

BANTWANA SCHOOLS INTEGRATED PROGRAM (BSIP) CASE STUDY:

Voices from Youth - December 2012



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Written by Janet Barry and Leah Jones

Based on research by Susan Amoaten, Mthobisi Sibandze, Landiso Madvonsela

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I. Introduction

With the highest HIV prevalence in the world at 26%,¹ Swaziland is home to an alarming number of highly vulnerable children who are in urgent need of comprehensive support to mitigate the impact of HIV and AIDS on their lives and to ensure that their basic needs are met. The Swazi government estimates that 130,000 children—or 31.3% of all children in the country—are orphans or highly vulnerable.² In preparation for program implementation to support this cohort of children, the Bantwana Initiative of World Education conducted broad community-based research³ in Swaziland in 2007 to better understand the current situation of orphans and other vulnerable children (OVC) and to explore the efficacy of using schools as entry points for comprehensive service delivery, with particular attention to gaps in services for adolescent children.

The results of this research confirmed that: 1) the serious impact of HIV on Swazi families had deeply eroded traditional community “safety nets” thus placing extremely high stress on families, communities, and schools, particularly in high poverty and drought-stricken areas like the Lubombo region; 2) schools were well placed as comprehensive service delivery points for reaching high numbers of OVC given the lack of NGO and CBO infrastructure and recent positive changes in education policy that enabled OVC to go to school; 3) there were significant gaps in comprehensive services targeting adolescent OVC, who make up a high percentage of OVC in Swaziland, as most programs target children as a homogenous group and overlook the specific needs of OVC; and, 4) with proper training, School Committees were well placed to manage and oversee comprehensive school-based OVC initiatives.⁴ The research also pointed to gender-related disparities that place girls at disproportionately high risk for abuse and neglect, as well as a range of other child protection issues,

including school dropout due to high school fees and related levies, hunger at home, and teen pregnancy. Research suggested that girls were twice as likely to dropout out of school as boys;⁵ child-headed households were seen as particularly disadvantaged.

Drawing upon findings from the research and in consultation with key ministries, schools, and communities, Bantwana launched the Bantwana Schools Integrated Program (BSIP) program in 2008 in 10 schools in the Lubombo region⁶ supporting 4,220 children. Working in close partnership with the Ministry of Education and Training (MoET) and the Ministry of Health (MoH), Bantwana sensitized School Committee members, teachers and principals to issues and challenges of effective community engagement, as well as to the set-up of simple, community referral systems for children with urgent or more severe health or psychosocial support (PSS) needs. To eliminate stigma associated with OVC status, services would be available to all children in schools. BSIP would be linked to the most vulnerable households and the broader community through Bantwana-trained Community Health Outreach Volunteers (CHOVs). To galvanize support for BSIP and broader advocacy for comprehensive OVC services, Bantwana would routinely share information and solicit input from the MoET, MoH and community and traditional leaders during community and other structured meetings.

BSIP offers students access to services in the following integrated and complementary areas:⁷ *primary healthcare and health education, nutrition, livelihoods programming, and psychosocial support (PSS) and child protection*. The overall goals of the program are to: 1) increase access to a comprehensive range of urgently needed services to significant numbers of orphans and highly vulnerable children, with

1 UNAIDS 2012

2 National Plan of Action (NPA) for Children 2011-2015.

3 Key informant interviews and focus group discussions were conducted with school principals, teachers, school committee members, and district representatives of health, education, agriculture, and social welfare to explore their interest and support for an OVC initiative in schools.

4 Needed skills included: budgeting and financial management, governance, counseling and guidance of OVC, school development planning, fund-raising for school projects.

5 The researchers also reviewed pertinent policy documents to better understand the situation of OVC and reviewed the OVC database in Lubombo region (from the World Food Program) to assess the numbers of school age OVC in and out of school.

6 Schools were selected by the MoET through the MoET's Regional Office in Seteki based upon 1) high numbers of OVC in schools; 2) the existence of an established School Committee; 3) support from district government, principals, teachers, traditional leaders, communities and parents/carers.

7 Selected services were based upon priorities identified by communities, schools and key government ministries.

a particular focus on adolescents, and, 2) strengthen the broader capacity of schools and local communities to better support highly vulnerable children and youth over time.

An evaluation commissioned by Open Society Institute of South Africa (OSISA) in 2010 demonstrated that BSIP had achieved a lot in a short time. In particular, the evaluation acknowledged the benefits of the methodology which built the capacity of existing structures and encouraged ownership of the programme to rest within the local school, involving parents through the School Committees. It found that BSIP had ‘been a catalyst in strengthening the capacity of ten schools and communities to respond to the needs of highly vulnerable children in more coordinated and cooperative ways.’

In 2011, based upon the success of the BSIP pilot, Bantwana received additional funding to scale up the program to a total of 34 Lubombo schools, thus covering all secondary schools in the region.

This case study was commissioned by Bantwana in 2012 with the primary purpose of gathering views and recommendations from adolescents themselves to help inform the BSIP scale up in a way that could most effectively meet adolescents’ needs. By utilizing feedback from adolescents as well as other relevant BSIP stakeholders, the case study also aimed to better understand the value of the integrated model on improved adolescent wellbeing.

The report is divided into three sections; section one describes the BSIP program model; section two describes the analysis and feedback of students and other key stakeholders on the value of BSIP; and, section three summarizes recommendations for improvements generated by the students, other adult stakeholders, and the Bantwana team.

BSIP school principal's views on issues facing adolescent OVC:

“Around 80% of pupils are OVC with evermore children acting at head of households. These children survive on school lunch; they are always hungry... abuse and difficult situations at home with guardians are a growing problem for many students. Poverty and fractured social relations have fueled abuse faced by girls and lack of respect between boys and girls must be addressed.”

II. The BSIP Program Methodology

The cornerstone of Bantwana’s BSIP approach is to use schools as a point of service delivery, while also equipping schools—i.e. School Committees, teachers, and school principals—with the skills and tools to mobilize community action and advocacy for OVC and to extend the safety net of care and support from schools into the broader community.

Following joint school selection,⁸ schools invite Bantwana to an introductory meeting with the School Committee and school principal, followed by open community forums to introduce the BSIP model and sensitize community members and parents/caregivers to the range of OVC needs. Throughout the program, Bantwana also works with traditional leaders to lead and sponsor ongoing community dialogue and action planning around existing OVC policy, child rights, and gender-based violence prevention and conflict resolution.

BSIP trains School Committee members in good governance, financial management, action planning and community mobilization and supports school principals to select Focal Point Teachers to serve as mentors for and coordinators of specific aspects of BSIP interventions, e.g. permaculture gardens; livelihoods activities; PSS support and HIV prevention clubs. BSIP also trains School Committees and teachers in basic psychosocial support skills

⁸ BSIP pilot schools were jointly selected by Bantwana and the Regional MoET based upon high numbers of OVC; existence of a School Committee, and, expressed interest and commitment of schools and communities to support the program.

so they can identify and respond to children's emotional issues and/or refer them to follow-up counseling from the Bantwana PSS Specialist for particularly urgent cases. BSIP regularly liaises with Regional School Inspectorates and MoH's School Health Outreach team to improve existing systems and ensure that BSIP is in line with current policy, and to enhance existing processes and monitoring to improve services. BSIP also works closely with traditional leaders and schools to identify the most vulnerable children and galvanize and train CHOVs who provide the link between schools and household-based health, first aid, and emotional support, as well as follow-up on referrals for health issues requiring more advanced attention. Through joint planning, consultation, training and follow-up support at every level, BSIP aims to engender ownership and motivation within the school, regional ministries, and at the community level as a strategy for continued advocacy and ongoing provision of essential OVC services beyond the life of the program.

III. BSIP Study Methodology

This review was conducted by an external team of researchers commissioned by Bantwana. Researchers began with a preliminary review of BSIP program documentation, including: the Baseline Assessment Report for the Swaziland Schools Integrated Program for OVC (2007); Quarterly and Annual Program Reports (2009, 2010) an external evaluation commissioned by BSIP donors Open Society Institute of Southern Africa (OSISA) and ELMA Philanthropies (2010)⁹, and interviews with the Bantwana BSIP implementation team. Researchers also conducted a desk review of relevant policy and research documents concerning the status of OVC in Swaziland and sub-Saharan Africa.¹⁰ School-based data collection took place between April and May 2012 in five BSIP study schools,

selected¹¹ by the BSIP Director based upon length of time of involvement with BSIP, and similar (community, school environment, numbers of OVC, range of interventions) and distinct (peri urban and extremely rural) characteristics to support meaningful comparison and contrast.

Key informant interviews and focus group discussions were conducted with adolescents in the five selected schools. In total, over 100 students participated in focus group discussions, represented by an equal number of boys and girls between 15 – 24 years old. [The vast majority of students described themselves as either double or single orphans, living in grandparent or child-headed households. Key informant interviews were also conducted with 30 stakeholders](#) from the surrounding communities that are critical to the implementation of the BSIP program and play an ongoing role as part of the community OVC 'safety net,' namely School Committee members, Focal Point Teachers and CHOVs. The researchers used a variety of participatory techniques including matrix ranking of priorities by students which allowed them to use their own definitions of how best to define and prioritize services;¹² and focus group discussions and individual interviews with self-selected students. Discussions with the Bantwana team and existing monitoring data provided a framework for the BSIP model and helped to corroborate data collected.

[Limitations to the methodology:](#) First, while Bantwana collects significant quantities of data from each school, at the time of this research, the Bantwana team was in the process of upgrading the data storage and analysis system and thus available corroborating data was limited. Second, one of the schools selected for inclusion in this review was not operating BSIP at the time of data collection,¹³ and thus, was unable to provide data related to students' priorities around BSIP. However, researchers did share their feedback on why the BSIP should be revived. Finally, while baseline data was not available, researchers confirmed that

9 The BSIP was supported by a range of private donors including OSISA, Elma Philanthropies, and a range of private individual donors. The OSISA evaluators believed that BSIP had 'been a catalyst in strengthening the capacity of ten schools and communities to respond to the needs of highly vulnerable children in more coordinated and cooperative ways largely based on the results of local institutional capacity building of schools and school committees.

10 These documents included: UNICEF: From Evidence to Action (2010); the South African Development Community (SADC) OVC Framework (2011); Swaziland National Plan of Action (NPA) for Children (2011-2015) and Swaziland HIV Strategic Framework (2009 -2014).

11 Selected schools included: *Hlutse High School, Siphofaneni Highschool, Sitsatsaweni, Highschool Nkonjwa Highschool, and Othandweni Secondary School*. All participating schools serve adolescents ranging in age between 13-24 years old.

12 The researcher suggested that a matrix ranking approach would allow students to self-select which BSIP interventions held most value and to define the value of the interventions based upon their own experience without being biased to the intended purpose.

13 BSIP was put on hold in this school due to health problems of the principal.

in selected schools, no services were available for OVC prior to the BSIP intervention.

IV. Core BSIP Program Areas

The BSIP program consists of the following core integrated interventions:

A. **Permaculture/nutrition gardens** are established in BSIP-supported schools and in selected OVC homesteads (deemed to be the most vulnerable by school communities) to supplement school lunches, build students' skills in permaculture gardening techniques, and improve the diversity of food available at students' homes.

In schools, a plot is first prepared and fenced jointly by students, teachers and School Committee members. Bantwana then trains School Committee members and the Focal Point Teacher in permaculture techniques, particularly relevant in resource poor areas with limited access to water. The School Committee and Focal Point Teacher then work with selected students to farm the plot, with Bantwana providing initial inputs such as seeds and tools.

Working directly with OVC selected by School Committee and community volunteers as most vulnerable, some of whom are heads of or are living in child-headed households, Bantwana helps them to set up permaculture gardens at their homesteads to improve food security and provide income in cases where produce can be sold. Bantwana provides follow-up support to these households to ensure gardens are adequately cared for and, at the same time, to monitor the general wellbeing of children in the household. In cases of children and/or households with ongoing issues, Bantwana alerts CHOVs so that efforts are coordinated and children receive adequate support. The permaculture method lends itself well to being replicated in the community as it does not rely on expensive external inputs.

B. **Income Generation Activities (IGAs):** IGAs aim to generate income through development of small business enterprises in BSIP-supported schools, the profits of which are used to cover school-related costs for the neediest OVC and for basic schools supplies that are not covered by over-

stretched and underfunded MoET budgets. OVC benefiting from generated revenue are selected by teachers based on teachers' perceptions of greatest need, and in some cases informed by input from community volunteers.

Bantwana trains Focal Point Teacher and School Committees in business skills, after which they determine which IGAs are most likely to succeed based on local market research. The range of IGAs include: brick making; poultry-raising; goat-rearing; school tuck shops; manufacturing of soap, floor polish, or sanitary pads; and waste recycling (handicrafts). In some schools, income generated from produce grown from permaculture gardens and from products sold through tuck shops also generated profits that were then fed into the pool of funds covering OVC school costs. Bantwana provides technical support and start-up capital for the IGAs and mentors schools twice per term.¹⁴ Thirty percent (30%) of profits are used to cover operational costs and 70% are used to cover OVC and school costs.

C. **Child Protection and Psychosocial Support (PSS):**

In addition to training school leaders to identify children in need of one-on-one or follow-up support and counseling, BSIP delivers child protection and PSS through a range of after-school clubs, which differ from school to school. The menu of services schools can choose from include: health clubs, which serve largely as HIV Prevention Clubs, *Protect Our Girls Clubs*,¹⁵ and community volunteer-led programs, for instance *Lisango-Liguma*.¹⁶ More details on the latter two interventions are highlighted below.

In addition to the school-based clubs, Bantwana works to improve child protection mechanisms within the community. In partnership with the Gender Protection Unit of the Police, Bantwana raises the profile of child protection issues during community dialogues and trains School Committees and focal teachers about their role as custodians of child safety in the community and how to recognize abuse.

14 Start-up capital ranges from R15,000 – R20,000 (USD \$1,500 – USD \$ 2,200 equivalent) per school.

15 In 2012, *Protect Our Girls Clubs* evolved into Protecting Our Youth Clubs to encourage the participation of boys and ensure that boys and girls were sensitized to their differentiated needs and issues so that they could become allies of one another around child protection issues.

16 Across all five study schools, students consistently identified the *Lisango-Liguma* program as a priority service. As other PSS programs were not identified by students as priorities, they are not discussed here.

Bantwana then link committees and teachers to local opinion leaders chosen by the community who then formulate strategies to address the issues raised.

Lisango-Liguma evolved as a direct response to concerns raised by community members about challenges facing adolescent OVC who, due to the loss of parents and break down of traditional family structures in the wake of the HIV epidemic, lack trusted adult mentors from whom they can learn about Swazi traditions and garner the support needed to grow into healthy, productive adults. Working closely with community members, Bantwana developed the *Lisango-Liguma* toolkit which couples traditional Swazi values with modern topics concerning gender relationships, good decision-making, sexuality and sexual and reproductive health, growth and development, management of peer pressure, anger and time management. Using the field-tested toolkit as a guide, Bantwana trains community volunteers, usually respected elders or peer educators, who facilitate weekly sessions for all students during school hours.¹⁷ In addition to the volunteer-facilitated sessions, Bantwana also equips one male and one female teacher with basic counseling skills so that they are able to respond to sensitive issues that may arise amongst the student body as a result of *Lisango-Liguma*. Teachers can refer students to Bantwana-trained CHOVs who complement the *Lisango-Liguma* program by following up on cases of abuse (verbal, physical or sexual) raised by students at the community- or household-level. For more severe cases, CHOVs or teachers call on the Bantwana PSS counselor to offer additional support.

Protect Our Girls Clubs: Based on the International HIV/AIDS Alliance's 'Our Future, Our Lives' methodology, Bantwana's *Protect Our Girls* clubs employ participatory methods to deliver sexual and reproductive health education to adolescents. Complementing the *Lisango-Liguma* program, these after-school clubs are facilitated by recent school leavers and help young people address a range of issues affecting girls, including abuse, HIV, and negative peer pressure for early sexual debut.

D. School Health Outreach Program (SHOP): SHOP provides regular access to health education and primary healthcare to all students in BSIP schools, as well as referrals to health facilities for students with more involved or serious health issues. Working in close collaboration with the MoET and with the MoH school health outreach team, Bantwana covers the salary costs of a qualified BSIP nurse who is seconded to the MoH Regional Office and covers transportation costs for the full school health team to reach all schools under their mandate.¹⁸ School-based health education and primary health care services, including health screening and referral, are delivered through quarterly field visits to BSIP schools. This is coupled with training of teachers in first aid and supply of first aid kits to all schools. [Health education sessions conducted by the health team nurses](#) are geared to sensitize students and provide them with information that may be discussed in more detail during private health screening sessions. These sessions are conducted during each school visit before health screenings and cover a range of topics, including risks and prevention related to HIV, AIDS and other Sexually Transmitted Infections (STIs); sexual and reproductive health (including teen pregnancy); gender and sexuality; sexual abuse; peer relationships and peer pressure; identifying low self-esteem and the associated decision-making risks; managing alcohol and drug use; and recognizing symptoms of basic diseases. [Health screenings](#) include one-to-one check-ups in a mobile tent set up on the day of the school health outreach team visit; at the secondary school level, students are treated on a voluntary basis. Student screenings include: eyesight, hearing and oral hygiene; weight; deworming; dehydration; skin conditions; mental disorders; immunization; and STIs. The BSIP nurse also makes referrals for students as needed, which may include STI/HIV treatment, HIV testing and counseling, counseling and PSS support, and nutrition.¹⁹

In addition to these components, at the time of this review, Bantwana was also piloting a [gender program](#) in four schools, which was initiated in late 2011. This program component has since been mainstreamed into all

¹⁷ By offering the program to all students, Bantwana eliminates risk of stigma to those identified as OVC

¹⁸ Before Bantwana's SHOP program, the MoET School Health Outreach Team was idle due to lack of government resources for transport (e.g., fuel, vehicles).

¹⁹ Mubiromusoke, Nansu, School Health Outreach Program (SHOP) Case Study, 2012.

BSIP schools.²⁰ The program aims to reduce gender-based violence (GBV) and gender inequality through community dialogues that engage both men and women on these sensitive topics. During these dialogues, chiefs are encouraged to take a more prominent role in addressing issues of GBV and conflict resolution between men and women. The dialogues are also used to identify and invite local women role models to speak at BSIP-supported schools to reinforce the value of education for girls and encourage girls to stay in school. Complementing the gender program at the school level, Bantwana works in collaboration with the MoET and the Exam Council to establish [Science and Math Clubs](#) to improve student performance in math and science, with a focus on engaging/involving female students to promote their involvement in these fields.

V. BSIP in Practice: Collective Views of the Students²¹

In all five schools participating in this review, students reported that they were aware of and had been involved with and/or benefited from the program. The following describes the BSIP service priorities identified by the students and their views of program interventions. Views of other key stakeholders have also been incorporated to supplement information gathered from youth.

A. **Permaculture gardens were ranked as the top priority activity in every focus group discussion held with students in every school.** Students ranked permaculture garden activities highly in terms of the information and skills acquired that had practical and critical application to their own lives, as well as to the versatility of permaculture activities, whereby all students can participate. The students also valued the fact that this activity helped support the neediest children in their schools. Students were generally well informed of the importance of nutritional variety in the diet (vegetables grown included spinach, onions, green pepper, tomatoes and lettuce), and spoke positively of the role vegetables play in healthy growth and development.

Specific benefits identified by the students included:

- Supplementing staple school food, such as rice and beans, thereby improving overall nutritional value
- Providing the neediest students with vegetables to take home to their families
- Generating income which can be applied to help cover school fees or uniforms for the neediest students
- Imparting new skills among students that can be used to develop permaculture gardens at home
- Strengthening student's sense of responsibility and ownership over their own wellbeing
- Teaching students about new gardening techniques that are practical and not overly labor intensive²²

Simanga's Story

17-year-old Simanga lives with his mother and five siblings. His father died some time ago. He got involved with the BSIP permaculture garden program in 2011. Since then he has been able to take home spinach, beetroot, lettuce and onions for food for his family and sell the extra produce to generate revenue to cover some daily living costs. He believes the gardening has transformed his life because everything is easier to cope with "if you know where your next meal comes from." He has some food security for his family and the money he gets from selling vegetables can be used to buy stationery, his school uniform and to pay his bus fare to school.

²² Students suggested that there did appear to be a bias towards selecting boys to participate in this activity but this information was not corroborated by the researchers.

²⁰ Given that these interventions were only available in a small number of schools at the time of this review, they are not part of this study.

²¹ This section contains excerpts from young participants of the focus group discussions. In all instances, the names of respondents have been changed to protect the identity of the adolescents.

Conditions at schools varied and affected permaculture implementation. Extremely low water tables and poor to nonexistent access to water in the *Sitsaweni High School* community precluded extension of gardens to homesteads. At *Nkonjwa High School*, an irrigation program is expected to bring in piped water in the near future; however, due to lack of water at the school – even for drinking – the garden is not operational. *Hlutse High School* has incorporated the permaculture garden into a far larger plot supported by the Ministry of Agriculture (MoA), which has significantly bolstered the output - supplying nearly 50% of the food for the school during the winter months. However, students suggest that the *main* benefit of the permaculture garden is the skills they learn that they can then practice at home.

Students in all schools believed permaculture/nutrition gardens have more potential for positive impact than any other aspect of BSIP. Students would like to see the school plot size expanded and to get more involved in all aspects of permaculture gardening, which would include developing technical and business skills as they see the selling of produce as a means of generating income for their future. Complementary interviews with adult stakeholders (School Committee members, Principals, and Focal Point Teachers) reinforced the importance and value of the school-based permaculture gardens in providing supplementary food for school lunches. School Committee members suggested that Bantwana establish Model Student/School Committee Farmers in the community that could demonstrate permaculture gardening to homesteads as a way to expand use of this water-saving model particularly in areas prone to drought.

B. Income Generating Activities (IGAs) were ranked as the second most important priority for students in all schools, particularly girls. Students saw the value of both the permaculture gardens and the specific IGAs with regards to income raised and business skills learned. Tuck shops had a mixed reception by student and other stakeholders; students thought they had improved safety for children by offering sundry items in schools, which eliminated risks to children buying from tuck shops located on busy roads outside of schools; but teachers felt they raised little income and created problems with informal petty traders, many of whom were parents/caregivers of stu-

dents. Students in *Othandweni Secondary School* thought that the floor polish program had potential given its brisk sales, while in most other schools, floor polish had no local market. The most popular and successful IGAs were the poultry projects, as they supplemented the school diet, raised income for the school, provided the local market with fresh chicken, included business skill development for students and produced natural fertilizer for the permaculture gardens. The poultry project in *Hlutse High School* has been particularly successful, which students suggested was in large part due to the commitment of the Focal Point Teacher.

Hlutse High School: IGA in Action

Mr. Makhanya, Focal Point Teacher for IGAs at Hlutse High School is the driving force behind the success of the school's poultry project. Bantwana provided initial seed funding to the School Committee to set up a poultry house and buy the first batch of broilers (topped up by funds from the school). Mr. Makhanya and a selected group of girls manage the project. Together, they feed and care for the chickens on a daily basis and record their activities in their logbook to monitor progress. The girls then prepare the chickens for sale and maintain records on sales, income and expenditure. Since 2011, the school has produced nine batches of approximately 190 chickens in each batch. The school buys back chickens (E50 per chicken) to supplement the school diet every two weeks. There is a ready market for chicken locally and profits have been used to buy books, uniforms and shoes for the neediest children. Already 30 students have been provided with tee shirts without which they cannot attend school. The chicken manure is converted into liquid fertilizer and used for the school permaculture garden.

Students and teachers believed the entrepreneurial and business skills acquired were at least as important as the IGAs themselves. In reality, the income raised in most IGA activities in most schools (except poultry projects) have been minimal to date, but most were still relatively new and still in the process of becoming properly established. Interviewed students, as well as teachers, across schools

suggested that the skills learned were potentially of greater importance (record keeping, financial management, how to open a bank account) given the depressed state of the Swazi economy and limited job opportunities available in the Lubombo Region. The older students at *Sitsatsaweni High School* were very positive about IGAs, particularly soap making, because of the skills they developed, despite that little revenue had been raised from the sale of products. *Othandweni Secondary School* students were the least positive about the IGAs; this is possibly because it was still a very new activity at the time of the interviews and mainly owned by the principal and Focal Point Teachers, rather than by students themselves. However, the polish has sold out and was seen by the students as a potential income generator for the school in the future. School Committee members, principals and teachers (including Focal Point Teachers) in all four schools where IGAs were already yielding income or had the potential to do so, felt that they were of high value, particularly the poultry projects.

Tsepho's Story²³

18-year old Tsepho is a double orphan whose parents died when he was in primary school. He lives in a generous person's homestead with his two brothers and sister but they have no income and they are separated from their immediate family who live far away. He works on the homestead in return for food and shelter but there is no one to pay his school fees. The poultry program at Hlutse High School has helped him as the school used part of the profit to buy him a school uniform that is essential to attend school. This has helped his academic performance as he no longer misses class which is particularly significant because he is in his final year of high school, which is a very crucial and challenging grade. He thinks that the IGAs should receive the highest priority, especially because the OVC government²⁴ grant does not cover 100% of the school fees and he has not paid the remainder. Tsepho hopes that the BSIP will scale up the IGAs and that he can then receive financial help to pay off his outstanding fees before the end of the school year.

23 Names of interviewed students were changed to protect privacy.

24 The OVC government grant is a modest grant available to eligible OVC but is not enough to cover basic needs or all school-related costs.

Students and teachers both believe there is a need to revisit the methodology for the IGAs. In general, students want to get more involved with running of the IGAs, particularly with regards to learning business skills, but several students suggested that poor communication between students and teachers and perceived distrust of students (particularly boys) by teachers creates an unfair bias. Students suggested that girls are more likely to be selected for participation than boys because teachers perceive them as being more trustworthy.²⁵ Meanwhile, interviewed Focal Point Teachers reported that they find it difficult to find time to give the IGAs the necessary attention they need during the school day, and know that weak market research has meant some of the selected IGAs are unlikely to become viable businesses.

Nozipho's Story

19-year-old Nozipho began living with her father and one of her stepmothers following the death of her mother a few years ago. She has eight half siblings and five full siblings, none of whom live with her. Nozipho has little time with her father or stepmother and has not dealt with her grief of losing her birth mother. She suffers from bouts of depression, and has problems with self-confidence and motivation. She has never discussed sexual or reproductive health and has had to struggle with her questions and concerns on her own. She thinks the Lisango-Liguma program has changed her life. The teacher is helpful and informative and being with other girls in similar circumstances has given her the chance to talk about many issues and get critical support from her peers. She says that Lisango-Liguma has helped her cope with her grief and has left her feeling motivated about her life and her future. She feels that the Lisango-Liguma program has added value in her life and lightened her emotional predicament, which was affecting her schoolwork. She is confident that she can focus on her academics and succeed and if she cannot continue her studies, she will become a businesswoman.

25 Under BSIP, there are two types of IGAs supported. School-based IGAs are those managed by a school committee with collaboration from teachers. Profits are distributed as benefits (e.g., school uniforms) to vulnerable children. The "4S" program supports individual students to receive business-related training to be able to run group businesses directly. Despite this distinction, it was difficult to get a sense of the two different models in practise.

C. *Lisango-Liguma* was the most widespread activity in each school, undertaken by all students, and was the third priority of all students. Students were positive about the *Lisango-Liguma* component, seeing the value of adult guidance in their lives to advise and encourage them to achieve their goals and provide them with information on physical growth and development. However, students were interested in having greater involvement in topic selection and strengthening the interactive nature of the program through, for instance, debate and discussion, and less like school lessons to encourage greater engagement. As reflected in the student ranking, *Sitsatsaweni High School* and *Nkonjwa High School* students placed the greatest emphasis on *Lisango-Liguma*. *Othandweni High School* students did not rank *Lisango-Liguma* as high as students from other schools; however, their individual comments were more positive, particularly from girls who found the sessions supportive, encouraging and helpful in deflecting negative peer pressure. On the whole, interviewed girls were more positive than boys, particularly girls living with older grandparents because they feel that their elders are out of touch with the challenges of the modern world and cannot adequately guide them on issues surrounding transition to adulthood, particularly on sensitive topics like sexuality, marriage and negative peer pressure. In general, older boys were less positive about *Lisango-Liguma*, suggesting it could be repetitive, did not address their core issues and did not provide space for discussion and debate.

While CHOVs and other community members are the central group working with adolescents to deliver *Lisango-Liguma*, as previously described, teachers are also trained to manage issues that arise as a result of the program in the school setting. Based on this review, teachers expressed interest in linking the *Lisango-Liguma* lessons with areas in the school curriculum, particularly the Life Skills classes, to ensure consistent messaging on these issues. Some teachers felt they had insufficient training to undertake this role and that students did not like to talk to them about personal matters. Interviewed students in every school were strongly concerned about confidentiality

in their school, and said that they could not trust teachers. Whilst there was little content knowledge of *Lisango-Liguma* among School Committee members, principals, and teachers not directly involved in facilitating the sessions, these stakeholders all believed the program was making a positive difference to the students, with some specifically citing changes in student's sexual activity, including a drop in unwanted pregnancies.

D. Health visits and health education was ranked as the fourth priority, on average, by students, though ranked more highly in *Sitsatsaweni High School* and *Nkonjwa High School*, the two more remote rural schools visited. The most valued topics cited by students included sexual and reproductive health, which included how to recognize the signs of STIs. Students that had no other access to health-care ranked the health check-ups as particularly important. The work of CHOVs was not raised during discussions with students as a priority, but that may be because students may have seen the work of the CHOVs as slightly outside the core BSIP package.

There was a universal request by students for health education to be focused on sexual and reproductive health. The principal in one school suggested that parents and caregivers may also feel it important that young people are better informed on sexual and reproductive health because of the high level of sexual activity among adolescents and subsequent high rates of teenage pregnancies. Interestingly, teachers were more positive about the health visits than any other aspect of BSIP given what they perceived to be both short and long term benefits for students. They directly attributed positive changes in students' personal hygiene to the health program and universally applauded the health care component for bringing quality healthcare and education to students, many for the first time.

VI. The BSIP Package: Recommendations

The views of students clearly demonstrated the interrelationship between their needs, particularly with regards to health, PSS, IGAs and food security. The recommendations listed below were drawn from students, School Committees, Focal Point Teachers and the Bantwana team following a review of the information gathered during the study.

A. Refine BSIP methodology to broaden leadership

1. Strategize how best to support key BSIP implementers to best fulfill their responsibilities: BSIP relies heavily on the commitment of the School Committee and school principal to drive the program, as well as on the Focal Point Teacher and selected School Committee members to manage activities. Variations in commitment of these key program “champions” correlate with program quality. For example, in *Hlutse High School*, the IGA Focal Point Teacher was clearly the driving force behind the success of both the nutrition garden and the poultry project. Without his commitment, it is unclear whether those program elements would have enjoyed such success. In *Sitsatsaweni High School*, the *Lisango-Liguma* facilitators were dynamic and older students were particularly reaping the benefits of their approach. In contrast, School Committee members in *Sitsatsaweni*, while clearly committed to the program, reported that they struggle to fulfill their role adequately due to their needs to undertake work to augment their income. Given their important role in program success, it is critical that these implementers receive assistance to fulfill responsibilities associated with the program. In all schools, teachers in particular felt overwhelmed by the demands of BSIP and some saw themselves as involuntary implementers, rather than volunteers who were able to develop a sense of ownership over the program. In addition, the expanded responsibilities of Bantwana team members concerned with the program scale up meant that follow-up support to the original BSIP pilot schools was less consistent at the end of the first two years of implementation as compared to earlier in the program. Going forward, Bantwana may want to consider how to expand the “team of champions” from different struc-

tures in schools and at community-level, to eliminate reliance on just one or two key leaders.

2. Promote greater involvement by students in programming and activities: The majority of students requested greater involvement in the design and management of activities. Examples such as *Othandweni High School*, where students reported that they were heavily involved in the permaculture gardens and appreciated the opportunity to learn real skills and take on responsibilities related to managing the gardens, could be extended to other schools. Many of these students were over 18 and had been managing their own households for years; some were in their early 20s and already parents themselves. Their desires were likely attributable to their age, level of independence and level of need. With regards to *Lisango-Liguma*, several older boys in particular wanted more interactive discussion of more ‘modern,’ age-appropriate issues regarding transition into adulthood, as opposed to the more didactic approach commonly used by facilitators. Bantwana may want to explore ways to more strongly link or integrate the *Lisango-Liguma* program to the Life Skills curriculum, support greater involvement of students, particularly older students, in both the design and management of life skills programming, which may alleviate responsibilities of Focal Point Teachers and School Committees, promote greater ownership in programming and build important skills that older adolescents can use to support themselves and their families over time.

B. Explore how to improve trust between teachers and students

All interviewed students raised concerns about poor teacher/student relations. Physical punishment and caning are still permitted in the Swaziland education system and many students reported use of physical punishment that went beyond a level that is legally permitted. Students also raised concerns about alleged student sexual abuse by teachers.

Changing embedded culture and challenging traditional norms as they relate to safe school environments, is a complex, yet important process. Through BSIP, Bantwana sen-

sitizes community members and district authorities on all forms of child abuse and creation of safe school environments. Specific BSIP activities, such as the *Protect Our Girls Clubs*, address issues related to child protection. However, Bantwana may consider how it can utilize its position to further engage School Committees and principals around these issues to ensure that mechanisms are in place to promote safe environments and address reports of any kind of abuse in schools.

C. Strengthen the business and technical skills development aspect of the livelihoods and permaculture/nutrition programs

All students reported that the business and marketing skills learned through IGAs were highly valued and that the agricultural skills learned through the permaculture garden program for development of home gardens was as important as the food produced. Bantwana may want to explore options for strengthening the skills training elements of both permaculture and livelihoods activities, particularly for older adolescents who are concerned with building practical livelihoods skills that will help them generate income over time.

D. Strengthen the adolescent sexual and reproductive health aspect of health programming

Commonly cited by students as one of the most valued aspects of the School Health Outreach Program, Bantwana may want to assess how to bolster the dissemination of adolescent sexual and reproductive health information and services through health education sessions and referrals. Emphasis should be placed on utilization of sessions that utilize participatory approaches and where possible, draw upon materials available in Swaziland and approved for use in schools.

E. Update the content and improve the methodology for delivering *Lisango-Liguma* to improve relevancy and engagement of adolescents

The *Lisango-Liguma* program is highly valued by students because of the unique opportunity it affords adolescents to make positive connections with their peers and talk about

sensitive issues important to their successful transition to adulthood. However, students also suggested that the content be ‘modernized’ and that delivery be more interactive to promote broader discussion and debate. In August 2012, Bantwana began revisions to the *Lisango-Liguma* toolkit and is now working with facilitators to revise the delivery methodology.

VII. Conclusion

The integrated package of core BSIP services – permaculture gardens, IGAs, *Lisango-Liguma*, and the School Health Outreach Program—are all essential from the viewpoint of the students, School Committee members, principals, Focal Point Teachers and CHOVs, as they help meet the diverse needs of students and are seen to reinforce one another. Given the challenges facing highly vulnerable adolescents in the context of the HIV epidemic and worsening economic climate in Swaziland, it would be difficult for any adolescent to choose one program over another as students’ suggested that these integrated components were of significant value to them and easily accessible through schools. However, the study also illuminated areas that need strengthening and practical ideas for program improvement which are now being integrated into the thinking and implementation of the expanded program by the Bantwana team.