This curriculum and corresponding handbooks were funded by a grant from the United States Department of State as part of the DREAMS Innovation Challenge, managed by JSI Research & Training Institute, Inc. (JSI). The opinions, findings, and conclusions stated here are those of World Education, Inc./Bantwana Initiative and do not necessarily reflect those of the United States Department of State or JSI.
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2017 DREAMS-IC Agenda

Day 1

On Day 1, we are focusing on how to build an inclusive community. We are learning about good mentorship skills and about the girls in our program.

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 1</td>
<td>Introduction to DREAMS IC and Mentorship Training</td>
</tr>
<tr>
<td>8:30 - 9:00am</td>
<td>Activity 1: Creative Leadership Name Tags</td>
</tr>
<tr>
<td>9:00 - 10:00am</td>
<td>Activity 2: Welcome and Basic Training Overview</td>
</tr>
<tr>
<td>10:00 – 10:30am</td>
<td>Activity 3: Setting Our Ground Rules</td>
</tr>
<tr>
<td>10:30 – 10:45am</td>
<td>BREAK</td>
</tr>
<tr>
<td>10:45 – 11:30pm</td>
<td>Activity 4: Overview of DREAMS Program</td>
</tr>
<tr>
<td>Session 1.2</td>
<td>What is a good Mentor?</td>
</tr>
<tr>
<td>11:30 – 12:15pm</td>
<td>Activity 1: Remembering My Mentor</td>
</tr>
<tr>
<td>12:15 - 1:00pm</td>
<td>LUNCH</td>
</tr>
<tr>
<td>1:00 – 1:30pm</td>
<td>Activity 2: Introducing Good Listening and Bad Listening</td>
</tr>
<tr>
<td>Session 1.3</td>
<td>Qualities of a Mentor</td>
</tr>
<tr>
<td>2:30 – 3:30pm</td>
<td>Activity 1: Mentoring or Parenting?</td>
</tr>
<tr>
<td>3:30 – 3:45pm</td>
<td>BREAK</td>
</tr>
<tr>
<td>Session 1.4</td>
<td>What is my Role as a Mentor?</td>
</tr>
</tbody>
</table>
Day 2 will focus on the mentees, who they are and how we can support them. We will develop skills to work with them in active and creative ways.

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 2.1</td>
<td>Knowing Your Girls</td>
</tr>
<tr>
<td>8:30 - 9:15am</td>
<td>Activity 1: Step Into the Circle</td>
</tr>
<tr>
<td>9:15 - 10:45am</td>
<td>Activity 2: Who Are We?</td>
</tr>
<tr>
<td>10:45 - 11:00am</td>
<td>BREAK</td>
</tr>
<tr>
<td>Session 2.2</td>
<td>Understanding your Mentee</td>
</tr>
<tr>
<td>11:00 – 12:30</td>
<td>Activity 1: Leadership Trees</td>
</tr>
<tr>
<td>12:30 – 1:30pm</td>
<td>LUNCH</td>
</tr>
<tr>
<td>Session 2.3</td>
<td>Problem Solving Skills and Communication</td>
</tr>
<tr>
<td>1:00 – 2:00pm</td>
<td>Activity 1: Communication and Listening Skills</td>
</tr>
<tr>
<td>2:00 – 2:30pm</td>
<td>Activity 2: Developing Open Ended Questions</td>
</tr>
<tr>
<td>2:30 - 2:45pm</td>
<td>BREAK</td>
</tr>
<tr>
<td>Session 2.4</td>
<td>Assessment of Girls</td>
</tr>
<tr>
<td>2:45 – 3:30pm</td>
<td>Activity 1: Understanding Referrals</td>
</tr>
<tr>
<td>3:30 – 5:00pm</td>
<td>Activity 2: Assessment Tool Review</td>
</tr>
</tbody>
</table>
**DAY 3**

Day 3 will focus on working with families and how to launch our clubs and handle the first meeting!

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Session 3.1</strong></td>
<td>Family Contracts and Home Visits</td>
</tr>
<tr>
<td>8:30 - 9:30am</td>
<td>Activity 1: Family Meeting Dramas</td>
</tr>
<tr>
<td>9:30 - 10:30am</td>
<td>Activity 2: Family Meetings and Contracts</td>
</tr>
<tr>
<td>10:30 - 10:45am</td>
<td>BREAK</td>
</tr>
<tr>
<td>10:45-11:30</td>
<td>Activity 3: Mentor Home Visit Tracking Tool</td>
</tr>
<tr>
<td>11:30 – 12:30</td>
<td>Lunch</td>
</tr>
<tr>
<td><strong>Session 3.2</strong></td>
<td>Running Your Club!</td>
</tr>
<tr>
<td>12:30 – 2:00</td>
<td>Activity 1: Putting Our Skills Into Practice</td>
</tr>
<tr>
<td><strong>Session 3.3</strong></td>
<td>Review of Monthly Monitoring and Evaluation Tools</td>
</tr>
<tr>
<td>2:00 – 2:45pm</td>
<td>Activity 1: What works and what doesn’t work</td>
</tr>
<tr>
<td>2:45 - 3:00pm</td>
<td>BREAK</td>
</tr>
<tr>
<td>3:00 – 3:30pm</td>
<td>Reveal of Secret Sisters</td>
</tr>
<tr>
<td>3:30</td>
<td>Close</td>
</tr>
</tbody>
</table>
Below is an example of a simple Agenda Overview. Mentors will have copies of the more comprehensive agenda but you don’t necessarily want to go over it in depth. Create an overview for the training based on the three days you have together in advance of the workshop.

I would recommend having a movie night or something fun in the evening with mentors!

**Overview suggestions for the Training**

**Day 1** – Being Great Mentors  
**Day 2** - Understanding and Supporting Girls  
**Day 3** – Working with families!
DOE SHEET

TOGETHER WE WANT AN AIDS-FREE FUTURE FOR ALL GIRLS AND WOMEN!

HOW WILL WE DO THAT?

The Bantwana Initiative will help girls develop into DETERMINED, RESILIENT, EMPOWERED, AIDS-FREE, MENTORED, AND SAFE women in Sithobela and Siphofaneni Tinkhundlas.

The Bantwana DREAMS program wants to keep all adolescent girls (ages 15 - 20) in school.

WHAT KIND OF ADOLESCENT GIRLS?

Bantwana will focus on:

- Pregnant girls who aren’t going to school.
- Young mothers who recently dropped out of school.
- Girls still in school who could become pregnant and stop going to school because of that.

WHY DO WE FOCUS ON THOSE KEY GIRLS?

HIV/AIDS AND SWAZILAND

The highest HIV prevalence rate in the world is in Swaziland at 28.6%.

HIV/AIDS AND GIRLS

1 in every three girls already have HIV (ages 20 - 24).

NEW HIV INFECTIONS

4,108 girls become infected with HIV each year (ages 15 - 24).

PREGNANCY

22% of girls reported having given birth by the age of 18.

ALL OF THESE FACTORS INCREASE GIRLS’ RISK TO DROP OUT OF SCHOOL!
IN SWAZILAND, A STAGGERING
120,000 ADOLESCENT GIRLS AND WOMEN ARE LIVING WITH HIV.

THAT MEANS 31% OF WOMEN IN SWAZILAND ARE HIV-POSITIVE.

HOW WILL BANTWANA HELP?

If you're still in school:
You can participate in girl-only Youth Clubs at your school or outside of your school to learn more about how you can prevent pregnancy, have healthy relationships, stay AIDS-free, keep studying, and live the life you want to live.

If you're not in school:
You can participate in out-of-school study groups to obtain your Grade 7 Primary School Certificate Examination (PSCE), Junior Certificate, or O level certificate and learn more about how to financially support yourself.

If you're pregnant:
You can receive more information about how to be a better mother in parenting classes.

EVERYONE IN THE DREAMS PROGRAM WILL:

Receive a mentor to meet with regularly who can help you with your challenges each week and tell you where to go for help if you or your baby is sick, if you have experienced violent treatment, if you need help completing your schoolwork.

Receive additional support from trained Career Guidance Teachers, Head Teachers, Peer Educators, and Early Childhood Education Tutors.
People tend to think of listening as something passive, or they tend not to think about it at all. But listening is actually a skill—a valuable skill that can be practiced and learned.

**ACTIVE LISTENING IS THE MOST IMPORTANT SKILL OF A GOOD MENTOR**

“You cannot truly listen to anyone and do anything else at the same time.”
—M. Scott Peck

When you talk with your mentee, try to remember to:
1. Clear your mind of distractions, so you can give her your full attention.
2. Make eye contact.
3. Be aware of your body language.
4. Pay attention to your mentee's facial expressions, gestures, and body language.
5. Learn to say, “How did that make you feel?”
6. Ask open-ended questions. Don’t ask, “How was school today?” Instead ask, “What did you do in school today?”
7. Restate in your own words—what you think she has said.
8. Ask questions when you don’t understand. For example, you might comment, “If I understand you well, you are saying...” This technique will make you pay attention to the speaker so you can summarize correctly.
9. Put yourself in your mentee’s “shoes,” and try to understand the world from her perspective.
10. Put aside preconceived ideas, and refrain from passing judgment.
11. Acknowledge that you are listening by occasionally nodding your head and saying things like, “I see.”
12. Give your mentee the same respect that you desire for yourself when you are talking to someone.
**HANDOUT: WHAT IS THE DIFFERENCE BETWEEN PARENTING AND MENTORING?**

Listed below are a variety of roles adults can take on when interacting with young people—some of these are part of your role as a mentor, some are not—and some are strictly the role of the young person’s parents.

Please put an “X” in the mentor column if you believe a role on the left is part of your mentor responsibility; put an “X” in the parent column if you believe this is strictly a parent responsibility. If it is a role you both share, put an “X” in both columns.

<table>
<thead>
<tr>
<th>Role</th>
<th>Mentor</th>
<th>Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a friend</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advises them</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disciplines them</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaches them about life</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helps them solve problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is someone they can confide in</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Answer Key:**

<table>
<thead>
<tr>
<th>Role</th>
<th>Mentor</th>
<th>Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is a friend</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Advises them</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Disciplines them</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Teaches them about life</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Helps them solve problems</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Is someone they can confide in</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

\(^1\) ConnectEd Training Manual, Pg 11
Your Role as a Mentor:

• At the beginning your Mentees may be hesitant, unresponsive, or unappreciative of the mentor relationship. This is simply her insecurity about the relationship. The Mentees’ attitude will gradually take a positive turn as she realizes your sincerity about being a friend. Be patient!

• Remember that the mentor–mentee relationship has a beginning phase. During this phase the Mentee is more interested in getting to know how “real” you are and how much she can trust you.

• Don’t try to be teacher, parent, disciplinarian or babysitter. Be a dependable, consistent friend. Listen and offer possible solutions without passing judgment. Don’t criticize or preach. Think of ways to problem solve together rather than telling the Mentees what to do. Never “should have” your Mentees.

• Respect the uniqueness and the integrity of your Mentees and influence her through constructive feedback. Identify her interests and take them seriously. Watch for opportunities and teaching moments.

• Set realistic goals for your Mentees and make achieving them fun. Remember there is a big difference between encouraging and demanding. Help her make the connection between her actions today and the dreams and goals of tomorrow. Don’t get discouraged if the mentee isn’t turning her life around or making great improvements. Look for signs such as increased school attendance, improved grades, showing up for meetings and expressing appreciation.

• As a friend you can share and advise, but know your limits. Problems that your Mentees may share with you regarding substance abuse, molestation and physical abuse are best handled by professionals. If you have any concerns, contact the mentor coordinator immediately.

• Be supportive of the parent, even when you may disagree. Don’t take sides or make judgments concerning any family conflict or situation. Leave the parenting to the parent.

Discipline:

• There may be instances when your mentee’s behavior is unacceptable. Again, remember the care giver is responsible for the girl’s discipline. The following guidelines are to be used if the care giver is not around to assume the responsibility for the girl.

• Never physically discipline.

• Never use abusive language.
• Don’t use ultimatums.
• Most girls will listen and respond to reason. Explain why you find her behavior unacceptable.
• Don’t give your Mentees the silent treatment to solve the problem.
• Discuss your concerns.

Health and Safety:

• Protect the health and safety of your Mentees and seek advice from school faculty or program staff when in doubt and inform school or program staff of any person, situation or activity that could affect the health and safety of the girl.
• Do not use alcohol, tobacco or drugs when with your Mentees.
• If you have become aware that your mentee’s safety or the safety of another is in danger through (e.g., girl abuse, sexual abuse), report your concern to the mentor coordinator immediately. Let your Mentees know that you are required to do so.
**Mentor Job Description**

**Overview**

The primary function of the Youth Mentor is to mentor Adolescent Girls (AGs) by establishing a relationship and visiting them to ensure that they participate in Out of School Study Groups (OSSG) and to offer them life skills. She must also provide routine monitoring and reporting of the adolescent progress in the Out of school Study Groups through gathering success stories. She must also provide monitoring feedback to her supervisor in order to keep the program on track.

**Responsibilities**

- Visiting adolescent girls in their homes once in three months
- Conduct Adolescent Girls club sessions once a week
- She must also provide routine monitoring and reporting of the adolescent girls progress in the Out of school Study Groups
- Provide mentoring, leadership, lay counselling and sexuality training to the adolescent girls
- Facilitate referrals for the Adolescent Girls
- Write monthly reports
- Attend monthly meetings
The image contains a guide titled "Handout: Your role as a mentor". It outlines various responsibilities and activities for mentors, including:

- **Respond to Mentee’s Behavior**: Avoid physically disciplining a mentee's behavior. Instead, discuss the behavior and its consequences.
- **Mentee’s Health & Safety**: Be aware of any health or safety issues and report them to the appropriate authorities.
- **Monitor and Report**: Keep track of the mentee’s progress and report any concerns to the facilitator or program staff.
- **Out-of-School Study Groups**: Attend meetings and support the mentee's academic progress.
- **Key Activities for All Mentors**: Conduct home visits, conduct monthly progress reports, and help the mentee understand the connection between their actions today and their dreams for tomorrow.

The guide emphasizes the importance of being a good friend, a supporter, and an advocate for the mentee. It encourages mentors to listen, understand, and help the mentee set and achieve realistic goals.
A Profile of an Adolescent Girl in Swaziland

Gender-Based Violence (GBV)

One in three women report that they experienced some form of sexual abuse by the time they turned 18. Even worse, across nearly half of Swazi women, report they have experienced sexual violence.

Health, Pregnancy and HIV Statistics

By the time they were 18, about 22% of adolescent girls reported they had already given birth to at least one child. Swaziland has the highest HIV prevalence in the world at 25%. One out of every three women aged 15-49 are HIV-positive, and about 20% of HIV-positive girls aged 15-19 will become infected with HIV every year.

Education

Even though many youth in Swaziland enroll and attend primary school, much fewer go to secondary school. Only four out of every 10 girls actually go to secondary school. Of the girls who do go to secondary school, about 30% of girls drop out of school, and some drop out due to pregnancy.
Leadership Tree

blossoms - your DREAMS

branches - your talents, leadership qualities, strengths, & skills

trunk - important people & your role models

dead leaves - things you want to let go (limiting beliefs, etc.)

soil - your passions & interests

roots - family values, stories, & legacies
Good mentoring relationships are based on trust. You can help build that trust by communicating effectively. In this section we will present several techniques that can help with communication in this context-- these fall into three categories: asking open-ended questions; active listening; and, giving and receiving feedback.

### Open-ended Questions

The process of having a deep conversation can sometimes depend not on if you ask questions, but on how you ask them. Questions that only require “yes” or “no” answers can limit the depth and flow of a conversation with youth.

Practice creating open-ended questions. Try changing these close-ended questions to open-ended questions:

<table>
<thead>
<tr>
<th>Close-Ended</th>
<th>Open-Ended</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many brothers and sisters do you have?</td>
<td>i.e. Tell me about your brothers and sisters</td>
</tr>
<tr>
<td>Do you have a favorite music group?</td>
<td></td>
</tr>
<tr>
<td>Are you angry?</td>
<td></td>
</tr>
<tr>
<td>Did you go to school yesterday?</td>
<td></td>
</tr>
<tr>
<td>Have you decided what job you want?</td>
<td></td>
</tr>
</tbody>
</table>

Examples of open-ended questions:

<table>
<thead>
<tr>
<th>Close-Ended</th>
<th>Open-Ended</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many brothers and sisters do you have?</td>
<td>Tell me about your brothers and sisters</td>
</tr>
<tr>
<td>Do you have a favorite music group?</td>
<td>What kind of music do you like? Tell me about your favorite group.</td>
</tr>
<tr>
<td>Are you angry?</td>
<td>How are you feeling? How does that make you feel?</td>
</tr>
<tr>
<td>Did you go to school yesterday?</td>
<td>How was school yesterday?</td>
</tr>
<tr>
<td>Have you decided what job you want?</td>
<td>Describe to me what your favorite job would be like.</td>
</tr>
</tbody>
</table>

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2 ConnectEd Training Manual, Pg 11
The Alliance of Mayors Initiative for Community Action on AIDS at a Local Level (AMICAALL)

Phone: +268 2505 7792  
Location: Corner Sandlane and Nkoseluhlata, Manzini  
Info: AMICAALL works in collaboration with local government, communities and partners to facilitate prevention, impact mitigation and response management by facilitating community dialogues, starting school health clubs, promoting and distributing condoms, and providing many other resources.

Cabrini Ministries

Location: St, Philips  
E-mail address: family.services@cabriniministries.org  
Info: Cabrini Ministries is a faith-based community care organization serving the Lubombo lowveld with a mission of promoting the well-being of individuals and families through comprehensive integrated health care, child care, education and social services to the most poor and vulnerable. Currently Cabrini Ministries is fulfilling its vision of Restoring Life through programs related to Health Care, Child Care, and Education

Baphalali Swaziland Red Cross Society

Phone: +268 2404 2532  
Location: Dzelwi Street, Mbabane  
Email Address: bsrscs@redcross.org.sz  
Info: The Red Cross’ mission is to help the physically disabled, do community service, support orphaned and vulnerable children, and promote HIV/AIDS, education.

Baylor College of Medicine Children’s Clinical Center of Excellence (CCOE)

Phone: +268 2409 6000  
Location: BCM CCOE Building, Corner Somhlolo and Sigwili, Kent Rock, Mbabane  
Info: Baylor is the largest provider of ARV’s to children in Swaziland. Other services offered to
children at Baylor include ARV adherence monitoring, TB treatment, nutrition services, and psychosocial support. They also offer women’s health services; Baylor is leading the way in Prevention of Mother to Child Transmission of HIV in Swaziland.

**Family Life Association of Swaziland (FLAS)**

**Phone:** Mazini Clinic +268 505 5144 Mbabane Clinic +268 404 6680

**Location:** FLAS Manzini Clinic FLAS Mbabane Clinic Next to Swaziland Milling Company Behind Mona Flats Mbhabha Street, Manzini Smuts Street, Mbabane

**Info:** FLAS clinics in Manzini and Mbabane offer a wide range of health services including counseling, testing and screening for HIV, pregnancy, infertility, breast cancer, STIs, and TB. They provide a full range on contraceptive options like the birth control pill, implant, injection, condoms, and the “morning after” pill.

**International Mental Health Resource Services (IMERSE)**

**Phone:** +268 2404 9162

**Location:** Located at the FLAS Clinic, Behind Mona Flats, Smuts Street, Mbabane

**Email Address:** info@imerse.org

**Info:** IMERSE works to promote the knowledge and skills necessary to stay mentally healthy and to support those living with mental disorders. They coordinate with local existing resources to strengthen service delivery. Additionally, they facilitate mental health research to better understand mental health issues in a local context.

**Nhlangano AIDS Training Information and Counseling Center (NATICC)**

**Phone:** Toll-free Landline: 800 9001 Other Landline: +268 2207 9797

**Location:** Bethesda Mission Station, Corner Sililo and Ndvungunye, Nhlangano

**Info:** NATICC offers the following services: Face to face counselling, Telephone counselling, Couples’ counselling, Child counselling, Rehabilitation/trauma counselling, Perpetrator counselling, Family therapy, Legal advice, Court preparation, Community Dialogues, Workshops with chiefs, in schools, in churches, etc., Referrals HIV Testing and ART clinic, and can assist in reporting all types of abuse.
National Emergency Response Council on HIV and AIDS (NERCHA)
Phone: +268 2406 5000
Location: Portion 738, Farm 2, Emajika Road, Mbabane
Info: NERCHA offers a variety of HIV prevention, testing, counseling, and treatment services nationwide. They also have many resources which are very useful for HIV education.

The Rock of Hope
Phone: +268 2505 3586
Location: 1228 Mbhabha Street, Manzini
Info: The Rock of Hope provides support and services to the LGBTI+ (lesbian, gay, bisexual, transgender, and intersex) community in Swaziland. Their focus is on human rights, and their core programs are in health care center sensitization, LGBTI human rights advocacy, peer education, empowerment and self-actualization workshops, commodity distribution, and psychosocial support services.

Save The Children
Phone: +268 2404 2573
Location: Plot 44 / Farm 48, Jojo Street, Msunduza Road, Mbabane
Info: Save The Children works in the areas of psychosocial support, encouraging positive discipline, and creating Child Protection Committees to enforce children’s human rights. They lobby and advocate for protection of children from all forms of violence and abuse, especially sexual abuse, exploitation, child labor and corporal punishment.

Swaziland Action Group Against Abuse (SWAGAA)
Phone: +268 2505 7514
Location: Lot 126 Esser Street, Manzini
Email Address: swagaa.communications@yahoo.com
Info: SWAGAA’s two main programs are counselling and education. They promote attitudinal and behavior change on gender-based violence and HIV/AIDS, using mass media, dialogues, training sessions and school debates. They also offer counselling services to survivors of abuse and their families.
**The AIDS Information and Support Center (TASC)**

Phone: +268 2505 4790  
Location: Suite 14 Makhaya Convenient Centre, Ngwane Street, Manzini  
Email Address: director@tasc.org.sz  
Info: TASC offers HIV counseling and testing, outreach AIDS work, peer counseling, HTC and psychosocial training, support group promotion, and HIV and AIDS treatment and care.

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**Women and Law in Southern Africa (WLSA)**

Phone: +268 2505 6343  
Location: Esser Street 142, Mandlenkhosi Building, Manzini  
Email Address: wlsaswaziland@gmail.com  
Info: WLSA is an organization which aims to contribute to the socio-economic, political, and legal advancement as well as protection of women and girls. This is achieved through strategic action research in the socio-legal field, lobbying and advocacy for legal reforms, policy changes, and repealing laws (including Swazi law and custom) and practices which discriminate against and disadvantage women and girls.

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**Population Services International (PSI)**

Phone: +268 2404 9718  
Location: 1st Floor, Nkhotfotjeni Building, Corner Msakato and Dzelwe, Mbabane  
Email Address: info@psi.sz  
Info: PSI offers a variety of services including the promotion of voluntary male circumcision, condom distribution, HIV testing and counseling, behavior change communication, health system strengthening, and gender mainstreaming (incorporating an awareness of Swazi gender roles into all HIV programs, and acknowledging the impact of gender-based violence on HIV transmission).

---

**World Vision**

Phone: +268 2404 1102  
Location: Opposite E-Dish Café, Somhlolo Road, Queens Gate, Mbabane  
Info: World Vision interventions have addressed problems on food insecurity (mainly through agriculture), water shortages, education, HIV and AIDS, health, infrastructure development, and economic development.
Some community and country service providers we can refer to:

**Domestic Violence Services:**
Child Protection and Counselling, Family violence and counselling, Sexual offences, Rape, Law enforcement, Legal advice, Domestic violence, Provide tips against sexual abuse, Conduct Educational forums at schools and communities, legal department, Counselling on rape cases, Referring to police and other organizations. Psychological support, Toll free numbers 9664 Ministry of education, 95 SWAGAA.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police (DCS Unit)</td>
<td>Siteki:</td>
<td>2343 4222</td>
<td>Free service</td>
<td>24 hrs</td>
<td>Everyday</td>
</tr>
<tr>
<td></td>
<td>Tikhuba:</td>
<td>2343 4228</td>
<td></td>
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<tr>
<td></td>
<td>Siphofaneni:</td>
<td>2344 1222</td>
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<td></td>
<td>Sthobelweni:</td>
<td>call Siphofaneni</td>
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<td></td>
<td>Mpaka:</td>
<td>2333 3222</td>
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<td></td>
<td>Lubuli:</td>
<td>23030222</td>
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<td>or Police near</td>
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<td>your area</td>
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<tr>
<td>SWAGAA</td>
<td>Manzini</td>
<td>951</td>
<td>free</td>
<td>8-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Save the Children</td>
<td>Siteki (Ministry</td>
<td>2343 4129</td>
<td>free</td>
<td>8-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td></td>
<td>of Education</td>
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<td>Offices)</td>
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</tbody>
</table>

**Drug/Alcohol Dependency Services:**
Couple Counselling, Drug/Alcohol counselling, Individual psychological counselling Services, Domestic violence counselling, and Suicide prevention counselling services.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Light House</td>
<td>P.O Box 1141</td>
<td>2404 5457</td>
<td>E100.00 per Month</td>
<td>8-5pm</td>
<td>Mondays-</td>
</tr>
<tr>
<td></td>
<td>Mbabane (Emafini)</td>
<td></td>
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<td></td>
<td>Fridays</td>
</tr>
<tr>
<td>Police (DCS Unit)</td>
<td>Siteki:</td>
<td>2343 4222</td>
<td>Free service</td>
<td>24 hrs</td>
<td>Everyday</td>
</tr>
<tr>
<td></td>
<td>Tikhuba:</td>
<td>2343 4228</td>
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<td>Siphofaneni:</td>
<td>2344 1222</td>
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<td>Sthobelweni:</td>
<td>call Siphofaneni</td>
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<td></td>
<td>Mpaka:</td>
<td>2333 3222</td>
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<td></td>
<td>Lubuli:</td>
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<td>or Police near</td>
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<td></td>
<td>your area</td>
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</tr>
<tr>
<td>Guidance &amp; Counselling Unit -</td>
<td>Siteki</td>
<td>2343 4129</td>
<td>Free</td>
<td>8-5pm</td>
<td>Mondays-</td>
</tr>
<tr>
<td>Ministry of Education</td>
<td>Education</td>
<td></td>
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<td></td>
<td>Fridays</td>
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<tr>
<td></td>
<td>Offices)</td>
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</tr>
<tr>
<td>Save the Children</td>
<td>Siteki (Ministry</td>
<td>2343 4127</td>
<td>free</td>
<td>8-5pm</td>
<td>Monday to Friday</td>
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<td>of Education</td>
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<tr>
<td></td>
<td>Offices)</td>
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</tbody>
</table>
# Home Based Care Services:
Home Based Care Services and Trainings, Support groups, HIV Counselling, Home visits, Nutritional advice counselling, Treatment of illness, hospice services/end of life care and Counselling, Education to families of the sick.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Sherpherded Hospital</td>
<td>Siteki</td>
<td>2343 4133</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>Mbabane</td>
<td>2404 5234</td>
<td>free</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Baphalali Red Cross</td>
<td>Mbabane or Siteki</td>
<td>2404 2532 2343 4303</td>
<td>Unknown</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Hospice At Home</td>
<td>P.O Box 28 Matsapha</td>
<td>2518 4485</td>
<td>Unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
</tbody>
</table>

# Spiritual Counselling Services:
End of life care, Individual Psychological counselling, Spiritual counselling, Home visitation and Family counselling

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good Sherpherded Hospital</td>
<td>Siteki</td>
<td>2343 4133</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>Mbabane</td>
<td>2404 5234</td>
<td>free</td>
<td>7am-4pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Baphalali Red Cross</td>
<td>Mbabane or Siteki</td>
<td>2404 2532 2343 4303</td>
<td>Unknown</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Hospice At Home</td>
<td>P.O Box 28 Matsapha</td>
<td>2518 4485</td>
<td>Unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
</tbody>
</table>

Local Church in the community where person was affiliated or even if not, Pastors are always willing to pray where there is a problem to help the affected spiritually. *N:B the affected is not only the sick person, but family members as well.*
### Income Generating Projects/Activities or Professional Training Programs

Income generating activities, Training programs for community groups.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balolongi</td>
<td>P.O Box 606 Matsapha</td>
<td>2404 4017</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Sebenta Vocational Centre</td>
<td>P.O Box 64 Mbabane (Next to SCOT)</td>
<td>4042644</td>
<td>free</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Lutheran Development Services (LDS)</td>
<td>Po. Box 388 Mbabane (Kaschile Main House)</td>
<td>2404 3122/2404 2562</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Lutsango Lwaka Ngwane</td>
<td>P.O Box 473 Ezulwini.</td>
<td>2416 2228</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>ACAT</td>
<td>P.O Box 283 Mbabane</td>
<td>2404 4738</td>
<td>unknown</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>Bantwana Initiative</td>
<td>P.O Box 1493 Mbabane</td>
<td>2 505 2848</td>
<td>free</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
</tbody>
</table>

### Nutritional Advice/Counseling or assistance and Post-test Support Clubs And Support Groups

Nutritional advice or counselling, support group services, Education on Nutrition, Resources for food, Gardening, Poultry.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>SWANNEPHA</td>
<td>P.O. Box 4161 Mbabane</td>
<td>2404 2578 or 2404 8359</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>SINAN (infant nutrition)</td>
<td>P.O 1032 Mbabane</td>
<td>24048863</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday-Fridays</td>
</tr>
<tr>
<td>SASO</td>
<td>P.O Box 6102 Mbabane</td>
<td>4220662</td>
<td>free</td>
<td>8am-5pm</td>
<td>Mondays-Fridays</td>
</tr>
<tr>
<td>SWAPOL</td>
<td>Manzini</td>
<td>2505 7088</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday-Fridays</td>
</tr>
</tbody>
</table>

You may also get help from a local HIV Support Group if there is one present in your community.
### HIV Counselling services for the Disabled and Preventive Counselling

HIV Counselling and Testing services for disabled community, Education, Community mobilization

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>FODSWA</td>
<td>Save the Children Offices</td>
<td>2404 2576</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
</tbody>
</table>

### Legal Advises

Legal advices for women, children and families

<table>
<thead>
<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council of Swaziland Churches</td>
<td>Manzini</td>
<td>2505 3628 or 2505 3748</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
<tr>
<td>Women and The Law (WLSA)</td>
<td>P.O Box 508 Mbabane</td>
<td>2404 8863</td>
<td>Nil</td>
<td>8am-5pm</td>
<td>Monday- Fridays</td>
</tr>
<tr>
<td>Department of Social Welfare</td>
<td>Siteki Government Offices</td>
<td>2343 4457</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday- Fridays</td>
</tr>
</tbody>
</table>

### Mental Health Services.

Psychotherapy services, Treatment of drug abuse symptoms, and Family therapy/Counselling.

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<tr>
<th>Organization</th>
<th>Physical Address</th>
<th>Phone number</th>
<th>Fee Required</th>
<th>Time</th>
<th>Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Psychiatric Hospital</td>
<td>Manzini</td>
<td>2505 5170</td>
<td>free</td>
<td>8am-5pm</td>
<td>Monday to Friday</td>
</tr>
</tbody>
</table>
**Referral**: The provision of timely, appropriate guidance to an individual designed to refer the individual to a specific care and/or service provider for care such as in cases of post Abuse / Gender Based Violence (Physical abuse, sexual abuse). This will be mainly done by the Umliba officers who are already trained on the National referral system and have established relations with the post care institutions i.e Cabrini Ministries.

**Linkage**: An individual is seen by a health care provider (physician, physician assistant, nurse practitioner, Counsellor, HIV tester) to receive medical care such as for HIV infection/ and or Tuberculosis screening, mental health counselling, Post Gender Based Violence Care, usually within a specific time as an outcome of a referral.

**Within the** DREAMS project, linkage will include the post-referral verification that medical services were accessed by the individual being referred to care. This will be done by the mentor through one-on-one interviews with their mentees and through physically seeing a duplicated copy for an assurance of a referral completion from the service provider.

### Role of a Mentor

- Give mentees a list of physicians/clinics/ Institutions
- Provide mentees with information on other community services (pamphlets/brochures)
- Refer mentees to a specific care or service provider and instruct client to make an appointment
- Remind mentees of the appointment
- Give mentees a list of physicians/clinics and allow her to choose a provider
- If possible, attend the appointment with mentee
- Follow up with mentee or provider after the appointment to ensure services were received
- Confirm medical care services were accessed within 90 days
This form is to be used by mentors to screen/monitor/assess or support AGYW in their clubs on a monthly basis. It informs the mentor on the state of the AGYW on a general note and on specific health issues related to them and their babies.

Name of AGYW ______________________________________________  Age_____________

**Homestay:**

1. Have there been any changes since I last visited your family in the following areas? If YES, please explain
   (a) Academic/School Work Support_______________________________________________________
   (b) Baby Care Support_________________________________________________________________
   (c) Care giver Support_________________________________________________________________

**Education Progress:**

1. How many days have you looked at your school work whilst at home this past week? ___________
   ___________________________________________________________________________________

2. How many times were you absent from class last month? ________________________________
   ___________________________________________________________________________________

3. What were your reasons for absenteeism? ___________________________________________
   ___________________________________________________________________________________

4. How many did you get in your Test Scores this past month?
   Name of subject___________________________________________ Test Score__________________
   Name of subject___________________________________________ Test Score__________________
   Name of Subject___________________________________________ Test Score__________________

5. What are you most proud of that you have accomplished this past month? __________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

6. What has been your main challenge or struggle this past month?
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

7. Is there any way I can better support you or anything I can help you with?
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

**GBV Screening**

**Psychological /emotional violence in the family.**

1. Are you currently in an intimate relationship with a person who threatens, frightens, insults you or treats you badly?  
   1_________ YES  2_________ NO
2. Are you currently in an intimate relationship with a person (e.g., husband, boyfriend/man friend) who forces you to participate in sexual activities that make you feel uncomfortable? 
1_________YES         2_________NO

3. Have you ever been forced to have sex with someone that you were NOT in an intimate relationship with (i.e., not your husband, not your boyfriend/man friend)? 1______YES 2_______NO

4. If ‘YES,’ did this happen within the last six months? 1 _______YES 2_______NO

**HIV Status Information**

1. Have you ever been tested for HIV?  
   1____Yes                2_____No  
   (If never been tested, REFER for HIV Test)

2. If yes when last did you get tested? 
   1__less than 3 months  
   2__more than 6 months ago  
   3__over a year ago

4. Do you know your HIV status? 1____Yes                2_____No

5. If yes, would you like to share your result? 1____Yes                2_____No

6. If Positive_____, are you currently on Treatment (ART)? 1____Yes                2_____No

7. If Yes, when did you last go for your refill?  
   __________________________________________

8. When is your next date for clinic visit? __________________________________________

**Family Planning Services**

1. Since you gave birth to your last child or (since you last ANC visit if pregnant) Have you been counseled on Family planning services at the clinic?  
   o  Yes  
   o  No (REFER for FP counseling)

2. Are you currently doing something or using any method to delay or avoid getting pregnant? (contraceptives)  
   o  Yes  
   o  No (Refer for FP)

3. Which method are you currently using? (PROBE for each method, select all mentioned)

<table>
<thead>
<tr>
<th>Pill</th>
<th>IUD</th>
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<tbody>
<tr>
<td>Tubal ligation</td>
<td>Norplant</td>
</tr>
<tr>
<td>Injectable</td>
<td>Foam</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>Natural family planning</td>
</tr>
<tr>
<td>Diaphragm</td>
<td>Lactational amenorrhea</td>
</tr>
<tr>
<td>Condom</td>
<td></td>
</tr>
</tbody>
</table>

4. When is your next visit to facility for FP service (refill, replacement, injection etc.) ___________?
Child Growth Monitoring

1. Did you go for ANC when you were pregnant/In the last month (if pregnant)
   - Yes
   - No (REFER for ANC or PNC)

2. Does your child have a growth chart (Please ask to see it)
   - Yes
   - No

   If you see the chart check if its up-to-date. If not, REFER for the Health Facility

3. Check and copy form the growth chart if the child was immunized

<table>
<thead>
<tr>
<th>Age</th>
<th>Immunization</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Now born</td>
<td>B.C.G</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Polio drops</td>
<td></td>
</tr>
<tr>
<td>3 months</td>
<td>Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>D.P.T</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B.C.G</td>
<td></td>
</tr>
<tr>
<td>4 1/2 months</td>
<td>Polio D.P.T</td>
<td></td>
</tr>
<tr>
<td>6 months</td>
<td>Polio</td>
<td></td>
</tr>
<tr>
<td></td>
<td>D.P.T</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Measles</td>
<td></td>
</tr>
<tr>
<td>9-10 months</td>
<td>Measles</td>
<td></td>
</tr>
</tbody>
</table>

4. Do you think your child is growing well?
   - Yes
   - No (Refer)

5. Are you worried that your child may be having any disability? Explain________________________
   ___________________________________________________________________________
   ___________________________________________________________________________
   ___________________________________________________________________________
   If YES refer to clinic.

AGYW Signature_______________________________ Date: _______________________________

Name of Mentor_____________________________ Signature_____________________________

AGYW Signature_____________________________ Date: _______________________________

Name of Mentor_____________________________ Signature_____________________________
HANDOUT: First family visit

1. Greet the family.
2. Introduce yourself as a DREAMS Mentor. Ask their names and ask about their family.
3. Explain that the daughter has been selected to participate in the DREAMS IC Program. She will not only attend school but also receive valuable life skills and...
4. Ask the couple what they think the benefits are of the daughter participating in the program.
5. Explain that you will visit the home XX times over the period of the project, meeting with their daughter once a week.
6. Clarify expectations. The daughter will need to attend weekly meetings with the mentor and school once a week. If she has a child she will need assistance in care for the child. She will also need moral support as the work is challenging.
7. Clarify your role as a mentor. My role is to teach, guide and support adolescent girls to finish their education and become community based leaders.
8. Ask the parents what their questions are.
9. Tell the parents that you have a contract for them about the program. We want everyone to be involved and supportive. Ask them if they agree to the expectations.
10. Ask the parents if the girl and family do not meet the expectations then what should be the result?
11. If they cannot read or write explain the contract and what it entails and ask for verbal confirmation.
12. Set a date and time for the next visit and ask for mobile/contact information.
Date:_________________________

Congratulations to you and your girl child for being selected as beneficiaries under the Bantwana/DREAMS Innovation Challenge program. The program and you as the caregiver/parent will support your girl child to access quality education. The Bantwana DREAMS Innovation Challenge support is conditional and therefore dependent on fulfilling your obligation as a parent or Caregiver to the girl and on the girl's academic performance and general behaviour and participation in the various DREAMS Innovation Challenge activities, as well as obeying rules and regulations of the out of school study group she is placed in.

The commitment note spells out the extent of support to your household and the girl under this scheme and the responsibilities, “dos and do nots” for both you the parent/caregiver and the girl/young woman.

NOTE:

Please read and understand this commitment note after which sign the document where indicated and return to the community mentor volunteer who will bring it to Bantwana office.

Objectives of the Support

To increase enrollment, retention and completion of primary, secondary and high school education for Adolescent girls and young mothers while addressing their psychosocial, nutrition and health needs and the needs of the babies.

Bantwana DREAMS Innovation Challenge Support for Beneficiaries:

The school support package covers 20 months from March 1, 2017 to October 30, 2018.

Bantwana shall:

1. Ensure payment of out of school study group related costs to Sebenta National Institute or Emlalatini Development Center (Tuition/ marking fees/ workbook fee/any requirements provided by the school): 100% in year 1 and in year 2. This is paid directly to the schools that are providing the education.

2. Ensure payment of examination fees for the girl child for all six subjects in 2017 and 2018.

3. Ensure payment of transportation fee to attend out of school study group classes where necessary.
4. Monitor the performance of your girl child on monthly and termly basis and give advice for improvement especially when a child's academic performance is poor.

5. Make decision to terminate the education support for progressive poorly performing girls; the girls who are not supported to attend school by their caregivers/parents; bad mannered and irresponsible girls; and those who fail to attend other Adolescent girls and young women club activities under the program.

6. Select and train a community volunteer mentor in the community who will support the girl and ensure that she gets adequate support from her family to attend classes and to have time to study during the course of the week. The volunteer mentor will also provide psychosocial support to the girl and your family during home visits; facilitate Life Skills and Early Childhood Stimulation classes for the girl.

Please note that there is no provision for a girl who is advised to repeat a class or fails to meet the academic standards of the out of school study group to which she has been enrolled.

Responsibilities and commitments by parent/caregiver to support progression of girl child:

1. As a parent/caregiver, I will give all the necessary support to my girl child in order for her to perform and behave well so as to complete school. The program has the right to drop our girl child if she is not maintaining the required academic performance.

2. The family and I will look after the girl's baby when the mother is either studying at home or has gone to attend out of school study group classes at school.

3. I will ensue that my girl child always attends out of school study group classes, as needed e.g. every Saturday.

4. I will ensure she attends other program activities like Early Childhood Stimulation and Life Skill Skills training sessions that will be held every week either at school or in the community later in the year.

5. I will support and encourage the girl child to do homework and give her enough time to concentrate on her studies while at home.

6. The family and I will monitor the girl’s academic performance and overall behavior.

7. I will cooperate with the community volunteer mentor and teachers to come up with strategies to support the girl’s academic performance, Psychosocial support, health and nutrition needs whenever required.

8. I will be ready to contribute to my girl child’s welfare, scholastic materials, school requirements through out the study period as and when required.

9. I will support the girl child to get admitted into the formal secondary or high school or Emlalatini Development Centre to continue with education at the end of the DREAMS Innovation Challenge program.
10. I will pay all the required enrolment fees; exam fees; buy uniforms where necessary for the girl child when she re-integrates into the formal school at the end of DREAMS program.

11. The family and I will participate in all program events and meetings like Community Dialogues for which we are invited.

12. I will report any signs or withdrawal of the girl child from the program to the community volunteer mentor.

Responsibilities and commitment by the Girl Child to ensure progression:

1. Apart from what we are providing to your girl child, we also expect your child to succeed and to be of good behavior and conduct. For this to happen we expect your girl child to:

2. Keep her academic scores high! This is the first thing we expect from you. We will be monitoring your grades and your continuation in the education support will depend on your academic performance.

3. Pass all examinations the first time since the program does not support those who are repeating.

4. Respect teachers, parents/caregivers, community volunteer mentors and communities in general. Teacher and your parents will be consulted periodically to help us assess you further.

5. Attend all the extra activities of the program through the adolescent girls and young women clubs both at school and in your community.

6. Lead a disciplined life to become a contributing citizen of Swaziland.

7. Show exemplary behavior at home, school and in the community.

As a parent/caregiver of the girl child who is being supported to access out of school study group education classes under the Bantwana DREAMS Innovation Challenge program, I clearly understand the requirements of this scholarship and my responsibilities as a parent/caregiver to supporting the girl child. I am fully aware that the whole family support is required to ensure that my child completes a phase (either STD5, JC or SGCSE) to obtain a certificate.

If you agree to all of the above, both support and responsibilities, Finally, please sign this commitment note (you and your daughter).

1. Girl/woman’s name: ______________________________________________

2. School/class of enrollment:___________________________________________

3. Girl/woman’s Signature: ____________________________________________

4. Name of Parent/Caregiver: _________________________________________

5. Signature of Parent/Caregiver: ______________________________________

6. Relationship of Parent/Caregiver with Girl: ____________________________
7. Contact number of Parent/Caregiver: ________________________________

Family Profile:
- Family Name: ________________________________
- Community: ________________________________
- Chiefdom: ________________________________

1. Number of people in the home

2. Number of Female adults above 20 years

3. Number of girls less than 20 years old

4. Number of male adults above 20 years

5. Number of boys less than 20 years old

Community Mentor Volunteer Notes/Observation

Signature and Designation of witnessing CVM: ________________________________
**HANDOUT: MENTORS’ HOME VISIT TRACKING TOOL**

Date: _______ / _________ / ______

1.0 Visit Profile

1.1 Name of Mentor__________________ Community __________________ Cell _________

1.2 Name of AGYW ____________________________ Cell __________

1.3 Class Currently Attending

1.4 Name of AGYW Caregiver/Head of Family___________________ Cell __________

2.0 Information on Visit

2.1 Purpose of visit (Tick all that applies)

- To check on overall wellbeing of AGYW
- To check on overall wellbeing of AGYWs baby
- Follow up on an issue
- Educational Motivation
- Club attendance Motivation
- Family Contract follow-up
- Other

3.0 Family Contract Commitment Follow-up

This is a follow-up to the contract signed in support of the AGYW in the DRREAMS Program

3.1 Have you been able to support the AGYW in the program _____Yes _____No

Explain______________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

3.2 Does the AGYW have enough time at home to do her school works? ___Yes ___No

3.3 How often does she do her school work at home

- Every day
- 1-2 times a week
- 3-5 times a week
- Never
Explain how she does it

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

3.4 How many times has she missed Saturday Classes in the past month _______times

3.5 Reasons for missing classes_______________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

3.6 Do family members help in caring for the baby when the baby’s mother is studying or is at school? _______Yes _______No
(If No please explain why. If Yes, explain how):

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4.0

4.1 What has been going well?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4.2 Challenges faced by AGYW

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
4.3 Challenges faced by Parent/Caregiver related to the program or AGYW
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4.4 Are there any changes you are seeing in the AGYW either positive or negative, please explain?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

4.5 Is there any form of support that you think the AGYW needs from me “mentor” or from anyone else?
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Mentors Signature:  ______________________________________________
Caregivers Signature:  ______________________________________________
Date of Visit   ________________________________________
1. What activities can we do to start together as a group?

2. What are some things I could tell my mentees about myself that would help us get to know each other? For example, is there anything in my life or history that might be relatable to them?

3. What materials do I need for my first meeting?

4. What are my hopes for this relationship?

5. Remember to ask what the hopes are of my mentee!
Week #1

Topics Covered

• Creative Name Tags – a different way to introduce your sister
• Setting Ground Rules – what rules should everyone follow for the program
• What is the DREAMS program?
• Logistics – understanding where to meet, the safest space, how to manage personal issues

Materials Needed

• Scissors, glue, magazines, paper, string
• Chart Paper and pens
• Workbooks for students
• Handout about DREAMS

Set Up

• Remember to have mentees sitting in a circle
• Make sure you have student workbooks and pens

Activities

Activity 1: Creative Name Tags: Personal Quality

Mentor Notes: The purpose of this activity is to set the scene for the entire training. We know that good facilitation needs to be fun and creative. How do we set the students at ease? Sometimes it’s challenging for people to get up and talk about themselves. They might need a descriptive word or image to help them feel comfortable integrating into the group. We want the students to select a word that describes their personal style and likely says a little bit about them. For example: strong, caring, open, listener, etc. They should also have their names on the nametag. The mentor should also have their own nametag too.

Materials Needed:

1. Paper
2. Pens,
3. Coloring pens.
4. Magazines – if these are available it really helps for students to use pictures
5. Scissors and glue sticks
6. String – they loop this into their nametag and put it around their neck
Set up: Get all of the materials and put them onto a table at the side of the room. All of this should be set up before the mentees arrive

Estimated Time: 30 mins

Step 1: As mentees arrive ask them to put down their things and head over to the art table.

Step 2: Tell them that they are going to be creating their own nametags through art that describes themselves. Try not to give them examples unless they are really struggling. We don’t want them to use what you suggest. Explain that it can also be a quality that describes them as a person. Please remind them to also write their names on the paper. That should be the only written word on the paper.

Step 3: Give them 30 minutes to complete or until everyone is finished

Step 4: Once done they can move to the circle. Ask them to turn to the person next to them or someone they don’t know. They should ask the person about their nametag and what it means. Give the mentees 5-10 minutes to do this.

Step 5: Have each person introduce their partner to the group.

Activity 2: Setting Our Ground Rules

Mentor Notes: The purpose of setting up rules together is that it creates buy in with the participants. If they are the ones who come up with the rules then typically they will also feel more obliged to follow the rules. These are rules of behavior during the training that everyone will try to respect. For example, keeping time, phone usage, talking, answering questions.

- It’s good to have long pauses and feel a little awkward with empty space. People need time to respond and having a long pause is ok and leaves space for someone to step forward. The most important thing is that you get the mentors to respond and not always be the one to respond.
- Examples of Ground Rules
  - Raise your hand when you want to speak
  - Don’t interrupt people when they are speaking
  - Turn your phone on silent
  - Respect everyone’s ideas and opinions
  - Be on time for each session, respect timing of the training
  - Support your fellow mentors
  - How to resolve conflict
  - Confidentiality - No one repeats what anyone else says in the group outside of the group without getting permission from that person.

Materials Needed:

1. Chart paper
2. Markers

Set up: Place a chart paper on the wall with Ground Rules as the title
Estimated Time: 30 minutes

Step 1: Ask the mentees to think about what types of rules they think are important for everyone to follow for the training. Provide a few leading questions. What should we do with our phones, what should we do about time, what should we do about respecting ideas? Give them some time to think and respond.

Step 2: As mentees begin to have ideas write them down on the chart paper. Always ask if everyone agrees, encourage everyone to speak and encourage open dialogue. If someone can’t agree to one, try to revise it so that it is acceptable to everyone. Let the group know that you can change or add to the list as you go along.

Step 3: Once you feel you have covered everything make sure that you go over it and everyone agrees with the ground rules. These should remain up for the rest of the training. If someone is not respecting the rules then you can refer to them.

Activity 3: What is DREAMS

Mentor Notes: In this activity it is important for mentees to understand the program they are participating in. What does it include, what do they have to look forward to and if they have any questions. It’s important to set up an environment of transparency and willingness to ask and answer questions or concerns.

Set up and Materials:
1. Handouts of DREAMS Program

Estimated Time: 15 Minutes

Step 1: Handout the DREAMS program overview. Share with mentees what the program is about and why it’s important.

Step 2: Ask the mentees if they have any questions? Is there anything that concerns them?

Activity 4: Reviewing Logistics

Mentor Notes: The final activity should be a discussion about logistics for the participants. Possible questions to discuss:

1. How is the location of the training?
2. Do they have any issues getting there an home?
3. Do they have any childcare needs? How can they figure out a solution?
4. Will weekly meetings help?
5. Are there things that they would like to get training on?
Week #2

Topics Covered
- Review Ground Rules
- Getting to know one another (step into the circle)
- First Evaluation of mentees

Materials Needed
- Chart from the previous week
- Student workbooks
- List of questions

Set Up
- Remember to always sit in a circle and be prepared for the lessons in advance.
- Always begin the session by asking participants to share one great thing from their week and one thing that was challenging.

Activities

Activity 1: Review Ground Rules

Mentor Notes: Make sure you still have the ground rules from the previous week. Go over the rules, see if everyone is still happy with them or has something to add.

Activity 2: Step Into The Circle

Mentor Notes: One of the most important pieces of group and individual mentorship is to help the individual feel like they aren't alone. That there is someone there to support them and who shares their experience. It's difficult to share our personal stories and create a safe space of understanding. If we are able to support mentees to break through and feel safe and understood then they will trust and invest in the program.

Materials Needed:
1. List of questions for mentor

Set up: Make sure there is an open space where everyone will be able to stand in a circle together. Please review the suggested questions and adjust to correlate to the group that you have. You are going to ask everyone to stand in a circle together. Your role is to help set the tone for safety, inclusion and respect. The mentor will read a number of statements. Participants are asked to step into the middle of the circle if they agree with the statement or if it applies to them remain there for 5 seconds and then step out. At the end, participants are asked a few discussion questions. The mentor helps maintain physical and emotional safety and comfort within the group.

Estimated Time: 30-45 minutes
Step 1: Ask all participants to stand in a circle, shoulder to shoulder. The mentor should also be in the circle.

Step 2: It is important to share with the group that you will be doing an activity that requires trust and respect. Refer to the ground rules that you set up to start. Tell participants the purpose of this activity and that it is something that they can do with their mentees to build a safe space together. There should be no judgment in this activity.

Step 3: Mentor says, “I am going to say a number of statements. If you agree with the statement, step into the circle. If you do not, you are unsure, or you are not comfortable answering, stay in your spot. Please feel free to remain standing for all of the statements if you do not wish to participate.”

Step 4: Please ask the following questions. Give enough time between statements to allow participants to step into the circle. Once they are there have them look around and see who else is in the circle. There should be no talking. **There should also be no judgment of people who are in or out of the circle. This is a way to accept and respect everyone's experience.**

1. Move into the circle if you were born in Swaziland…
2. Move into the circle if you immigrated to this country…
3. Move into the circle if your parents immigrated to this country…
4. Move into the circle if you speak more than one language…
5. Move into the circle if you are the…
   a. Youngest child
   b. Oldest child
   c. Middle child
   d. Only child
6. Move into the circle if your parents/guardians went to school
7. Move into the circle if you went to school
8. Move into the circle if you consider yourself a leader
9. Move into the circle if your family told you that you could do, or be, anything you wanted.
10. Move into the circle if society told you that you could do, or be, anything you wanted.
11. Move into the circle if you have struggled with low self-esteem
12. Move into the circle if you have ever felt that you didn’t belong
13. Move into the circle if you have ever experienced discrimination because you are a girl.
14. Move into the circle if every day you are aware of being a girl and how it shapes your life.
15. Move into the circle if you believe that girls have the power to create deep change in our world.
16. Move into the circle if you want to be involved in a movement that advances the rights of girls.
17. Move into the circle if you want to contribute your gifts to creating a world in which everyone feels safe, valued, and respected.
18. Does anyone else have a question/statement you’d like to share that wasn’t mentioned?

Invite participants to call out other identities they belong to and want to name…

Reflection questions:

1. How did you feel when you heard the statements? What came up for you?
2. How did it feel to step into the circle, and how did it feel to be left standing?
3. Did anything surprise you? Did you notice anything new or different about yourself or the group?
4. What have you learned from this activity? Share any insights or reflections if you’re comfortable.

Activity 3:

Mentor Notes: Students should be given some time to write or draw about their experience. How are they feeling? This is a time for them to write anything they want about the program or their lives.

Materials:
1. Student workbooks
2. Pens

Closing:
- Thank mentees for their time.
- Ask them if they have any questions about the program or their participation.
Week #3

Topics Covered

• Talking about our own stories (Leadership Trees)
• Something good and something challenging

Materials Needed

• Chart paper for everyone
• Colored markers
• Student workbooks

Set Up

If you have your leadership tree from the mentor training that would be ideal. If you do not then you should do another one! Show the students the different pieces of your story!

Activities

Activity 1: Leadership Trees

Always remember to open the circle with something good and something challenging that happened that week! If it's something really challenging, perhaps ask students to see if they can help brainstorm a solution together.

Step 1: Tell the mentees that you are going to be doing a leadership tree. As mentors we must be leaders in the community. We are also asking your mentees to be leaders as well. In order to be leaders we need to understand our past and look towards our future. Using visual art is a good way to share your story. Please stress that you do not have to be good at drawing to complete this activity.

Step 2: Walk through the different pieces of the tree and what each action means. Please make sure you provide examples. You could even have prepared your own tree to share.

- Roots – What are your family values, how were you raised and what is the foundation of who you are?
  - Example: My family valued education, we worked very hard, my mother was a leader in our community.

- Soil – Your passions/interests. What do you care about as an individual?
  - Example: young women, my family, singing

- Dead Leaves – What do you want to let go of? What limits you?
  - Example: Being a girl means you aren’t strong, feeling like I’m not smart enough, being shy

- Trunk – Important People/Role Models
  - Examples – My mother, my teacher in primary, my neighbor

- Branches – Talents, Strengths and skills
- Examples – I am a good leader, I am compassionate, I take care of people, I have a loud voice

**Blossoms – Your dreams**
- Example – I want to lead girls in my community, I want to finish school, I want to be President

**Step 3:** Provide mentees with chart paper and markers. Ask mentees to make their own trees writing out their story. Make sure you circulate helping them work through their different ideas. Give them at least 30 minutes to complete.

**Step 4:** Ask them to get into groups of 3 to share. This activity can be quite emotional and tell the mentees that it is ok as it is sharing our life story and our dreams.

**Step 5:** At the end of them sharing ask them if anyone wants to share anything about themselves that they realized. Please ask them not to share about anyone else as personal stories are always confidential unless given permission.

---

**Week #4**

**Topics Covered**
- Leadership Trees review from the previous session
- What is self-confidence and how can we build self-confidence?

**Materials Needed**
- Leadership trees from previous week
- Student notebooks

**Set Up**
- Set up in a circle!

**Activities**

**Activity 1 – One Good one Challenge**

**Mentor Notes:** Ask mentees to go around the circle, say their name and share one good thing that happened to them during the week. Ask the to also share one challenge and how they approached it. Ask other mentees to provide support and feedback when possible.

**Activity 2 – What is self-confidence and how can we build it?**

**Mentor Notes:** Today’s session will explore self-confidence, which is the way people feel about themselves. It is important to have good feelings about oneself because it can help people set goals and lead healthy, empowered lives.
Time allotted: 20 minutes

**Step 1:** Ask girls if they have ever heard the term “self-confidence.” Ask them what it means. (Possible answers: Some girls might say that it’s being confident; others might say that it means to be conceited or arrogant.) Explain that people with good self-esteem love and respect themselves. When people feel they deserve love and respect, they expect it from others and are not likely to accept being mistreated or disrespected.

**Step 2:** Then explain to the girls that how people feel about themselves affects their actions towards others and what they can accomplish in life. Ask them to brainstorm how a person with good self-esteem acts. Write their ideas on the chalkboard or on a flipchart and be sure to include the following points.

People with high self-confidence:

- accept their mistakes and keep going;
- accept new challenges and try new activities, and thereby gain self-confidence;
- are more comfortable with others;
- believe that they can succeed and set goals to do so;
- feel more confident in their decisions and make choices based on their own desires and values, not those of others.

Inform the girls that the opposite is also true. People with low self-confidence may be more likely to fall under the influence of others, not trusting their own values or decisions.

1. Point out that people are not born with self-confidence. Children learn it when they feel loved and valued. As children hear positive remarks including praise, encouragement, and reassurance about themselves and the things they do, their self-esteem is strengthened over time.
2. Point out that high self-esteem is different from being conceited. People with high self-esteem like themselves, but that does not mean that they think they are perfect or better than other people. Ask girls if they can think of ways people can improve their self-esteem. Write their responses on the blackboard and include the following ideas:

“You can work on your self-confidence every day by...”

- Not comparing yourself with others. Setting your own goals, and not judging yourself according to someone else’s achievements.
- Recognizing your special talents and appreciating yourself the way you are. Make a list of the things you do well. Are you an artist, athlete, singer, storyteller, footballer or dancer? In what subjects do you excel in school? What things do you do well at home?
- Thinking about the kind of person you are and making a list of your best qualities: What do you like about yourself? Are you generous? Do you have a good sense of humor?
- Being aware of the things you would like to improve about yourself, but not being overly critical of yourself.
• Being realistic. Set achievable goals so that you can be satisfied when you accomplish them.
• Believing in yourself. Tell yourself: “I can do it!”
• Spending time with people who care for you, make you feel good about yourself and boost your self-esteem.
• Staying away from people who damage your self-esteem, particularly if they do it on purpose. Self-esteem protects you. When someone treats you poorly, your sense of self-esteem shouts: “This is wrong. I do not want to be treated like this!”

**Activity 3: Treasure yourself**

**Time allotted:** 30 minutes

**Step 1:** Explain that we are born with an imaginary empty treasure chest. As people love us, compliment us, appreciate us, spend time with us, and learn with us, we build up our treasure. As people criticize us, shout at us, and put us down, we lose our treasure. Explain that as the put-downs accumulate, the treasure chest can empty and that prevents us from feeling good about ourselves and others.

**Step 2:** Read the following statements aloud one at a time. Ask mentees to write a response to each statement.

- What do you think is your greatest personal achievement to date?
- What do you like most about your family?
- What do you value most in life?
- What are three things you are good at?
- What is one thing you would like to improve about yourself?
- If you died today, what would you most like to be remembered for?
- What do your friends like most about you?

**Step 3:** Divide the girls into groups of three or four and ask them to share two or three of their responses with their group.

**Step 4:** Ask learners to name different aspects of self-confidence. Write their suggestions on the board as they list them. When they have finished, discuss the different suggestions and why they are so important!
# Club Session Attendance Registry

**Facilitator's Name:** ………………………………….  
**Date:** ………………………………………….  
**Inkhundla:** ……………………………………….  
**Umphakatsi/Community:** ……………………………………….  
**Venue:** ……………………………………….  
**Name of Session:** ……………………………………….  
**Start time:** ………….  
**Finish time:** ………….  

**Participants List**

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<th>Sex</th>
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# Mentors Monthly Report Form

**Reporting Month:**

**Inkhundla:**

**Umphakatsi:**

## Progress Report

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<tr>
<td>Number of Club meetings held this month</td>
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<tr>
<td>Number of girls who attended All sessions</td>
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<td>Number of girls who attended at-least 3 sessions</td>
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<td>Number of topics covered this month</td>
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<tr>
<td><strong>List of Topics covered</strong></td>
<td><strong>Comments</strong></td>
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<td>4.</td>
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<tr>
<td><strong>Home Visits / mentoring progress</strong></td>
<td><strong>Number</strong></td>
<td><strong>Comments</strong></td>
</tr>
<tr>
<td><strong>Indicator</strong></td>
<td><strong>Number</strong></td>
<td><strong>Comments</strong></td>
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<tr>
<td>Number of homes visited</td>
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<td>Number of guardians met with this month</td>
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<td>Number of AGs met with individually</td>
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<tr>
<td>Number of AGs referrals done this month</td>
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<td>Type of referral</td>
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<td>1. HIV testing and Counselling</td>
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<td>2. Family Planning</td>
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<td>3. Other Clinical services</td>
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<td>4. Post GBV Counselling</td>
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<td>5. Linkages to HIV Care &amp; Treatment</td>
<td>6.</td>
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<td>6. Other Linkages</td>
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**Successes in this Reporting Period**

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Challenges in this Reporting Period

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Name of Mentor: .................................................................Signature.........................

Date of Reporting: .................................................................

Supervisor approval: Yes (....... ) No (....... )

New Revision due date: .................................................................

Date of report resubmission: .................................................................

Supervisor’s Name ................................................................. Signatures.........................

NB: Please attach all sources documents for this report ( club attendance registers, Home visit forms)