

loveLife Across the Nation

“The logic of loveLife,” says board chair Cheryl Carolus, “is that the Born Free Generation of South Africans must grow up thinking and acting differently if we are to combat the HIV epidemic. It requires a social movement that goes beyond the mantra of ‘abstain, be faithful, use a condom’ to address the attitudes, values and traditions that shape sexual dynamics in South Africa.”

“You can’t do that without challenging the social norms that drive HIV infection and that’s often controversial,” she adds, “but the fact is that young South Africans have a 50-50 chance of getting HIV in their lifetime – one of the highest risk ratios in the world. As a nation that is just intolerable. Traditional HIV education campaigns have produced limited

results which is why we have to be more innovative. loveLife combines a bold media campaign with countrywide services on an unprecedented scale.”

“Scale is fundamental to the prospects of making an impact,” says Carolus. “There are many fine

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HIV/Aids related programmes all across South Africa, but their impact will be limited unless we can create national momentum behind the idea that an HIV-free generation is attainable. That’s why loveLife’s contribution is so crucial – its focus on under twenties concentrates efforts on

a priority age group; its campaign leverages and strengthens the response of local communities and key government departments; while its media and face-to-face programmes constantly seek to push the frontiers of HIV prevention. ”



groundBREAKERS

Some 1,700 loveLife groundBREAKERS (gBs) – the class of ’05 – will soon “graduate” after volunteering for loveLife for 12 months. gBs are loveLife’s frontline workers implementing HIV/Aids and lifestyle education programmes throughout South Africa. Based in some 3,700 schools, 450 clinics and a national network of 130 community-based



organisations, gBs are highly motivated young people who use their own energy

and personal drive to motivate their peers to envision a future without Aids and to make the personal life choices that will keep them HIV-free. Over the past five years loveLife has graduated more than 5,000 gBs. Of these, about 70% have gone on to formal employment or tertiary education. Nationally, employment among 18-25 year olds is estimated at 25%.

Face It

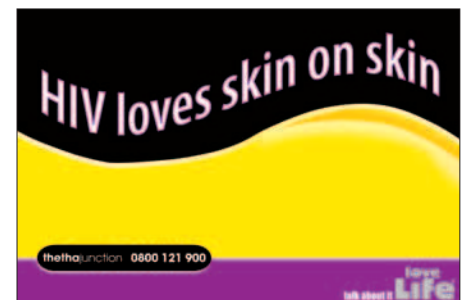
loveLife's 2006 communications campaign is built around the tagline "HIV: Face it" and reflects an evolution of the loveLife campaign in line with the changes in the HIV epidemic. The most basic change is that prevalence rates among 15-24 year olds seem to have peaked at levels lower than originally projected. But although prevalence levels have remained relatively flat for the past three years, there has been no significant decline. "This begs the question," says loveLife CEO, Dr David Harrison, "whether this is the best that



can be expected from all our prevention efforts in future?" Fact is that although more than 95% of young people are fully aware of the behaviour that could protect them from HIV infection, in recent surveys some two thirds of young people already infected with HIV said they did not consider themselves at risk of infection.

"We have to FACE IT," says Dr

Harrison, "basic awareness is not enough to change young people's behaviour. Although young people tend to take risks, that is not enough of an explanation. We have to better understand the gender, behavioural and sexual dynamics driving risk-taking behaviour among young people and tackle these issues head-on – that's what the FACE IT campaign aims to do."



Teenage Pregnancy in the Spotlight

One part of loveLife's FACE IT campaign really got the nation talking – drawing both sharp criticism and strong applause. Amongst others, billboards highlighted the link between HIV and the view that childbearing affirms womanhood.

Teen pregnancy is strongly associated with the dramatic escalation of HIV infection among young women - from less than 6% at age 17 to over 25% by age 21. Two thirds of South African women have their first child by age 20. Young women aged 15-19 years who have been pregnant have almost double the risk of HIV infection, obviously because it involves unprotected sex.

Clearly, warning of the risk of HIV will have little effect if the motivation to have a child is stronger than the desire to avoid infection.

The explosion of HIV infection among 18-21 year old

women appears to be driven by sexual relationships with older men (who have a higher probability of already being infected). Although an age differential in relationships between men and women is not uncommon in societies across the world, the risk of unprotected sex may be heightened by unequal power dynamics – women risk the long-term consequences of HIV infection in exchange for the immediate need for physical and material security. In addition, unemployed school-leavers may seek personal affirmation in childbearing – placing them at high risk for HIV infection. The challenge is to foster a society in which sexual debut and pregnancy can be delayed; barrier contraception used consistently; and to the extent that it is possible, to ensure that planned conception is safe from HIV infection through mutual testing, joint decision-making and appropriate medical care.

loveLife Shines in Rural Eastern Cape

At 84 years of age, Makhulu Msikinya is loveLife's oldest groundBREAKER... well, honorary groundBREAKER. Strictly speaking, you need to be between 18 and 25 years of age to be part of the programme. But loveLife makes exceptions when it finds incredibly dynamic people. Makhulu is one such person, a real gogo-getter!

On a windy road between King Williamstown and Stutterheim is the little Eastern Cape village of Ethembeni, home to Makhulu. A retired school-teacher, she now campaigns every day in schools, clinics, church groups and taverns.

Makhulu's clarion call to all the young people of Ethembeni is that "You're born free. Embrace life in ways that keeps you HIV-free!"

Makhulu draws on her experience in raising five children, fifteen grandchildren and eight great-grandchildren to talk with young people about their lives, aspirations, relationships, and sexuality. "loveLife has got it right," says Makhulu. "We

must talk to our children clearly about sex, pregnancy and HIV. I say to young girls think about what you want this baby for and think about what you want to do with the rest of your life."

She's also head of the governing committee of the local youth-friendly public clinic. In this clinic, like many others across South Africa, the Department of Health and loveLife work together to improve access and

quality of care to adolescents – previously an age group neglected by health services. Nearly 500 government clinics are already part of the nationwide effort to get all government

clinics to meet 40 standards of high quality care for teenagers including easy access, sound clinical care and strong management support systems. At the end of 12 months of quality improvement including training and technical assistance, clinics are reassessed to gauge progress. In the first year over 90% of the clinics enrolled in the programme more than doubled their quality ratings.



From groundBREAKER to Med School

Abigail Bambisa comes from a small village in Limpopo called Nkowakowa. Her difficult home circumstances and education in an under-resourced rural school meant that she just scraped by the matriculation requirements with little prospects for employment. But her determination and strong leadership skills were well recognized in her community, and in 2001 she was chosen as a loveLife gB in the Nkowakowa youth-friendly clinic.

Her year with loveLife changed her forever. She became one of loveLife's strongest public speakers and community activists, and when she graduated she was so motivated that she returned to school to repeat her final year. She passed with flying colours and was accepted into UCT Medical School in 2003. Now in her 4th year of medicine, Abigail remains committed to her community and the health of all South Africans.

She's part of the leadership of a Born Free Generation.



Fact File

Only 3% of 15 year old South Africans are HIV positive, creating real opportunity to reverse the course of the epidemic.

Over 40% of the South African population is under twenty years of age. This 'youth bubble' further increases the prospect for rapid change if they grow up with lower infection rates.

A national random probability sample survey of 11,300 15-24 yr olds conducted in 2003 found a strong association between lower rates of HIV infection and participation in loveLife programmes. This reinforces the importance of sustained face-to-face interaction to achieve behaviour change.

The Nation's Talking

loveLife has become well known for its "talk about it" pay-off line and now loveLife has taken the concept of open talk about sex, HIV and gender relations to communities across the country. Born Free Dialogues are loveLife forums that bring together adults and young people in a structured conversation about the difficult issues affecting young people's lives and the role of adults in helping them overcome the challenges.

Why, for example, a seventeen year old girl consents to unprotected sex despite her knowledge of HIV and how to prevent it. Or does she really consent? Is she just the victim of a society in which men still call the shots and even resort to violence to get what they want? How much choice does an unemployed school-leaver have when she's looking to older men for physical and material security? How can communities protect children whose parents have died from Aids and who are now vulnerable to the advances of predatory men?

These are tough and uncomfortable questions in the new South Africa, yet many communities have expressed clear intent to confront them. In Nongoma in rural KwaZulu-Natal, over a thousand parents and teenagers gathered to talk

about the strong sense of entitlement by men over women. Talk about gender-equality and generally men tend to make themselves scarce. Not in Nongoma, where men turned up in large numbers to listen and talk to their wives and children. In the small Eastern Free State Town of Paul Roux, teen pregnancy was the dominant concern, with many pointing to the fact that HIV infection and teen pregnancy

tend to go hand in hand. On Goedehoop Colliery in Witbank, local representatives of the National Union of Mineworkers led the debate on how children of miners could grow up protected from HIV.

Recently in Paul Pietersburg, 600 people turned out for a Born Free Dialogue. "It was such an emotional experience" says Sithembile Sefako loveLife's dialogue organiser, "parents

were pouring out their anguish about the risks of drugs, crime and HIV for their teenage children, but children were saying we know about these things, what we want is to be able to talk openly about what we see. What happens to us in our lives, and about our dreams." One young person said, "Sometimes parents spend so much time worrying about all the bad things they forget to motivate their children to succeed in life by focusing on the good."

"Young people most of all want motivation," Sithembile says "they need to believe that they can achieve a better life, that HIV infection is not inevitable and that ambitions are good."

More than 80 Born Free Dialogues are planned all around the country during this year and lots more impromptu ones organized by individuals from the communities usually stem from these.



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