



Counselling youth by mobile phone

A South African loveLife HIV prevention programme

A civil society organisation based in Johannesburg, loveLife runs a Contact Centre offering psycho-social counselling by phone and internet. This report focuses on Germany's support for measures to ensure counselling of best possible quality to as many people as possible. The ultimate aim is to prevent HIV and promote sexual and reproductive health and general well-being among South Africa's adolescents and young adults.

Situation

BMZ 🕷

South Africa is among the countries most affected by the HIV epidemic and its young women are especially vulnerable. From 1990 to 1999, the estimated number of South Africans living with HIV grew from 49 thousand to 3.7 million and HIV prevalence grew from 0.2% to 12.6%. Since then, the prevalence has levelled off at a high level (12.6% in 2012).

Annual incidence of new HIV infections among South Africa's young women (15-24) declined from 5.5% in 2002-2005 to 2.1% in 2008-2012. HIV prevention among young men (15-24) has been less successful but annual incidence among them is at a lower level than among women, peaking at 1.1% in 2005-2008 and declining slightly to 1.0% in 2008-2012.

High prevalence of HIV among South Africa's young people is best understood in the context of the many other challenges the majority of them face and these include poverty, economic and gender inequality, lack of education and job opportunities, and lack of access to youth-friendly health services.

Approach

Launched by a civil society/government partnership in 1999, loveLife set out to prevent HIV among all South African youth by focussing most of its attention on in-school and out-ofschool adolescents 12-17 years old living in the country's informal settlements and rural areas. Its approach has always

Key Messages

Situation. While annual incidence of new HIV infection among South African youth (15-24) has declined significantly since 2002, it is still far too high: 2.1% among young females and 1.0% among young males.

Approach. Since 2011, Germany has been supporting loveLife's holistic approach to HIV prevention. One German focus has been on assuring the quality and extending the reach of the psycho-social counselling offered by loveLife's Contact Centre via phone and internet.

Results. A German-supported study found that a large majority of callers were satisfied with the Contact Centre's counselling services and felt it helped them understand their problems and empowered them to act. However, some callers pointed to areas needing improvement and their input helped on-going efforts to assure counselling of good quality and, also, resulted in introduction of a new text-chat option.

Lessons learned. Mobile communications technology makes it ever more feasible to provide psycho-social counselling by phone to everyone. It is a low-cost intervention that can make significant contributions to HIV prevention, sexual and reproductive health if it is scaled up, promoted and sustained so it is widely available and people are aware of its availability year after year.

been holistic, based on the understanding that you can only change adolescents' risk-taking attitudes and behaviour if you give them the hope and self-confidence.

loveLife delivers a wide range of programmes through its country-wide networks of 860 hubs, 470 youth-friendly health clinics and 22 youth centres. It supports these programmes mainly with two types of peer educator. Specifically, each year it recruits, trains and deploys more than a thousand recent highschool graduates it calls groundBREAKERS. To extend the reach of its groundBREAKERS, it recruits and deploys many more young people it calls *mpintshis* (Zulu for buddies).

The Contact Centre is a key component of loveLife's holistic approach. Its Youth and Parent lines allow people of all ages



A Counsellor in loveLife's Contact Centre listens carefully while a young man explains what's troubling him.

German Health Practice Collection

Showcasing health and social protection for development

The German Health Practice Collection describes projects supported by German Development Cooperation in the fields of health and social protection. All were proposed and assessed as 'promising or good practice' by a vibrant community of practice composed of experts from German development organisations. Each report has been examined and approved by two international peer reviewers and is published in a short version of 2-4 pages and a comprehensive long version. To download the full report of the approach described and other publications in the German Health Practice Collection, go to health.bmz.de/good-practices.



to access information, referrals and psycho-social counselling provided by nine qualified counsellors, five operators and ten groundBREAKERS. Its 'Plz Cal Me' function allows those on mobile phones to request call-backs and avoid phone charges. And its Mizz B serves as a fictional agony aunt who writes a newspaper column and invites communication by regular mail, email or text-chat.

Germany's approach to supporting the Contact Centre has been to assign it a quality assurance advisor. Since 2011, this advisor has been initiating and/or supporting development of a range of measures to ensure psycho-social counselling of best possible quality and to extend the offer of such counselling to more people by making good use of mobile communications technology. A key measure was a quality assessment and improvement study in 2012/ 2013 which included analysis of the centre's routine monitoring data plus a survey in which 420 callers participated.

Results

A 2011 study found that youth who participate in loveLife's programmes are significantly more likely than other youth to have knowledge, attitudes and behaviour that reduce their risk of HIV infection. The 2012/2013 German-supported quality assessment and improvement study found that the Contact Centre was making its intended contributions to loveLife's holistic approach to HIV prevention among all youth, especially those living in informal settlements and rural areas.

The study found that a large majority of callers were under 25 (80%), were calling from mobile phones (73%) and lived in informal settlements and rural areas (71%). Many asked only for information or referrals but more than 40% asked for counselling. Reasons they asked for counselling covered the full range of issues loveLife generally covers (e.g., HIV, unintended pregnancy, poor parent-child relations). A large majority were very satisfied (66%), satisfied (15%) or somewhat satisfied (13.5%) with their counselling experience and rated it highly for helping them understand their problems and empowering them to act. Almost all said they would call again if they needed help with another problem and would also recommend the service to others. The study also identified needs to improve the friendliness, patience and non-judgmental listening skills of some counsellors, operators and groundBREAKERS. This informed the German advisor's on-going efforts to initiate and/or support development of tools and measures which now include, for example:

- A Contact Centre Manual with details on the centre's operations, guidelines and procedures
- A three-day basic training course and additional training sessions focusing on specific issues such as sexual coercion and violence
- Online data-collection and rating forms with drop-down menus that counsellors, operators and groundBREAKERS fill out during the course of calls
- An online tool for assessing individual counselling sessions and weekly calibration sessions with a quality assurance team, during which participants listen to a recording of one of that week's counselling sessions and discuss its strengths and weaknesses
- An Exchange Platform enabling all South African providers of psycho-social counselling by phone to share experiences and lessons and to collaborate on training and other matters of mutual interest.

Lessons learned

- Psycho-social counselling by phone and internet can make significant contributions to HIV prevention, sexual and reproductive health and general well-being among young people.
- The ongoing revolution in mobile communications makes it increasingly feasible to extend such counselling to the poorest people in the remotest communities.
- Such counselling is low-cost. It costs loveLife 0.70 Euro per call in 2012 and there is potential for lowering the cost by relying less on salaried staff and more on groundBREAKERS or other volunteers.
- It is effective to the extent that it is of good quality and is scaled up, promoted and sustained so it is widely available and people are aware of its availability year after year.

Published by	Deutsche Gesellschaft für	In cooperation		
	Internationale Zusammenarbeit (GIZ) GmbH	with		
	Registered offices Bonn and Eschborn		V	
	Sector project PROFILE			
	Dag-Hammarskjöld-Weg 1-5	On behalf of	Federal Ministry for Economic Cooperation and Development (BMZ)	
	65760 Eschborn, Germany			
	T+49619679-0		cooperation and bevelopin	
	F +49619679-1115	Division	Health; population policy	
	ghpc@giz.de			
	health.bmz.de/good-practices	Addresses of the BMZ offices	BMZ Bonn	BMZ Berlin
			Dahlmannstraße 4	Stresemannstraße 94
Writer	Stuart Adams		53113 Bonn, Germany	10963 Berlin, Germany
T .	CLIPC		T +4922899535-0	T +49 30 18 535 - 0
Layout	GHPC		F +49 228 99 535 - 3500	F +493018535-2501
Printed by	Aksov Print und Projektmanagement			
1 11111111111111111	, mooy , fine and , rojenenianagement		poststelle@bmz.bund.de	
As at	November 2014		www.bmz.de	

GIZ is responsible for the content of this publication.