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Session: Younger and Older: HIV across the lifecourse

`It felt like a weight was being taken off my shoulders': the impact of the Lending a Hand intervention in supporting migrant adolescents and young people in KwaZulu-Natal, South Africa

23 – 26 July  $\cdot$  Brisbane and virtual





## Summary

### Main question:

Can the development of a protective support structure for mobile adolescents and young people in South Africa mitigate migration risks?

### We found that:

- Their transitioning caused health, physical, psychological, and mental challenges
- Intervention lifted a burden by providing advice and support without judgment, described as uplifting.
- Development of adaptive coping strategies and improved health behaviors achieved

### It is important because:

- The intervention was designed with mobile young people and tailored to meet their needs
- Efficient referral process enhanced acceptability
- Peer-led interventions can effectively address young people's challenges

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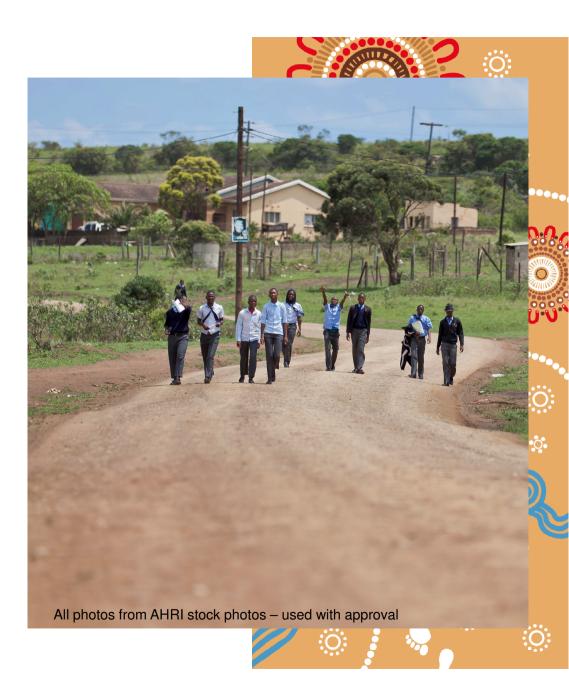


## Background

In South Africa, many young people move away from their homes to semi-urban areas for education.

They attend day schools while staying in rented accommodation.

They experience alcohol and drug misuse, and violence, including sexual violence, which puts them at risk of sexually transmitted infections, including HIV.



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### **Our study aim**



- To develop and test the acceptability and feasibility of a support structure for mobile adolescents and young people (14-24 years)
- Investigate the impact of the intervention (Lending a Hand) on migration-related risks, including sexual health

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# The Lending A Hand intervention

Five peer navigators (young people who were former migrants) were trained on needs assessment (clinical, social, educational and psychosocial) and lay counselling for mobile adolescents and young people

The intervention included:

- 1. Using a mobile phone to link to and provide support to young migrants
- 2. Facilitating the referral process through a telephone hotline.
- 3. Sensitising local health service providers to the needs of young migrants, and helping them link to care

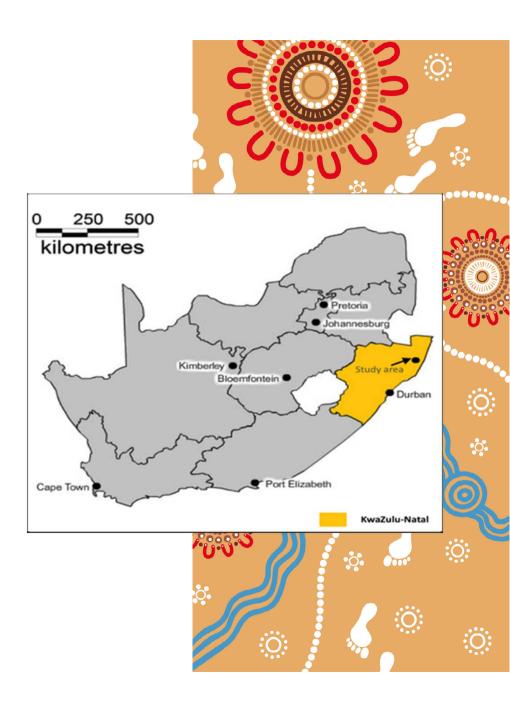


## **Data collection**

- Indepth interviews with 20 young migrants
- Five interviews with peer navigators

In rural northern KwaZulu-Natal an area which has

- High unemployment and poverty rates
- High prevalence of HIV







- Two hundred and eighty-three mobile young people made contact with the peer navigators over the 18 months of the intervention implementation.
- Most mobile adolescents and young people were in day schools, completing their final years of schooling.
- They stayed in single rooms rented for them by relatives, close to school, but the rooms were also close to bars and places where sexual services were provided, and drugs sold.
- The young people told us that having someone to talk to, who could provide advice and support, `felt like a weight was being lifted off my shoulders'.



## Findings



Young people confided in the peer navigators about traumatic events as well as more mundane worries and concerns.

Picture of peer navigators (shared with their consent)

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"I had a miscarriage... I was four months pregnant... I took the foetus, put it in a basin, and kept it under my bed."

17 year old woman

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### Conclusion



- Mobile adolescents and young people appreciated that the intervention was designed for them
- They liked the short turnaround time during the referral process which made it acceptable
- The mobile young people appreciated the interactions with the peer navigators; people like them
- Mobile young people felt respected
- Interventions targeted for mobile young people can be effective when they are led by peers who understand these young people's experiences

### Acknowledgements



#### Study team

Nondumiso Dlamini Janet Seeley (Principal investigator) Nothando Ngwenya Maryam Shahmanesh Sarah Bernays Siphesihle Hlongwane Carina Herbst

**Peer Navigators** Nontethelelelo Myeni Zandile Nxumalo Snenhlanhla Mathenjwa Londiwe Myeni Senamile Mathunjwa

- 1. The whole community of uMkhanyakude district, KwaZulu-Natal
- 2. All our study participants
- 3. Our colleagues in AHRI-Somkhele who support our work

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