

Integrating a Mentorship Component in Programming for Care and Support of AIDS-Orphaned and Vulnerable Children: Lessons from the Suubi and Bridges Programs in Sub-Saharan Africa

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Published online: 18 March 2014
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Abstract

Purpose We examine a mentorship component within a family-based economic empowerment intervention for AIDS-orphaned children in Uganda.

Method Mentorship was guided by a comprehensive nine-session curriculum. We present themes developed from the mentors' field reports and logs.

Results Findings suggest that mentorship offers AIDS-orphaned children opportunities to develop and strengthen future plans. Moreover, the mentorship process was beneficial to both the mentees and their mentors. The program creates a positive life trajectory for a highly vulnerable group of youth.

Conclusion The findings can be used to understand and design mentorship programs targeted at improving the psychosocial well-being of children and adolescents.

Keywords AIDS-Orphans · Vulnerable and orphaned children (OVC) · Mentorship · Economic empowerment · Suubi project · Bridges to the future

Introduction

The HIV/AIDS pandemic has taken a devastating toll on children and their families. An estimated 17 million children worldwide have lost one or both parents as a result of HIV/AIDS (hereafter referred to as orphans). Ninety percent (90 %) of these children live in sub-Saharan Africa (UNAIDS 2010). The psychosocial effects of HIV/AIDS on orphaned children are profound. They are at a greater risk of dropping out of school, experiencing psychosocial distress, living in poverty, and engaging in sexual risk behaviors, all of which increase their risk of exposure to abuse, exploitation, and sexually transmitted infections (STIs) including HIV/AIDS (Atwine et al. 2005; Cluver et al. 2011). Additionally, orphaned children often lack strong relationships with a caring adult, which exposes them to many of the aforementioned risks. Under normal circumstances, within much of sub-Saharan Africa, the presence of a caring adult can provide the support that orphaned children need to overcome challenges and to take advantage of opportunities that benefit them for their future (Sipe 2002). Unfortunately, because HIV/AIDS is creating huge numbers of orphaned children, there are instances when these children cannot count on the emotional support of an adult caregiver. In such instances, there may be a need for someone from outside the family to support the psychosocial and functional needs of these children.

One of the interventions that researchers and practitioners have been experimenting with—as a form of supporting the psychosocial and functional needs of vulnerable children—is mentoring. Mentoring has been defined as a relationship where a more senior, experienced individual is committed in providing

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developmental assistance and guidance to a less experienced protégé (Kram 1985). Mentoring differs from other adult/child relationships (such as those with teachers or supervisors), in terms of intensity and involvement. It has been described as an intense and powerful one-on-one developmentally tailored relationship, entailing identification, and emotional involvement (Wanberg et al. 2003). Positive effects of mentoring are thought to be derived from the support and role modeling these relationships offer through three interrelated processes; (1) enhancing the youth's social relationships and emotional well-being; (2) improving their cognitive skills through instruction and conversations; and (3) promoting positive identity development by serving as role models and advocates (Moodie and Fisher 2009). Against that backdrop, this paper examines a mentorship program that has been integrated in the care and support of AIDS-orphaned and vulnerable children in Uganda, a country heavily impacted by HIV and AIDS.

Role of Mentorship

Mentoring relationships with non-parental adults (or, in some cases near peers to the adolescents benefiting from the mentorship program), regardless of whether they occur naturally (where youth develop their own relationships) or in the context of a program (formal mentoring), have been shown to have positive effects on adolescents' outcomes. One of the most comprehensive evaluations of the effect of natural mentoring on youth outcomes (e.g., education, employment, psychological well-being, physical health, and risk-taking) was conducted by Ahrens et al. (2008). Using data from the National Longitudinal Study of Adolescent Health (Add Health), the authors found that mentored youth had a significantly greater number of positive outcomes relative to non-mentored youth. Specifically, mentored youth reported favorable overall health; they were less likely to report suicide ideation, less likely to receive a diagnosis of a sexually transmitted infection, and less likely to have hurt someone in a fight in the past year (Ahrens et al. 2008).

Positive results have also been reported from formal structured mentoring relationships. A notable example is Big Brothers Big Sisters (BBBS), a US community-based mentorship program. The BBBS study involved a randomized controlled trial of 1,138 youth, ages 10 to 15 years, who were randomly assigned to mentors or a control group in which youth were placed on a wait list for 18 months. Evaluation findings from this program indicate that youth matched with a mentor were less likely to initiate drug and alcohol use and less likely to skip school; they showed fewer incidences of violence, exhibited higher scholastic competence, and improved their relationships with parents and peers (Grossman and Tierney 1998).

Additionally, LoScuito et al. (1996) conducted an evaluation of Across Ages, a multicomponent substance abuse prevention program for youth in middle school. The study used a quasi-

experimental design and compared outcomes of three groups: (1) an experimental group that participated in a substance abuse prevention program; (2) a second experimental group that participated in the same program (substance abuse prevention) plus mentoring; and (3) a third study group—a control group—that received no intervention. Findings from the study indicate that youth who received mentorship had significantly better attitudes regarding school and the future than did youth in the other two groups (without mentoring). In addition, compared to their counterparts who did not receive mentorship, youth who were matched with a mentor reported a decreased use of substances, improved school attendance, increased feelings of self-worth and well-being, and decreased feelings of sadness and loneliness (LoScuito et al. 1996).

The aforementioned studies point to positive results of mentorship among children and youth. The studies, however, are from experiences with mentorship in western industrialized countries. Published work on similar mentorship programs in low-resource countries is lacking, especially from sub-Saharan Africa—which would likely benefit from these programs given the high numbers of orphaned and vulnerable children affected by intergenerational poverty and disease, including HIV/AIDS. Indeed, little, if any, is known about programs that utilize mentoring relationships for orphaned and vulnerable children in sub-Saharan Africa.

There are a few examples, however, that we were able to locate. Brown and colleagues (2007) tested a model of adult mentorship and support to improve psychological outcomes among youth-headed households in Rwanda. Findings from this specific study indicate that mentoring from adults within the community can measurably mitigate adverse psychosocial outcomes among male- and female youth-headed households. Youth who participated in the mentorship program reported a significant decrease in feelings of marginalization, a decrease in depressive symptoms, an increase in adult support, and a decrease in maltreatment (sexual abuse and exploitation). The youth who did not participate in the intervention reported a significant increase in feelings of grief.

It is important to note that the benefits of mentorship are not only to the mentees. Mentors may also benefit. Specifically, mentors may (1) derive intrinsic satisfaction from observing and participating in the success of the mentee, which can result in rewarding experiences for them and reinforce their sense of competence and feelings of accomplishment; (2) mentees can improve the job performance of their mentors by providing them with new perspectives and knowledge. In other words, mentors can learn from their mentees; (3) mentees can also become trusted allies of their mentors and form a loyal base of support for their mentors; and (4) finally, mentors may gain recognition among peers and superiors for helping to develop high potential individuals (Eby and Lockwood 2005; Kram 1985; Kram and Hall 1989; Wanberg et al. 2003).

Overall, existing studies point to the benefits of mentoring programs, both to the mentee (including improving the psychosocial and functional needs of the mentee) and the mentor. Yet, most of the mentorship programs have been conducted in the western industrialized countries with slightly different populations—not necessarily orphaned and vulnerable children, a huge population sub-group in sub-Saharan Africa resulting from wars and diseases. Thus, in this paper, we report on the process of a mentorship program for AIDS-orphaned children in a sub-Saharan African country heavily affected by poverty, civil wars, and HIV/AIDS, Uganda.

Theoretical Framework

The mentorship program presented here is guided by resilience theory, which posits that having a supportive adult outside of the family is a way to reduce the impact of stress on a child's psychosocial well-being. It focuses on the child's internal and external positive elements that contribute to the child's healthy development. Positive elements within the child include self-esteem, self-worth, and life skills (Fergus and Zimmerman 2005). Resilience theory emphasizes that external positive elements such as family and community support as well as mentorship, can be a focus of change to aid youth in overcoming obstacles and avoid damaging effects (Fergus and Zimmerman 2005). At-risk youth, such as orphans and vulnerable children, can still exhibit positive outcomes despite their life circumstances. We posit that one approach to enable resiliency, care, and support for orphaned and vulnerable children is through mentorship, coupled with other supportive programs.

Methods

The Intervention: Bridges to the Future

Bridges to the Future is a 5-year (2011–2016) longitudinal randomized experimental study funded by the National Institute of Child Health and Human Development (NICHD). A total of 1,410 AIDS-orphaned children, 14 years of age, on average, in their last 3 years of primary schooling were recruited to participate in the study. The study is being implemented in 48 public primary schools, in four geopolitical districts in southern Uganda. The study evaluates the long-term impacts of a family-based economic empowerment intervention which, among several other intervention components, includes mentorship for AIDS-orphaned children. Specifically, the *Bridges to the Future* (hereafter, *Bridges*) intervention combines both children's savings accounts (a form of economic empowerment) and health promotion strategies,

including mentorship, to empower and strengthen families caring for AIDS-orphaned children in southern Uganda.

Study participants are randomly assigned to either a control or treatment condition. Participants in the control condition receive what is referred to as the “usual care” of services offered to orphaned children in the region. Usual care includes counseling, food aid, and scholastic materials (textbooks, notebooks, and school uniforms). Participants in the treatment condition receive the usual care services mentioned above, plus three intervention programs: (1) workshops on financial education and planning, and microenterprise development; (2) a matched savings account in the form of a Child Development Account (CDA). The matched savings account is matched at a ratio of either 1:1 or 2:1. The matched amounts are used to pay for post-primary education or for small business development for the family; and (3) a mentorship program, hereafter, the Suubi and Bridges Mentorship Program.

The Suubi and Bridges Mentorship Program

The Suubi and Bridges Mentorship Program was developed to help orphaned and vulnerable children in Uganda in the last 3 years of primary schooling. This is a time when most children are faced with the difficult decision of dropping out of school due to the strain on household resources, when their caregivers are contemplating taking them out of school, for the same reason. This is especially so as they approach the last grade in primary school, after which parents/caregivers begin paying for their children in school. Free Universal Primary Education ends in primary seven—the last grade of primary school. Thus, the aim of the mentorship program is to aid children in developing the ability to identify specific future goals and educational aspirations through building their self-esteem, working on improving their school attendance and grades, reducing stress, encouraging hopefulness, building stronger communication skills with their caregivers and/or family members, enhancing safe sexual decision-making, and decreasing sexual risk-taking behavior. The program is guided by a comprehensive curriculum developed by the principal investigator of the study, research staff, and graduate students.

Selection of Mentors

The selection of mentors involved identifying students from local universities in Uganda. Mentors were required to meet the following inclusion criteria: (1) be a university undergraduate or its equivalent; (2) be committed to issues of children's rights and empowerment; (3) have the ability to express themselves in English and in the local language, Luganda; and (4) have the willingness and ability to work on weekends and evenings. Mentors were also gender-matched with the mentees. Priority was given to former

Suubi Project graduates/beneficiaries, university undergraduates who were still in school, and several of the *Bridges* study research assistants. There were a total of 21 mentors; 8 males and 13 females. Five former Suubi Project participants (one female and four males) served as mentors to *Bridges* participants. The majority of the mentors were from the study region, within Rakai District and Greater Masaka District. The principal investigator and the in-country project coordinator trained the mentors.

Program Content and Process

The Suubi and Bridges mentorship curriculum comprises nine 1-h sessions. Mentorship was conducted at the children's schools. One session per month was covered, over the course of 9 months (December 2012–August 2013). Children were placed into small groups with no more than seven peers from the same school, and each child had to stay in the same group, with the same mentor, throughout the entire mentorship program. This was intended to build trust and rapport not only between the mentor and mentee but also between all of the children in the same group. The first session introduced participants to the mentor, established ground rules to be followed over the remaining eight sessions, and provided an overview of the program and the purpose of the entire *Bridges* study. Specifically, all nine sessions are listed below:

- Session 1: Overview of Program
- Session 2: Self-esteem, education planning, and setting goals
- Session 3: Savings, asset building, asset accumulation, and microenterprise
- Session 4: HIV/AIDS and STD/STI knowledge
- Session 5: HIV/AIDS stigma and discrimination
- Session 6: Puberty, the ABC model, and protection from abuse
- Session 7: Identifying risk, alcohol and drug use, and peer pressure
- Session 8: Negotiation and refusal skills for risky situations
- Session 9: Curriculum review

Each session is introduced and followed by activities, videos, scenarios, and role-playing to facilitate discussion and learning. After each activity, the topic and major themes are summarized. In the last session of the program, participants review all of the topics discussed and receive completion certificates. Mentors keep track of participants' attendance and review any missed sessions with participants who missed a previous session. After each session, mentors completed a mentoring report that reflected their thoughts and observations of the mentorship process, their role as mentors, methods used in approaching each topic, challenges faced, lessons learned, responses from the participants, and recommendations and conclusions. Findings and narratives from

these written reports are based on the experiences of the mentors ($N=21$) and mentees ($N=914$, only children in the treatment condition receive mentorship) are integrated into the results reported here.

Program Quality Control and Data Analysis

Supervision and quality control procedures were put in place by the principal investigator and study team. Protective measures were put into place by study staff to address participants' abuse and other emergency situations. All procedures were approved by the Columbia University Institutional Review Board and the Uganda National Council of Science and Technology (UNCST). In addition, mentors received ongoing training across the implementation of the study. Major themes were developed by six data coders and analysts from the mentors' field reports and logs, based on the following procedure: First, analysts developed a set of initial codes based upon review of the first set of mentor logs. Next, mentor logs were coded by the same six coders as a group with divergent codes discussed at length. New codes were also added based on discussions. Finally, mentors' logs were divided among staff, and closed coding procedures were employed.

Results: Emerging Themes from Mentorship Sessions

Mentors' Experiences

Mentors ($N=21$) reflected on their mentorship experiences and what they learned from each session. Results from their reflections indicate that (1) mentors had positive experiences in mentoring that helped them reflect on their own knowledge and life experiences; (2) mentors developed a sense of importance/significance in their mentoring role and emphasized the importance of the mentorship program; (3) mentors gained an understanding of some of the effective ways of conducting mentorship sessions; (4) mentors gained an understanding of the participants' level of commitment to the program; (5) mentors gained an understanding of the youth and their realities; and (6) mentors encountered challenges in conducting the mentorship sessions. Below, we provide details about the specific themes that emerged from the qualitative data:

1. Mentors had positive experiences in mentoring that helped them reflect on their own knowledge and life experiences.

Mentors explicitly stated that they learned a lot about themselves during the mentorship sessions, such as their own self-esteem and self-confidence. The sessions with

the youth reinforced the mentors' own personal and career goals, and they were happy to share them with the youth:

“The session was so wonderful to the participants and me, because everyone had an idea on whatever we were discussing... It was so interesting to share with participants how I managed to start-up a livestock project (heifer project). I assured them that, to start up a project does not mean that you have to be rich; you just have to be committed to what you want...” [Mentor 3]

On the same topic of sharing personal and career goals, two mentors said the following:

“It was really interesting to share with the kids my education goal of becoming a statistician and how I achieved it through reading hard and starting up a small piggery project, from which I got pocket money...” [Mentor 4]

“This session was so good to such young kids because [through interactions], they got to know my education goals and how I managed to achieve them...through attending classes, savings and reading hard.” [Mentor 7]

Mentors 12 and 21 explicitly mentioned that the sessions were useful and beneficial not only to the participating children but also to the mentors as well. The following examples depict this theme:

“The session was so useful not only to participants but also me because it increased my self-esteem and encouraged me to set up other goals in life.” [Mentor 12]

Mentor 21 went on to say the following:

“This session helped me in particular to learn more tactics to share with the children... we always concluded the sessions by deciding [together], that we should put in action [practice] what we had learnt during the sessions.” [Mentor 21]

In the process, mentors also gained valuable information from the program sessions that was relevant to their own lives. Mentors showed interest in interacting with the youth and shared their own life experiences to influence positive changes among the mentees. Mentors talked about their own income-generating projects, and provided real life examples as to how they were able to achieve some of their goals. This was a way to encourage children by inspiring them that they too can be successful and that they (the participating children) can realistically achieve their goals. Additionally, the mentorship process increased the mentors' understanding of the notions of saving, asset building, and HIV education, and the

mentors recognized how these topics apply to their own lives. For example, mentors 4 and 5 said the following:

“[These sessions were] really interesting because kids had some knowledge about savings and starting some small businesses. In turn I shared my goal for this year...setting up a piggery project. I told them that I set a plan first; came up with a budget for all the project requirements, saved that money, and started the project.” [Mentor 4]

“Talking to these kids about HIV/AIDS and STD knowledge was a pleasure to me because I have always wanted to share my life experiences (which I did) about HIV/AIDS to the teens and youth such that they get to know that HIV/AIDS is real and that it lives among us...” [Mentor 5]

On the same topic, mentors 12 and 13 said the following:

“Children understand better when real life experiences and examples are used in discussions.” [Mentor 12]

“[As we continued] discussing session three with the children, I learnt more about the concepts of saving and asset building; and those things could be developmental to my life when put into practice.” [Mentor 13]

- Mentors developed a sense of importance in their role as mentors and reflected on the significance of the mentorship program for the youth.

Mentor reports highlighted the sense of satisfaction mentors received from the youths' engagement based on the youths' responses:

“I learned that it's good to take different programs to the kids in schools because they pick interest and actively participate in them...just like the mentorship.” [Mentor 7]

“I enjoyed mentorship because it was full of happiness. Children were answering and asking questions which showed me that they learnt something in our discussions. This made me more confident...and [I gained experience on] how to interact with children.” [Mentor 15]

Mentors believed that as long as the youth are committed to the program, they will experience positive outcomes with their future goals. Mentors felt that they may take some part in contributing to the positive outcomes the youth may experience from the program, as well as in enhancing community functioning. Mentors 1 and 3 said the following:

“I really look at mentorship as a tool that will help the participants stick to their goals, as it will offer them ways to avoid risky behaviors, contracting HIV/AIDS and sexual abuse. This can only happen if participants attend all [the] sessions of the program.” [Mentor 1]

Another mentor said the following:

“Mentorship is an interesting program...I feel happy when interacting with participants with an aim of enhancing community functioning.” [Mentor 3]

Mentors 8, 14, and 17 evaluated the process in terms of children’s empowerment. They said the following:

“Mentorship is interesting and empowering; children meet and network with the right people who lead them to opportunities.” [Mentor 8]

“The session will help a lot of these participants to be self-reliant and productive, [given the] knowledge and life skills from the properly designed curriculum...” [Mentor 14]

“Mentorship will help these children stick to their goals. It teaches them ways to live, [such as] high self-esteem, plans to help them reach their goals, avoid risk behaviors, and saying no to alcohol and drugs.” [Mentor 17]

Mentors recognized the opportunities the mentorship program created for orphaned and vulnerable children. They believed that the program created positive and sustainable outcomes for the youth and the community. Mentors emphasized their belief that the mentorship program is an opportunity for the youth to have brighter future that will benefit them and the communities in which they live. For example, mentors 2 and 5 said the following:

“I suggest that mentorship should continue even to other children because they are really appreciating the benefit...[The program] is encouraging these children... they share knowledge with their friends and learning ways...that will help them stay in school...” [Mentor 2]

“In my personal view, I appreciate the Project Investigator for coming up with such a brilliant idea of helping orphaned children. Sometimes, orphaned children drop out of school because they don’t have hope for the future, but I believe that this is no longer the case for the *Bridges* participants...” [Mentor 5]

Mentor 5 went on to say the following:

“Mentorship is very good because it increases the children’s level of self-esteem and it has also helped a lot in preventing these kids from being exposed to risky situations or avoiding risky behaviors. [In addition], the work we do is recognized by the schools because every teacher who approached us, seem to be grateful.”

Several mentorship sessions cover issues related to avoiding risky behavior, avoiding contracting HIV and other STIs, as well as life transitions and physical development, such as puberty, which can be a precarious time in youths’ lives. To that end, mentor 8 highlighted the developmental impacts of mentorship on children. She said the following:

“It was a right time for participants to get this session because most of them are going through puberty. This session has really made a difference because children have been looking at things differently, and it has helped them a lot to think about the challenges faced during puberty and how they can cope with them.” [Mentor 8]

Mentors 17 and 19 made similar observations:

“I conclude by saying that session 3 was really developmental and good towards these children; because it showed them the good things they can get from saving, the importance of having assets and the Suubi & Bridges way to save...which I hope encouraged them to go and convince their parents [caregivers] to save for them...” [Mentor 17]

“This session was important in teaching the kids how to deal with risk and peer influence. I am positive that the kids learnt both methods and will be able to apply them later on... Their answers also made me [realize] that they had not forgotten [what they learned] from session 5 about HIV/AIDS stigma and discrimination; and that they will work to reduce its impact on people in their communities...” [Mentor 19]

- Mentors gained an understanding on some of the effective ways of conducting mentorship sessions.

Throughout the mentorship program, mentors realized that children participate and learn better in particular situations, including the use of small groups and facilitation with refreshments, and that lunchtime is not the best time to conduct a mentorship session. Also, mentors learned that sharing personal experiences helps participants to open up; exhibiting a sense of humor helps them to relax and actively participate in the discussions. Given that this was the first time for most mentors to conduct such sessions, it helped them realize what works best for the children. Mentor 8 illustrates these learnings below:

“I learnt that when you talk politely to children, it matters a lot towards their contribution [participation] because some participants were too shy and silent in this session 6; but when you become too angry it won’t work out for them to express their views.” [Mentor 8]

“I learnt that role play was good...the Stop, Breath, Think, and Act handout made participants happy, mostly...taking a deep breath... participants were able to interpret the picture/cartoons...[which helped them to understand better].” [Mentor 8]

Other mentors share similar findings involving using different techniques to facilitate group discussion and interaction:

“Participants easily open up in small groups.” [Mentor 9]

“I used the open discussion method after introducing the session and explaining the key words to them, because I wanted each participant to follow and participate in the session...and feel free to ask questions. This was so good because some participants managed to share with us their life experiences...” [Mentor 7]

“I learnt how to deal with children using different techniques...[such as] cracking jokes and that is how they can contribute more.” [Mentor 13]

In the two examples below, mentors relay the important role food played during their mentorship sessions. Given the extent of poverty in which the *Bridges* participants live, it is no surprise that offering any amount of food, or being respectful of participants’ lunchtime, was critical:

“For the group that was mentored during lunch time, I think that time did not favor them because...some participants were not attentive...seeing their friends going for porridge and they also wanted to go...” [Mentor 20]

“Food helps in the mental and psychological functioning of a human being. During the first session with participants, refreshments motivated them to participate more... before participants were given refreshments, they were a bit dull...but participated more after eating.” [Mentor 9]

Mentor 12 describes his/her experiences of sharing his/her own life lessons with mentees, and the impact this had on the mentorship groups:

“Children understand better when real life experiences and examples are used in the discussion...[and they] understand more when the discussion is held in their local language – Luganda.” [Mentor 12]

“I learnt that the way we present ourselves before children in the first place matters a lot towards their contributing in the discussion. For example, if you start by jokes, telling stories and not being so serious, children will take you as being simple and they will feel free to participate in the discussion.” [Mentor 12]

4. Mentors gained an understanding of the participants’ level of commitment towards the program.

Throughout the mentorship sessions, mentors realized that participants were highly committed to the program. Participants encouraged their friends, even those who were not in school at the time, to continue attending the sessions. Additionally, participants demonstrated their knowledge of the material learned in mentorship sessions in their regular classes. This made the non-participants want to join the program, after they realized that their friends were learning a lot. This is illustrated in the following mentors’ reports:

“Participants have a sense of togetherness, because those who attended session 2 took the responsibility of informing their friends who did not attend. In 4 schools, I had more participants and when I asked who informed them, they told me that they were informed by their friends.” [Mentor 3]

Another participant inquired about the *Bridges* study plans to include participants who switched schools or dropped out of school. This is what she said:

“What is your plan for those who changed schools and dropped out because they are missing those educative sessions?” [Mentor 4]

Inherent in the study design (an intent to treat method), *Bridges* tracks every enrolled participant, regardless of whether a participant changed schools, moved to a different location, or dropped out of school. Regarding the mentorship program, all treatment condition participants were tracked, included, and invited to join their original mentorship group, irrespective of whether they changed schools or dropped out of school.

This mentor describes how one participant she mentored was more interested in the content being discussed during the mentorship sessions, rather than the transport reimbursement participants received:

“I talked to one participant who attended mentorship but [was not in school at the time]. I asked how she came to know the session date; she told me that her friend told her that she had missed the new things from the discussions with the Suubi mentor and the money. The friend also told her that that the money comes second, but the main issue was what was taught...to help them stay in school.” [Mentor 8]

5. Mentors gained an understanding of the youth and their realities.

For many mentors, this was their first experience working with children, and as such, the children’s real

life responses were an eye-opener for the mentors. Mentors learned that these children have hopes and goals they want to achieve, which the mentors did not expect considering that these children live in poverty and do not have supportive adults in their homes. Mentors also realized that children have people they look up to as role models for inspiration and encouragement. This is illustrated in the mentors' reports below:

"Once children are given a chance, they can become whatever they want (i.e., doctors, engineers, pilots, lawyers, politicians.)" [Mentor 1]

"I found it interesting to work with vulnerable children because they are full of hope that they will make it." [Mentor 4]

The narratives below demonstrate how mentors themselves felt inspired by the dreams and goals their mentees hoped for:

"Children, like adults, have dreams and goals, which enhance them to stay focused on this road of life. When children have dreams and goals, it increases [their chances of staying] in school...they are motivated to work harder and produce good grades in school necessary to fulfill their career goals and dreams." [Mentor 9]

Another mentor reported the following:

"Never underestimate someone, is what I learnt; because one participant surprised me when she said she wants to start up a school of her own in twenty years to come... that made me [realize] that I am mentoring people with wider visions." [Mentor 11]

Mentors 12 and 13 depict general sentiments held among their mentorship groups, with regard to participants' future orientation:

"Participants have goals while studying and are seriously aiming at achieving them." [Mentor 12]

"Every child has a dream, but they lack guidelines [guidance] on how to achieve them." [Mentor 13]

Mentors acknowledged that children have role models in their communities to help inspire and encourage them to reach their goals. For instance,

"I observed that [although] these kids are still young, they look up to others for inspiration in reaching their goals. They were giving good examples of their role models... one participant admires the Suubi/Bridges staff because of the great mentoring job they do." [Mentor 7]

"I have learnt that children can look at others for inspiration in reaching their goals because they have good examples of people whom they take as role models; and some of them include: [politicians] Hon. Namayanja [area Woman Member of Parliament], teachers, doctors, and religious leaders like nuns." [Mentor 8]

However, mentors also learned that some participants look up to people who may not set the greatest example to the children—given their lifestyles and behaviors. Mentors also learned that given the children's financial constraints, they are forced to be part of groups that may expose them to risky behaviors, yet find it hard to leave such groups:

"Participants argued with me a lot about a famous local musician taking drugs...[they thought] that it is through those drugs that he is doing developmental things." [Mentor 13]

In addition, the quote below exemplifies the power of peer pressure and the struggle some participants went through when trying to manage it:

"A number of participants still have problems or find difficulties in deciding whether to leave a bad group or not... for fear of losing the [group identity] and the things they get from such groups." [Mentor 13]

Reinforcing certain elements of peer pressure, some participants felt as depicted in the above quote, other participants surrendered to risky situations because they felt they had no alternatives for obtaining resources, as mentor 13 describes below:

"I observed that poverty has played a great role in promoting risky behaviors...a child decides to get involved in risky behaviors to get what his caregivers cannot afford... when he decides to leave a group, he feels that he cannot survive." [Mentor 13]

The Participants' [Mentees] Experiences

Throughout the mentorship process, participants' responses were identified through observations and mentors' reflections on what the participants shared during each session. During session 1, the participants did not actively engage, as trust needed to be established with the mentors. However, as the sessions progressed, participants were more engaged and showed interest in the curriculum topics. Results from the mentorship sessions indicate that (1) orphaned children have educational and future aspirations; (2) despite living in poverty with no stable supportive adults, children do save, own assets, and have income-generating projects that support

their education and supplement household income; (3) participants are knowledgeable about HIV/AIDS and STIs in terms of modes of transmission; (4) participants have knowledge of stigma and discrimination against people affected by HIV/AIDS; (5) participants have knowledge of puberty, the ABC model of HIV prevention, and child abuse; (6) participants have knowledge and ability in identifying risky situations and risky behaviors such as alcohol and drug abuse; (7) participants have knowledge of refusal and negotiation skills; and (8) participants had positive attitudes towards the mentorship program and the *Bridges* program in general. The specific themes that emerged from the qualitative data are listed below:

1. Participants' educational aspirations and future plans

Session 2 of the mentorship program was designed to help participants understand the importance of setting goals, including educational and career goals and help them identify the unique qualities and attributes they can explore to reach their goals, as well as identify the importance of identity and self-esteem in making decisions. Throughout this session, participants demonstrated high aspirations and placed an emphasis on their education in order to accomplish their career goals. For many, their major goal was to finish secondary school and pursue higher education, and their long-term goals were all related to education. Participants indicated that they had goals and dreams of becoming teachers, doctors, lawyers, presidents, and politicians, among other professions, and were able to identify role models they wanted to emulate, as reported through the experience of the mentors:

“They [participants] said that through education one can get what they want to be and what they want to achieve...all of us should have high self-esteem in order to make better decisions. Some have aspirations of becoming medical doctors, lawyers, teachers, and nuns.” [Mentor 3]

Mentor 1 describes how participants expressed that they had big dreams and professional role models:

“When it came to role models, all participants thought big...in terms of doctors like Dr. Fred, Presidents like Obama, politicians and lawyers. In terms of dreams and goals, participants had good ideas like becoming doctors, engineers, lawyers, surgeons, teachers, and a few loved politics.” [Mentor 1]

Additionally, the quote below from mentor 7 depicts how participants realized the important roles education and mentorship play in the pursuit of their dreams:

“I observed that participants were so interested in this program because it will help them [improve their] self-

esteem and stay in school as one of the ways to achieve their goals. For example, [one participant] told me she wants to be a teacher, [another participant] told me she wants to be a doctor because she admires all the doctors for the great work they do to save people's lives so she wants to do the same.” [Mentor 7]

Indeed, participants communicated the importance of education. The lack of financial resources posing constraints on their opportunities is a reality for the participants; however, the comments above are illustrative of the fact that despite their life circumstances, participants still have hopes and dreams for their future.

2. Participants' knowledge and attitudes towards saving, asset ownership, and income-generating activities/projects

All treatment program participants received a matched savings account as one of the intervention components. Mentorship session 3 was therefore designed to introduce participants to the concepts and importance of saving, asset building, and asset accumulation and microenterprise, as well as helping participants to set potential savings goals and how to achieve the goals. Most participants already had knowledge about savings and assets. Many of them indicated that they saved prior to participating in the *Bridges* study, but never had formal savings accounts. They stated that they saved their money in piggy banks, tins, or gave their money to a trusted family member for safekeeping. After being taught about bank accounts and matched funds they received from the program when they deposited money, participants were convinced that a bank account is a better place to save money. Participants also indicated that they earned money mainly through income-generating activities and projects, including piggery projects, and rearing goats and hens.

“Some participants told me they had saved money through starting up income generating activities such as keeping rabbits, rearing pigs and chickens...they also get money from activities such as selling milk, fetching water, collecting fire wood, working on the building sites as building aids...three participants had saved 1,000 shillings, which the project gave as transport refund in session two.” [Mentor 3]

Additional quotes illustrating the ingenuity and resourcefulness of the participants, as captured by mentors 3 and 17:

“Other participants told me that they had saved money earned from working in various activities. One participant had saved 30,000 shillings from selling brooms and digging for others. Two participants had saved 10,000 shillings each... from sorting grasshoppers during the months of May and November. I asked them what their

plans were for those savings and they told me they were going to buy scholastic materials...and deposit some on their savings accounts.” [Mentor 3]

“Each participant in all the five schools I mentored had a small income generating project ...two participants were making mats and selling them...they used the money to buy books and pens. Other participants had pigs, hens, and gardens of beans, cassava and sweet potatoes.” [Mentor 17]

The two quotes below from mentors 4 and 5 also exhibit how inventive and knowledgeable the participants are, in terms of their income generation capacities:

“I observed that these kids own assets...one participant told me that he owns a female pig which gave birth to 5 piglets...he plans to sell 4 piglets and buy a goat. The remaining amount will be saved for his education and also buying his school requirements.” [Mentor 4]

“Most of the participants deal in chicken rearing, a few in pigs and the smallest percentage have nothing to own...some of these children help their guardians in taking care of these projects...in return for their hard work, guardian give the children piglets or chickens of their own...” [Mentor 5]

Many of the participants contributed their earned income towards household needs and school requirements, especially school fees and paying for other scholastic materials. Participants emphasized that the aim of saving is to pay for their education in order to have a promising future. Indeed, several participants firmly supported the benefits of saving money and put more emphasis on saving for education. For example,

“One participant indicated that she had so far saved a total of 4,000 shillings...the goal was to save 20,000 shillings needed by the school, for P.L.E registration passport photos.” [Mentor 5]

Some participants also shared that their caregivers were having trouble saving for them due to financial constraints at home:

“One participant mentioned that the aunt who used to save for her is suffering from diabetes and has been in the hospital for 4 months; and there is not enough money to pay for hospital bills, take care of the household needs and save. She [participant] added that even when her aunt was still healthy, she could not save for her saying that it’s easier to pay in installments at school than taking the money to the Bank.” [Mentor 14]

Many participants realized the importance of saving during this particular session, so much so that they promised to end all activities that were a disinvestment towards achieving their goals. For example, one participant vowed to stop “betting”, which is a form of gambling on sports activities— —which were taking all the money he got from doing odd jobs. He promised to increase on saving so he would increase on the number of hens he currently keeps, to help him in the future. [Mentor 2]

3. Participants’ knowledge of HIV/AIDS, STIs and their modes of transmission

Participants were receptive to the health-related component of the *Bridges* mentorship program. Session 4 was designed with the aim of teaching participants basic knowledge regarding HIV/AIDS and STIs, how they are transmitted, how they affect the body, why young people engage in sex, and why it is good to wait to have sex. Participants expressed interest in this topic, as indicated by the many questions they had, related to modes of transmission, symptoms of infection, and treatment. At the end of session 4, some participants expressed interest in getting tested and knowing their HIV status, and they asked mentors if they could get tested. Mentors helped explain to the participants the importance of getting tested, and advised them to go to their respective health centers in their communities, with permission from their guardians. Below are some of the mentors’ comments regarding HIV testing:

“Participants told me that they would like to know their HIV status...I encouraged them to go to public health centers because they can access free services there.” [Mentor 3]

The quotes below capture participants’ desire to get tested for HIV, and some of the barriers they encounter in doing so:

“Many participants always ask me to tell the project that they want to be taken for HIV testing...which I knew was not allowed for the project to do HIV tests on the participants without the permission of their guardians... since it’s not part of the study protocol...” [Mentor 14]

“Most of the participants want to test for HIV but they are not able because their guardians do not have time to take them to hospitals and other parents just refuse them saying that it is useless to test for HIV at their age.” [Mentor 21]

4. Participants’ knowledge of HIV/AIDS stigma and discrimination

Session 5 was designed to help participants become aware of the reasons why and ways through which people

stigmatize and discriminate against those infected by HIV/AIDS, the impact of stigmatization and discrimination, and the ways through which participants can show support and respect for those infected or affected by the disease. Given that this session followed the HIV/AIDS and STIs session, participants were able to remember what they had learned and could relate that information to this session. As reported by mentors, some participants were aware of the stigma and discrimination practices in their communities and the places where these practices occur, including schools, health centers, and their own households. Participants shared stories and experiences on how people in their communities, and sometimes, their own friends were stigmatized, as reflected in the mentors' reports below:

"If some pupils at school find out that your parent died of HIV/AIDS, they don't want to share a desk with you, they do not accept to play with you...thinking that you also have the disease." [Mentor 3]

"We have an uncle at home who has AIDS...my aunt gave him a personal room, plate, and a cup which I believe is a sign of discrimination." [Mentor 14]

Sadly, as mentor 4 describes below, one participant witnessed a peer drop out of school because he was told he had HIV/AIDS:

"There is a kid in our class who was being told that he has HIV/AIDS...he was always alone and eventually dropped out of school." [Mentor 4]

Mentors believed that it was very important to talk to adolescents about stigma and discrimination practices against people living with HIV because some participants were not aware of these practices and unknowingly stigmatized against other people. Indeed, participants debated on the different places where stigmatization is common in their communities. For example, after one participant mentioned trading centers, the other had a different perception:

"No, in trading centers they do not discriminate because many people have it [AIDS]... so one cannot start discriminating the other when others also have it...It sounds bad to many people who are infected but in villages, discrimination is common because few people have the disease." [Mentor 13]

Throughout the session on stigmatization and discrimination, mentors became aware that stigmatization might be hard to stop because children may have strong reservations when it comes to people living with HIV, given their

physical appearance, as reflected in the following statement from a participant:

"Sir, imagine when you are the one and then an HIV/AIDS patient comes to give you a hug when he is full of wounds, can you really accept?" [Mentor 13]

However, at the end of the session, participants were able to suggest ways through which stigma and discrimination against people affected by and living with HIV could be reduced. One participant said the following:

"Maybe what should be done is...we can go to L.C 1 chairmen and tell them to pass laws on the people who practice stigma and discrimination on the HIV infected persons. This will make people know that HIV victims are also people and should be treated with respect." [Mentor 13]

The same participant went on to say the following:

"It is better to help people who are infected with HIV in all situations because some of them may be innocent about their infection." [Mentor 13]

- Participants' knowledge of puberty, the ABC model, and protection from abuse

Session 6 was designed to help participants understand the changes that occur during puberty and their effects on children's emotions and behaviors, the ABC model of HIV prevention, the importance of abstaining from sexual activities, and how to protect themselves from sexual abuse. Most of the participants fully participated in this session because (1) many of them were going through puberty, so they could relate and share their own experiences and (2) this topic is on the school syllabus, and therefore, participants had prior knowledge. Most participants were aware of the physical changes that occur during puberty; however, they were not familiar with the intellectual, social, and emotional changes that occur during this stage. Therefore, this session helped bring these changes to their attention. Some participants openly shared their experiences with the group:

"I was scared after having wet dreams and then rushed to my grandmother who told me that maybe it was a dream...I think she feared telling me the truth." [Mentor 3]

Mentors acknowledged that it is important for children to have adults to talk to as they go through this transition.

"If children have people to talk to...give them continuous guidance where they are going wrong, they can be good people and it can give them a better chance of finishing school." [Mentor 8]

Regarding the ABC model of HIV prevention, participants were aware of the risks involved in early sexual practices and the benefits of abstinence, as indicated in the following reports:

“If a person abstains from sex, they can achieve their set goals...failure to abstain from sex may result into bad practices such as early marriages and sexually transmitted diseases like HIV/AIDS and syphilis...and imprisonment, in case they are found with a an underage person.” [Mentor 3]

“It is difficult for youth who engage into sexual practices to save money for their education...because for each salary they earn they think of girls instead of their future.” [Mentor 3]

Participants were also aware of the sexual abuse practices in their communities and were able to articulate the risky situations that could put them in danger of sexual abuse. They shared their experiences regarding abuse and how they managed to escape them:

“One participant shared with us her near rape experience...she was stopped abruptly by a man who wanted to rape her...she screamed loudly but people took long to come to her rescue...screaming made the man run... and she survived.” [Mentor 19]

“One participant said that when someone tries to bribe her with money, she strongly tells him that I don’t want your money because I was not raised up on your money”. [Mentor 8]

Young boys are also at risk of being sexually assaulted, as mentor 4 recounts a young boy’s experience:

“One participant mentioned that a girl from their neighborhood tried to trick him into going to her home to comb her hair...he refused because maybe...she was thinking other things like getting involved into sexual intercourse.” [Mentor 4]

This was a common statement that mentors observed among participants who emphasized that

“...even if it is a lot of money... it is just “obusente” [pocket change].” [Mentor 8]

Unfortunately, most of the participants did not know what to do in case they were sexually assaulted. They expressed concern that it is very hard to trust because sometimes people take advantage of them. The abusers are aware of the participants’ resource constraints and pretend to be offering help, yet they have different

intentions. Some participants mentioned that sometimes, the abusers are their teachers, relatives, or caregivers—people who are supposed to protect them. In such cases, the participants did not know what to do. This can be illustrated from mentors’ reports and the questions that participants asked:

“If a person rapes me and intends [threatens] to kill me when [if] I discuss it with another person, what should I?” [Mentor 8]

“What if a man tries to rape me, can I bite his penis?” [Mentor 19]

“Is it true that girls of our age get damaged when they are raped?” [Mentor 14]

In some troubling cases, participants asked their mentors about navigating situations in which the perpetrator is someone very close to them, such as a caregiver or teachers, as represented in the quotes below:

“If a person is your caregiver and rapes you what can you do?” [Mentor 13].

“You tell us to avoid going to men’s houses when we are alone, [but] even our teachers, how can we avoid our teachers because if you refuse they can beat you or make you fail?” [Mentor 19]

It is important to note that in a number of cases, child protection measures had to be put into place by study staff when abuse expected to be occurring.

6. Participant’s knowledge of risky situations, substance abuse, and peer pressure

Session 7 was designed to help participants understand risk and to identify risky situations and people, identify good and bad friends, develop the ability to resist peer pressure, and understand how alcohol and drug use can influence their decision-making abilities. Participants were able to identify risky situations and were able to share their experiences regarding peer pressure and what they learned from such experiences. Participants identified risky situation and places where they are more likely to feel pressure, for example, from strangers on their way to school asking to offer free rides on a *boda boda* (motorcyclists): participants shared experiences of peer pressure:

“Whenever I move with my village mates, they tell me they want to buy me local beer and when I request soda instead of beer, they don’t accept.” [Mentor 3]

From the same reports, we gleaned the following:

“During school games like inter-class football matches, some pupils tend to influence their friends to fight the pupils of other classes whom they are playing with.” [Mentor 3]

“One day I escaped from home and went for a dance to a neighboring village without permission. When we reached there with my friends, we danced up to 2:00 am and then my friends decided to go back home but I refused that it was too early for me, they left me and at around 4:00 am I decided to go back. On my way back...a wild animal chased me...when I got home, I was locked out...I came back home in the morning and I got punished...” [Mentor 3]

On the same topic, mentors 4, 7, and 16 had the following in their reports:

“Some of my friends told me to escape from school and I accepted to do so...in the evening, our class teacher roll called and noticed that we were not in class. The following day...we got punished... from then I never accepted whatever my friends tell me...because I may get in trouble.” [Mentor 4]

“I had a friend who had several boyfriends. She always pressured me to join their group and I refused...they usually gave my friend whatever she wanted so she told me to become friends so that they would give me whatever I wanted...I refused to become friends with them because I didn’t want to have boyfriends and I felt that it wasn’t good for me... one day my friend asked me to go with her to meet up with her friends but she had different intentions...when I found out, I decided to leave her and told her that I was not ready to stay with her friends because I am still young and want to continue with my studies to achieve my goal of becoming a nurse...” [Mentor 7]

Similar issues were highlighted by participants mentored by mentor 16. For example, one participant said the following:

“My friend was persuading me to leave school, buy a phone and escape from school...but I refused because I wanted to remain in school.” [Mentor 16]

Participants had prior knowledge regarding substance abuse – especially alcohol abuse and they knew the dangers associated with alcohol abuse. This is partly because they learn the dangers of alcohol abuse in class, but they also witness people in their communities, including in their families, abuse alcohol and the effects associated with it.

However, participants did not share much on drug use, partly because it is not a popular practice in their communities. On the dangers of alcohol abuse, participants shared the following:

“You should not even think of it (taking alcohol), play games instead of taking alcohol, read stories and other activities that can keep you from thinking of alcohol.” [Mentor 18]

“Some participants have tried to take alcohol and others have not. I did not get any case of those who had ever tried marijuana or any other drug...to me it meant that alcohol is the commonest substance exposed to these children.” [Mentor 13]

Mentors 3 and 4 captured similar sentiments from their mentorship group participants—who listed the dangers of consuming alcohol:

“It leads one to contract diseases like lung cancer, lead to risky behaviors such as sexual intercourses, accidents and death, and family conflicts.” [Mentor 4]

“Alcohol leads to family neglect, family conflicts, poverty, accidents and diseases like lung cancer thus leading to death.” [Mentor 3]

7. Participants’ knowledge of negotiation and refusal skills in risky situations

Session 8 was designed to teach participants negotiation and refusal skills to effectively avoid risky situations, increase their communication skills in resisting peer pressure, and help participants increase their sense of pride and responsibility in negotiating abstinence and risky behaviors. Mentor reports indicate that children experience peer pressure from their friends, family members, and people in their communities. Most participants had knowledge of refusal skills, for example, saying “no,” but were not aware of negotiating their way out of risky situations. Participants were able to demonstrate their refusal skills, as indicated in the mentors’ reports below:

“My brother told me to go steal our neighbor’s jack-fruit...I refused and told him that stealing is not good.” [Mentor 3]

“My friend was punished by his mother...he asked me to team with him and insult his mother... I refused and told him that I could not insult adults.” [Mentor 3]

Mentors 3 and 4 highlight responses from participants in their mentorship groups who expressed insistence on

staying in school, not skipping school, and not escaping from school, despite pressure from their peers:

“A friend from my village told me that he had a job for me in a nearby town... I refused and told him that I am still young and still want to be in school.” [Mentor 3]

“My friends wanted me to skip school... I thought about the consequences before moving on with the decision... instead I told them that I am not ready to skip school because I will be missing out a lot of things from my teachers.” [Mentor 4]

“My friend asked me to escape from school and I refused... I told him I have never escaped and will never escape.” [Mentor 3]

8. Participants’ attitudes towards mentorship and the Bridges program in general

Participants expressed a strong interest in the mentorship program and indicated that they appreciated having a supportive adult they could trust and turn to for guidance. Many of the participants’ responses reflect the benefits they receive from the program. They strongly believe that the *Bridges* program will help create real opportunities for their future. Participants’ belief that the *Bridges* program will help them is a reality because it can potentially create financial empowerment and allows them to fulfill their educational goals, thereby generating a promising future. Some participants explicitly stated that the program has helped them save money, acquire assets and start micro-enterprise projects to generate income and will ultimately help finance their education beyond primary and secondary schools. This is reflected in the following as mentor reports:

“All the information you have shared with us will help us to reach our dream goals and most of all achieve our educational goals.” [Mentor 4]

Mentor 5 shows that participants expressed how much they learned in relation to saving money and accumulating assets:

“Most of these participants appreciate the *Bridges* program and they believe that it has changed their ways of living through the money the project [matches]. A participant from [one] primary school used the 9,000 shillings she was given during interviews to buy chickens... which laid eggs and now has five chickens... she plans to make the business grow.” [Mentor 5]

“Others participants admit that they have these assets because of the *Bridges* program... one participant saved

the money received during interviews and was able to buy a piglet which is now 4 months old.” [Mentor 5]

Mentors relayed how participants in their mentorship groups expressed how much mentees valued having a mentor to talk to and seek advice from:

“Participants welcomed the program and they were happy that they could have someone to talk to.” [Mentor 5]

“Participants were very grateful for this session and promised me to put in practice what I discussed with them. It showed me that they were getting problems but not knowing what to do in order to deal with them. It showed me after discussing this session with them that they will practice what I discussed with them.” [Mentor 13]

“Since mentorship was coming to an end, participants were interested and said they will need the same program to continue. Other participants seconded the idea of conducting mentorship next year because they missed some sessions when they were away for Girl Guide camp.” [Mentor 8]

Mentor 5 reports that a participant indicated how informative one particular session was (session 6) and how it helped that participant excel in school:

“The ABC was brought in the P.7 pre-mocks exam... the kids said that they answered these questions correctly and they believe that the ABC model was failed by non-participants because it was only them who knew it in full – after mentorship session 6.” [Mentor 5]

Teachers also indicated that the program is very important to the children, and they continue to see differences among children who participate in the program as opposed to those who do not, as reported by one mentor:

“One teacher told me that what we discuss with the kids is very vital to them [the kids] and it helps to shape the kids into better persons. She also added that there’s a difference with Suubi kids... as I was concluding, the contact [teacher] approached me and said, I can’t imagine where these kids would be without your support... they have no one to support them... send our sincere gratitude to Dr. Fred for all he’s doing for our school.” [Mentor 5]

Teachers, showing commitment to their profession, also expressed appreciation for the mentorship program and the *Bridges* study overall, as mentors 5 and 13 convey:

“Another teacher approached me and thanked the project for the great work going on, he even went ahead and

showed me a boy who was a roadside vendor... but because of the project, he was able to come back and stay in school.” [Mentor 5]

“Teachers appreciated the work we do [for the benefit] of their pupils and told me that there is some bit of change ever since we started talking to them. This gave me courage and showed me that we are doing a great job.” [Mentor 13]

Discussion

Strength of the Suubi and Bridges Mentorship Program

Rhodes (1994) argues that mentoring programs may provide greater benefits to the youth who are considered at-risk, and that the effectiveness of mentoring programs depends on the following: (1) features of the program design and implementation; (2) characteristics of participants; (3) qualities of the mentor-mentee relationship; and (4) issues related to the assessment of youth outcomes. Findings from the Suubi and Bridges mentorship program point to the potential of positive outcomes among orphaned children. First, in terms of design and implementation, mentoring relationships produce enhanced benefits when they are linked to other supportive services (Flaxman et al. 1988). The Suubi and Bridges mentorship program is provided as a component of a family-based economic strengthening intervention that provides matched savings in the form of child development accounts, workshops on financial planning, and microenterprise development, as well as the provision of scholastic materials to orphaned children.

Second, recommendations have been made on the recruitment of mentors that emphasize matching of youth with mentors based on age, gender, and individuals with specific backgrounds, to enable effective mentoring relationships (Freedman 1992; Rhodes 1994). In our program, participants were matched with mentors who were young or closer in age with the participants, and were matched by gender. In addition, some of the mentors participated in a similar study and benefited from the mentoring program as well. Therefore, they were able to relate to and connect with the participants more effectively.

Third, in terms of mentor-mentee relationships, Freedman (1992) emphasizes that it is necessary for programs to establish relationships between youth and adults that involve patterns of regular contact over a significant period of time. Our program was structured in such a way that participants met with mentors on a monthly basis for a period of 9 months, where they talked about a variety of topics, including educational planning and self-esteem, asset building, HIV/AIDS

knowledge and prevention, puberty, and negotiation and refusal skills. Throughout the entire process, participants were able to develop trust and meaningful relationships with their mentors.

In terms of assessment, we report findings based on mentors’ observations and experiences of the mentorship process, as well as the participants’ experiences—as perceived by the mentors. Our findings indicate that mentors developed a sense of importance in their roles as mentors; sharing their own experiences with the participants helped them to reflect on their own lives and accomplishments as well. Mentors gained an understanding of the realities of the youth participants; they were able to learn effective methods of conducting mentoring sessions, all of which they were not aware of prior to mentoring. These findings are consistent with other mentoring programs regarding the benefits of mentoring (Eby and Lockwood 2005; Kram 1985; Kram and Hall 1989; Wanberg et al. 2003).

Findings from the participants’ experiences of the mentoring relationships indicate that despite financial constraints and limited support, (1) orphaned children have educational aspirations and future plans; (2) they do save, own assets, and have income-generating projects that support their education and supplement household income; (3) they have knowledge regarding HIV/AIDS, its transmission and prevention; (4) they are able to identify risky situations and practice refusal and negotiation skills; and (5) they have positive attitudes towards the mentorship program and the *Bridges* program overall. The findings presented throughout this paper have important implications for the design and implementation of mentorship programs, especially those that aim to improve the psychosocial well-being of children and adolescents.

Limitations and Future Research

This paper presents findings from the Suubi and Bridges Mentorship Program as reported by mentors and mentees. We cannot assess the long-term impact of the program on children’s actual behavior. This will necessitate a long-term assessment of the participant’s behavior. Plans are underway for that. Overall, the findings of the Suubi and Bridges study point to the positive role of mentorship among AIDS-orphaned and vulnerable children, including children’s future plans and aspirations. Given this, future research should focus on the role of mentorship to adolescent youth in general, including non-orphans. Should these findings prove effective in other populations, they will provide a new resource for improving the lives of youth not only in sub-Saharan Africa but also in several other resource-constrained communities across the globe.

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