

A group of young people, mostly women, are gathered in a field, reaching their hands up towards a red and white soccer ball. They are wearing blue t-shirts with yellow text on the back. The background shows a hilly landscape under a clear sky. A large red triangle is overlaid on the left side of the image, containing the title and subtitle.

THE SIZANANI EFFECT

Monitoring and Evaluation Report on Camp
Sizanani for Global Camps Africa (GCA)



EXECUTIVE SUMMARY

Global Camps Africa (GCA) established Camp Sizanani in 2004 to improve the lives of vulnerable children and youth from HIV-affected communities in South Africa. During eight-day sessions at the residential camp outside of Johannesburg, about 140 youth ages 11 to 18 enjoy fun, games, and camaraderie as they benefit from life skills and nutrition training, HIV-prevention education, and participate in many other skill-building activities. Caring, trained adults—30 to 40 in each session—ensure campers receive the layered and integrated support they need to become healthy and productive adults who translate knowledge into action and positively influence their own futures and the future of their communities.

In 2011, GCA launched a five-year evaluation program that covered 12 camp sessions. Campers completed paired survey questionnaires: a pre-test survey, provided just before or on arrival at camp, and a post-test questionnaire, filled in on the last day of the session. The surveys probed what campers hoped to learn and had learned at camp and their knowledge, attitudes, and practices relating to HIV and HIV-related stigma. Questions probed their sense of hope, resilience, and locus of control, gauging changes that occurred during the session. The evaluation found statistically significant, positive change in these three areas, a remarkable outcome after only eight days. Post-test, campers’ HIV knowledge scores and disapproval of HIV-related stigma registered statistically significant increases, and campers expressed less concern about HIV testing and disclosure. Campers not only learned “level-one” skills by playing sports and participating in traditional camp activities, they gained understanding and practiced “level-two” skills, such as respect, perseverance, teamwork, and positive attitudes.

The program’s effectiveness and fidelity in delivery are demonstrated by the gains registered across all camp sessions during the five-year evaluation period. Camp Sizanani is making a positive impact. Camp Sizanani delivers more than program activities and HIV-prevention education. It forges bonds between campers and with caring, adult role models, builds self-esteem and life skills, and contributes to empowerment and agency. Vulnerable youth who attend a camp session are better prepared to make good decisions, apply their knowledge, and take actions that positively affect their future and the future of their communities.

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CAMP SIZANANI

INTRODUCTION

Global Camps Africa (GCA), a U.S.-based 501(c)3 organization, established Camp Sizanani in 2004 in order to change the lives of vulnerable children and youth affected by HIV and AIDS in South Africa. Campers are typically between 11 and 19 years old and from high-risk, HIV-affected communities in Soweto. They stay at the residential camp for eight days, where they get needed respite from daily challenges and are introduced to new skills, peers, and caring adults. Each day, they receive the layers of integrated information and support they need to become healthy and productive adults who translate knowledge into action to positively influence their futures.

Camp Sizanani weaves life skills and HIV education into activities, along with abundant fun, camaraderie, and adventure. Schedules usually include sports, nutrition, arts and crafts, theatre, and dancing and drumming and incorporate games, skits, storytelling, poetry, campfires, and issue discussions. The intensity of the shared time and experiences creates bonds, builds self-esteem, and gets campers to broach issues they do not raise at home or in school. After a camp session ends, many participants attend biweekly Youth Clubs in Johannesburg that reinforce what they learned and contribute to the support they need to realize their dreams and a positive and HIV-free future.

GCA's current local partner, Camp Sizanani Life Skills Inc., works with local schools, churches and community organizations to identify the vulnerable youth who will attend the camp—about 140 in each residential session. To date, there have been more than 7,200 campers. The eight-day sessions are organized at least three times a year, typically in March, September, and December, preceded by four days of staff training. Counselors—between 30 and 40 for each session—are called “vochellis.” Recruited by the Camp Director (a South African), many are former campers or volunteers for other youth development organizations. The Director ensures that vochellis are positive role models who create a safe, caring, and fun environment that builds resiliency and hope for a brighter future.¹

GCA's four-day training programs for vochellis was established by Michael Brandwein, a globally renowned trainer of camp staff (Brandwein 2008). Vochellis are not only trained to teach “level-one” or traditional camp skills, such as swimming, netball, soccer, and art. Their training program before each session incorporates HIV-prevention education, team and community building, positive discipline, and other youth development basics. The most important role of vochellis is to build and support “level-two” life skills, such as respect, teamwork, patience, perseverance, positive attitudes, and self-confidence. They use updated lesson plan manuals that support these objectives and weave in HIV-prevention education. Vochellis stress the “so what” of an activity: campers come to recognize that they are learning valuable level-two skills and how they can apply these to mitigate daily struggles and make better choices.

Each camper may attend only one session so other vulnerable youth can benefit from the program. Former campers connect with each other and with vochellis at year-round Saturday Youth Clubs established by GCA at several locations around Soweto. The clubs aim to reinforce and add to campers' HIV education and sustain the life skills, improved self-esteem, positive behaviors, and constructive bonds nurtured at Camp Sizanani.²



EARLIER EVALUATIONS

GCA embraces critical thinking: a mindset reflected in the five-year evaluation program launched in 2011. It built on notable methodological lessons of earlier evaluations and contributions of visiting leaders of the American Camp Association and the Ontario Camp Association. One lesson was that engaging parents, guardians, or other caregivers and former campers after the session yielded unacceptably low response rates, in part due to fragile home circumstances. Another lesson was that vochellis felt burdened by additional reporting responsibilities during camp sessions: they wanted to focus their energies on campers and their activities.

The most influential groundwork for the current evaluation program's mixed-methods approach was contributed by Dr. Leslie Scheuler (Scheuler 2007; Pierce, Brinberg, and Staauffer 2008). She analyzed in-depth interviews with about 70 campers, documenting their eagerness to participate in activities; knowledge gains on HIV-prevention and nutrition; development of effective communication skills; benefits from supportive relationships with camp staff; strengthening of self-confidence, teamwork and anger-management skills; and gains in self-expression and physical skills.

METHODOLOGY OF THE FIVE-YEAR EVALUATION PROGRAM

The current mixed-methods evaluation program set out to obtain qualitative and quantitative results as well as timely feedback on the program's effectiveness over 12 camp sessions. The evaluation integrated data collection into normal camp life as much as possible and aimed to reinforce learning and improve activities. Institutional Review Board oversight was granted from the University of Georgia as a secondary data analysis.

The authors of this study used previously validated self-report scales to craft a survey in English that campers filled out, either before or on their arrival at camp (pre-test) and on their last day there (post-test). Caregivers were required to provide signed permission forms, and campers were assured there would be no repercussions if they left items blank. The risk of a positive response bias was mediated by the combination of perception and knowledge questions.

Both researchers were on site during a pilot. They conducted cognitive interviews, tweaked wording, and trained the staff who administered the surveys and answered campers' queries. Data from a control group were collected during the pilot, but this did not continue after March 2011. Standard frequency checks were used for data cleaning. Privacy was protected, including by storing surveys in secure locations and sending them to the USA.

The 2011–15 survey probed camper's HIV knowledge, attitudes, and behaviors. During the pre- and post-test, campers answered the same 11 knowledge questions by responding "yes," "no," or "I don't know" (Hou, 2008; 2009a, b). They marked on a likert-type scale agreement and disagreement with statements on HIV testing, stigmatizing statements about HIV-positive people (others), and how they might feel about themselves if HIV-positive. Campers also rated their level of HIV knowledge and divulged information about their sexual history and partners, including their experience and intentions relating to condom use and HIV testing. (Campers were assured that their responses, held in strict confidence, would inform the camp's educational programs.)

One of the pre-test questionnaires asked campers what they expected to learn from camp activities under the following categories; life skills, nutrition, arts and crafts, theater, sports and adventure, and (depending on availability) swimming. On the last day, campers indicated what they had learned under these categories. Every camper indicated what he or she learned from life skills activities, and every camper was asked about one additional activity area (rather than being asked to complete questions on each activity). This system allowed for feedback on all activities from one-sixth of the camper population, and reduced the survey burden on the last day. The evaluation used simple word counts to compare responses, focusing on level-two skills and other specific gains.

A series of previously validated declarative statements were used to score and gauge campers' sense of hope, resilience, and locus of control before and after camp.³ Responses were entered in a likert-type scale that ranged from "none of the time" to "all of the time." Campers provided perceptions of their own lives before and after their camp experience, including their ability to solve problems respond to hardships, make good decisions, ask for help and accomplish objectives.

This report summarizes and analyzes data provided by 1,104 campers who participated in both the pre-test and post-test over the five-year period. Results reported are aggregated data from all collection waves. Tests of significance were run using SPSS software to assess whether changes in responses could be attributed to chance or naturally occurring changes. The threshold of .05 was used for these tests.⁴

LIMITATIONS

Vulnerable South African campers may be less equipped than other youth to provide introspective and clear responses to a long list of survey questions. Some questions were verbally dense, though vochellis provided help if asked. Some campers may have simply checked boxes on the knowledge text. Data on sexual behaviors were collected from three camps (March 2011, October 2012, and March 2015). Females were more likely to leave these questions blank than males, and sensitive and deeply personal questions, not appropriate for younger campers, were purposely omitted when used with younger campers.

Slightly different versions of the survey were used during earlier sessions, so all data points were not directly aligned. Initially, it proved difficult to compare data across collection waves, but improvements were made to the documentation of monitoring codes that better connected pre- and post- tests.

Staff at six camps administered follow-up surveys at assigned intervals, but less than half of the former campers and their caregivers provided responses. Among those responding, 90 percent had attended the Youth Club. These data indicated retention in the majority of measures, but this report does not detail these surveys.

EVALUATION RESULTS

DEMOGRAPHICS AND HIV KNOWLEDGE, ATTITUDES, AND BEHAVIORS

Demographic data provided by the post-test were more complete and sometimes different from pre-test data, perhaps due to increased trust. Among campers providing demographic information, 98 percent were between ages 10 and 18, their mean age was 14,⁵ and 57 percent were female.

Most campers—53.9 percent—reported no boyfriend or girlfriend, 71.5 percent indicated they were heterosexual, 9.2 percent reported they were either bisexual or gay/lesbian, and 19.2 percent said they were not sure of their sexual orientation. About a third of the campers who responded to questions on sexual behavior acknowledged they were sexually active.

Campers answered an average of 5.92 of the 11 HIV-knowledge questions correctly in the pre-test survey and 6.08 correctly post-test. This is statistically significant ($p < .01$), though there is obviously room for improvement. Among respondents, 45 percent increased their overall scores, 35 percent saw no change, and 30 percent had lower scores. Campers ages 11–12 were more likely to get lower scores, while females and all campers ages 14–15 were more likely to increase their scores. Post-test responses reflected perceptions of increased levels of knowledge about HIV and AIDS (3.08 vs. 3.39; $t = -7.00$, $p < .000$) as well as about HIV testing (2.83 vs. 3.18; $t = -8.06$, $p < .000$). This is important because feeling more knowledgeable feeds into the confidence to use new information (Hou and Powell 2015a).

Between pre-test and post-test, the percentage who favored getting an HIV test increased from 51 percent to 55 percent, and campers acknowledged feeling less scared about learning their HIV status ($p < .000$). There were also statistically significant changes pre- and post-test relating to the desire to use a condom for next sex (4.05 vs. 4.37; $p < .000$) and intention to use a condom if having sex in the next six months (4.00 vs. 4.28; $p < .000$). Campers' overall confidence in their ability to convince a partner to use a condom did not change significantly (3.5), but males showed a statistically significant lower mean (3.43 vs. 3.24) than females (3.56 vs 3.56).

Statistically significant changes were also registered post-test relating to HIV stigma. The score of 40 reflected the highest level of agreement with stigmatizing and discriminatory statements in the survey. The series of questions asked campers' self-perception and perception of others in addition to likert-type scaled questions about their thoughts and feelings. Pre-test, campers registered overall scores of 15.81 and 14.78 post-test ($p < .000$) documenting a decrease in agreement with discrimination (Hou and Powell 2015b). Post-test, shame, guilt, and other negative attitudes about self, if HIV-positive, were also significantly reduced (17.58 to 16.35, $p < .000$). While there was no statistically significant increase in comfort levels in disclosing an HIV-positive status, 68 percent said they knew three or more people they could trust with such a disclosure.

RESULTS: DOCUMENTED GROWTH THROUGH CAMP ACTIVITIES

Dramatic increases were registered in survey data on expected learning and actual learning from camp activities, both in knowledge gained and level-two skills.

LIFE SKILLS: Pre-test, campers acknowledged they expected to learn about HIV, life, STIs, pregnancy, self-control, peer pressure, and sex. Post-test they reported they learned about all of these issues and added others, such as new knowledge on stigma and its harm, how to protect themselves and others from HIV and other STIs, and how to face challenges/fight for a future and work through difficult times. Level-two skills gained included respect for people, "belief in myself," and the ability to "stand my ground" and feel "free to talk about the past." Some added a camp catchphrase, "Forward ever, backwards never," while others wrote: "I have many problems and I wish I could quit, but I can get help to solve them and be strong."

THEATER: Pre-test, most campers expected to learn about theater, drama, acting, dance, and music: 12 percent cited new level-two skills. Post-test, level-two skills were acknowledged by 82 percent of respondents, including focus, respect, "belief in myself," and "realization that I have talent."

NUTRITION: Pre-test, campers indicated they had little general understanding of the overall concept of nutrition. Post-test responses doubled in content, and 31 percent listed level-two skills. Campers connected healthy living with exercise, referenced kitchen and personal hygiene, and learned how to make healthy dishes.

ARTS AND CRAFTS: Level-one expectations included drawing, painting, and design. Level-two skills were also anticipated, including "making things with my own hands" and "using my mind." Post-test, campers noted additional level-two skills, including focus, respect for myself, and ability to use new skills to generate income and employment. These responses reflect the camp's broader goals and life skills activities. For example, campers were engaged in beadwork projects when "focus" was the quote of the day. They had looked at themselves in a figurative mirror in a life skills class and reflected on who they were, then proceeded to an art class where they drew themselves and their family trees. Coordinated efforts that provide layers of learning and fun across activity areas support overarching concept development.

SPORTS/ADVENTURE: During the pre-test, about 45 percent of the campers cited level-one skills such as learn to play netball, while 54 percent cited level-two skills like respect, team spirit, equality, and understanding. Post-test, responses were dramatically different: only 5 percent cited level-one skills and 95 percent cited level-two skills, including teamwork, respect, concentration, focus, communication, reaching goals, trust, patience, and positive attitudes. Campers understood and internalized the purpose of activities and their intangible benefits.

SWIMMING: Not all camps offered swimming. Pre-test, learning how to swim and the rules of the pool were common level-one expectations. Post-test, responses encompassed 12 different categories, including encouraging others, working as a team, passion, determination, ability to analyze the weather, and respecting those who did not want to swim. Several campers noted they learned in swimming classes that people can help others do impossible things.

RESULTS SURVEYS ON SENSE OF HOPE, RESILIENCE, AND LOCUS OF CONTROL

Analysis of pre and post-test data across all camps showed statistically significant improvements in scores for all three of these scales. This is rare for a youth program that lasts only eight days.

- On the sense of hope scale (maximum score 30) campers increased their scores from 25.04 to 26.18 ($p < .000$).
- Indicators of resiliency (maximum 98) increased from 71.36 to 74.20 ($p < .000$).
- For locus of control (maximum 70), scores increased from 45.83 to 48.14 ($p < .000$).

Tables 1–3 show findings by camp session over the five-year period.

TABLE 1.
SENSE OF HOPE SCORES BY CAMP SESSION

CAMP SESSION	PRE-TEST SCORE	POST-TEST SCORE
Mar 2011	25.38	28.67
Mar 2012	26.00	26.87
Oct 2012	20.32	21.16
Dec 2012	21.62	22.58
Mar 2013	23.13	25.01
Sept 2013	25.82	26.52
Dec 2013	24.79	25.62
Mar 2014	26.42	26.88
June 2014	25.12	26.88
Oct 2014	25.18	26.24
Dec 2014	26.11	27.53
Mar 2015	25.47	26.63

TABLE 2.
RESILIENCY SCORES BY CAMP SESSION

CAMP SESSION	PRE-TEST SCORE	POST-TEST SCORE
Mar 2011	72.58	81.68
Mar 2012	76.00	77.18
Oct 2012	54.81	54.78
Dec 2012	58.40	58.36
Mar 2013	61.31	66.13
Sept 2013	72.78	77.15
Dec 2013	77.80	77.59
Mar 2014	70.82	72.58
June 2014	73.45	72.27
Oct 2014	73.12	75.18
Dec 2014	72.25	77.09
Mar 2015	72.99	76.72

TABLE 3.
LOCUS OF CONTROL SCORES BY CAMP SESSION

CAMP SESSION	PRE-TEST SCORE	POST-TEST SCORE
Mar 2011	46.64	50.28
Mar 2012	—	—
Oct 2012	45.61	45.15
Dec 2012	48.33	—
Mar 2013	50.52	45.00
Sept 2013	—	—
Dec 2013	—	—
Mar 2014	46.30	46.99
June 2014	46.14	45.91
Oct 2014	45.07	46.93
Dec 2014	42.60	48.92
Mar 2015	46.74	48.76

The overall pre and post test scores are achieved by adding the individual item scores within each scale. These results are an indication of an increase in a feeling of hope for the future and an ability to influence it.



CONCLUSIONS

Qualitative results confirm that campers benefited from fun and engaging activities that encompassed level-two, transferable, and relevant skills and that they recalled and were aware of the benefits of the skills (Powell and Hou 2012). From the perspective of the broader field of youth development, the consistency of objectives was clear; staff adapted easily to different camper interests and questions. Findings demonstrate that Camp Sizanani provides much more than fun activities and HIV-prevention education. Campers form bonds with caring role models, build self-esteem, and increase their ability to apply their new knowledge.

Gains demonstrated across camp sessions demonstrated fidelity in delivery and statistically significant impacts on almost all measures, including increased HIV knowledge and stigma reduction. Increased scores relating to sense of hope, resilience, and locus of control are particularly important. It is worth noting that these psychological measures usually do not increase in a short period of time.

This kind of change is linked to increased ability to implement the knowledge that has been gained. The changes registered by survey respondents are empowering. Over the short, eight-day period at Camp Sizanani, vulnerable children and youth not only enjoyed a wide range of fun activities and traditional camp skills, but they absorbed critically important life skills and were systematically prepared to make good decisions and take action to make a positive difference—for themselves, their families, and their communities.

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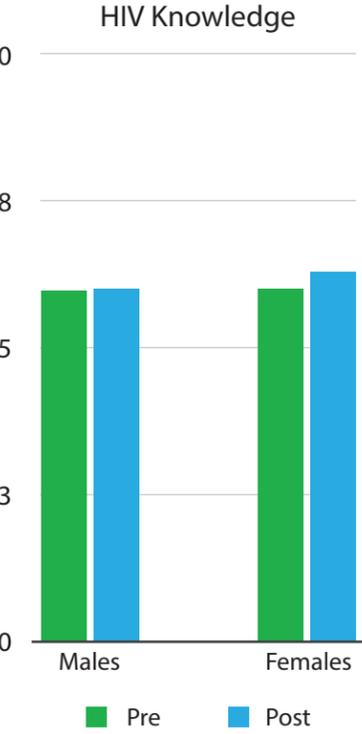
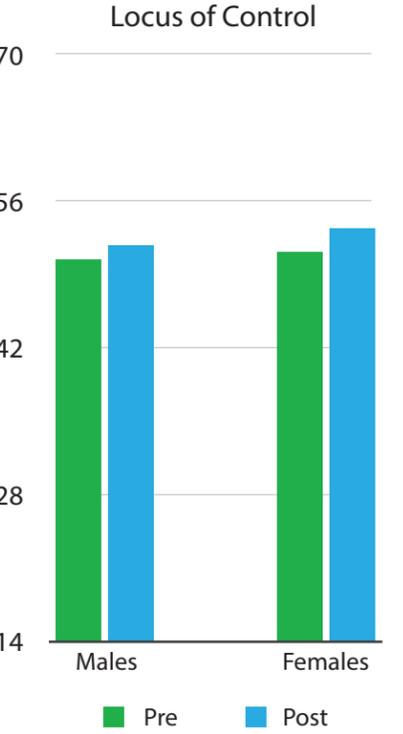
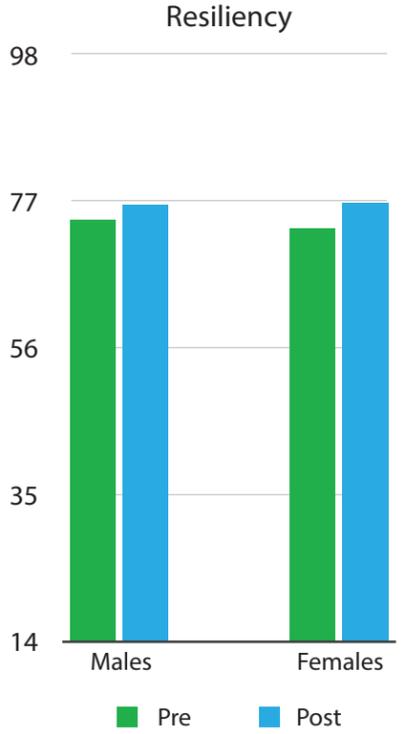
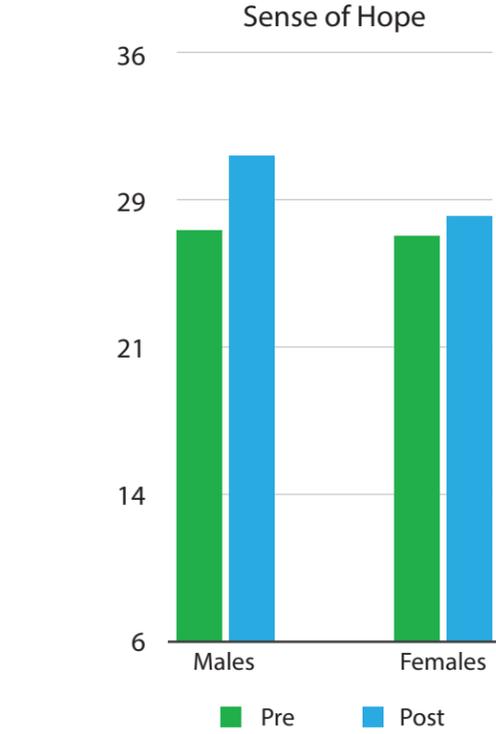
ANNEX 1. AVERAGE SCORES ON INDIVIDUAL QUESTIONS, SENSE OF HOPE, RESILIENCY, AND LOCUS OF CONTROL

Pretest Scores		Posttest Scores	Change
SENSE OF HOPE			
4.18	I think I am doing pretty well in life	4.47	0.29
4.30	I can think of many ways to get the things in life that are most important to me	4.45	0.15
4.11	I am doing just as well as other people my age	4.26	0.15
3.97	When I have a problem, I can come up with lots of ways to solve it	4.26	0.29
4.06	I think the things I have done in the past will help in the future	4.34	0.28
4.29	Even when others want to quit, I know that I can find ways to solve the problem	4.41	0.12
RESILIENCY			
4.56	I usually manage one way or another	4.86	0.30
5.33	I feel proud that I have accomplished things in life	5.46	0.13
4.50	I usually say on track even if bad things happen	4.90	0.40
6.06	I like myself	6.17	0.11
4.36	I feel that I can handle many things at a time	4.79	0.43
4.79	I am determined	5.08	0.29
4.87	I can get through difficult times because I've experienced difficulty before	5.17	0.30
5.33	I have self-discipline	5.46	0.13
5.29	I keep interested in things	5.46	0.17
5.14	I can usually find something to laugh about	5.30	0.16
4.92	My belief in myself gets me through hard times	5.05	0.13
4.70	In an emergency, I'm someone people can generally rely on	4.97	0.27
5.63	My life has meaning	5.88	0.25
5.02	When I'm in difficult situations, I can usually find my way out of it	5.35	0.33

Pretest Scores		Posttest Scores	Change
LOCUS OF CONTROL			
3.18	When faced with a problem I try to forget about it	2.94	-0.24
3.16	I change my opinion when someone I admire/respect/like disagrees with me	3.26	0.10
4.22	If I want something I work hard to get it	4.33	0.11
3.57	I like to have a say in any decisions made by any group I'm in	3.77	0.20
2.87	What other people think makes a big difference in my behavior	2.89	0.02
4.00	When something good happens to me I feel it is because I earned it	4.08	0.08
3.66	I enjoy being in a position of leadership	3.82	0.16
2.70	I need someone else to tell me my work is good before I am satisfied with what I've done	2.78	0.08
3.49	I stick to my opinions/ideas when someone disagrees with me	3.65	0.16
3.77	I do what I feel like doing, not what other people think I should do	3.80	0.03
3.14	I get discouraged when doing something that takes a long time to finish	3.11	-0.03
3.03	When I am part of a group I want to let other people make all the decisions	3.15	0.12
2.64	When I have a problem I follow the advice of friends and/or relatives	2.82	0.18
2.48	Having someone important tell me I did a good job is more important to me than feeling I've done a good job	3.53	1.05
HIV/AIDS KNOWLEDGE			
% Correct		% Correct	
60.0%	A person can get HIV/AIDS from mosquito bites	65.0%	5.02%
47.3%	A person can get an HIV from oral sex	52.3%	4.96%
73.0%	A person can get HIV even if he/she has only had unprotected sex once with an HIV infected person	68.4%	-4.60%
46.7%	People with HIV quickly show serious signs of being infected	52.7%	5.97%
73.8%	A person with HIV can look and feel healthy	75.9%	2.05%
55.6%	A pregnant woman with HIV can give the virus to her unborn baby	58.3%	2.73%
	It is harder for women to get HIV from men, than for men to get HIV from women		
52.2%	Showering, or washing one's genitals/private parts, after sex keeps a person from getting HIV	50.4%	-1.79%
41.3%	It takes a couple of weeks or months for HIV to show up in a test	43.3%	2.02%
53.7%	Coughing and sneezing DO NOT spread HIV	54.6%	0.95%
80.1%	A person can get HIV by swimming in the same pool with a person who has HIV	72.0%	-8.10%

AVERAGE SCORES BY GENDER

	Sense of Hope			Resiliency			Locus of Control			Knowledge		
	Pre	Post	Change	Pre	Post	Change	Pre	Post	Change	Pre	Post	Change
Males	25.18	26.40	1.22	71.71	74.13	2.42	45.38	47.12	1.74	5.97	6.01	0.04
Females	24.78	26.08	1.30	70.17	74.61	4.44	46.40	49.16	2.76	6.00	6.29	0.29





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