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Girls are often not aware of the HIV risks associated with having sex with men of different ages.

Poverty & lack of access to resources for necessities such as food, school fees, and uniforms etc., lead to exchange of sex for resources.

Peer pressure & aspirations for status and/or consumer goods also may motivate exchange of sex for goods.

Power imbalances limit girls’ options to negotiate condom use.

**Growing expertise but mixed evidence on how to address adolescent girls’ HIV vulnerability in Sub-Saharan Africa**

- MEMA kwa Vijana, a school-based adolescent intervention in Tanzania, showed no impact on HIV incidence.
- In Kenya, provision of information to girls on HIV risk by partner’s age led to a 28% decrease in teen pregnancy & substitution away from older (riskier) partners towards protected sex with same-age partners*. In Zimbabwe, micro-finance interventions with adolescent girls have had problems with repayments.
- Growing programmatic expertise on the delivery of gender transformative interventions for adolescent girls and women in Sub-Saharan Africa.
- On-going trials of promising interventions.

**Where are we on the HIV prevention landscape for girls?**

*Zomba CCT in Malawi showed significant impact on HIV and HSV-2, & illustrates the importance of access to cash for HIV prevention*

- No difference in HIV impact between conditional & unconditional intervention arms.
- Main HIV impact through reductions in numbers and age difference in partners.
- Likely that impacts linked to a reduction in transactional sex.

**Important questions:**

- If there is no difference between conditional and unconditional payments, is the impact due to money alone?
- If the impact was a result of poverty reduction, could other poverty reduction and/or skills development approaches also be important?
- How can HIV impact be sustained? Is giving money to girls a temporary or transformative intervention?
- Could additional or longer term benefits be achieved by combining economic & empowerment project components?

*Dupas 2009, **Baïd et al 2012

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**More than money?: Are cash transfers a solution to addressing adolescent girl’s vulnerability to HIV in Sub-Saharan Africa?**

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**Continuing gender disparities in rates of heterosexual HIV transmission among adolescents in Sub-Saharan Africa**

**HIV prevalence adolescents aged 15-24**

Sub-Saharan Africa

Source: UNAIDS 2009

**Young girls’ greatest HIV risk is through sex with higher risk men**

- Girls are often not aware of the HIV risks associated with having sex with men of different ages.
- Poverty & lack of access to resources for necessities such as food, school fees, and uniforms etc., lead to exchange of sex for resources.
- Peer pressure & aspirations for status and/or consumer goods also may motivate exchange of sex for goods.
- Power imbalances limit girls’ options to negotiate condom use.

**Sexual coercion and violence a driver of early sex by girls**

**WHO study findings showing the percentage of women reporting forced first sex by age of first sex**

- *Note: Japan city, Dar es Salaam city and Thessaloniki city are not represented because of the very low percentages reporting first sex before age 15 years.*

Source: WHO multi-country study on women’s health & domestic violence, 2008

**Lessons from IMAGE intervention in South Africa**

**IMAGE Micro-finance & gender equity intervention in rural South Africa (participants aged 18+)**

- RCT to assess the impact of a micro-finance & participatory gender, violence & HIV programme in rural South Africa.
- 860 women enrolled, 1,750 loans disbursed, total value USD $ 290 000

**Significant impacts on levels of poverty, violence & communication achieved at low cost**

- Past year experience of domestic violence reduced by 55%
- Significant reductions in hh poverty.
- Improved HIV communication
- $43 per client in trial / $13 per client at scale up

**Benefits among younger women receiving intervention (18 – 35)**

- 64% higher uptake HIV testing
- 25% reduction in reported unprotected sex

Source: UNAIDS 2009

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**Micro-finance alone reduced poverty but did not impact on empowerment, violence or HIV related indicators**

**Economic indicators**

**Empowerment indicators**

**Violence**

**HIV**

*All AHR for indicators represented as bar graphs on a logarithmic scale.

Source: Kim et al 2008 WHO Bulletin

**More than money likely to be needed to achieve a sustained impact on adolescent HIV risk**

Adapted from: Brady, Martha. Population Council, 2005.

**Information & social power**

**Money, economic skills & opportunities**

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