



## Do Integrated Models Work?

### A randomized study evaluating an intervention integrating economic strengthening and HIV prevention programs for vulnerable youth in South Africa

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At the request of the Prevention and Orphans and Vulnerable Children (OVC) Team of the Health Development Office of USAID South Africa, FHI 360's Accelerating Strategies for Practical Innovation & Research in Economic Strengthening (ASPIRES) project<sup>1</sup> is carrying out a 4-year, \$10 million program to improve the long-term economic security and HIV prevention knowledge and skills of at-risk youth in South Africa. ASPIRES will do so through the application of integrated combinations of evidence-based, gender-sensitive economic strengthening (ES) and HIV prevention education interventions, carried out in close collaboration with five PEPFAR Implementing Partners (IPs)<sup>2</sup> who support or implement programs to assist OVC and their caregivers in South Africa. To build the evidence base around the efficacy of such interventions, ASPIRES will carry out rigorous qualitative and quantitative research.

Central to the project's research efforts is a study to assess whether the integration of an ES program with an HIV-prevention education program produces synergistic effects on economic and health outcomes. HIV prevention education has been shown to educate and build skills, which leads to safer sex practices and lower rates of sexually-transmitted infections (STIs), HIV, and unintended pregnancies. Economic strengthening interventions, such as financial education and savings, can reduce economic vulnerability and risk behaviors. This study seeks to identify if the combination of these two types of interventions leads to greater results than each intervention might have alone.

<sup>1</sup>For more information about ASPIRES, please visit:

<https://www.microlinks.org/library/accelerating-strategies-practical-innovation-research-economic-strengthening-aspires-project>

<sup>2</sup>The five IPs selected by the Prevention and OVC Team of the Health Development Office of USAID South Africa are: Networking HIV, AIDS Community of South Africa (NACOSA); National Association of Child Care Workers (NACCW); Children in Distress Network (CINDI); HIVSA; and Future Families (FF).

#### Study Objectives

- To assess whether the integration of an ES intervention with an HIV-prevention education intervention improves economic and health outcomes beyond singular interventions.
- To estimate the resources required at the program level to support the ES and HIV-prevention education interventions.
- To describe whether the interventions were perceived as effective in addressing economic and health outcomes and to describe how and why the interventions were perceived as effective or not.



## Study Description

ASPIRES will carry out a full factorial randomized controlled study with qualitative and costing subcomponents to answer the following question:

*Does the integration of an ES program with an HIV-prevention education program produce synergistic effects on economic and health outcomes?*

This study will be conducted in four communities in the greater Pretoria area where one of the IPs—Future Families—currently operates. Two thousand youth beneficiaries of Future Families aged 14–17 will be randomly assigned to one of four arms (500 each): ES intervention only, HIV prevention education only, ES + HIV prevention education combined, and no intervention (control). Participants in all four arms (including the control) will receive Future Families’ standard package of services during the study.

### Full Factorial Randomized Controlled Design

ES + HIV prevention	HIV prevention only
ES only	No intervention (control)

ASPIRES will conduct quantitative in-person surveys and test for STIs and pregnancy among youth study participants before Future Families implements the interventions (baseline) and about nine months after Future Families starts the interventions (endline 1) and then again about 18 months after Future Families starts the interventions (endline 2). Additionally, ASPIRES will conduct explanatory qualitative research around the time of each quantitative

endline survey to get in-depth perceptions of whether the programs were effective, and if so or if not, how and why. Qualitative research will be conducted with a randomly selected sub-sample of youth participants, their caregivers, and randomly selected Future Families program staff. Finally, ASPIRES will collect program implementation and costing data throughout the implementation of the interventions from Future Families. Results are expected by mid-2018.

### Study Outcomes

The primary outcome being measured in this study is the prevalence of gonorrhea, trichomoniasis or chlamydia infection. These STIs are proxy measures for engaging in unprotected sex and were selected because they are common and can be tested in urine samples obtained from both males and females.

The secondary outcomes being measured (all self-reported, except pregnancy) are:

1. Prevalence of pregnancy;
2. Percent of adolescents engaging in protective sexual behavior, defined as self-reported abstinence or consistent condom use (a condom used every time) over the past six months;
3. Engaging in transactional sex in the past six months;
4. Two or more sexual partners in the past six months;
5. HIV knowledge;
6. Financial literacy;
7. Participation in a savings group;
8. Opening a savings account;
9. Total amount of savings in past year;
10. Saving for education;
11. Caregiver providing youth money for savings; and
12. Participation in household budgeting.

### Data collection activities spanning 18 months

