

Impact Evaluation of the African Youth Alliance in Ghana, Tanzania and Uganda: Implications for Future Youth Programming

**Jessica Posner, Timothy Williams, Ali Karim,
Stephanie Mullen
John Snow, Inc.**

**American Public Health Association Meeting
November 2007
Washington DC**



John Snow, Inc.

Thanks and Acknowledgements

- **Bill and Melinda Gates Foundation**
- **AYA Partners**
 - **Country Teams, Country Offices, Host Country Implementing Partners**
 - **Global AYA partners (UNFPA, Pathfinder, PATH)**
- **AYA M&E Technical Advisors Committee**
- **Country Research Organizations: ISSER/Ghana, IRA/Tanzania, Makerere/Uganda**
- **JSI team**
 - **Disha Ali***
 - **Charlotte Colvin***
 - **Ali Karim**
 - **Anne LaFond**
 - **Michael McQuestion***
 - **Stephanie Mullen**
 - **Leslie Patykewich**
 - **Jessica Posner**
 - **Tim Williams**



Focus of this Presentation

- Brief overview of AYA
- Quick description of the evaluation
- Review of the most *'interesting'* results (see handout for more detail on results)
- Conclusions for future youth programming from this study

African Youth Alliance Program Overview

- Collaborative program between the United Nations Population Fund (UNFPA), the Program for Appropriate Technology in Health (PATH), and Pathfinder International
- **Program Goal:** Improve adolescent sexual and reproductive health (ASRH) in four African countries and reduce the incidence and halt the spread of HIV/AIDS and other sexually transmitted infections (STIs)
- **Program Implementation timeframe:** 2000-2005
- **Budget:** \$57 Million from Gates Foundation
- **Target age:** 10-24 (youth)



Six Strategies for Achieving AYA Goal:

- **Policy and Advocacy**
- **Youth-friendly Services**
- **Life Planning Skills**
 - both in and out of school programs
- **Behavior Change Communication**
 - interpersonal communication (peer educators)
 - folk media, including drama, dance, sports (small groups)
 - social mass marketing campaigns
- **Institutional Capacity**
- **Coordination and Dissemination**



Evaluation Objective

- To determine whether exposure to AYA-supported **integrated programs** resulted in improved ASRH behavioral outcomes among young people aged 17-22 in areas where AYA concentrated their efforts

Was there a “treatment effect” **attributable** to AYA?

Impact Evaluation Design & Analysis

- **Countries:** Ghana, Tanzania, and Uganda
- **Age range of respondents:** 17-22
(unmarried or married in the past 2 years)
- **Post-test only design** intervention-control and self-reported exposure approaches
- **Analysis:** Propensity score matching (PSM) and Instrumental variable (IV) approaches
- **Field Work:** Individual, household and community questionnaires applied Feb-May 2006

Sample Size by Country

(cluster sampling– slight variation by country)

	Male		Female		Total
	Intervention	Control	Intervention	Control	
Ghana	952	628	1,036	800	3,416
Tanzania	492	229	843	336	1,900
Uganda	995	633	933	615	3,176



Results



John Snow, Inc.

Exposure to AYA-Supported Programs

% of Youth Who Were “Highly Exposed” to AYA
(exposed to three or more AYA programs in intervention areas,
by sex and by country)

Ghana		Tanzania		Uganda	
Females	Males	Females	Males	Females	Males
42%	56%	24%	40%	36%	37%

Summary of AYA Impact on ASRH Antecedents

Variable	Females			Males		
	Tanzania	Uganda	Ghana	Tanzania	Uganda	Ghana
High HIV/AIDS knowledge score (spontaneous response)	Positive	Positive	Positive		Positive	Positive
High HIV/AIDS knowledge score (prompted response)						
Believes that condom is protective against HIV		NA			NA	
Positive attitude toward condom users	Positive			Positive		
Very confident in obtaining condom when needed		Positive	Positive			
Could put on condom correctly	Positive		Negative			Positive
Can insist partner to use condom	Positive	Negative	Positive	Positive	Negative	

Summary: Antecedents

- Positive impact on “spontaneous” HIV/AIDS knowledge (all countries)
- Positive impact on attitudes toward condom users and can insist condom use (Tanzania)
- Several unanswered questions:
 - Little or no impact seen on “prompted” knowledge and belief that condoms protect against HIV
 - threshold for that phase of behavior change met already?
 - Positive impact on negotiating condom use in Tanzania and Ghana females; negative impact in Uganda
 - Look at this variable among sexually active youth only?

Summary of AYA Impact on ASRH Behavioral Outcomes

Variable	Females			Males		
	Tanzania	Uganda	Ghana	Tanzania	Uganda	Ghana
Delay of sexual onset			Positive			
Abstains from sex (last 12 months)	Negative	Negative	Positive			Negative
<2 sex partners during past 12 months	Positive		Positive			
Condom use at first sex	Positive	Positive	Positive	Positive		
Condom use at last sex	Positive	Positive	Positive			
Ever used condom with current partner	Positive	Positive	Positive			
Always use condom with current partner	Positive	Positive	Positive	Positive		
Modern contraceptive used at first sex	Positive	Positive	Positive	Positive		
Modern contraceptive used at last sex	Positive	Positive	Positive			

Conclusions: Behavioral Outcomes

- Strong positive impact on females in most/all countries for partner reduction, condom use, and contraceptive use
- Positive impact on males observed in Tanzania (condom/contraceptive use at first sex; consistent condom use)
- Elsewhere impact on males was mostly insignificant
- Limited positive impact on delay of sexual debut (Ghana females)
 - due to age range of respondents, short time of interventions, and high starting values?
- Mostly negative impact on abstinence
 - due to age range of respondents, short time of interventions, high starting values, and life cycle issues?

Conclusions: General

- Results from all countries showed ***strong evidence of significant positive treatment effects of AYA*** on several variables

Overarching Conclusions from the Study

- Small but important impact observed on antecedents
- Consistent impact detected on condom and contraceptive use among females
- Less impact observed among males
- Less or negative impact on sexual debut and abstinence

Implications and Recommendations

- Results suggest that a comprehensive, scaled-up, multi-component approach such as AYA's can be effective in improving some key ASRH outcomes
- Future ASRH programs could benefit by replicating AYA-supported interventions associated with successful impact
 - HIV/AIDS knowledge
 - self-efficacy
 - condom use and contraceptive use
- Future interventions would need to strengthen areas with lesser impact
 - Males
 - Sexual debut/abstinence
 - Partner reduction

Questions?

Full Country Reports and synthesis report will
be available at www.jsi.com

Thank you!

