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MULTISECTORAL APPROACH TO EMPOWER ADOLESCENT GIRLS: ADOLESCENT GIRLS INITIATIVE – KENYA (AGI-K)

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CEDIL Webinar
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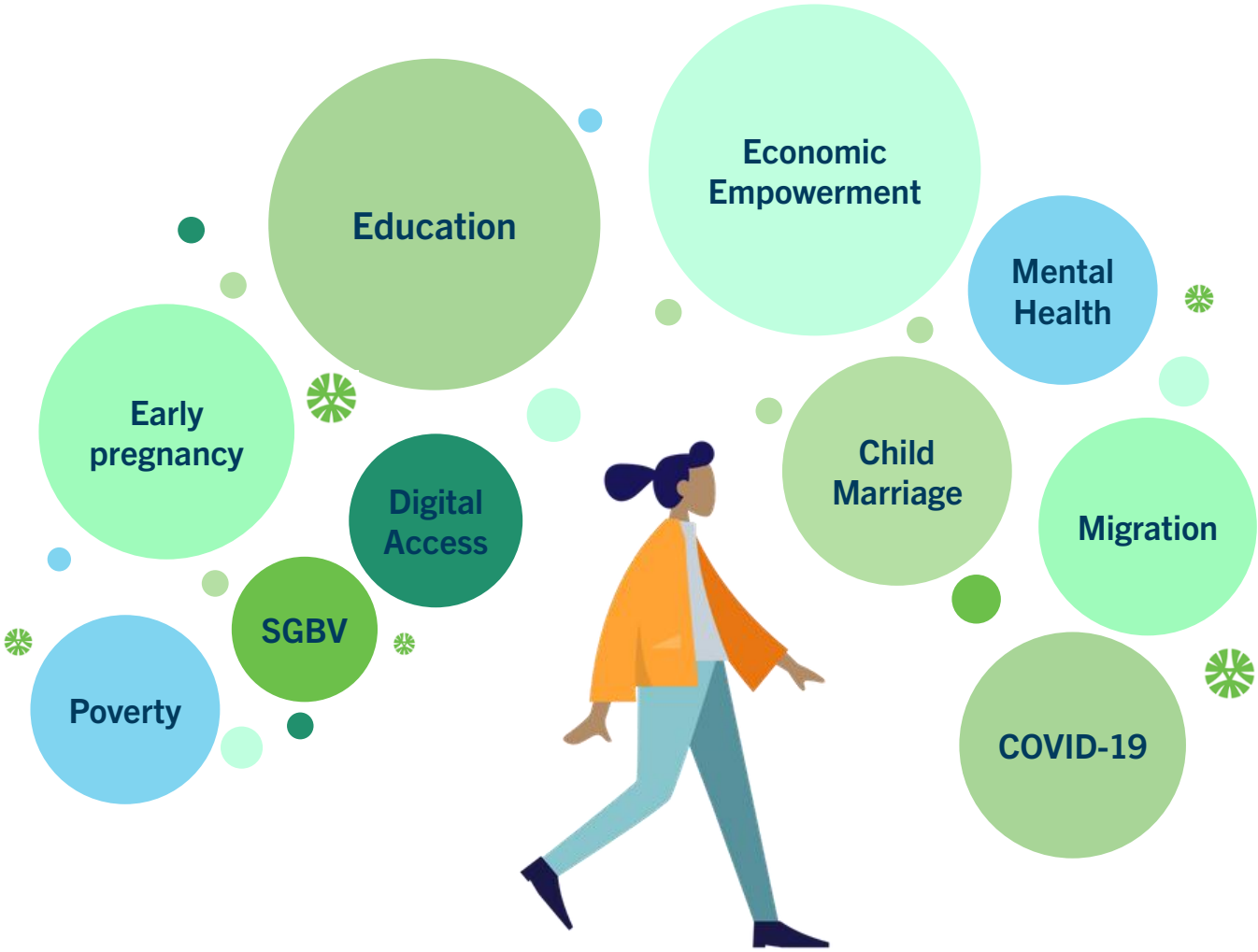

Why a multi-sectoral approach?

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Adolescence is a period of dynamic development: brain, physical, social

*"The **most powerful actions for adolescent health and wellbeing are intersectoral, multilevel, and multi-component**: information and broadband technologies present an exceptional **opportunity for building capacity within sectors and coordinating actions between them.**"*

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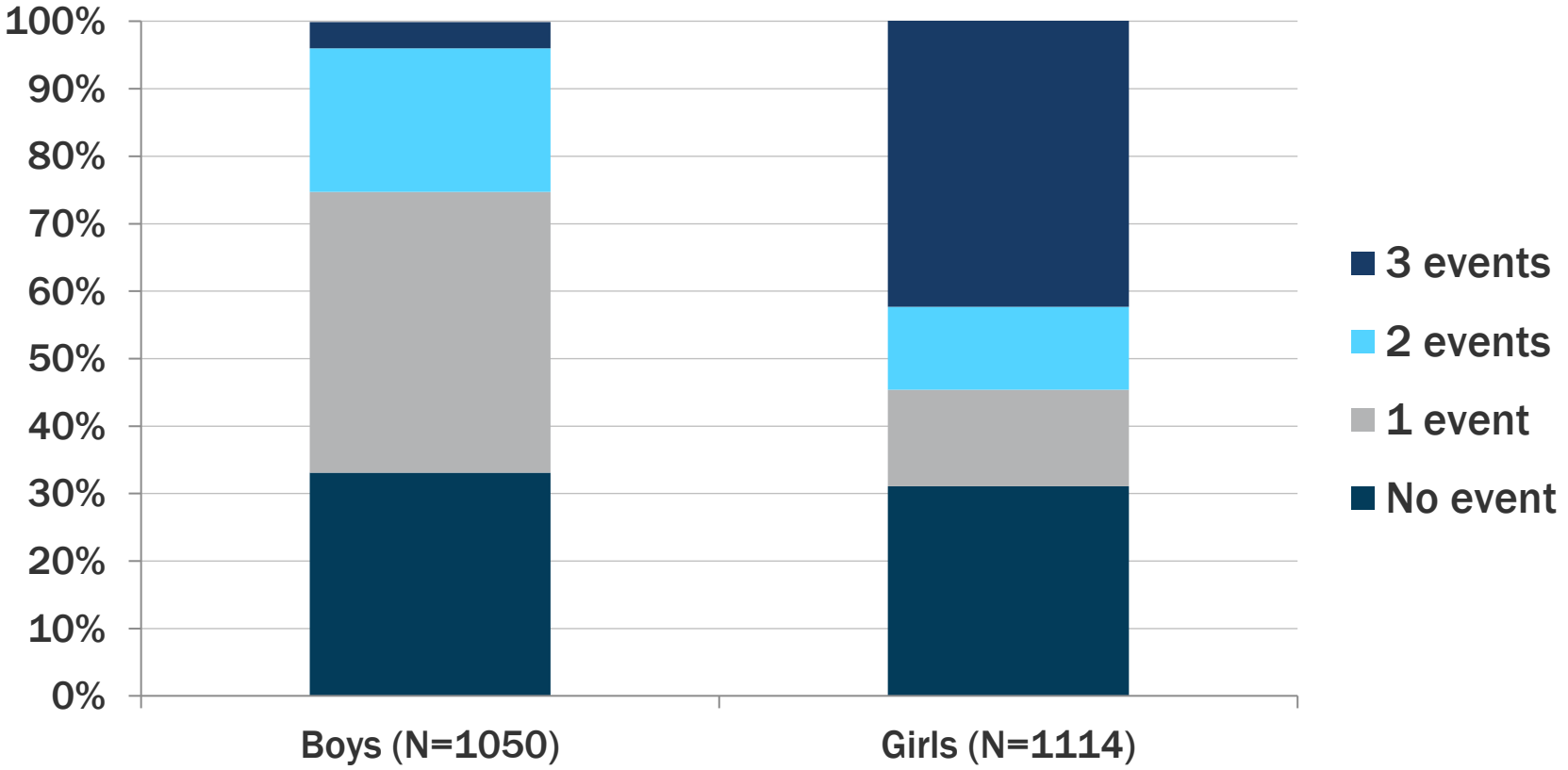
Number of life events (school leaving, sexual initiation, and marriage) among Malawian adolescents* by ages 16-19



By ages 16-19, more than 40% of the girls had experienced all three transitions (leaving school, sexual initiation, and marriage), compared to fewer than 5% of boys at the same age.

*resident in Balaka and Machinga districts, 2007

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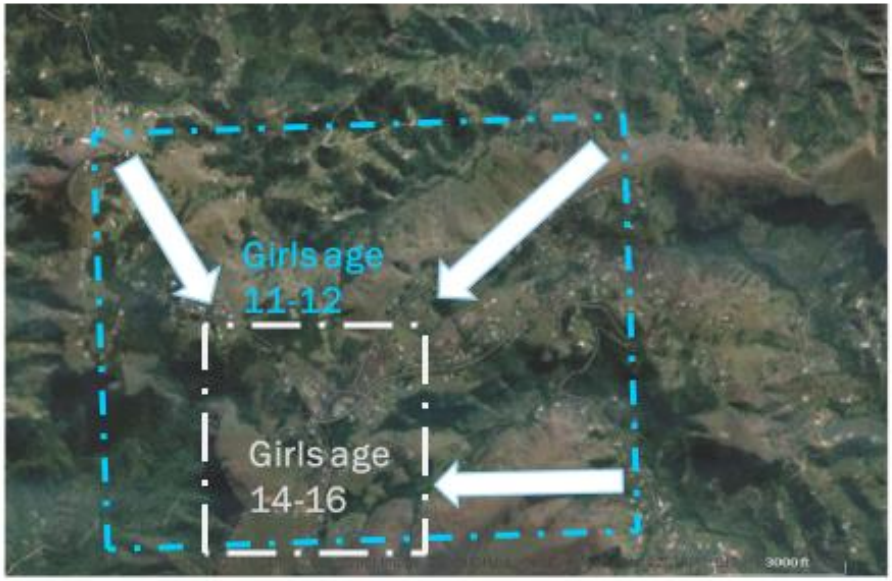
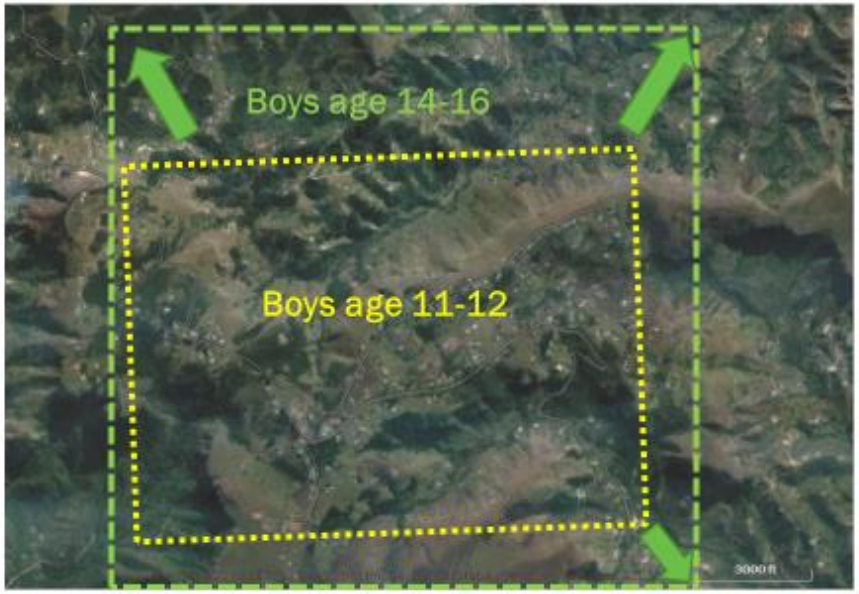
Girls' Worlds Shrink at Puberty Compared to Boys

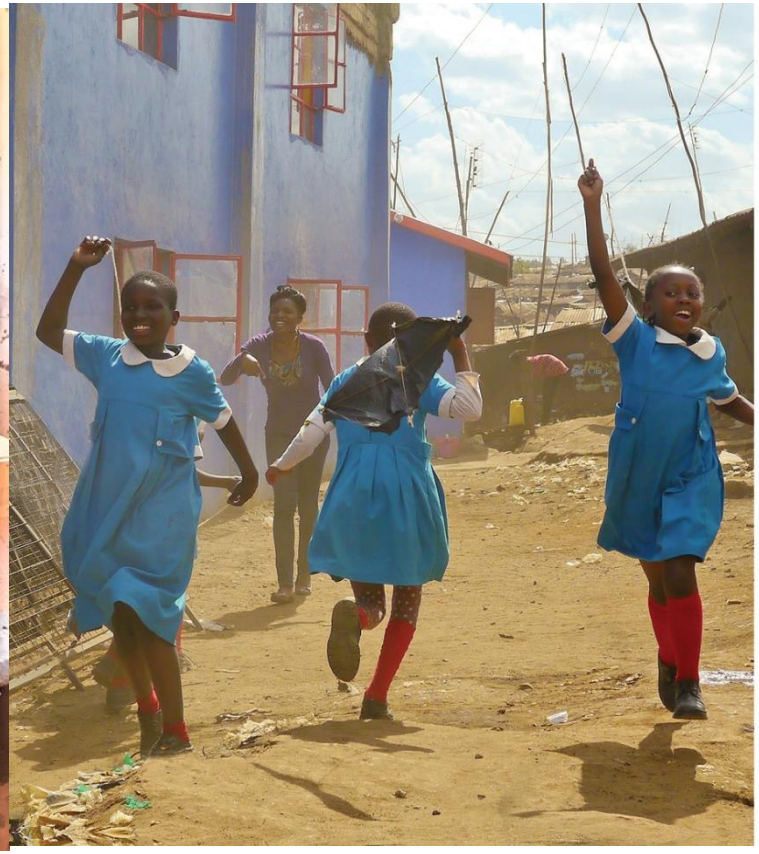
Differential spatial access depicted by 4 sex-age groupings in one community





Source: Kelly Hallman, Nora Kenworthy, Judith Diers, Nick Swan, Bashi Devnarain. 2015. "The Shrinking World of Girls at Puberty: Violence and Gender-Divergent Access to the Public Sphere among Adolescents in South Africa," ***Global Public Health:*** *An International Journal for Research, Policy and Practice,* Vol 10(3): 279-295. http://dx.doi.org/10.1080/17441692.2014.964746

Adolescent Girls Initiative – Kenya



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UKaid
from the British people

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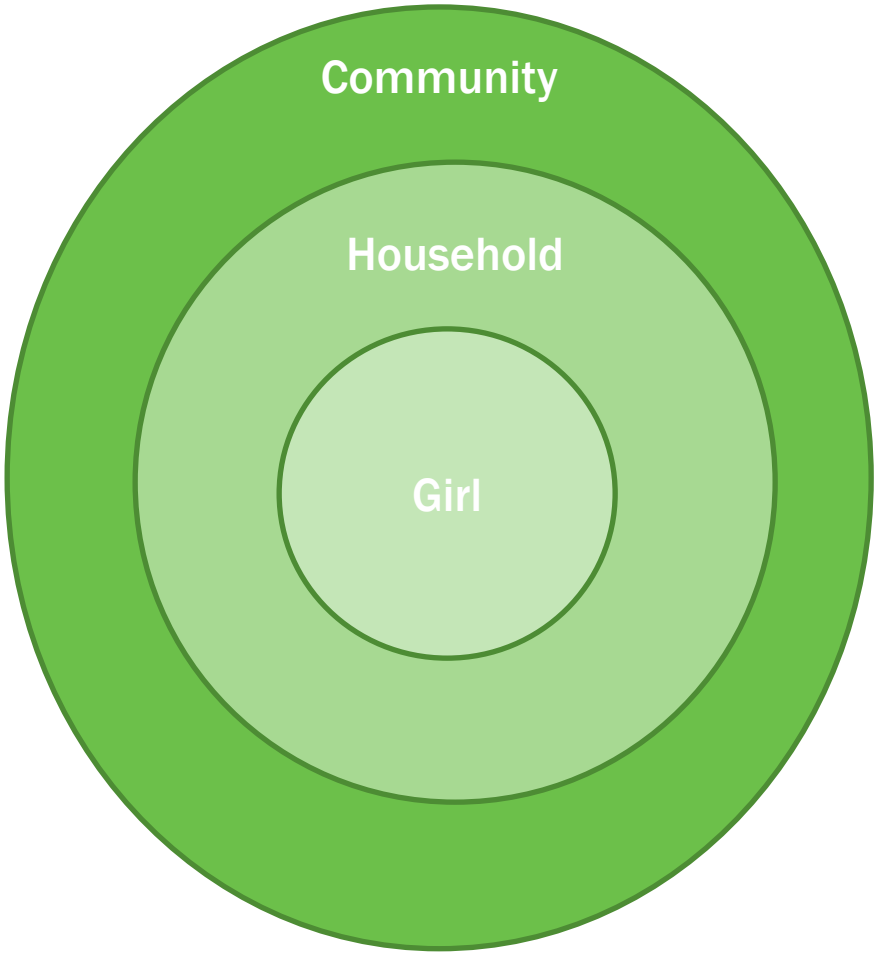
What did we want to learn?

- What package of multi-sectoral, multi-level interventions has impact for adolescent girls?

- Can early interventions improve longer-term outcomes?



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Intervention Overview

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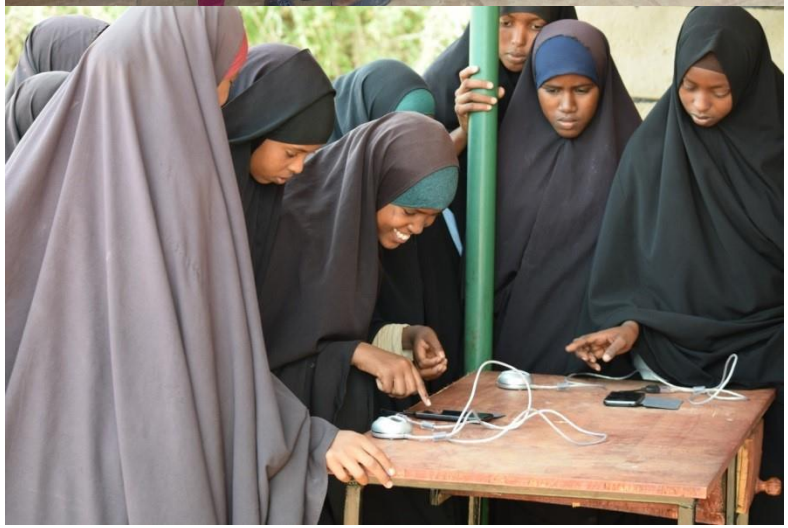
- Violence Prevention
  - —Community Conversations & Contracts
    - Key stakeholders in community selected
    - Bi-monthly discussions/agreement on a “contract”
    - Topic will focus on “value of girls”
    - Fund for implementation of community projects
- Education
  - —Conditional Cash Transfer
    - Cash transfer to household (twice per term)
    - Fees + incentive to school (once per term)
    - Kits to girls (once per term)



Intervention Overview

- Health
  - —Safe Spaces + Health/Life Skills Education
    - Girls groups segmented by age/schooling status
    - Led by female mentor in the community
    - Covers wide range of topics on health & life skills
- Wealth Creation
  - —Financial Education + Savings
    - FE curriculum integrated into safe spaces groups
    - Wajir – homebanks + annual savings incentive
    - Nairobi – formal savings accounts + annual savings incentive

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Intervention Arms

ARM 1

Community engagement

ARM 2

Community engagement + Education Cash Transfer

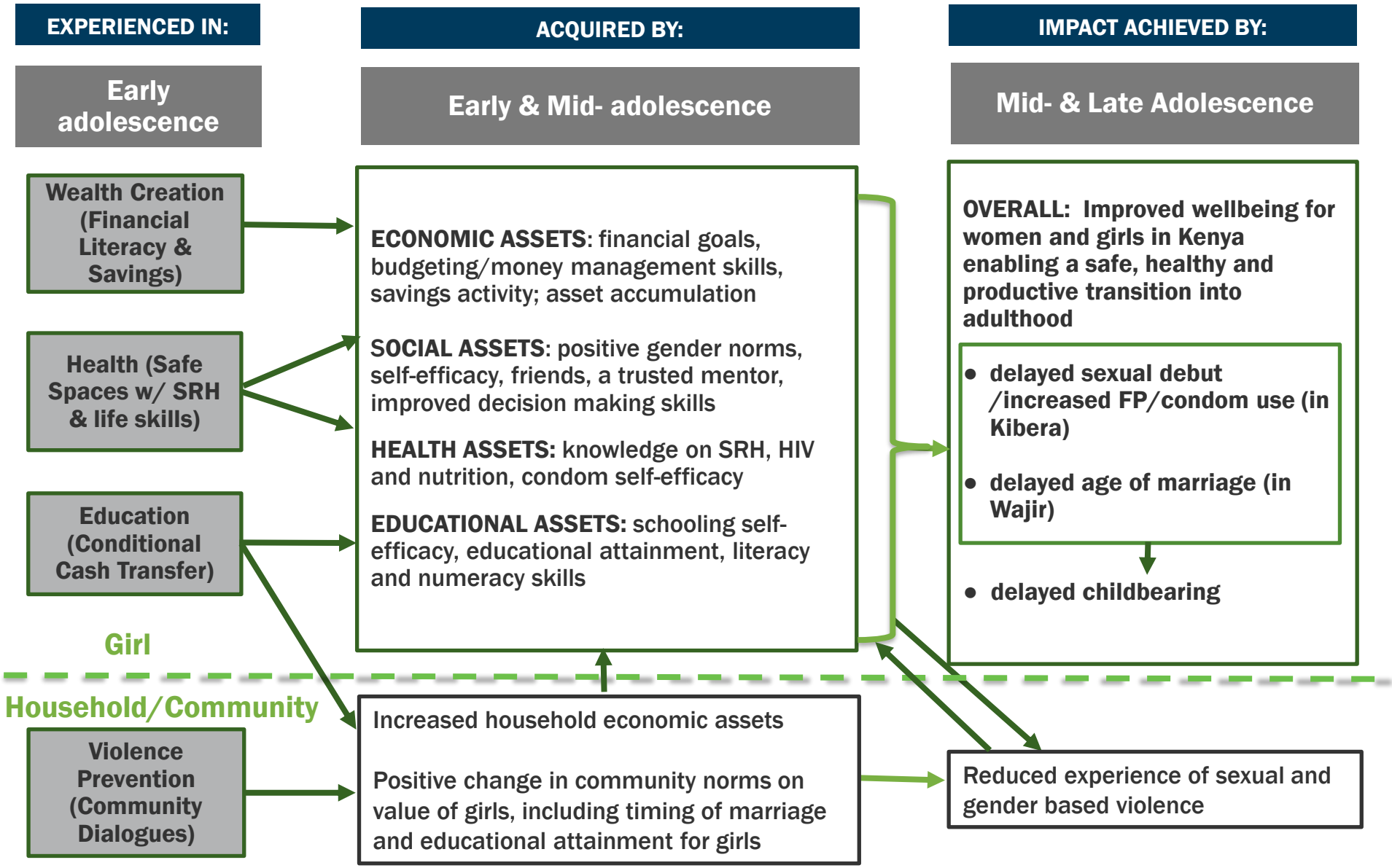
ARM 3

Community engagement + Education Cash Transfer + Health/Lifeskills

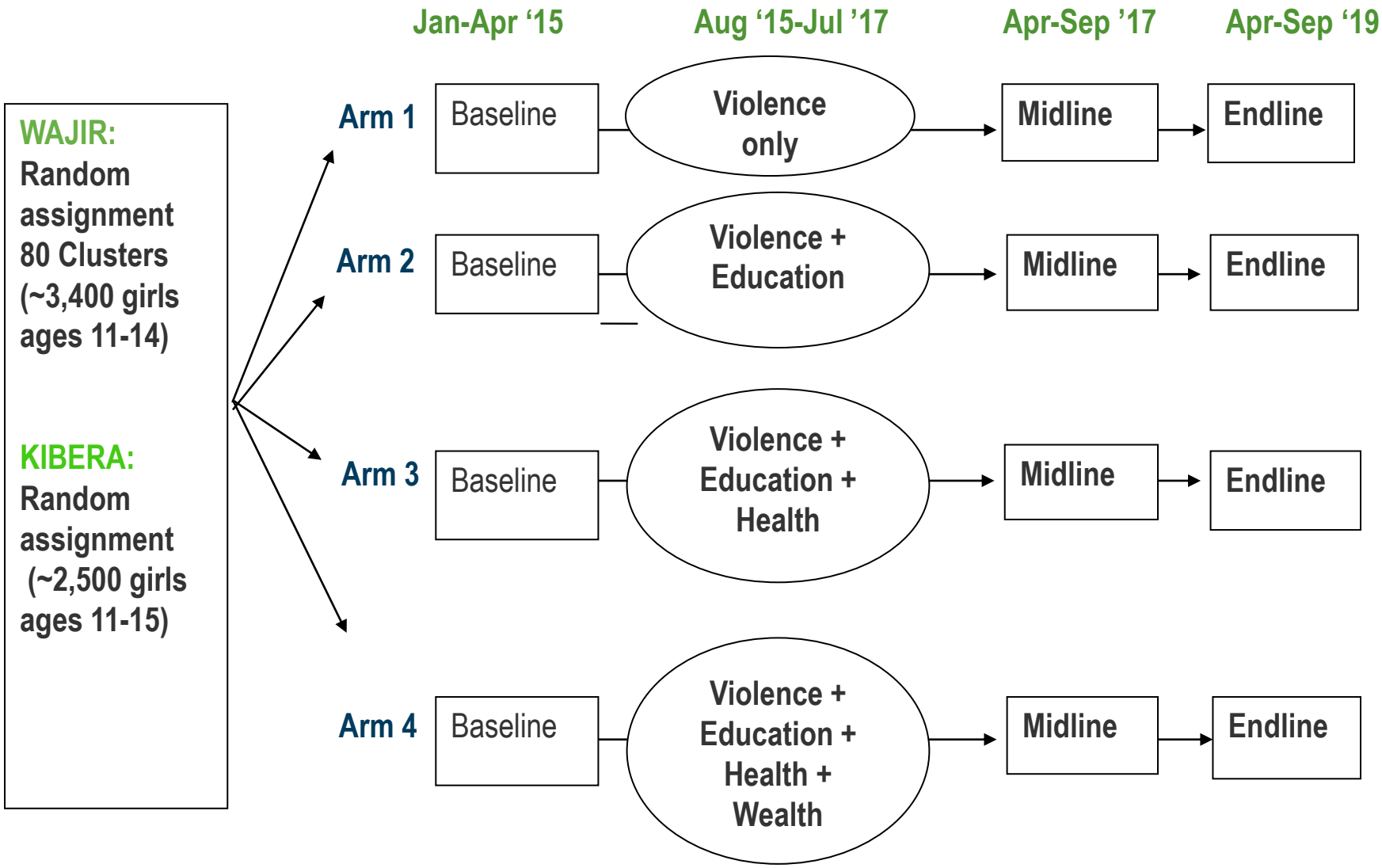
ARM 4

Community engagement + Education Cash Transfer + Health/Lifeskills + Wealth

Theory of Change



Randomized Controlled Trial Design



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ENDLINE (2 years post intervention) + FOLLOW UP (4 years post intervention) RESULTS

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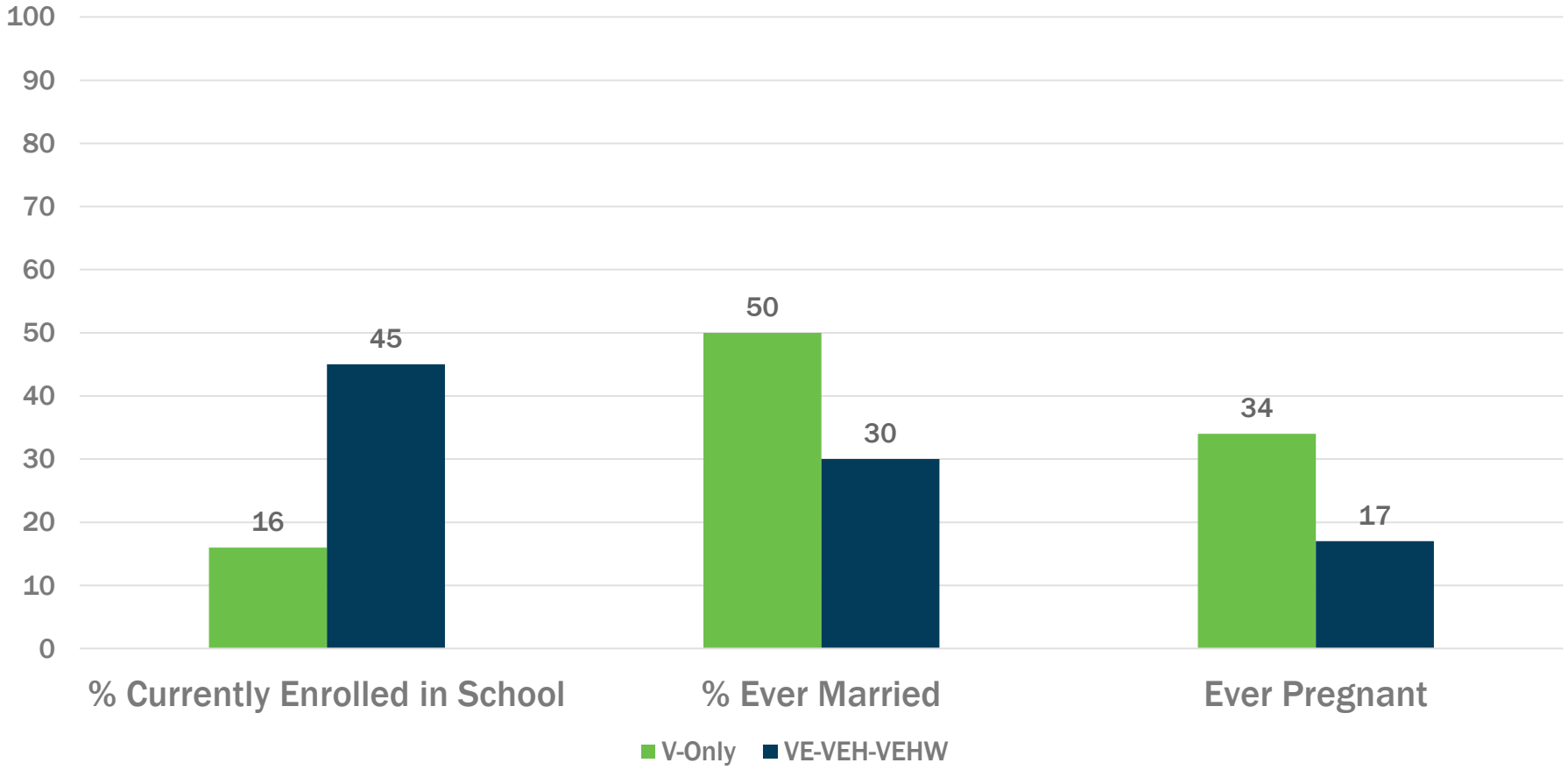
Wajir: ↑ in school enrollment, ↓ in early marriage and pregnancy (2 yrs)



*Among out of school girls at baseline

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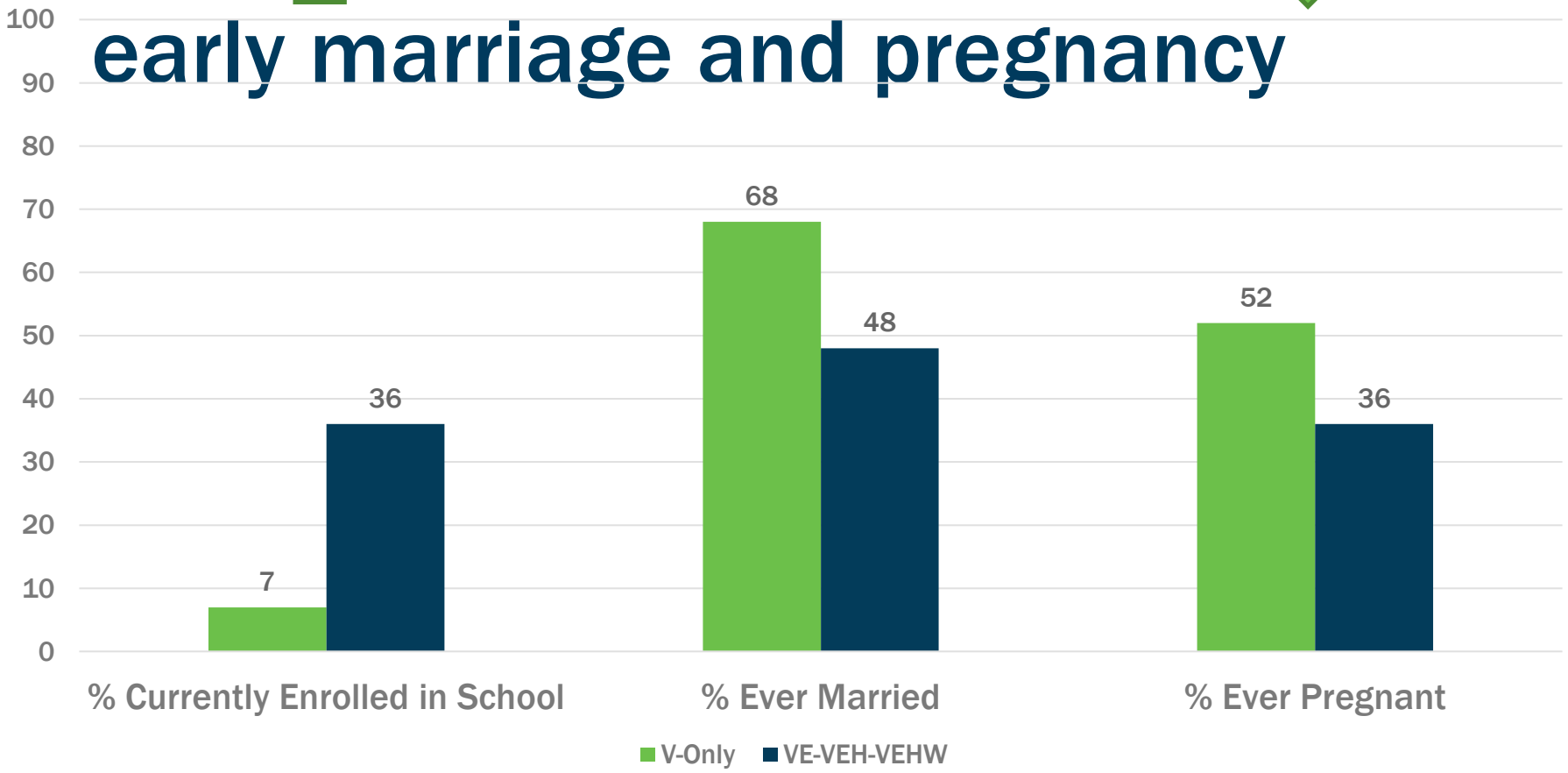
4 years after the program, there is still ↑ in school enrollment, ↓ in early marriage and pregnancy



*Among out of school girls at baseline

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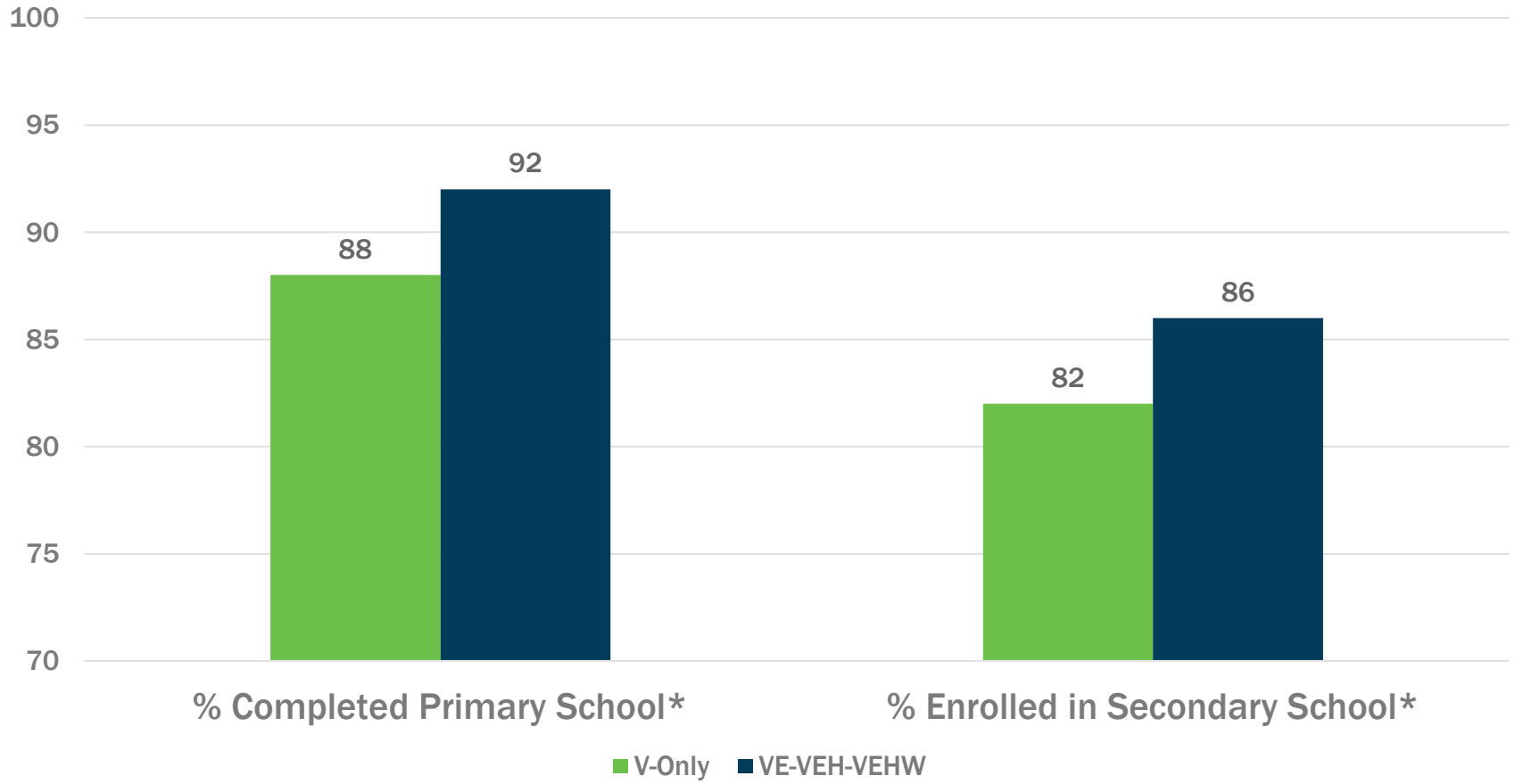
Kibera: ↑ In Primary School Completion and Secondary School Enrollment (2 yrs)



**p < 0.01; *p < 0.05; †p < 0.10

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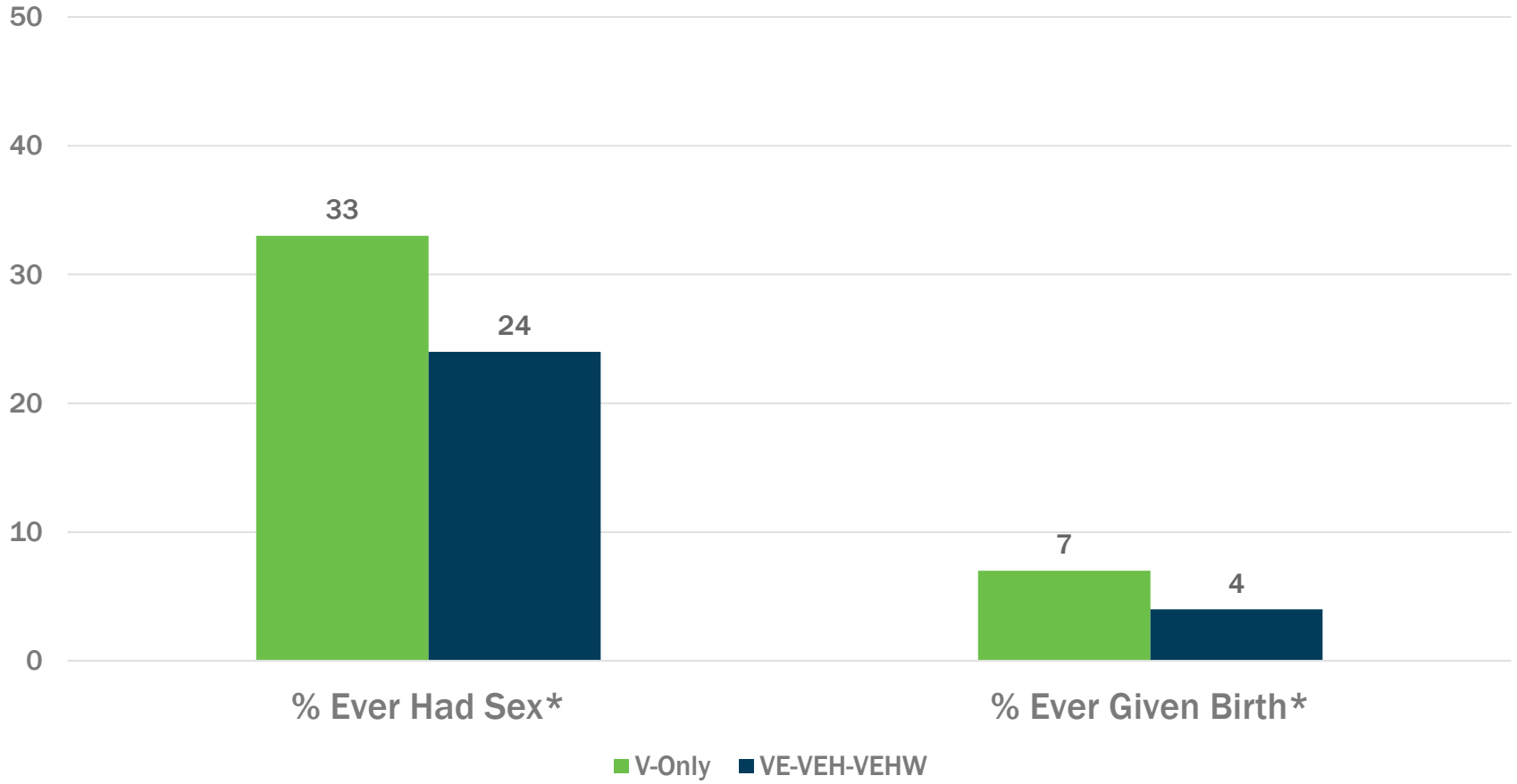
Kibera: ↓ In Sexual Debut & Pregnancy (2 yrs)



**p < 0.01; *p < 0.05; †p < 0.10

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Adolescent Girls Empowerment Program

- Safe spaces groups
- Health Voucher
- Savings Account

- No impact on
  - Education
  - Pregnancy
  - Contraceptive Use

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Program Implications

1. **Working across sectors and at multiple levels of a girl's eco-system is important**

2. **Addressing underlying economic constraints at household level opens up change for girl-level outcomes**

3. **Girls empowerment – life skills with both SRH and economic content – is critical**

Reflections on Burchett et al paper

- Individual level interventions will not address structural problems
- Diversity of experience/life stage and context for adolescents is critical
- However, cannot focus on adolescent use of contraceptives as the 'end game'
  - Will not achieve the desired outcome
  - Might legitimately not be the desired outcome

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