

## Policy Brief: Social protection can reduce HIV risk behaviours among adolescents

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### Research Questions:

1. Which form of social protection (i.e., Cash, Care or Combinations) reduces HIV risk behaviour?
2. How does cash compared to care social protection reduce HIV risk behaviours?
3. Is social protection effective for those adolescents who are most at risk?

### Definitions:

**Structural drivers:** food insecurity, informal housing, AIDS-affected and community violence

**Psychosocial Problems:** school dropout, substance use, behaviour problems, mental health distress

**Cash Social Protection:** cash transfers, free school, books, feeding, transport, uniform, food garden, parcel or kitchen

**Care Social Protection:** positive parenting, teacher social support, home based care, school counsellor

### The Research:

- Prospective observational study with initial 3515 adolescents aged 10-17 years (< 2.5% refusal, 96.8% retention rate), 2009 – 2012.
- Random samples were taken from two urban and two rural health districts (which > 30% antenatal HIV prevalence) in the two South African provinces, Mpumalanga and the Western Cape.
- Using gender-disaggregated analyses, longitudinal mediation models were tested for potential main and moderating effects of social protection.

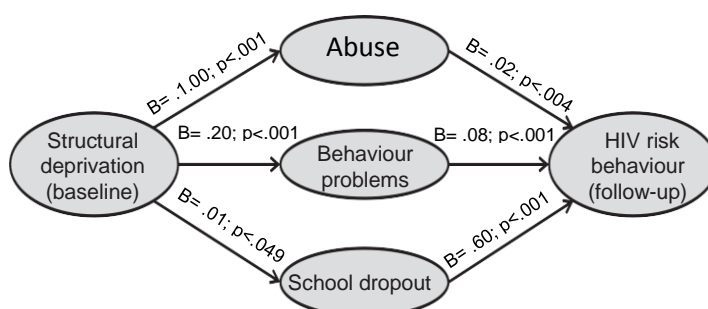
**Finding 1:** Overall, there is a high prevalence of structural deprivation: 47% are exposed to violence, 32% are AIDS-affected, 31% live in informal housing, and 25% did not have enough food.

**Finding 2:** Structural deprivation is associated with an increase in psychosocial problems which, in turn, lead to increased adolescent risk behaviours, in both boys and girls (Figure 1).

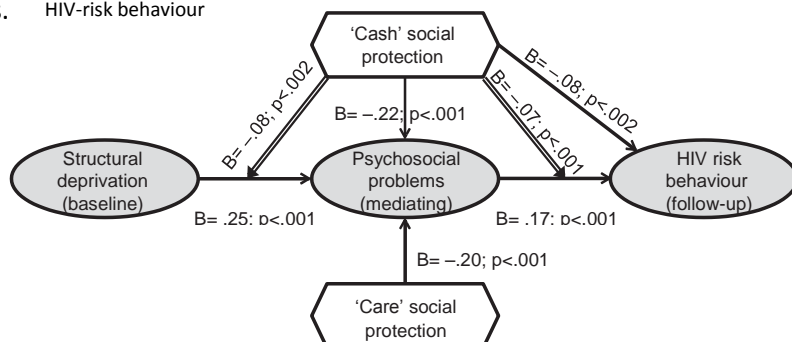
**Finding 3:** Cash social protection reduces the risk of psychosocial problems as well as HIV risk behaviours. Specifically, it reduces the impact of poverty on HIV risk behaviours. Care social protection reduces psychosocial problems (Figure 2).

**Finding 4:** Social protection has positive effects on adolescent HIV-risk behaviours. Social protection is particularly effective for adolescents at highest HIV risk due to structural and psychosocial drivers.

**Figure 1:** Adolescent girls: Effects of psychosocial factors on associations between structural deprivation and subsequent HIV risk behaviour among adolescents



**Figure 2:** Adolescent girls: Effects of social protection on structural risk pathways to HIV-risk behaviour



### Policy Message:

- Structural deprivation puts adolescents aged 10 – 17 in South Africa at higher risk for HIV-infection through increased psychosocial problems.
- Cash and Care social protection reduce the risk for HIV-risk behaviour and psychosocial problems for children in highly deprived areas.
- Provision of unconditional social protection to adolescents can reduce a range of psychosocial problems and HIV risk behaviours and reaches those who are in most need of HIV prevention.