









Policy Brief: Child cash transfers halve HIV risk behaviours for adolescent girls.

<u>Citation:</u> Cluver, L, Boyes, M, Orkin, M, Pantelic, M, Molwena, T, Sherr, L. Child-focused state cash transfers & adolescent HIV-infection risks: A prospective multi-site study in South Africa. The Lancet Global Health, December 2013. 1:e362-70

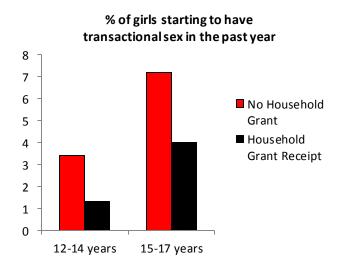
The Question: Do government-provided, national child-focused cash transfers reduce teenage HIV-infection risks?

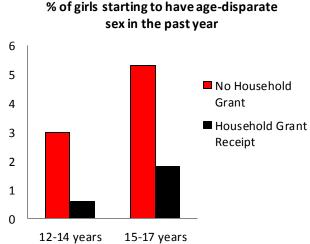
Why is this important?

- A million youth in sub-Saharan Africa are infected with HIV annually. Girls are at up to 3x higher risk.
- Transactional and age-disparatesex('sugardaddies')are a key cause of HIV-infection.
- Systematic reviews show limited effectiveness of behavioural HIV-prevention programmes. Cashtransfers to alleviate poverty may be helpful.

The Research:

- Longitudinal survey, 3515 children aged 10-18 (<2.5% refusal, 96.8% retention rate), 2009-12
- Stratified random sampling of entire census enumeration areas in rural & urban sites in two South African provinces (Western Cape, Mpumalanga)
- Propensity score matching to replicate randomised controlled trial conditions, additional checkin multivariate logistic regression.
- Finding 1: Child-focused cash transfers reduce by half the risk of incidence and prevalence of transactional sex for teenaged girls. (sex in return for money, school fees, food or shelter)
- Finding 2: Child-focused cash transfers reduce by two-thirds the risk of incidence and prevalence of agedisparate sex for teenaged girls (having a sexual partner more than 5 years older)
- Finding 3: Cash transfers did not reduce multiple partners, unprotected sex or sex whilst drunk or using drugs. No consistent effects were seen for adolescent boys.





Policy messages:

- Cash transfers to poor households allow teenage girls to make safer sexual choices. They reduce reliance on 'sugar daddies' to provide basic needs
- Currently, child support and foster child grant reach around 70% of eligible children. Full scale-up could prevent 77,000 new cases of transactional sex in South African girls each year.
- Cash transfers do not reduce all HIV-infection risks, and must be part of combination prevention approaches

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