

# THE COST OF REACHING THE MOST DISADVANTAGED GIRLS

TECHNICAL  
REPORT

PROGRAMMATIC EVIDENCE FROM  
EGYPT, ETHIOPIA, GUATEMALA, KENYA,  
SOUTH AFRICA, AND UGANDA



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# PREFACE

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The inspiration for this report was the rising interest in investing in the poorest girls in the poorest communities as a vital strategy for interrupting intergenerational poverty, promoting positive health (maternal, child, HIV reduction), and achieving fertility goals. Strong justice and equity dimensions are also associated with this interest in adolescent girls. Many girls are subjected at an early age to severe human rights abuses, and as a group they are seriously underrepresented in conventionally configured development efforts—youth programs, secondary education, economic empowerment initiatives, HIV-prevention programs, and social participation.

Adolescent girls are rarely mentioned in policy documents and the extent of their participation in programs is usually measured in relation to negatives averted (e.g., elimination of child marriage, reduction of unplanned or ill-timed pregnancies, or diseases prevented or mitigated). Whereas it is important to support girls in protecting themselves, insufficient focus has been placed on where girls “need to be” by specific ages, both in terms of human rights and development goals. A widely achievable vision of their wellness or wholeness has not been driving programs.

The five programs described here have identified key subpopulations of adolescent girls, defining positive health, social, and economic assets to be imparted “ahead of the curve,” early enough to reduce vulnerability to the worst outcomes and set in motion a “virtuous cycle” as girls acquire and deploy core capabilities. These programs (all partnerships between the Population Council and government and civil-society actors in poor countries) are creating measurable differences at the level of the girl, and over time (because of the typically high proportion of eligible girls engaged in the program) differences visible at the community level translate into longer-term indicators, such as delayed age at marriage.

While there has been enthusiasm for these investments, there is also a good deal of curiosity about them. One question raised, “How much will these investments cost?” is framed against an unconscious belief that current practice is cost-effective and that innovation is usually “costly.” Another question is whether existing programs could simply be “tweaked” to reach marginalized young female populations.

To answer questions about the mechanics of mounting multidimensional interventions to reach these girls and determine the respective costs, several years ago five Population Council programs began working closely with analyst Jessica Sewall-Menon. Program managers gathered information, not to provide a comparison among these programs, but to provide ranges of values (across a number of geographic areas) with respect to: 1) initial outlay (which allowed comparison with other kinds of outlays for reaching other kinds of populations), 2) the costs by category of expenditure, 3) the cost per girl per annum, and 4) the cost per completed programmatic “dose.”

Community-based girl platforms/safe space programs are “black boxes” to many. This paper contains enough programmatic detail so that readers can understand the strategic vision of each of

the programs as well as the tasks they tackle on “Monday mornings”—conducting recruitment, building staff, and organizing and delivering content. We identify categories of activity so that programs can be presented in a parallel fashion (though they are not comparable in the formal sense, given the difference in context and often the program’s level of ambition).

The data presented in this paper suggest that while it is not costly to develop strong community-based platforms for girls, it is clearly very costly *not* to do so. In all the communities served, there was nothing else reaching girls, even by those services that represented themselves as being youth-centered or prioritizing vulnerable populations. Giving girls a weekly girl-only space in the community, which is a social asset in itself, provides girls with mentoring, social support, physical security, new skills, and a sense of validated belonging to their society. These platforms are also an asset to the community because they are a means through which other content (e.g., new financial products, health vouchers) can be delivered to girls.

During the past ten years, we’ve moved from zero generation (one of tentative engagement) to initial pilots and now scale-up. These girl programs are reaching the scale and experience to test the relative effectiveness of different inputs—greater or lesser amounts of mentoring, sequencing of content, and so forth. Once there is more activity, one can look at the comparative costs in relation to specific outcomes (such as reducing HIV infection rates). Recent analyses of cash transfer programs (conditional and unconditional) have elicited a great deal of interest in these kinds of comparisons. Reaching girls directly with asset-building is valuable, but how can this be done at scale? A number of these programs are already scaling: *Biruh Tesfa* reaching 50,000 girls, Kenya’s savings program extending to a widening generation in many more schools, *Siyakha Nentsha* expanding to the entire district of Umbumbulu, *Abriendo Oportunidades* expanding throughout the Mayan Highlands, and *Ishraq* adding longer-term livelihood options in its 30 Upper Egyptian villages. Programs go far beyond proof of concept. Once “basic” girl-program practice is widely accepted, these programs can be related to some of the new mass interventions, such as the historic fielding of 33,000 female community health workers in Ethiopia. Imagine if each of these community health workers was given a resource to start a small girls’ club in her community?

When we wrote the first draft of this paper, it was notable that when using relatively simple costing techniques the programs sometimes became slightly more costly per capita in generation two. The reasons for this are interesting. In most settings, because “nothing” reaches these demographic subgroups, once a structure exists that engages the girls, the program organizers see a comparative advantage in expanding rather than narrowing what they are delivering. In generation two, they are typically adding more content (such as financial literacy) while also strengthening the delivery apparatus to ensure sustainability. In second- and third-generation programs, increased emphasis is placed on harvesting “the gains” of the newly created organizations, delivery platforms, and enthusiastic girl participants as they acquire skills and provide a cascading leadership resource.

Work with adolescent girls generates an intergenerational process. In addition to the measured change of specific cohorts of girls reached, the programs have the potential to create a longer-term social infrastructure at the community level through which girls can:

- Establish their identity
- Know and claim their rights
- Aggregate demand

- Create access and ways to capture existing private and public resources
- Evolve new development content and more relevant messages
- Synergize existing investments (given that there are such strong linkages between health, social, and economic needs)

As these programs evolve, some of this vital content could be delivered through current supply systems, such as Ministries of Health, Education, and Youth. Some content might be best offered through community-based platforms. These female platforms are a potentially huge new resource for democratization and social participation. Establishing permanent places where adolescent females of different social categories can meet with peers provides an important new governance structure—a place where excluded young women can be given voice and agency, where they can press for fairer practices, changes in laws, improvement in the timing, staffing, and allocation of services, and making government accountable to its citizens.

But back to our modest ambitions. Read this as a transparent set of programs that are pursuing similar goals, succeeding and expanding in their diverse environments. They are a “set” in the sense that they are successfully tackling vital excluded sub-populations of girls.

I want to thank our analyst, Jessica Sewall-Menon, for her prodigious persistence among other things, and the busy program staff who dug so deeply to move this information forward.

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# INTRODUCTION





The “most disadvantaged” adolescent girls are the poorest girls from the poorest communities. They suffer from human rights abuses, lack education and economic opportunity, are affected by HIV/AIDS, and have poor reproductive and maternal health outcomes. These girls require investment that is distinct and separate from that provided to other adolescent groups. To effectively reach these girls so that they can receive critical services such as safe gathering spaces, friendship, life skills, financial literacy, financial education, savings accounts, and reproductive health knowledge, they must be targeted as a distinct segment.

It has been observed through programmatic experience that the most disadvantaged adolescent girls are not always reached effectively through mainstream development and youth programs (LISGIS 2009; Lloyd 2005; Mekbib, Erulkar, and Belete 2005; Macro International 2011; Population Council 2006 and 2009; United Nations 2009; Weiner 2010). Though these girls are the population segment that will often benefit most from increased reproductive health knowledge, financial literacy, and a second chance at education, without appropriate targeting and designing of programs specific to their needs, evidence suggests they will not be reached. Not only will these girls not meet their full economic potential, but neither will their children, communities, or countries.

Investment in the most disadvantaged girls does not have to cost a lot to realize positive outcomes for girls and benefits for whole communities, especially once effective programs have been established and expanded. Thus it is important to invest heavily in building the capacities of local partners and governments to deliver and scale-up low-cost, well-targeted programs.

This report is intended to assist programmatic officers, technically involved donors, and policy analysts in making program and policy decisions on investments in adolescent girls. It does so by providing an understanding of the appropriate expectations and frameworks through which to consider the costs of adolescent girls’ programs. It draws upon current literature on investments in the most disadvantaged girls and highlights case studies from diverse second-generation girl platform programs in Egypt, Ethiopia, Guatemala, Kenya, South Africa, and Uganda. A sample of programmatic costs is identified in the case studies—each designed to equip the most disadvantaged girls with safe gathering spaces, friendship, life skills, financial literacy, financial education, savings accounts, and reproductive health knowledge. Each program’s unique features and components are described to provide a context for the presented costs.<sup>1</sup> Average annual costs of individual program components, average annual costs per girl beneficiary, and unit costs of interest are presented.

A cost-benefit analysis or evaluation of the cost efficiency of girl platforms for disadvantaged girls is not presented in this paper. An investment is efficient if the marginal social benefit of the last unit of that investment just equals its marginal social cost. *Thus, to truly gauge the cost-effectiveness or efficiency of a program, we require longitudinal data on the impact of the program on behavioral change, labor entry and earnings, reduction in HIV/AIDS, reduction in fertility, and so forth, over a long duration* (Knowles 2003). Because longitudinal impact data is not yet available for programs for which we are collecting costs, we cannot calculate the social benefits and thus cannot calculate the cost effectiveness or efficiency of the programs. Furthermore, limited data is available from which to compare a variety of programs for youth and to draw sound conclusions. However, we can make qualitative inferences about cost effectiveness, or at minimum the payoff of investments in girls, using a sample of girl platforms based on identified short-term outcomes.

We conclude with a discussion on improving the availability of cost data on adolescent girl programming in order to provide richer data for future analysis. A combination of improved longitudinal monitoring and evaluation and systematic data collection, as well as documentation of programming costs, will allow for deeper understanding of the needs of the most disadvantaged girls. This, in turn, will help future investments become more cost-effective in the evolution and scale-up of platforms for adolescent girls.

# 1. INVESTING IN GIRLS IS THE RIGHT THING TO DO AND SMART ECONOMICS



## 1.1 Who are the most disadvantaged girls?

Adolescent girls are a distinct segment of the population that is often excluded from participation in mainstream education and youth programs. Among adolescent girls, there are additional subsets of “most disadvantaged,” “marginalized,” and “socially excluded.” These girls tend to be more difficult to reach than their less marginalized counterparts and as such tend to miss out on critical investments in adolescents.

Disadvantaged girls are vulnerable because they lack educational opportunities and literacy, are married and have children young, belong to minority and ethnic groups, and live away from their parents in marginalized rural or urban slums. Such girls grow up to be marginalized and disempowered women who raise similarly disadvantaged daughters.

**TABLE 1 Illustrative contrasts between the better-off girl and the disadvantaged girl<sup>a</sup>**

Better-off girl	Disadvantaged girl
Literate	Illiterate
Enrolled in and attends primary and secondary school in a grade appropriate for age	Does not attend school, dropped out after primary completion, or had less than four years of schooling
Fluently speaks, reads, and writes dominant/national language	Fluently speaks indigenous language but does not speak, read, or write national language
Belongs to an ethnic/religious majority	Belongs to an ethnic/religious minority
Family supports her waiting for marriage and childbearing until after school completion	Family arranges for an early marriage between age 12 and 18, after which childbearing is likely
Lives with parents in a permanent home	Lives away from her family and/or moves frequently
Lives in an urban area in close proximity to a school	Lives in a rural area or an urban slum not in close proximity to a school
Has parents that care for her	Has a sick/disabled parent or family member (including HIV-affected)

<sup>a</sup> DHS Adolescent Data Guides, produced by the Population Council, disaggregate data along the most conventionally collected parameters of inclusion: schooling, family, living arrangements, and marital and child-bearing status.

**SOURCE:** Population Council. 2009. “The Adolescent Experience In-depth: Using Data to Identify and Reach the Most Vulnerable Young People.” Country Reports. New York: Population Council. <<http://www.popcouncil.org/publications/serialsbriefs/AdolExpInDepth.asp>>.

A disadvantaged girl could be affected by harmful traditional practices including female genital mutilation/cutting or child marriage and early childbearing. She could belong to a socially excluded and vulnerable group such as an ethnic, religious, or linguistic minority; an indigenous or nomadic community; or a population living in a remote areas or an urban slum. She could be living in an area that is insecure and vulnerable to natural disasters or be at increased risk of the effects of climate change, armed conflict, gender-based and generalized violence, and HIV infection. She may not be protected by the household where she lives, such as girls who are in institutions, living apart from both parents, living in violent households, living as domestic laborers, trafficked or living on the street, or living in refugee camps or internally displaced populations without family. She could be excluded from education because of poverty, lack of safety and security, disability; because she has to care for family members with HIV; or because family circumstances force her to leave school early. She could be living with physical disabilities (UNIATF 2007). Poverty, gender, ethnicity, and other factors intersect to create segments of socially excluded girls.

**TABLE 2 Illustrative cases of how excluded populations of girls are disadvantaged across geographical locations<sup>a</sup>**

Country	Disadvantage
Turkey	43% of Kurdish-speaking girls from the poorest households have fewer than two years of education.
Nigeria	97% of poor Hausa-speaking girls aged 17–22 have fewer than two years of education, compared with the national average of 6%; only 12% of primary-school-age Hausa girls attend primary school.
Egypt	Children from the wealthiest households are 28 times more likely to be in pre-school or lower primary school than children from the poorest households.
Guatemala	The nonindigenous Spanish-speaking population of girls and women do better than individual girls and women on a number of parameters: <ul style="list-style-type: none"> <li>• Nonindigenous women are more than twice as likely as their indigenous counterparts to give birth in a public health facility with trained personnel.</li> <li>• Average years in school range from 6.7 for Spanish speakers to 1.8 for Q’echi speakers. Girls of Indian ethnicity from poor households have primary school attendance rates of 60% compared with the national average of 82%, and they are more than three times more likely to have fewer than two years of education.</li> </ul>
Egypt/Morocco	Almost 50% of poor rural females aged 17–22 have fewer than four years of education.
Yemen	90% of poor young women aged 17–22 have fewer than four years of education compared with 30% of their male counterparts.
Sub-Saharan Africa	On average, young girls are three times more likely to be infected by HIV/AIDS than young men aged 15–24. <sup>b</sup>

<sup>a</sup>UNESCO 2010. <sup>b</sup> UN Interagency Taskforce on Marginalized Girls 2007.



## 1.2 Why Invest in Disadvantaged Girls?

Investing in girls is the right thing to do and results in instrumental benefits to society, including positive contributions gained and long-term costs averted. It is clear that well-designed programs that target disadvantaged girls have significant positive effects on delaying marriage and childbirth, gaining literacy, and achieving higher levels of primary and secondary education.

### 1.2.1 Fairness

Adolescent girls deserve investment so that they may realize their full potential as individuals. Particularly in the developing world, adolescent girls are often the most marginalized and invisible segments of the population. Despite public policy measures and adoption of international human rights standards, many girls and young women still suffer from abuse and discrimination (Levine et al. 2008). Quoting from the seminal work on adolescent girls, *The Uncharted Passage*:

“Girls everywhere should have the opportunities and capacities that people in developed countries believe possible for their daughters and granddaughters: good health, happiness, safety, education, and economic independence.” (Mensch, Bruce, and Greene 1998)

Furthermore, adolescent girls are often invisible not only within societies and communities but also within development programs. Well-intentioned but poorly designed youth programs that do not specifically target disadvantaged adolescent girls can perpetuate unequal access to critical services and opportunities for improved health, education, and economic outcomes.

### 1.2.2 Economic Benefits to Society and Marginal Gains for Girls

There is clear-cut evidence of the economic benefit of investing in girls, particularly those who are most disadvantaged and stand to gain the most. Productive economic gains for countries could translate into significant increases in GDP. These gains are currently not being realized in developing countries where girls are not provided with education, skills, and work opportunities, and where they marry and bear children at young ages.

Girls who are provided with education or second-chance opportunities for education are likely to make important economic contributions to their local and national economies as well as to their own families. For example, one study finds that although educating girls and boys has the same impact on the wages of both, educating girls is more effective in generating social benefits such as reducing child mortality, fertility, maternal mortality, and the spread of AIDS (Summers 1992). More recently, data from nine countries across Africa, Asia, and Latin America has shown that completion of primary education increases girls' earnings from 5 percent to 15 percent over their lifetime, while boys experience a rate of return of between 4 percent and 8 percent. Additionally, increasing girls' secondary education by 1 percent results in an annual income increase of 0.3 percent per capita (Chaaban and Cunningham 2011). Not only is an economic benefit derived from investing in girls, but the high cost of failing to invest in them is averted.

**Labor Force Participation and Economic Growth.** Underserved disadvantaged girls who have no social networks or support grow up to become marginalized women. In today's globalized world,



gender inequality is costly to economies because it makes it more difficult for countries to compete internationally, particularly if they specialize in female-intensive goods and services (World Bank 2011). Although women account for more than 40 percent of the global labor force, 43 percent of the agricultural workforce, and more than half of the world's university students, women's labor is still misallocated and underused because of discrimination in markets and societal institutions.

For an economy to function at its full potential, women should be engaged in activities that make the best use of their skills and talents (World Bank 2011). In Egypt, for example, female youth unemployment costs the economy nearly US\$2.6 billion annually. The discounted lifetime earnings per female school dropout in Egypt is estimated to be \$19,340 PPP for primary, \$23,196 PPP for secondary, and \$34,833 PPP for tertiary schooling (Chaaban 2008).

Young girls' economic inactivity is costly to economies when compared with that of their male counterparts and older female counterparts. In India, Nigeria, and South Africa, more than 75 percent of girls aged 15–24 are not engaged in paid work and are not looking for work. It is estimated that if young women had inactivity rates more similar to those of young men, annual GDP growth rates would be up to 4.4 percent, equivalent to almost \$165 billion (PPP adjusted). Further, if young women's inactivity rates were equal to those of adult women, annual GDP growth rates would be up to 5.4 percentage points higher, and it is estimated that national economies would grow by 0.8 to 5.4 percentage points annually (Chaaban and Cunningham 2011). This is a minimum estimate of the potential increase in annual GDP growth rates, because we presume that investments in adolescent girls would increase with the participation of adult women.

**Education Costs.** *It costs an estimated 33 percent more per beneficiary to reach a marginalized adolescent, but the investment has a higher economic return rate.* It is estimated that schools serving marginalized populations globally will require 33 percent more resources per student, compared with more conventional schools, to provide incentives such as school meals and conditional cash transfers as well as programs to attract teachers to rural and remote schools (EPDC 2009).

One study estimates that extending primary school opportunities to social groups facing extreme and persistent deprivation globally will cost \$3.7 billion annually, while another study estimates that \$3.9 billion is required to reach marginalized girls alone through formal education routes (UNESCO 2010). It has been estimated that the global education cost per pupil is \$106 for preprimary, \$68 for primary, and \$119 for secondary (constant 2007 US\$). Adding policy measures focused on gender parity, education quality, and reaching the marginalized through supply and demand side interventions would add \$102 to the estimate for preprimary pupils, \$125 for primary, and \$162 for secondary pupils (EPDC 2009).

The lifetime cost of female school dropouts that may be attributed to lost productive capacity, however, is far more costly and ultimately undermines developing countries' growth potential. In Kenya, if all girls completed primary school alone, the additional output over their lifetime would be equivalent to 20 percent of Kenya's annual GDP, rising to 48 percent if they completed secondary school. It is estimated that if the 27 percent of all girls in Burundi who are primary school dropouts had completed primary school before going to work, they would have generated lifetime income equivalent to nearly 25 percent of Burundi's annual GDP. Furthermore, if the 88 percent of all girls

who do not complete secondary school were able to do so, their additional lifetime productivity would increase Burundi's GDP by more than 66 percent of their annual GDP (Chaaban and Cunningham 2011).

**Adolescent Pregnancy and Child Care Costs.** Adolescent pregnancy results in high health-care expenditures and social welfare costs as well as a less-educated and skilled workforce, limiting the human resources available for socioeconomic development. Young mothers' dependency on male providers is also increased, perpetuating gender inequality. One study estimates that the lifetime opportunity cost related to adolescent pregnancy is 30 percent of annual GDP in Uganda, 27 percent in Malawi, 26 percent in Nigeria, and 12 percent in India, equivalent to nearly \$400 billion (PPP adjusted) (Chaaban and Cunningham 2011).

Half of all first births in the developing world are among adolescent girls (calculations by John Bongaarts). The youngest first-time mothers face elevated mortality and morbidity risks (Bruce and Bongaarts 2009). Pregnancy- and childbirth-related deaths are the number one killers of 15–19-year-old girls worldwide, resulting in an estimated 70,000 deaths each year. Data for seven Caribbean countries show that the cost of preventing one adolescent pregnancy averages \$17, while the savings of an averted pregnancy would be approximately \$235 per year in financial expenditure and economic opportunity costs, not including the cost of lost human capital development and lost income for adolescent mothers and their children (UNFPA 2007).

It is estimated that meeting the unmet need for modern family planning methods globally would cost \$3.6 billion (2008) in addition to the \$3.1 billion spent serving current users (\$6.7 billion annually). Providing all pregnant women and their newborns with the recommended standards of maternal and newborn care would increase current spending from \$8.7 billion to \$17.9 billion, assuming that the unmet need for effective contraceptives is met. Further, reducing unintended pregnancies globally by meeting the need for family planning would save \$5.1 billion that would otherwise be required to provide recommended care to pregnant women and newborns (Guttmacher 2009).

### 1.3 How to Invest in Disadvantaged Girls

*Existing resources can be used more effectively through the targeting of programs and benefits.* Many “youth programs” designed as safety nets for the disadvantaged are either underutilized absolutely or in relation to their target groups (Bruce 2006). Projected marginal social benefits of many programs could be reduced if there is inefficient expenditure such as poor program quality, poor policies or regulations, or investment in the wrong people (Knowles 2003).

Investing in status quo programming is not sufficient, and in many cases is wasteful when not reaching those who should be reached, particularly when considering programs addressing HIV/AIDS and maternal mortality. Specific programs, such as second-chance programs that target highly marginalized groups including child laborers, the extreme poor, ethnic minorities, children with disabilities, and locations such as remote rural areas and slums, must be financed in order to meet global educational targets (UNESCO 2010; Bruce and Hallman 2008).

One study analyzing 180,000 variables and identifying the most deprived children (including girls and ethnic minorities) found that for every additional \$1 million invested in an equity-focused approach, 60 percent more deaths were averted than would be under current investment patterns (UNICEF 2010). A cost-effectiveness analysis of India's Second National HIV/AIDS Control Project found that a program targeting only in-school females would cost \$20,000 per HIV infection averted because of the low incidence of HIV infection in this group; *the program was not appropriately targeted to in-school females because those who were out of school were a more at-risk group* (Knowles 2003).

The effects and benefits of many investments in youth differ significantly by income and gender. School-based health investments, for example, benefit only those currently enrolled in school, but in many developing countries, secondary students are disproportionately male and from upper-income groups. Thus, investments designed to improve the quality of schooling benefit only those enrolled in school, whereas targeted scholarship programs can be designed to benefit mainly poor and/or female out-of-school children and their families (Knowles 2003). Youth services paradoxically also perpetuate the bias favoring populations with higher levels of schooling—in some countries those receiving youth services are not only disproportionately male and older, but generally have higher than average schooling levels (Bruce and Hallman 2008).

### *1.3.1 Identify and Target Vulnerable Girls*

The first step in ensuring that the most disadvantaged girls are reached through specific targeting efforts is using proven strategies to identify who they are and make them visible. This may include the use of mapping techniques to identify high concentrations of disadvantaged girls (Bruce and Hallman 2008); speaking to girls directly and incorporating their opinions into situation analyses; measuring girls' social assets, access, and safety; gathering and analyzing data to develop social profiles of diverse groups of girls; assessing marginalized girls' share of existing program resources; and engaging and building skills of young people and involving them in program design (see UNIATF 2007; Austrian and Ghati 2010; Erulkar 2011).

A project in Yemen, for example, utilized geographic information systems (GIS) and social mapping to identify the demographics of the area to target the poorest and most marginalized young girls and women and improve their access to reproductive health care services. Mapping identified specific pockets of the population who were not receiving any health benefits and pockets of the population who were receiving duplicate family planning services. Once this was identified, the project was able to reduce health care costs by allocating and tracking family planning resources. Health care costs were reduced by more efficient allocation of resources and avoidance of duplicate coverage (Yemen Partners for Health 2007).

One key resource for identifying the most vulnerable populations is the Population Council's adolescent data guide series entitled "The Adolescent Experience In-depth: Using Data to Identify and Reach the Most Vulnerable Young People." Available for more than 50 countries, these data guides provide decisionmakers with data on the situation of adolescent girls and boys and young women. Drawing from the Demographic and Health Surveys, this data provides a wide range of variables to highlight the vulnerabilities that many young people, girls in particular, experience from

ages 10 to 24 such as schooling, marital, and childbearing status, living arrangements, and geographic location. Guides may be accessed at <[www.popcouncil.org/girlsdata](http://www.popcouncil.org/girlsdata)>.

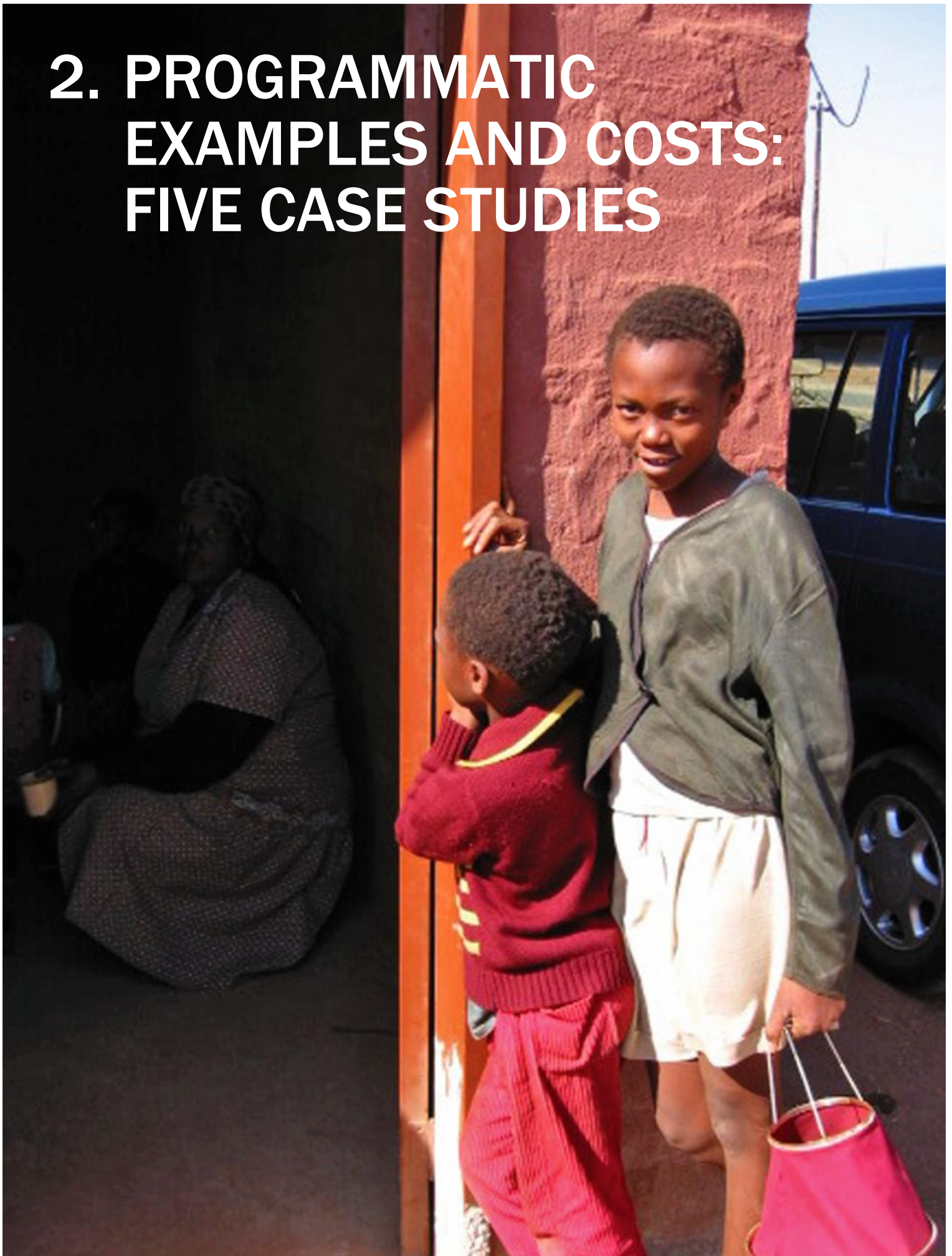
### *1.3.2 Create Single-Sex Program Opportunities for Girls*

Evidence suggests that mixed-sex programs are not appropriate platforms to reach the most disadvantaged girls. Not only do fewer girls participate in such programs, but they are not successful in reaching the most marginalized girls. For example, despite the presence of youth clubs in communities in Malawi, 72 percent of girls did not participate because they thought the clubs were only for boys (UNESCO 2010).

The UN Interagency Taskforce on Adolescent Girls, drawing heavily on the Population Council's field experiences, prescribes the following to reach and include marginalized adolescent girls once they have been appropriately targeted<sup>2</sup>:

- Implementing an age-appropriate approach. (Different interventions are required for younger girls than older ones. Married versus unmarried—focusing on younger girls is an effective preventive approach.)
- Promoting girls-only activities is a good way to increase participation.
- Developing local girl leaders as mentors and role models for younger adolescents.
- Assuring access to girls-only spaces. (Providing safe havens from trauma, stress, violence, and abuse, where girls can develop friendship networks, learn about their rights, and become leaders.)
- Creating livelihoods by leveraging girls' capabilities and assets, to reduce vulnerabilities and expand opportunities (Population Council 2000).
- Promoting participation that will help girls develop self-confidence and skills; build competencies; and learn to be active, shape their own lives, and expand their freedom.
- Involving families and communities (including political and social leaders) from the beginning, so they help support and create opportunities for girls' empowerment.
- Working on boys' and men's attitudes through education to overcome biased gender socialization.
- Involving local and national governments to factor gender equality and gender-responsive budgeting into development planning.

## 2. PROGRAMMATIC EXAMPLES AND COSTS: FIVE CASE STUDIES





Utilizing programmatic case examples from Egypt, Ethiopia, Guatemala, Kenya and Uganda, and South Africa, this section provides an overview of programs for various segments of girls, including the programs' structure, and the associated costs of delivering interventions designed and targeted to a segment of girls.

This section will focus on understanding the programmatic structure and costs of each individual program. These programs cannot be compared, and costs should not be compared. Each program was developed and tailored to meet the needs of a targeted demographic of adolescent girls. The programs are all at different stages of evolution. Some operate part-time, with weekly meetings, whereas others are intensive with full days of programming. Some have an array of components, whereas others have fewer programmatic components. They operate in different places and target different sets of girls who have different characteristics and age cohorts.

*The case studies of girl platforms across Egypt, Ethiopia, Guatemala, Kenya and Uganda, Guatemala, and South Africa have one thing in common: They are reaching disadvantaged adolescent girls and serving their needs.* Every program provides a single “platform” for providing disadvantaged girls with services to meet their unique needs depending on their age, ethnicity, language, and living situation. They all provide a safe space for girls to meet with other girls their age, and gain a wide range of skills from life and reproductive health skills to financial literacy and assistance with savings.

*When we wrote the first draft of this paper, we discovered that costs did not always decrease as programs were scaled-up. This is because these programs became appropriately ambitious both in reaching more girls and expanding content.* The expansion of content and the “fractal” scaling of these program structures is just beginning to be understood (Bruce 2011). However, we found that the programs are likely to be cost-effective (relative to themselves) in scale-up and expansion in three ways:

- Programs provide unique access to the service entitlements and social grants that are already there but are underutilized, often dramatically, by key target clients.
- Programs create a platform through which new content can be added with limited additional costs.
- Programs' service-delivery cadres are developed to the point where they create a basic source of sustainability. Through a cascading leadership model that is inherent in the design of most programs, some girls absorb the skills to teach others, including other members of the community and their families. The newly trained girls and community members become leaders and mentors expanding the base of service deliverers and, over time, increasing the number of beneficiaries per dollar invested in the “graduated” girl.

## 2.1 Illustrative Range of Costs across Programs

Although we do not compare costs across programs, the following summary data provide an illustrative range of costs for five girl platforms. Costs for all programs are reported in 2011 US dollars to account for inflationary effects across various implementation periods and currencies from six countries.

To identify what the average cost of delivering a program to a girl might be across countries and places, a cost per girl for each hour, or dose, of service that she receives is calculated. Calculating a cost per hour allows us to control for the time investment and program intensity across programs where one may meet with girls for one hour monthly and another may meet daily for a full day. Hourly costs range from as little as \$0.29 per girl for a savings program in Kenya and Uganda to \$2.45 per beneficiary for a second-chance schooling and life-skills program in Egypt. The average cost per girl

for each project hour received is estimated at \$1.47. All programs have relatively inexpensive costs per hour, with no program exceeding \$2.50 per hour. The average annual dose each girl receives across programs is 203 hours, ranging from 31 hours in Ethiopia to 576 hours in Egypt (see Table 3, which further summarizes costs and programmatic doses).

Across programs, girls are expected to participate on average 77 percent of the time, meaning that they are expected to receive approximately three-quarters of the ideal programmatic dose. There is extremely little variance across programs. It is not realistic to expect that girls will be able to participate 100 percent of the time because of time constraints, household responsibilities, health conditions, and so forth. Most programs reviewed have found that a minimum three-quarter attendance will provide participants with the skills they need to have positive expected outcomes.

For each new intervention or service, the five programs engage the entire community in the development and implementation of their programs and services for girls. Thus, time and resources are spent engaging the community and its leaders, surveying the community, and rooting the program to ensure that it is not only supported but also tailored and developed in ways that serve the most disadvantaged girls based on local conditions and attitudes. The average time it takes to root a program into the community is three months, although this ranges from 1.5 months in Guatemala to six months in Ethiopia. The variation can be attributed to the degree of community engagement in each cultural context.

All programs use some form of female leadership or mentorship model to implement their programs. They may be called leaders, promoters, or mentors and may be hired from the local community or may be “graduates” of the girl platform in which they participated. All programs provide initial and ongoing training for female leaders, as well as regular (annual, monthly, and sometimes weekly) refresher trainings to provide leaders with new and expanded skills. This costs an average of \$315 per female leader trained, ranging from \$125 per leader trained in Ethiopia for an initial training period of one week to \$613 per leader trained in Egypt for a period of several months across several specializations. Training leaders is an important investment for girl platforms, because their capability and success in providing mentoring and imparting skills to girls is the key to positive outcomes. Much of the training cost is an upfront investment, which translates into reduced costs with program scale-up or expansion. The training also builds sustainable and essential female cadres and venues for the convening of female-based leadership.

Compensation for female leaders varies according to several factors. For some programs that meet every two weeks, considerably less time is required by leaders than intensive programs where leaders are engaged on a full-time, daily basis. Further, compensation is determined by local purchasing power and is often based on the equivalent of local wages received by primary school teachers or community health extension workers. The average stipend that a female leader earns is \$92.85 per month, ranging from \$34 per month in Egypt and Kenya (comparable to a community health extension worker) to \$234 per month in South Africa (comparable to an auxiliary social worker).

Monitoring and evaluation is critical for ensuring program quality, making necessary adjustments during the program, and measuring program impacts and outcomes. Investment in monitoring and evaluation is key to determining whether the program investment is effective and efficient. The average annual cost across programs for monitoring and evaluation activities is \$22 per girl, ranging

from \$1 per girl in Ethiopia for minimal evaluation activities to \$49 per participant in Egypt. Ongoing monitoring and evaluation is critical to:

- Providing feedback to continue to tailor and adapt programs for each generation of girls from pilot to scale-up.
- Reaching more of the targeted populations of girls in new locations.
- Increasing and improving services to girls based on their needs and feedback.
- Reaching new segments of disadvantaged girls.
- Measuring program outcomes and impacts on the lives of disadvantaged girls and the communities in which they live.
- Measuring longitudinal impacts on early child marriage and fertility, education of girls and their children, health for girls and their children, etc.
- Conducting cost-benefit analyses of programs for adolescent girls and contributing to assessment of the cost-effectiveness and efficiency of such programs.

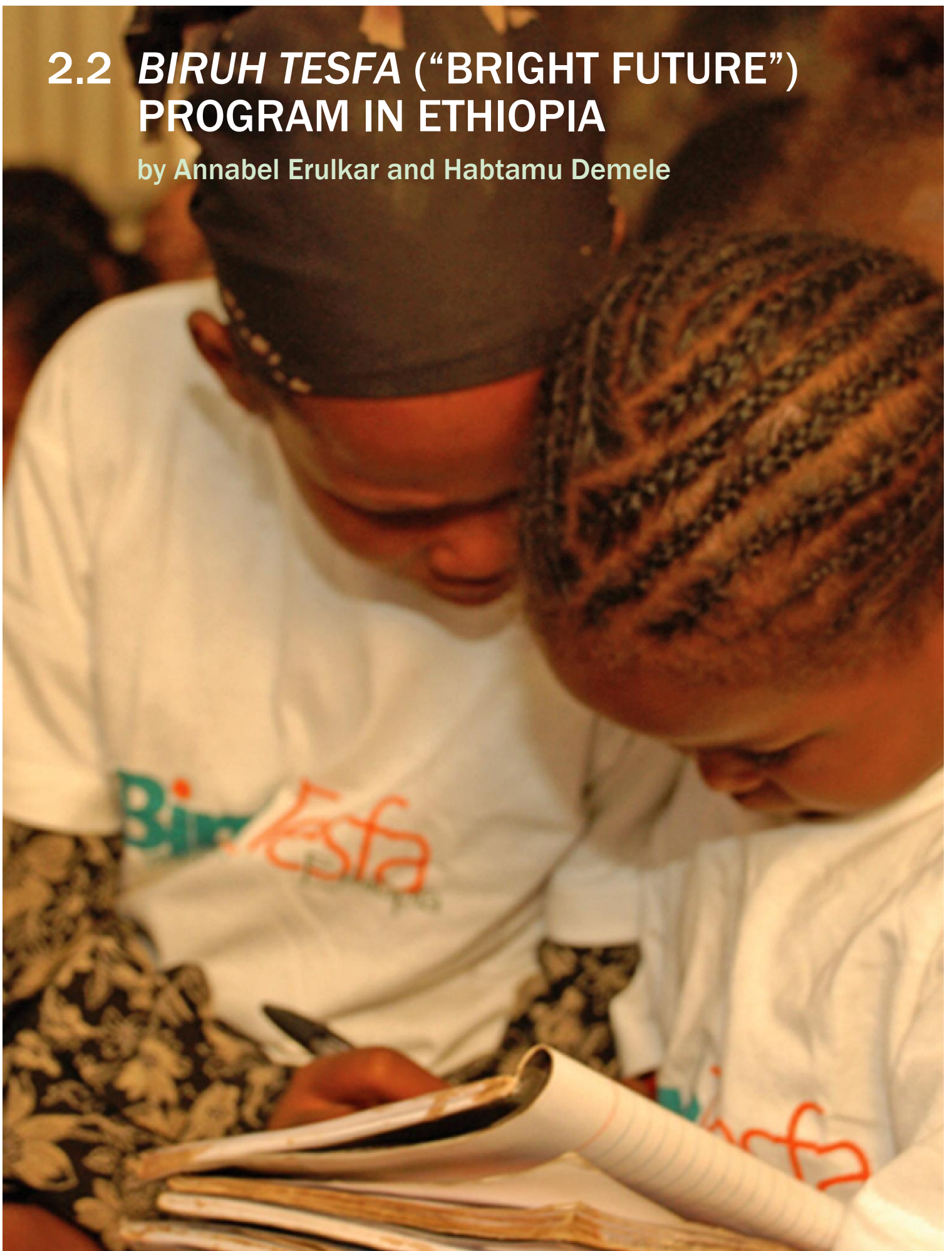
**TABLE 3 Range of costs (US\$2011)/units of implementing programs for disadvantaged girls**

Unit	Ethiopia	Egypt	Guatemala	Kenya/ Uganda <sup>a</sup>	South Africa	Average
<b>Key program components</b>	Mentoring, HIV/RH, life skills, financial literacy, identification cards	Second-chance schooling, develop literacy skills to school entry qualification, life skills, financial literacy, sports activities, food supplement	Mentoring, life skills, pregnancy/HIV, recreation, leadership, career development	Mentoring, savings, financial education, health training	HIV/RH, gender, accredited financial literacy, business/career skills, identification cards	
<b>Targeted age group</b>	7–24	12–15	8–24	10–19	15–24	<b>11–21</b>
<b>Meeting frequency</b>	3–5 x week (1 hour)	5 x week (full day)	3 x month (1 hour)	1 x week (2 hours)	2 x week (2 hours)	
<b>Ideal dose (hours of participation)</b>	31	576	104	208	80	<b>203.4</b>
<b>Average cost per hour for ideal dose</b>	\$1.72	\$2.45	\$1.02	\$0.29	\$1.87	<b>\$1.47</b>
<b>% of time expected to participate</b>	75%	75%	70%	75%	90%	<b>77%</b>
<b>Months to engage community</b>	6	3	1.5	2	2	<b>2.9</b>
<b>Monthly stipends per female leader<sup>b</sup></b>	\$37	\$34	\$125	\$34	\$234	<b>\$93</b>
<b>Comparable local profession (wage)</b>	Primary teacher (\$71)	Health worker (\$34)	Farm labor (\$270)	Health worker (\$34)	Social worker (\$234)	<b>\$129</b>
<b>Annual training per leader</b>	\$125	\$613	\$500	\$190	\$152	<b>\$316</b>
<b>Monitoring and evaluation per girl</b>	\$1	\$49	\$20	\$21	\$21	<b>\$22</b>

<sup>a</sup>The savings programs in Kenya and Uganda are separate but are similar in content and cost with shared administration costs, thus average costs of the two are reported. <sup>b</sup>Monthly stipends in some cases are for full-time work and in others for part-time work.

## 2.2 *BIRUH TESFA* (“BRIGHT FUTURE”) PROGRAM IN ETHIOPIA

by Annabel Erulkar and Habtamu Demele





### 2.2.1 Program Summary

The Biruh Tesfa program<sup>3</sup> provides out-of-school domestic workers, orphans, and migrant girls ages 7–24 in urban Ethiopia with social support, HIV/AIDS and reproductive health education, basic literacy, and life skills. The objective is to prevent new HIV infections and to promote abstinence and mutual monogamy by addressing HIV risk among vulnerable adolescent girls in Ethiopia and the girls' partners. Groups of 20–25 girls, ages 7–11, 12–15, and 16–24, meet three to five times per week over a four- to six-month period at a time that is convenient. They meet with an adult female mentor in a community space donated by the local administration/*kebele* (the lowest government administrative structure). From the 2006 project inception to 2010, 36,650 girls have been reached at an average cost of \$1.71 per girl per hour.

### 2.2.2 Target Population

The project is located in urban slums of 18 Ethiopian cities and towns, including large cities such as Addis Ababa, Bahir Dar, Gondar, and Mekelle, as well as small corridor towns. Ninety percent of the project is implemented in Amhara regional state, where early marriage is common. The population is heterogeneous ethnically and religiously, although 95 percent of participants in the targeted area are Orthodox Christians, and the dominant ethnicity is Amhara. Areas are targeted on the basis of the high prevalence of early marriage and high migrant rate, the vulnerability of out-of-school girls to abuse and lack of basic life skills, social isolation, lack of basic health information and access to health facilities, high concentration of low-status jobs in domestic work with high incidence of sexual abuse, and poor labor conditions.<sup>4</sup>

### 2.2.3 Program Activities

Key program activities for participants include the following:

- Social network and improved communication skills with peers, mentors, employers, etc.
- Basic reproductive health and HIV/AIDS information and services.
- Health-referral linkages for participants utilizing a coupon system to facilitate girls' access to private and government public health facilities.
- Temporary and halfway shelter and counseling services for sexually and domestically abused girls, and access to legal services.<sup>5</sup>
- Life-skills training, including guidance on keeping girls away from abuse, reporting abuse early, and seeking help; coaching on self-assertiveness and confidence, women and disability, domestic violence, rape, gender-based violence, alcohol and drugs, personal hygiene and menstruation, contraceptives, and migration.
- Savings groups.
- Financial literacy on financial management and entrepreneurship.
- Nonformal education to provide basic literacy and numerical education.



- Identity card, which is signed and sealed by kebele officials with the logos of the Population Council and the Ministry of Women, Children and Youth Affairs.
- Supplies such as exercise books, pens, pencils, soap, underwear, sanitary napkins, school bags, flip-flops, and hair oil for girls.<sup>6</sup>

#### 2.2.4 Community Engagement

*It takes approximately three to six months to root the Biruh Tesfa program in the community.* First, a letter of agreement must be signed with the regional Bureau of Women, Children and Youth Affairs to work in the specified zone, woreda (district), and kebele (the lowest government administrative structure). After this, specific kebeles are selected and local officials are briefed. Community sensitization is then conducted, followed by the selection and training of mentors, who then identify project participants. A Project Advisory Committee (PAC) is established, comprised of key government officials and community leaders, which follows the daily project activities and intervenes when necessary, such as when a girl stops attending. During this time, local city and kebele officials are responsible for identifying community spaces to be used for project activities. Community halls are generally used, and school classrooms in some cases. Although meeting space is free, most halls need basic renovation, which costs on average \$600 per year per space. The average annual facilities cost was \$14,871 for 70 facilities in 2009 and 74 facilities in 2010, or \$2.33 per girl.

#### 2.2.5 Beneficiary Enrollment and Participation Requirements

Project participants must be girls between the ages of 7 and 24, residents of the kebele, and out of school—either never having attended or having dropped out. The mentor leading the groups must know the house and the employer or guardian of each participant, since the willingness and consent of the guardian determines whether the girl will join the program. The targeted population of potential participants is identified through the mentors who register new individuals following house-to-house visits conducted each month. Frequently new migrant girls come to the kebeles from rural areas, and in some cases guardians or relatives bring girls to the project for registration. Girls enroll on a rolling basis in four- to six-month intervals, and may begin participating within one week of registration.

The primary obstacle in reaching this targeted population is convincing employers and/or guardians to allow girls time to participate in the project. To address this, sensitization workshops are conducted in the community by kebele officials, PAC members, and program staff. Another common challenge of reaching the targeted beneficiaries is that most participants are migrant girls working as domestic workers, and given the nature of their jobs they are very mobile, resulting in a drop-out rate of approximately 7–8 percent. Some participants change place of residence before completing the full program.

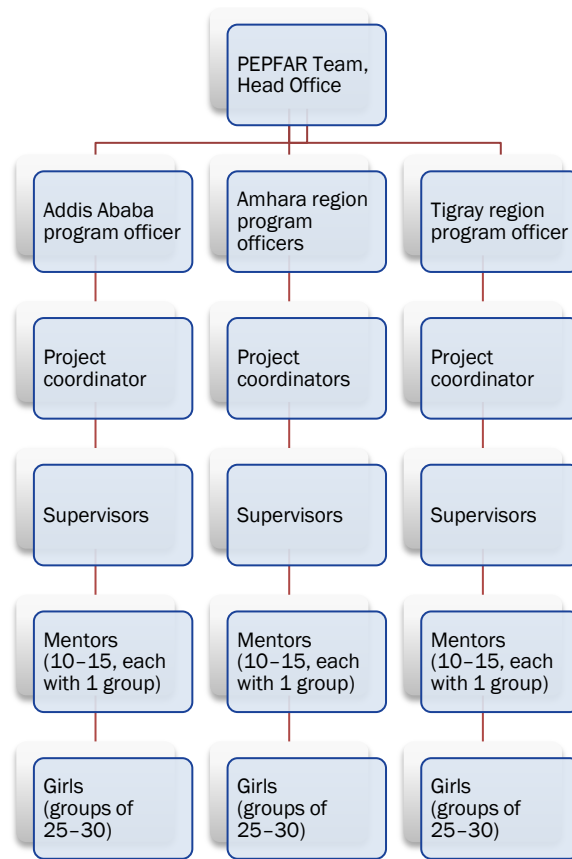
Once they are registered and start to participate, girls are expected to attend regularly. Their guardians, relatives, employers, or parents are expected to give the girls permission to attend the program. *The ideal program dose for each participating girl is 31 hours, costing an average of \$1.72 per girl per hour.* If a girl is absent for three consecutive days, her mentor goes to her house and

discusses the reason for her absence and tries to bring her back to the program. At the community level, the PAC follows the daily activity of the project and is tasked with convincing employers and relatives to send the girl to the program if she is absent.

### 2.2.6 Organizational Structure

The program is managed by one head office through the President’s Emergency Plan for AIDS Relief (PEPFAR) in three districts. Each district is managed by a program officer who works directly with a project coordinator, except in the case of the Amhara region which has more than one program officer and project coordinator. The project coordinators manage supervisors who each oversee approximately 10–15 mentors. Each mentor manages a group of 25–30 girls.

**FIGURE 1** Biruh Tesfa organizational chart



### *2.2.7 Female Mentors*

There are currently 200 mentors managing individual groups of girls. The Biruh Tesfa project relies on female mentors to deliver the project material to participants. A mentor must be a reputable and respected female aged 20–40 from the kebele where she is working, have completed grade 10 or 12, and preferably have additional certificates and previous experience in community mobilization. Preference is given to those who have experience in programs related to youth, HIV/AIDS, reproductive health, literacy, or other development areas. After mentors are recruited by the kebele administration and local leaders in consultation with Population Council program staff, they go through a formal interview process. Approximately one-third of eligible applicants are selected, and the drop-out rate is very small; since the commencement of the project, 15 of the 200 mentors have resigned after working for more than one year.

Once they are selected, mentors receive one week of training delivered primarily by Population Council staff using a curriculum that includes life skills, HIV/AIDS, reproductive health, gender issues (including gender-based violence), basic literacy, and nonformal education. The cost of the initial training is \$16,737 on average annually, or \$2.45 per girl participant. Some topics are covered by specialists at a daily rate of \$30. A hall is rented for the training at a cost of \$36 per day, and \$4 is provided to mentors for transportation, lunch, and refreshments, as well as \$3 for stationery. Each year, mentors receive additional training for a three- to five-day period, at a cost of \$8,359 total, or \$1.23 per girl participant. Since the educational requirement to become a mentor is higher than the participants' background and educational qualifications, so far there have been no mentors from the previous generation of participants.

Mentors are paid \$37.23 per month, in the form of an honorarium, for a total annual average of \$87,029 (175 mentors in 2009 and 200 mentors in 2010) in addition to \$1.80 for transport allowance to attend monthly review meetings. Monthly payments to mentors are decided upon by stakeholders who review the living standard and current inflation rate. Payment can be compared to the fixed standard primary school teacher salary, a uniform salary scale set for all teachers nationally working full-time in the government, which is \$71 monthly. Although mentors do not require close supervision, they are provided with technical support from 15 supervisors who follow the progress of the girls' groups. The mentors are paid \$17.30 per month for a total of \$11,080 on average annually. The mentors' performance is evaluated based on standard job-performance criteria. The confidence and self-assertiveness of beneficiaries is also a way of evaluating mentors' performance.

### *2.2.8 Average Annual Program Costs*

The average annual program cost in 2009 and 2010 is \$377,679, or \$53.16 per participating girl enrolled in the mentorship program (\$1.71 per hour per girl). The majority of the cost, \$29.44 per girl participant annually, is for the mentorship program; 6,322 girls participated in the mentorship program in 2009, and 7,993 participated in 2010.

Each year, 70 girls also receive the services of a halfway house that costs \$38,736 to run on average annually. This cost was not included in the overall average cost per girl in Table 4,

because it is outside the mentorship program. The halfway houses provide facilities for a small percentage of program participants, costing \$978 on average annually per girl to maintain, which includes renting two houses and providing meals for the girls. It costs \$8,937 on average annually to rent and maintain both halfway houses, and \$12,557 to support the 11 halfway house staff, supervisors, and counselors. The largest expense is for providing meals to the girls, which costs \$407.76 on average annually.

The current average annual cost in 2011 to supply each of the 8,000 participating girls with four exercise books, two pens and two pencils, two pairs of underwear, four sanitary pads, a t-shirt, a school bag, and medical expenses is \$43. In 2009, materials and supplies cost \$44,647 on average annually, or \$7.31 per girl.

**TABLE 4 Biruh Tesfa average annual program costs<sup>a</sup> (2009–2010)**

Program component	Program	Per girl <sup>b</sup>	Per hour <sup>c</sup>
Mentorship program (life skills, RH, HIV/AIDS, etc.)	\$194,815	\$29.44	\$0.95
Providing identification cards	\$4,180	\$0.59	\$0.02
Providing school materials and personal supplies	\$44,647	\$6.12	\$0.20
Monitoring and evaluation	\$6,703	\$0.96	\$0.03
Administrative costs	\$127,334	\$16.04	\$0.52
<b>TOTAL</b>	<b>\$377,679</b>	<b>\$53.16</b>	<b>\$1.72</b>

<sup>a</sup>Costs are reported in US\$2011. <sup>b</sup>The average annual cost per girl is calculated by dividing the total annual program cost by the number of girl participants in each year. <sup>c</sup>The average annual cost per hour is based on girls receiving an ideal programmatic dose of 31 hours.

#### Biruh Tesfa total cost per girl per recommended dose

Ideal dose (hours of participation)	Cost per girl per hour	Total
31	\$1.72	\$53.16

### *2.2.9 Monitoring and Evaluation*

Biruh Tesfa is monitored through an integrated Management Information System (MIS) that emphasizes feedback of data to managers for decisionmaking and facilitates the quality and appropriateness of the intervention. Mentors use a portable hand-held register to record contacts, collecting information on age, marital status of beneficiaries, and type of information, service, or referral received, and so on. All data is verified using original registers and random field checks, and mentors receive regular training and support on data collection and quality.

### *2.2.10 Program Outcomes*

After they have completed the program (over 90 percent complete the 4–6-month program), approximately 75 percent of the girls continue attending the nonformal education sessions for about a year, after which approximately 30 percent of all program graduates enroll in formal school. Those who are living with their relatives are typically enroll in regular formal schools, whereas most domestic workers register in night school. At the end of participation in the project, it is expected that the girls will have basic information regarding hygiene, HIV/AIDS, and reproductive health, and will go to a health facility when any health problem arises.

Measured impacts on participants have included:

- Increased communication skills and confidence to speak with friends, mentors, employers, and strangers.
- Increased social network and availability of a meeting place to interact with peers and mentors.
- Increased negotiation skills with employer or relatives.
- Establishment of friendships with peers and mentors, and having someone they can turn to in a crisis.
- Approximately 30 percent of girls enroll in formal school after completion.
- Identification cards issued (95 percent had no ID prior to participation).
- Increased access to health information and services.

### *2.2.11 Program Evolution*

During the pilot period, the Addis Ababa Bureau of Youth and Sport implemented the activities on a small scale in only one kebele in Addis. PEPFAR funding was secured to scale-up the project over seven years, expanding the number of project locations to five urban areas including Addis Ababa, Bahir Dar, and Gondar, and 17 districts and towns based on the availability of road networks with access to urban centers and the most mobile populations. Although ownership of the project remains in the Ministry of Women, Children and Youth Affairs, once the project secured funding from USAID all financial management shifted from the government entity to the Population Council, which has reduced procurement time for employment of project coordinators, materials, and supplies. This program is currently reaching (in early 2012) over 38,000 girls in urban areas of Ethiopia.



### *2.2.12 Associated Programs*

In addition to its regular Biruh Tesfa mentorship program, the Population Council has provided sub-awards to meet the needs of the participants outside of the mentorship program. The following are sub-award grants provided to NGOs outside the mentorship program and budget:

- Nia Foundation provides hairdressing-skills training and job placement to 40 orphaned, vulnerable Biruh Tesfa participants annually (\$29,433 was awarded in 2009 to assist 40 participants, and \$30,654 was awarded in 2010 to assist another 40).
- The Ethiopian Women Disabled National Association (EWDNA) was also provided with a sub-award to work with Biruh Tesfa participants who have disabilities, and OPRIFS was provided with a sub-award to provide temporary and halfway shelter for domestically and sexually abused girls.
- The Young Women’s Christian Association’s (YWCA’s) “Attainment of Reliable and Self-Sufficient Capability of Migrant Domestic Working Girl Children” project provides girls with financial literacy and has formed eight young savers groups with 150 girls total since 2010 (\$21,506 awarded in 2010).

## 2.3 *ISHRAQ* (“SUNRISE”) PROGRAM IN RURAL UPPER-EGYPT

by Nadia Zibani



### *2.3.1 Program Summary*

Ishraq gives disadvantaged, out-of-school, rural adolescent girls aged 12–15 a second-chance schooling opportunity.<sup>7,8</sup> The program supports them in their transition to a healthy and active adulthood, and prepares them to make informed and positive decisions about life issues such as schooling and marriage. Ishraq seeks to empower girls and build their self-esteem through promoting literacy, creating awareness of rights, enhancing life skills, and building social support with attention to reproductive health, information on livelihoods, and sports. Approximately 50–60 girls in each village, divided into groups of about 30, meet with various older female mentors over a 24-month period (approximately 1,152 hours per girl). They meet in visible public spaces such as youth centers that have at least two classrooms and a playground.

The objectives of the Ishraq program include the creation of safe public spaces for girls in their communities where they can gather, establish friendships, learn, play, and lay the foundation for citizenship. The program seeks to: improve girls' functional literacy and cognitive skills, and foster the continuation of schooling; provide knowledge and change attitudes about marriage and childbearing; impart knowledge about nutrition, hygiene, and reproductive health; change attitudes toward harmful traditional practices such as female genital mutilation/cutting (FGM/C); and create awareness of rights. It also aims to positively influence social norms concerning girls' life opportunities by mobilizing community members to: create an environment conducive to girls' education and empowerment, reduce social isolation and gender-based violence, and help girls' develop peer networks and participation in group and community activities. The Ishraq model is intended to be institutionalized to emphasize girl-friendly spaces in community/youth centers and to build capacity to provide nonformal education to rural girls through providing technical and managerial capacities in youth centers, intermediary NGOs, and youth directorates. Lastly, it promotes specific measures of accountability for national adoption of girl-friendly policies, measures, and best practices based on sound research and impact assessment of the Ishraq intervention.

### *2.3.2 Target Population*

Ishraq is mainly implemented in poor rural communities located in Upper-Egypt, which is the poorest region in terms of demographic, social, and health indicators. This is a socially and religiously conservative area with a high prevalence of female genital mutilation/cutting (90 percent). Both Muslims and Christians have been targeted to participate in the project, and the population is ethnically diverse, including girl participants from the Hawara tribe. In the current phase, baseline data from all 30 Ishraq villages was collected from 2,921 adolescent girls from all three governorates (January 2009–December 2010). Nearly three-quarters of the Ishraq target population consists of girls who have never been to school, and 91.5 percent of girls who joined Ishraq had not previously attended another literacy class/program. Twenty percent of the girls who joined Ishraq worked in farming. Among girls who joined the program, 93.5 percent were single, 6.3 percent were engaged, and 0.2 percent were married; 83.3 percent of the girls in Ishraq have experienced FGM/C, and 22 percent of girls reported that someone had beaten them or been violent with them in the past four weeks.



Between August 2001 and October 2003, Ishraq was first piloted in four rural communities in el-Minya governorate, during which 278 girls graduated. In the expansion phase (2004–2007), Ishraq implemented activities in ten villages in el-Minya and Beni-Suef governorates (five villages in each governorate), during which 336 girls graduated in the first round and 296 girls graduated in the second round. Under the current scale-up phase beginning in November 2008, 30 new rural communities in three new governorates of Fayoum, Qena, and Sohag have been targeted, currently enrolling 1,857 girls, which covers 60 percent of eligible girls across the 30 communities.<sup>9</sup>

### 2.3.3 Program Activities

Key program activities for participants include the following:

- A second-chance schooling/literacy<sup>10</sup> program (reading, writing, and numeracy skills) to the level of certification required for mainstreaming school-going.
- Life skills<sup>11</sup> (New Horizons) is mandatory for all girls in the program, and includes rights and responsibilities of women; nutrition, health and hygiene; first aid; rights and development of children; environment; adolescence; violence against women; marriage, pregnancy, and motherhood; family planning; and sexually transmitted diseases.
- Sports activities<sup>12</sup> to acquire skills in recreational activities (traditional and new sports), to receive basic health, nutrition, and hygiene-related information and develop attitudes that enhance feelings of self-worth and self-confidence, and to have a free medical checkup prior to start-up.
- Financial education<sup>13</sup> focused on budgeting and savings to broaden knowledge of financial options and principles, build skills to use financial tools, and promote attitudes and behaviors that support effective money management to enable girls to make informed decisions.
- Food supplement<sup>14</sup> provides free snacks to girls during class and a monthly take-home ration for girls' families based on attendance (as an incentive for poor families to enroll and keep their daughters in the program and to replace lost income).
- Life skills for male relatives of girl participants aged 13–18 (New Visions), including coverage of self-development, values, human emotions and relations, communication, gender, marriage, family, puberty and adolescence, reproductive health, physical hygiene, time management, studying, decisionmaking, employment, civil and legal rights, health rights, society, planning for the future, and the environment.

### 2.3.4 Community Engagement

It takes approximately three months to root the program in new communities. To be selected, villages must have a sufficient number of eligible out-of-school girls, a suitable youth center facility, and community willingness to adopt the program.<sup>15</sup> The youth center facility is assessed in eligible villages, and community orientation meetings are held to raise awareness for community participation, to highlight the importance of girls' education, and to encourage enrollment. Field visits are conducted in selected communities to ensure the youth center facility is available and can accommodate participants. Orientation meetings are held with the youth-center director and influential community members (mayor, school headmaster, youth center director, head of the local administrative unit, NGOs, health unit). Last, community mapping and household listing are conducted to identify all households that have eligible participants.

A verbal agreement, or "community contract," between the NGO project staff, youth center director, and community leaders establishes the terms of use and responsibilities of both parties. Ishraq posters are displayed at the entrance of each youth center. To operate and get support from the youth center, Ishraq partners signed a Memorandum of Understanding (MOU) in January 2004 with the Egyptian Ministry of Youth and Sports, and in May 2011, a tripartite agreement was signed between the Ministry of State for Population and Family Council (MoFP) and the National Council for Youth and Sports.

The youth center director is paid \$30 monthly, and another worker is paid \$10 monthly for managing the financial and administrative aspects of the program in the community. The program equips classrooms at the youth center with desks, chairs, blackboards, and sport equipment such as table tennis tables, and as needed it paints, installs fans, repairs broken windows, and provides cooler water. *In the current phase, there was a one-time fixed cost of \$3,539 to upgrade youth facilities (\$1.92 per girl), \$1,357 to install cupboards in youth centers (\$0.74 per girl), and \$54,259 to install classroom furniture such as desks, chairs, and blackboards (\$65.05 per girl).*

### 2.3.5 Beneficiary Enrollment and Participation Requirements

To be eligible to participate in the program, a girl must be between 12 and 15 years old, live in the selected village or within 2 kilometers (1.25 miles) of the youth center, and have either never attended school or dropped out before primary school completion. Priority is accorded to girls aged 12 or 13 with no schooling; in the current recruitment, more than 40 percent of the girls fall into this category. The current recruitment process took approximately three months.

After eligible villages were selected, orientation meetings (\$2,896 total, or \$1.57 per girl) were held with key community leaders, and a variety of public announcements were made (at the mosque during Friday prayer, and via posters, fliers, home visits, meetings with parents, and word of mouth). Girls and/or their parents register the participant's name, age, and educational status with the youth center. Village committees are composed of youth center directors, popular leaders,



the mayor, a school headmaster, health center doctors, religious leaders, parents, and one promoter (total cost of \$4,002).

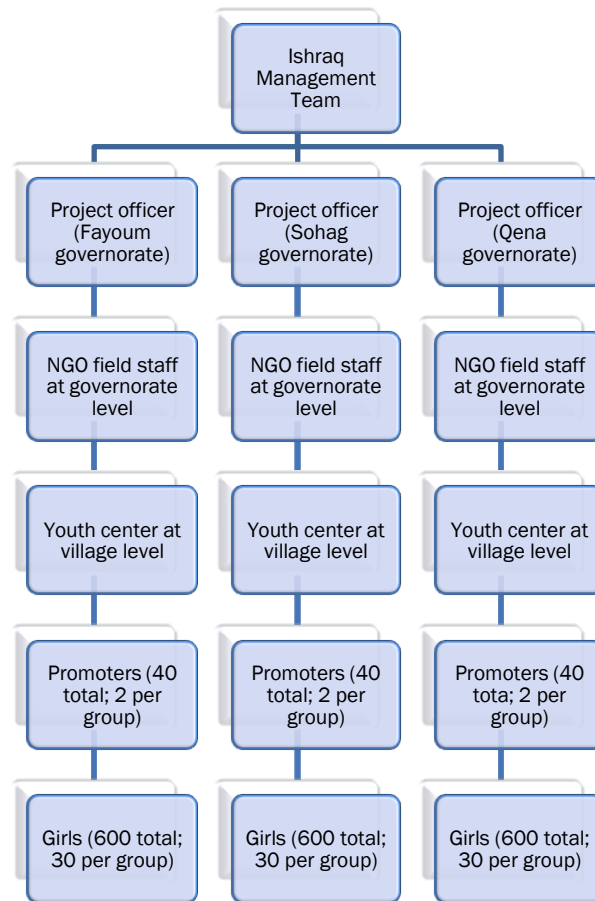
*Girls are expected to attend 75 percent of total program classes across all components over the 24-month program period. Each girl will ideally receive a project dose of 864 hours in literacy, 102 hours in life skills, 150 hours in sports, and 36 hours in financial education, which totals 1,152 hours over two years. This costs approximately \$1.24 per girl for each hour of the program received. If a girl is absent from class four consecutive times, a promoter goes to her home to visit her. Out of 278 program participants in the pilot phase, 108 completed the full 30-month program. The highest number of dropouts (83) occurred within the first six months, representing approximately 49 percent of all dropouts.*

The main challenge to participation is persuading parents and community leaders that the youth center is an appropriate girl-friendly space to host Ishraq activities. Some villages with a sufficient number of eligible girls refuse to adopt Ishraq either because youth center directors are not willing to provide space for the program at the facility and/or they are not convinced about the benefits of girls' education. Other villages refuse to adopt the program because of the poor reputation of nonformal educational programs implemented in the past.

### **2.3.6 Organizational Structure**

Ishraq management teams are responsible for program activities in three governorates, each managed by a project officer who oversees NGO field staff in five villages. For each selected NGO, project staff includes one Ishraq coordinator, one class coordinator, and one supervisor. Each supervisor oversees 10–15 “promoters” (female leaders) who deliver all the content in the classroom including the accredited literacy and numeracy curriculum, with some specialization for the sports component. Project staff also includes a Monitoring and Evaluation (M&E) officer, a community mobilization officer, and an accountant. Each promoter leads a class of 30 girls.

**FIGURE 2** Ishraq organizational structure



### 2.3.7 Female Promoters

Promoters are typically young women who are older (aged 18–35) than participating girls, and from the same community as the girls. Most are technical secondary school<sup>16</sup> graduates preferably with community-work experience. Since Ishraq is implemented for only one round in each village, graduates of Ishraq do not go on to become promoters. Where sufficient candidates are available, at least four are interviewed to select two literacy promoters in each location, in addition to two sports/life skills promoters. Currently, there are 120 female promoters.

Selected promoters receive training over several months on Ishraq curriculums and teaching techniques, as well as on issues such as gender, communication, and volunteerism. The responsible Ishraq implementing partner delivers each of the four components of the individual promoters’ respective fields. Training for literacy is held within 21 days in 6 training rounds, life skills in 21 days in 3 training rounds, sports in 20 days in 10 training rounds, and financial literacy in 12 days in 4 training rounds, plus bimonthly meetings. During the training workshops, promoters receive a transportation allowance of \$3 to \$4, lunch, and a snack.

All female promoters are paid approximately \$34 per month for full-time work. This salary is comparable to a community health worker (*raeda rifiya*) who holds a secondary technical diploma, or to a primary/ preparatory school teacher working at a village government school who earns between \$40 and \$80 per month depending on years of experience. Approximately 75 percent of trained promoters stay for the length of the program. One of the main challenges is the number of promoters who leave the program because of marriage and pregnancy after the program begins.

During the first cycle of the 24-month program, newly recruited promoters are supervised and assessed by the class coordinator and M&E field officer hired by a local NGO within the governorate. The coordinator and M&E officer each earn \$137 in compensation monthly. The promoters receive support from NGO project staff through site visits and monthly meetings, and receive training in the component for which they are responsible.

Three Population Council project officers earn \$1,725 each monthly, and the partner NGO provides monthly compensation to the Ishraq coordinator (\$275), a community mobilization officer (\$137), an accountant (\$188), and a secretary (\$85).

### 2.3.8 Average Annual Program Costs

The total average annual cost for implementing Ishraq is \$1.3 million; this translates into \$704.51 on average annually per girl, or \$2.45 per girl per hour of the ideal programmatic dose that she receives.

The literacy component is delivered to participants three times per week in three-hour sessions over 24 months.<sup>17</sup> This costs an annual average of \$69,944 (\$37.91 per girl). The cost includes literacy-training workshops (\$9,964 annual average, or \$5.40 per girl), supervision and technical support of literacy (\$18,250 annual average, or \$9.89 per girl), and materials such as books, stationery, and learning activities (\$18,249 annual average, or \$10.24 per girl).

Girls also receive life-skills training (New Horizons) over ten months in two sessions lasting 1.5 hours each. This costs an annual average of \$33,200, or \$17.99 per girl, which includes the cost of life-skills-training workshops (\$12,626 annual average, or \$6.84 per girl) and salaries for staff (\$17,340 annual average, or \$9.40 per girl).

The sports component, provided by the life-skills promoter, is delivered over a 12-month period, with two 1.5-hour classes held weekly. The annual average cost is \$29,033, or \$15.74 per girl. This includes the cost of medical checkups for all 1,845 girls and 120 promoters at a total cost of \$6,564, or \$3.34 per girl and promoter; sports equipment (total of \$11,464); sports training workshops (\$7,118 annual average, or \$3.86 per girl); sports tournaments (\$3,821 total); and three sports trainers at the governorate level (\$16,965 total, or \$9.19 per girl).

The financial education component is delivered twice a week for two hours per session over six months. This costs an annual average of \$6,000, or \$3.25 per girl (total cost for training of female promoters was \$7,047, or \$3.82 per girl; most other costs were for the preparation, adaptation, and pilot testing of the financial education material).

Girls are also provided with daily snacks, and families of girls who attend classes at least 75 percent of the time receive a monthly food ration. The total cost of this food supplement component

(implemented in 2010 and 2011) is \$685,982, or \$185.90 per girl annually. This amount is primarily the cost of the food ration and does not include the cost of providing daily snacks to girls, as this is provided as an in-kind donation.

**TABLE 5 Ishraq average annual program costs<sup>a</sup> (2009–2011)**

Program component	Program	Per girl <sup>b</sup>	Per hour <sup>c</sup>
Second chance schooling/Literacy and numeracy	\$69,944	\$37.19	\$0.13
Life skills	\$33,200	\$17.99	\$0.06
Sports	\$29,034	\$15.74	\$0.05
Financial education	\$6,000	\$3.25	\$0.01
Food supplement	\$228,661	\$123.94	\$0.43
Capacity building of local NGOs	\$113,997	\$61.79	\$0.21
Community mobilization	\$131,721	\$71.39	\$0.25
Monitoring and evaluation	\$90,843	\$49.24	\$0.17
Institutionalization of Ishraq	\$39,114	\$21.20	\$0.07
Administrative	\$557,303	\$302.06	\$1.05
<b>TOTAL</b>	<b>\$1,299,815</b>	<b>\$704.51</b>	<b>\$2.45</b>

<sup>a</sup>Costs are reported in US\$2011. <sup>b</sup>The average annual cost per girl is calculated by dividing the total annual program cost by the number of girl participants in each year. <sup>c</sup>The average annual cost per hour is based on girls receiving an ideal programmatic dose of 1,152 hours over a two-year period (576 hours per year).

#### Ishraq total cost per girl per recommended dose

Ideal dose (hours of participation)	Cost per girl per hour	Total
576	\$2.45	\$1,411.20

#### 2.3.9 Monitoring and Evaluation

The Population Council oversees monitoring and evaluation of Ishraq with an officer who works with field officers recruited in each local NGO. The average annual cost of monitoring is \$27,473, or \$14.89 per girl. At the village level, promoters monitor the attendance of participants in each class and conduct home visits in the event of four consecutive absences.

Ishraq is currently implementing an impact evaluation to measure the impact of the project on direct participants as well as nonparticipants in the village such as parents and siblings. The total cost for research activities (baseline and endline survey combined) is \$190,111, or \$103.04 per girl. The evaluation plan also includes surveying of girls and community members in control villages where no intervention is taking place.

### *2.3.10 Program Outcomes*

The study period is not long enough to gauge the impact of the program on outcomes such as educational attainment, age at marriage, fertility, child health and education, participation in economic activity, and empowerment in household decisionmaking. However, it will establish a database for future use. A sample of key indicators that will be used to measure outcomes of girls include:

- Grade attainment and repetition, rate at which girls are mainstreamed back into preparatory (middle) schools.
- Passing government-sponsored literacy tests.<sup>18</sup>
- Self-reported ideal age at marriage and views about decisionmaking regarding marriage partners and timing of marriage.
- Self-reported ideal family size and fertility intentions.
- Basic knowledge about nutrition, hygienic practices, bodily functions, reproductive behavior, and family planning.
- Girl's circumcision status and intention to circumcise their daughters.<sup>19</sup>
- Reduction of social isolation through widening girls' circle of friends, support they receive from peers, and extent to which they participate in group/community activities.
- Girls', parents', and brothers' attitudes about women's work outside the home, traditional female roles, domestic violence, sex preference for schooling, decisionmaking within the household such as spending, son preference, and choice of marriage partners.
- Anthropometric measurements (height and weight/WHO standards for body mass index).
- Basic knowledge about savings and budgeting skills and practices.
- Actual savings.
- Planning for future financial goals and preparing for unexpected emergencies.
- Parents' and brothers' attitudes.

### *2.3.11 Program Evolution*

Ishraq has evolved from a pilot phase to the current scale-up phase in numerous ways:

- The financial education and nutrition components are new to the scale-up phase.
- Class size has increased from 25 to 30 girls per class, with two classes per village.
- Younger girls are being targeted, most of whom have never been to school.
- In the pilot phase, girls were recruited into the program on a first-come, first-served basis, which attracted those who there were well connected to the youth center through relatives. In the scale-up phase, the recruitment strategy changed to reach the priority segment of girls aged 12–13 with no schooling through more rigorous community mobilization and outreach activities via village committees, pamphlet distribution to eligible households, meetings with parents, posters, and announcements made with megaphones.
- The program was previously implemented by Save the Children, whereas now local NGOs located at the governorate level are implementing the program. Implementation management and research has moved from Save the Children to the Population Council.



- With the support of small grants,<sup>20</sup> and through the creation of Girls' Clubs in some of the previous phases of Ishraq (previous generations of girls who have now graduated), the Council is facilitating a second phase of Ishraq with some former promoters and graduates who continue to learn and interact with each other after completion.

### *2.3.12 Associated Programs*

Brothers play a critical role in helping shape girls' lives. Therefore, Ishraq offers "New-Visions" life-skills classes to the brothers and male relatives of the girls in the program for six months (with an ideal programmatic dose of 76 hours). This component encourages them to think and act in a more equitable manner. Boys are targeted for recruitment using baseline data to identify brothers of girls enrolled in the program, after which other male relatives and neighbors are given priority for enrollment.

Under the current scale-up phase, two classes comprised of 25 boys (aged 13–18) each in every village are formed, with a total of 1,500 boys participating. Boys participate twice a week at the youth center at separate times and places from the girls' meeting spaces. The average annual cost is \$15,446, or \$10.30 per participating boy, or \$0.46 per hour per boy.

There are 30 male promoters implementing life-skills training for boys and men in the community. The male promoters receive 14 days of training in two training rounds. Male promoters are recruited through public announcement made by the youth center. The program selects one male promoter between the ages of 23 and 25 in each village. Promoters receive training on communication skills, creative thinking, values and human relations, gender issues, and planning for the future. They work for seven months and are paid \$60 per month.

## 2.4 SAFE AND SMART SAVINGS PRODUCTS FOR VULNERABLE ADOLESCENT GIRLS IN KENYA AND UGANDA

by Karen Austrian

- EARNING MONEY
- Selling food (Kenya)
  - Selling chapati
  - Selling Maize (Kasoli)
  - Driving taxi
  - Selling matooke
  - Selling clothes
  - Shoes
  - Selling metallic Beds
  - Retail shops
  - Bank
  - furniture
  - Cleaning Roads
  - Selling Oranges/Egg plants (vegetables)
  - Video
  - Making Snacks (Samosa)
  - Selling suitcases (metal)
  - Saloon
  - Washing Cars.
- Professional jobs
- Police officer
  - House girl
  - Nurse
  - Lawyer
  - Landlord
  - Teacher
  - Bank
  - Working in a Garage Mechanic



### 2.4.1 Program Summary

Safe and Smart Savings Products for Vulnerable Adolescent Girls in Kenya and Uganda<sup>24</sup> provides individual savings accounts for adolescent girls aged 10–19 along with financial education and social activities through “Safe Spaces” clubs, which are comprised of 25 to 30 girls led by female mentors aged 18–30. Groups meet once weekly for two hours for an ideal programmatic dose of 208 hours, at an average cost of \$0.29 per girl per hour across both programs. Girls meet for savings activities as well as financial education and health training. No fees are required to deposit money; each girl has an individual savings account, and the most frequent depositor and most active participant in each group is rewarded twice a year. During the pilot phase in Uganda, the girls first opened individual savings accounts, and then formed groups.

### 2.4.2 Target Population

Market research conducted before design and implementation of the pilots found that the absence of formal, accessible savings products for girls in East Africa increased their risk and vulnerability. Girls without safe, planned places to store their savings have been robbed; have suffered harassment by family members, boyfriends/husbands, and others in the community; and have been targets of sexual violence. Girls had also not been taught about budgeting and savings skills, and many lacked social networks and basic health knowledge regarding HIV and reproductive health.

In Kenya, the project was piloted in December 2008 in the urban slum of Kibera, where 44 percent of girls live with both parents, and 27 percent live with neither parent (Erulkar and Matheka 2007). There is a heterogeneous mix of ethnic and religious groups, including Catholic, Protestant, and Muslim, and girls speak a mix of English and “Sheng,” an urban youth slang. During the pilot test, 90 percent of participating girls aged 10–14 were in primary school. In Uganda, the project was piloted in October 2009 in three slums in Kampala, where 33 percent of participating girls live with both parents and 20 percent live with neither parent. There is also a heterogeneous mix of ethnic and religious groups, including Catholic, Protestant, and Muslim. The majority of participating girls are in school, but 40 percent report that they do not read fluently.

### 2.4.3 Program Activities

The main project components are:

- Individual savings account (each girl receives a savings account, photo ID, T-shirt, and lockable home bank).
- Financial education on saving and budgeting, setting financial goals, and earning money.
- Safe spaces groups that provide social networking opportunities, access to a mentor, games, and “fun days.”
- Life-skills training including good grooming, hand washing/cleanliness, information about drug abuse and sexual abuse, self-esteem, and managing stress.
- Health training on HIV and reproductive health issues such as early/teenage pregnancy, learning about the female body.

### 2.4.4 Community Engagement

During the pilot phase in Kenya, approximately six months were required to root the program in a new community including project development and savings product development. In subsequent



phases, that time was reduced to four months, and in the new rollout, it took approximately one to two months. Once the process had been streamlined, time was primarily devoted to training finance officers and mentors.

Before recruitment, orientation meetings are held with community leaders and parents. The program is advertised at local NGOs and community groups, schools, churches, and to adult banking clients who have daughters/nieces eligible to join, in addition to door-to-door recruitment. Meetings with participating girls are held by mentors in schools, churches, compounds, and community halls.

A meeting space is identified either by a field officer from a participating bank, or by a mentor. Spaces are often free to use, but sometimes can have a small cost of about \$10–15 per month.

#### *2.4.5 Beneficiary Enrollment and Participation Requirements*

It takes approximately three to four months to recruit a cohort of girls into the project through the mechanisms described above. The main obstacle to enrolling targeted girls is parents' initial skepticism regarding the savings account; parents either state they are too poor and do not have additional money for savings, or that if the girls have money to save they should give it to their family. Another enrollment challenge in Uganda is the small opening balance requirement. Further, because there is not more targeted recruitment, the program is not enrolling the most vulnerable girls, thus a high percentage of participants are in school, not married, and without children.

To be eligible to participate in the project, girls must be aged 10–19 and live in the geographic area. They also must be willing to open an account with a financial mentor who assists girls in opening a savings account and making withdrawals. Potentially all girls aged 10–19 in a targeted area could benefit from the project activities.

Girls are intended to be involved in project activities for an unlimited amount of time on an ongoing basis, ideally for a period of two years. During that time, girls would receive a project dose of two hours weekly for a total of 208 hours, although the project pilot period was one year. It is also possible that at some point a girl will leave the group but continue saving money.

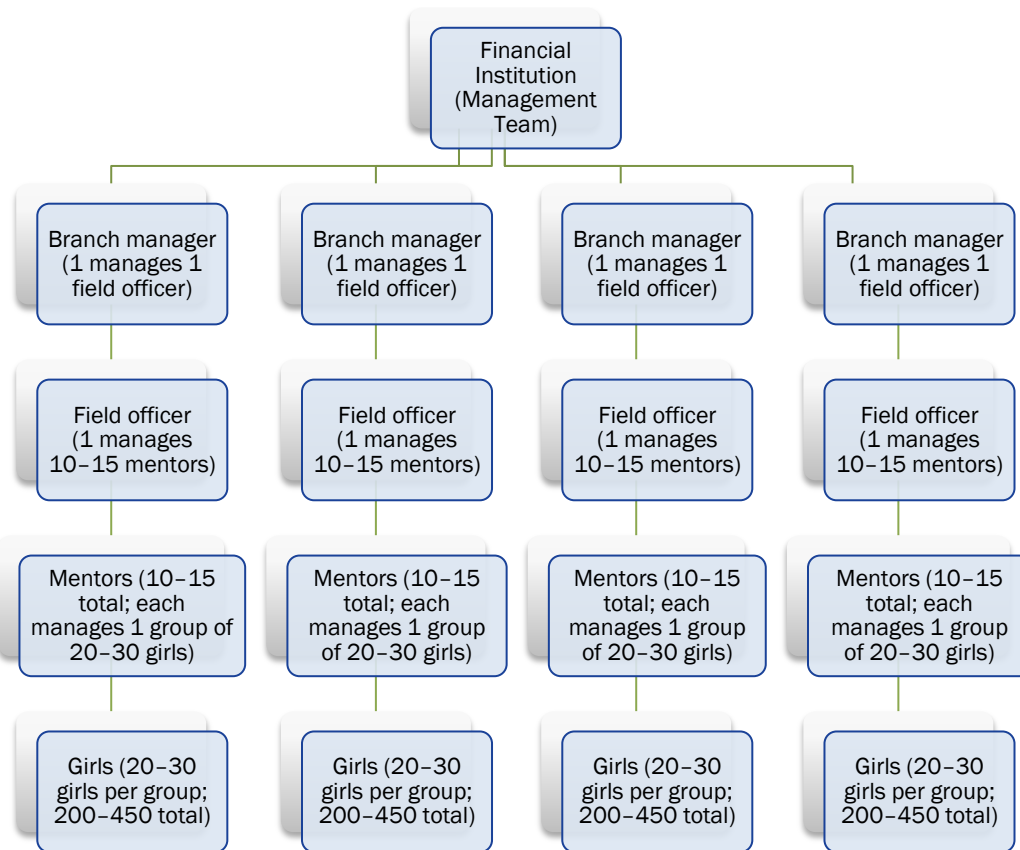
It is expected that girls participate in safe spaces gatherings at least 75 percent of the time, coming to at least three to four meetings per month. Even if a girl does not have money to save on a particular week, she is still encouraged to participate in meetings. In Kenya, between 5 and 10 percent of participants dropped out after an initial recruitment of 500 to 1,000 girls per financial institution, after which recruitment stopped. In Uganda, there is rolling admission, and 99 percent of girls who joined a group were still participating after one year.

During the pilot phase in Kenya, girls first became part of safe spaces groups (25–30 girls per group) and then opened savings accounts. Deposits and withdrawals take place at group level, meaning that girl groups make deposits and withdrawals together as a group. In Uganda, not all girls were given the opportunity to join groups, and evaluation data revealed more gains for those girls who were part of both savings and mentor groups. For example, girls with a savings account reported a 15 percent reduction in “sometimes feeling worthless,” while girls with both a savings account and group participation reported a 31 percent reduction. Additionally, girls in a group were found to be 1.7 times more likely at endline than girls with a savings account only to disagree that men rape girls because they can't control themselves (compared to no difference at the baseline) (Austrian, forthcoming).

### 2.4.6 Organizational Structure

In Uganda, the program is managed by a team from the Financial Institution Head Office. There are four branch managers, each of whom manage one field officer and supervises 10–15 mentors. Each mentor is responsible for a group of 20–30 girls. Field officers are compensated \$80 to \$115 per month. The Population Council and MicroSave Consulting, Ltd., also provide significant support and training of field officers and mentors at the community level.

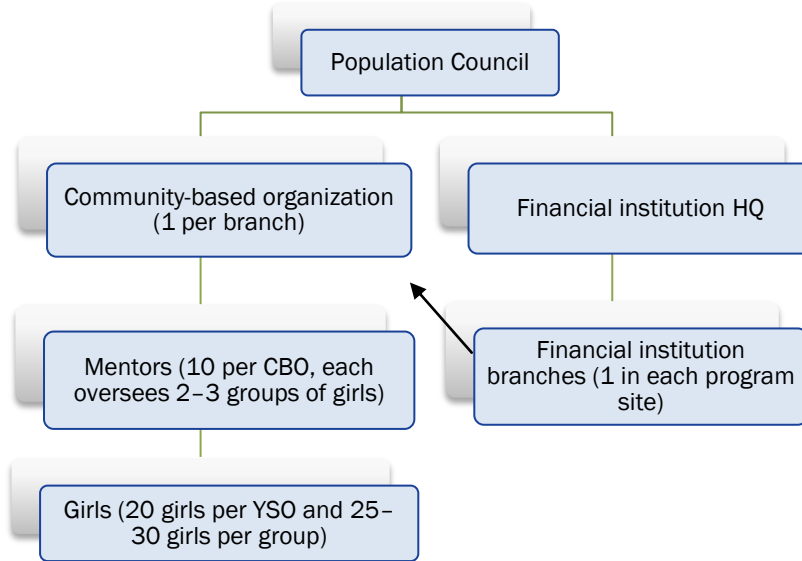
**FIGURE 3 Safe and smart savings products for vulnerable adolescent girls in Uganda: Organizational structure**



During the pilot test the groups in Kenya were managed by the financial institutions. As the program started rolling out, a community-based organization (CBO) was contracted at each new branch to hire, train, and supervise the mentors and take overall responsibility for the weekly girls' group meetings, health training, and financial education. Each CBO has one program coordinator who oversees 8–10 mentors. Each mentor oversees two to three girls' groups. Each Youth Savings Organization (YSO) has approximately 20 girl participants, and each girls' group has approximately 25–30 girls. The program coordinator liaises with the financial institution field officers to ensure proper account opening and management. Population Council and MicroSave staff provide supervision and training.



**FIGURE 4 Safe and smart savings products for vulnerable adolescent girls in Kenya: Organizational structure**



#### 2.4.7 Female Mentors

Most girls fall below the legal age of 18 required to hold a bank account in Kenya and Uganda. Thus each girl selects a female mentor over the age of 18 to assist with opening the account and making withdrawals, although girls can make deposits on their own. In addition, each group has a female mentor aged 18–35 from their community who facilitates the weekly group meetings.

During the pilot, there were problems retaining mentors (50 percent of mentors were lost during the pilot phase) because they were volunteers and participating financial institutions did not want to be financially involved beyond the savings component. Since the rollout period, each branch now partners with a community organization that directly hires mentors, and there are performance expectations and higher retention rates.

Mentors in Kenya are compensated \$34.50 per month for part-time work, which is equivalent to what community health extension workers earn in Kenya. This is also comparable to what a full-time primary school teacher earns on an hourly basis (\$92 to \$115 per month), and to what a live-in house maid earns (\$34 to \$46 per month). There were 15 mentors in Kenya during the pilot phase and 25 during the current rollout, and each mentor manages three to four groups of girls. In the rollout phase, mentors no longer served as savings account signatories as this was caused too many problems. Now each girl picks a female over the age of 18 to be a signatory for her savings account—a parent, guardian, or another female of her choice.

During the pilot phase in Uganda, girls also chose two respected females from the community who are between the ages of 18–30. One is a signatory, or financial mentor, for their savings account, who is chosen individually by each girl. The other is the group mentor. The group mentors are expected to have leadership qualities and some reproductive health knowledge.

The mentors in Uganda in the past had not been paid a monthly stipend but were reimbursed for transport costs to attend monthly review meetings. Now there is a trial period during which mentors are paid \$31 per month. There were 60 mentors in Uganda during the pilot phase, and 110 during the rollout in 2011.

Mentors are trained for one week in financial education and how to be a trainer, and receive one day of refresher training each month in communication, group management, conflict resolution, and counseling. It costs approximately \$3,000 to conduct an initial training with 25 mentors in Uganda, or \$3,500 for 35 mentors, including the cost of the hall, food, and supplies. In Kenya during the pilot phase, training cost approximately \$500 per month for 25–30 mentors, or \$6,000 annually. Mentors are reimbursed \$5.75 per day for transportation in Kenya and \$4.15 per day in Uganda.

#### 2.4.8 Average Annual Program Costs

The current projected average annual cost (2011) of implementing the program in its post-pilot phase in Kenya is \$232,335. This cost excludes monitoring and evaluation costs of \$111,000 in 2009 and \$94,000 in 2011. The average annual cost per girl is \$58.08, or \$0.28 per girl for each hour of the project dose that she receives. The cost per girl decreased from \$232.86 during the pilot phase in 2008–2009 to \$58.08 in 2011. This decrease in cost per girl can be attributed primarily to the project’s scale-up from reaching 1,087 girls in 2009 to a targeted 4,000 girls in 2011.

In Uganda, the projected average annual cost (2011) of implementing the program is \$307,000, or \$61.38 per girl, which costs an average of \$0.30 per girl for each hour of the project dose received. Similar cost decreases can be observed in Uganda. In the pilot phase in 2009–2010, the total project cost was \$378,500 (excluding monitoring and evaluation costs of \$112,300). This costs on average \$205.15 per participating girl, reaching 1,845 girls. In comparison, while the total projected program cost in 2011 is \$210,000 (excluding monitoring and evaluation costs of \$100,000), the cost per girl decreased in the second phase of the project to \$42.00 per girl. During this phase 5,000 girls were targeted, of which 2,915 are already participating. Like Kenya, although overall program costs did not significantly decrease from pilot to the second phase of the program, the number of girls reached increased significantly, decreasing the average cost per girl.

**TABLE 6 Safe and smart savings products for vulnerable adolescent girls in Kenya and Uganda: Average annual program costs<sup>a</sup> (2009–2010)**

Program component	Program (Kenya)	Per girl <sup>b</sup> (Kenya)	Program (Uganda)	Per girl <sup>b</sup> (Uganda)	Per hour <sup>c</sup>
Savings accounts	\$42,309	\$10.58	\$44,821	\$8.96	\$0.05
Safe Spaces mentoring	\$17,481	\$4.37	\$31,643	\$6.33	\$0.03
Monitoring and evaluation	\$93,925	\$23.48	\$96,900	\$19.38	\$0.10
Administrative	\$78,621	\$19.66	\$133,521	\$26.70	\$0.11
<b>TOTAL</b>	<b>\$232,336</b>	<b>\$58.08</b>	<b>\$306,884</b>	<b>\$61.38</b>	<b>\$0.29</b>

<sup>a</sup>Costs are reported in US\$2011. <sup>b</sup>The average annual cost per girl is calculated by dividing the total annual program cost by the number of girl participants in each year. <sup>c</sup>The average annual cost per hour is based on girls (average across both programs in Kenya and Uganda) receiving an ideal programmatic dose of 208 hours.

#### Safe and smart savings products for vulnerable adolescent girls in Kenya and Uganda: Total cost per girl per recommended dose

Ideal dose (hours of participation)	Cost per girl per hour	Total
208	\$0.29	\$60.32

#### 2.4.9 *Monitoring and Evaluation*

Banks monitor savings records, the number of girls participating in savings, and savings activity; mentors take attendance and monitor the girls' activities at the group level. Mentors have weekly meetings and are supervised by community-based organization staff in Kenya and Population Council and MicroSave staff in Uganda.

A quantitative survey was conducted with 3,000 girls (1,000 intervention girls and 500 comparison girls in each country) at baseline, 12 months, and 24 months. A qualitative study conducted by the Population Council, including focus groups and in-depth interviews with girls, their parents/guardians, and mentors, was conducted at the end of the pilot period. In Kenya, the total cost of monitoring and evaluation was \$111,000 in 2008 and a projected cost of \$94,000 in 2011, comprising 44 percent of the total 2008 program costs, and 39 percent of the total projected 2011 costs.

#### 2.4.10 *Project Outcomes*

After a girl has participated for an ideal length of time (18 months to two years), it is expected that she will experience a positive increase on all the baseline program indicators. Although at the end of 18 months it will not be possible to measure longitudinal impacts on the girls, it is expected that by participating they will have delayed age at marriage, increased school attendance, delayed childbirth, etc. Ongoing monitoring is conducted by field officers, mentors, and the participating banks, and the cost is included in field officer and mentor salaries.

Key outcome indicators that program measures include:

- Financial literacy (understanding of savings and budgeting).
- Girls' saving (amount/frequency of saving).
- Attendance at safe spaces meetings.
- Social assets such as number of mentors and friends a girl has, self-esteem, positive gender norms, social mobility, communication with parents.
- Basic HIV and reproductive health knowledge.
- Goals in life (beyond financial).
- Financial literacy.

Preliminary qualitative surveys from the pilot phase in Kenya have shown positive outcomes for participants. Girls are now able to identify the benefits of savings accounts, such as providing a safe place to keep money and the affordability of saving. There was an increase in savings for particular goals such as school fees and school clothing. Seventy-four percent of girls reported saving in the past six months at the endline, as compared to 30 percent at baseline; 60 percent of girls made use of the home bank they were given; 23 percent reported using a bank account (compared to 1 percent at baseline); nearly all had savings goals; and two out of three girls had a financial goal. Account balances increased by an average of 14 percent over the year, and 99 percent of all monetary transactions constituted deposits, with only 5 percent of girls making withdrawals.

Participants also had increased opportunities to make friends (increase of five friends at baseline to ten at endline) and an increased awareness of how to be a better person, such as being more respectful and giving back to the community. Additionally, mentors reported that adolescent girls had gained respect in the community and observed that girls are more disciplined with money and are

more hygienic. Reports of feeling worthless reduced from 55 percent at baseline to 34 percent at endline (Austrian forthcoming).

When interviewed, the group of 10–14-year-old girls talked easily with their peers and parents about knowledge they gained, such as early pregnancy, HIV/AIDS, drug and alcohol abuse, and good grooming. Strengthening of family relationships has also been reported.

The pilot evaluation in Uganda provides promising data on the effect of providing safe spaces, financial education, and a formal savings account to participants. One of the most alarming differences found between girls in savings groups and those who were not in groups were experiences of sexual harassment and violence, pointing to the possibility that simply providing economic empowerment (e.g., savings account only) has the potential to increase a girl's vulnerability unless it is done in the context of a more holistic asset-building program. Key findings include:

- Girls who had participated in the savings group were more likely to feel that people in their community trusted one another, and after one year of participation were more likely to have someone in their community they could borrow money from as compared with both girls with an account only and girls in the comparison group.
- All girls with an account (group and no group) had increases in economic assets as compared to the comparison group.
- Girls with a savings account experienced a 15 percent reduction in reports of “sometimes feeling worthless,” whereas girls with a savings account and group participation experienced a 31 percent reduction.
- Girls without a group were two times more likely than those with a group to have been touched inappropriately by someone of the opposite sex, and experienced a 25 percent increase in being teased by a member of the opposite sex.
- Girls in a savings group were more likely to have educational, employment, and health goals than girls without a group.
- Girls with a group compared with girls without a group were significantly more likely correctly identify more methods of HIV transmission, three and a half times more likely to name at least one correct method of HIV transmission, two times more likely to know that something can be done to prevent HIV transmission, and three times more likely to know at least one method of family planning.
- Girls not in a savings group made more withdrawals than girls in a savings group.

#### *2.4.11 Future Program Evolution*

Pending funding, the program intends to scale-up to reach more girls; 4,000 girls are targeted to be reached in Kenya and 5,000 in Uganda, and with additional funding for a national scale-up an additional 10,000 to 25,000 girls could be reached in each country in different geographic areas. A similar program in the planning stages in Zambia intends to reach 12,000 girls in urban, peri-urban, and rural areas. The Zambia program will include: girls' groups with mentors providing life skills, health, and financial education; savings accounts; and health vouchers that will serve as coupons to take to service providers. A longitudinal study will be conducted over a four-year period.



## 2.5 ABRIENDO OPORTUNIDADES IN GUATEMALA

by Jennifer Catino, Alejandra Colom, and Angel Del Valle





### 2.5.1 Program Summary

Abriendo Oportunidades<sup>22</sup> is a safety net program that empowers young, rural, Mayan indigenous women in Guatemala aged 8–24<sup>23</sup> to live healthy and productive lives. The program divides these participants into age-appropriate cohorts and works with them through community-based girls' clubs in safe spaces to build their health, social, and economic assets. Key goals are to improve health and education outcomes, improve gender equality, and promote community development.

The program is run predominantly by young female graduates who have been trained to become leaders of girls' clubs. Each intern or girl leader manages two girls' clubs with different age cohorts (ages 8–12 with 25 to 30 girls per group, and ages 13–18 with 15–25 girls per group), implemented over one year, meeting at least three times per month. The average annual program cost is \$255,033, which translates to \$106.45 per girl, or \$1.02 per girl for each hourly program dose she receives.

### 2.5.2 Target Population

Abriendo Oportunidades currently has girls' clubs in 48 rural indigenous communities in the departments of Alta Verapaz, Chimaltenango, Quetzaltenango, Sololá, and Totonicapán, representing six linguistic regions. Most of these communities are rural, except for some of those in Chimaltenango and Quetzaltenango, which are peri-urban. Mayans are the ethnic majority, and religion is divided between the Catholic majority and Protestants. Monolingualism is a very common characteristic among children and women, and agricultural activities dominate the daily life.

Mayan girls are Guatemala's most vulnerable population in comparison to both Mayan boys and their *ladino* counterparts (*mestizo*, or persons of mixed European and Native American ancestry). Girls face low educational attainment and literacy, early child marriage and child bearing, early child labor, and decreased economic opportunities as adults:

- Eighty-one percent of indigenous children and adolescents live in poverty, and 32 percent live in extreme poverty, compared with 44 percent and 10 percent of *ladino* youth, respectively (UNICEF 2008).
- More than two-thirds of indigenous girls live in rural areas where they often lack access to basic health and social services.
- Forty percent of indigenous girls enter a consensual or formal union before age 18, almost twice the percentage of nonindigenous girls, and 54 percent of indigenous girls will give birth before age 20, compared with 39 percent of *ladina* women (Hallman et al. 2007).
- Adolescent parenthood is three times higher among girls who have not completed primary school than among those who have (68 percent versus 22 percent) (Figueroa et al. 2006).
- Maternal mortality in the Guatemalan Highlands can reach well over 200, which is six times the level found in Guatemala City. Youngest first-time mothers, often adolescents, are at particularly high risk.
- On average, indigenous girls in rural areas complete only 1.2 years of schooling, compared with 8.9 years for nonindigenous boys in urban areas; at the age of 17, only 46 percent of indigenous boys and 26 percent of indigenous girls remain enrolled in school, compared with 56 percent and 53 percent of *ladino* boys and girls.
- Thirty-one percent of indigenous girls are literate, compared with 94 percent of *ladino* boys.

- Thirty-one percent of indigenous children participate in the labor market, compared with 18 percent of ladino children. But the lack of economic opportunities forces many of them to migrate to urban areas seeking work as domestic laborers, where they are poorly paid and often subject to dangerous working conditions (UNICEF 2007).

### 2.5.3 Program Activities

The Abriendo Oportunidades program consists of four core components:

- Establishment of public safe spaces for girls, with structured sessions on topics including self-esteem, life skills, developing aspirations and plans for the future, pregnancy and HIV/AIDS prevention, health and wellness, and unstructured sessions where girls meet for recreation and social activities to strengthen their social network and explore their interests in a safe and supportive environment.
- Development of indigenous girl leaders in rural communities with social assets in areas such as leadership, communication, and community organizing.
- Providing paid internships and skill building to foster workforce development in young indigenous women within community-based NGOs, or public- and private-sector institutions willing to participate in the Abriendo Oportunidades program
- Connecting clubs and graduates through national rural girls' empowerment networks to link girls' clubs and create a regional Mayan network of female leaders. This "female infrastructure" connects young women over the age of 18 who have participated in the program, gained employment, continued their education, and/or become community resources.

### 2.5.4 Community Engagement

*It takes approximately one and a half months to root the program in new communities.* This includes interviewing and selecting potential interns and introducing the program to community leaders and members. After this, house-to-house mapping is conducted to identify potential participants aged 8–18. Eligible girls are enrolled in the program after interns invite girls to club meetings. A Memorandum of Understanding (MOU) between Population Council and communities is signed before activities begin.

Community councils are essential partners in developing the programs. Local leaders are responsible for locating a safe space, assisting interns in enrolling girls, monitoring girls' clubs monthly, and visiting households if a girl drops out.

Most safe spaces in which girls gather are classrooms in public schools, community halls, or the home of a local girl leader. The spaces are negotiated with leaders, parents, the intern, and girls who will be participating in clubs. The MOU establishes the community's responsibility to find and make available spaces for girls to use free of charge. Some small investments are made in the spaces that do not exceed \$100 per community each year. For example, a sign is made for each community costing \$30, totaling \$2,233 on average annually, or \$0.49 per girl.

### 2.5.5 Beneficiary Enrollment and Participation Requirements

Interns and girl leaders are responsible for inviting girl participants to club meetings. It is easier to reach girls in communities that have a strong sense of social organization, which is stronger in the isolated rural communities. As such, the peri-urban communities that implemented the program in 2011 appear to have more problems with community acceptance of the program, resulting in delays

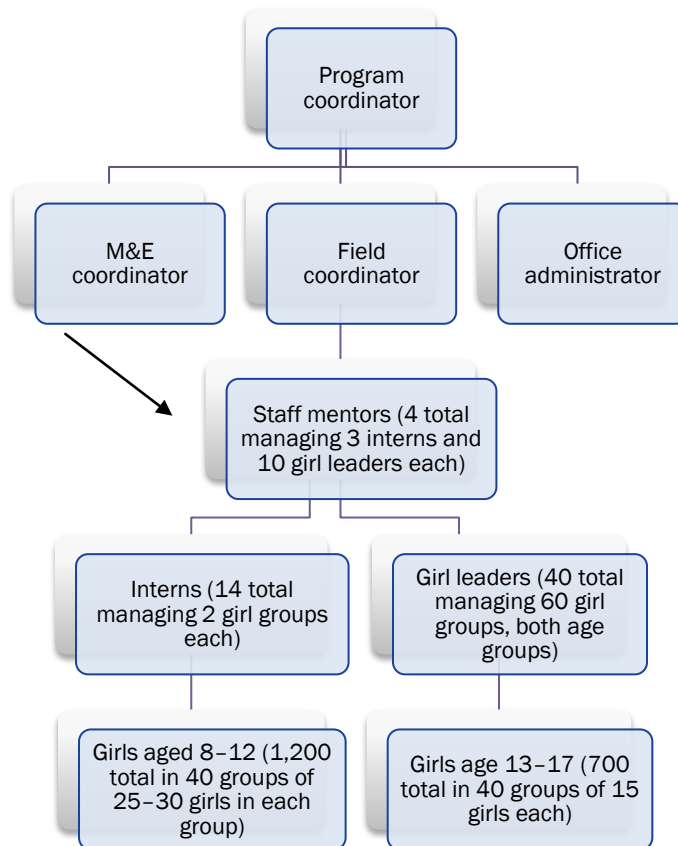
in signing the MOU and recruiting girls. There are also higher monitoring and evaluation costs because of the need for increased community visits.

The ideal number of girls per group is 30 in the age cohort 8–12 and 20 in the age cohort 13–18. Ideally, girls will receive a minimum programmatic dose of two hours per week, for a total of 104 hours over one year. The optimal level of participation is 85 percent, although it is expected that girls participate at a minimum of 70 percent over one year.

### 2.5.6 Organizational Structure

A program coordinator manages an M&E coordinator, field coordinator, and office administrator. The field coordinator supervises staff mentors, and the M&E coordinator also monitors staff mentors. The staff mentors are, in turn, responsible for managing both interns and girl leaders. Interns lead groups of girls aged 8–12, and girl leaders manage groups of girls aged 13–17.

**FIGURE 5** Abriendo Oportunidades organizational structure



### 2.5.7 Mentors, Interns, and Girl Leaders

Abriendo Oportunidades relies on a cascading leadership model to implement and root the program in communities, targeting the most disadvantaged indigenous girls. It consists of three levels of mentorship: staff mentors, interns, and girl leaders.

The current generation includes 14 interns and 30 girl leaders who receive 12 modules of training (six workshops and six curricula replications) over the course of one week provided by Population Council staff and experts when needed. The cost is \$66,420 on average annually, or \$490.93 per intern and girl leader trained. Compensation for mentors, interns, and girl leaders is comparable to the minimum wage for agricultural workers in Guatemala, which is approximately \$270 per month.

### *Mentors*

Each mentor is responsible for approximately ten communities, three interns, and ten girl leaders managing ten clubs and 500 girls.

Mentors are trained by the program's coordinator, field coordinator, office administrator, and M&E\_coordinator. They take part in community mapping, household surveys in homes with girls aged 8–18, validation and implementation of program evaluation instruments and surveys, collection of program monitoring data, data entry and analysis, and reporting.

Mentors are experienced indigenous women who speak at least one local language, are college students between the ages of 22 and 26, and were part of the pilot and second generation of the program. Since 2008, a total of eight mentors have joined the Population Council's staff, and only one has dropped out. Staff mentors began earning a salary of \$500 per month in 2008, which increased to \$750 in 2011. Staff mentors are expected to collaborate with the Population Council for a period of two years.

### *Interns*

Girl interns spend half their time on girls' club and community activities, such as representation on Community Development Committees where they gain community leadership and mobilization experience. Support is provided over a period of one year to girl leaders who manage girls' clubs in their communities. The other half of their time is spent developing professional skills and contributing to the work of the host institution during a 15–18 month period. They also receive support from past leaders, program staff, and volunteer mentors from their community, and have opportunities to leave their communities; build peer, social, support, and professional networks; and return to formal school or vocational training.

Older girls in the program aged 18–22 can apply for paid professional internships with community-based NGOs or public- and private-sector institutions that are willing to work with Abriendo Oportunidades. Internship opportunities are advertised on community radio and in local meetings through partner organizations, local municipalities, women's groups, etc.

After applicant finalists are interviewed, vetted by program staff, and selected by staff mentors and host NGO staff, the interns sign a contract and participate in an orientation. They begin monthly training that lasts more than 12 months on subjects including leadership, life skills, and gender-based violence. The training prepares them to lead girls' clubs activities in their communities, and they receive adult mentorship and participate in workshops run by staff mentors.

Interns are paid a monthly stipend of \$125 for their work (pilot to date) as an incentive to remain in their communities and learn skills that can open up future formal employment opportunities.

## *Girl Leaders*

Girl leaders are responsible for mentoring groups of girls aged 13–17. After an intern graduates and gives up her leadership responsibility, girls' clubs are managed by girl leaders. Their leadership skills are developed through program participation, and participants are expected to enroll in school to continue their education while participating in weekly club meetings.

After the initial selection of girl leaders in 34 communities in 2009, girls aged 15–18 were able to apply to become girl leaders. They receive a monthly stipend of \$62.50 for part-time work (2009 to date). Since the pilot phases began, approximately 15 girl leaders have dropped out of the program.

### *2.5.8 Average Annual Program Costs*

During the pilot phase (August 2004 to July 2006), *Abriendo Oportunidades*<sup>24</sup> was implemented in 14 communities. Sixteen girl leaders ran clubs with a total of 294 girls participating (182 girls aged 8–12, and 112 girls aged 13–17). In the pilot, the two age groups participated together, while in subsequent generations, age groups were separated. The total cost to implement the pilot was \$410,734 or \$331.23 on average annually per girl participant and intern.

From the second generation to current generation of girls over a three-year period (2009–2011), the average annual program cost was \$225,032 or \$106.45 per girl, intern, and girl leader. This amounts to *\$1.02 per girl for an ideal programmatic dose of two hours per week* for a total of 104 hours per year. From the pilot to the current generation, the cost per girl has decreased by 85 percent. During the second generation<sup>25</sup> of interns (October 2007 to September 2008), eight girl leaders led girls' clubs in ten communities, with a total of 854 girls participating (470 girls aged 8–12, and 384 girls aged 13–17).

In the third generation<sup>26</sup> of interns (September 2008 to September 2009), 19 interns (there were no girl leaders) led girls' clubs in 19 communities. A total of 1,352 girls participated (768 girls aged 8–12 and 584 girls aged 13–17). The annual cost of program implementation in the third generation excluding monitoring and evaluation costs was \$195,587 or \$142.71 per participating girl and intern.

Currently (September 2009 to date), *Abriendo Oportunidades* has scaled-up to reach 3,448 girls (exceeding the target of 2,500) in 34 communities. Sixty-eight girl leaders (no interns) have been selected from a pool of previous participants. The total cost of this scale-up, excluding monitoring and evaluation costs, is \$201,601 on average annually, or \$58.30 per participating girl and intern. In 2009–2010, 12 percent of the girls (416) did not attend any meetings.

In a new fourth generation<sup>27</sup> of interns (October 2010 to date), 35 girl leaders and 14 interns are leading girls' clubs in 14 communities. The program is targeting 1,300 girls and reaching approximately 850 girls (500 girls aged 8–12, and 350 girls aged 13–17). The program has 42 girl leaders (78 were originally selected in 2009) operating clubs reaching more than 4,000 girls in 48 communities from five departments across six linguistic regions, with an average annual cost of \$199,850 excluding monitoring and evaluation costs, or \$49.79 per girl.



**TABLE 7 Abriendo Oportunidades' average annual program costs for second to fourth generation<sup>a</sup> (2009–2011)**

Program component	Program	Per girl <sup>b</sup>	Per hour <sup>c</sup>
Establish safe spaces and clubs	\$5,378	\$2.51	\$0.02
Develop cadre of girl leaders	\$24,094	\$12.39	\$0.12
Provide internships/skills building	\$91,840	\$43.88	\$0.42
Community mobilization	\$2,778	\$1.28	\$0.01
Monitoring and evaluation	\$26,020	\$11.96	\$0.11
Administrative	\$74,922	\$34.43	\$0.33
<b>TOTAL</b>	<b>\$255,033</b>	<b>\$106.45</b>	<b>\$1.02</b>

<sup>a</sup>Costs are reported in US\$2011. <sup>b</sup>The average annual cost per girl is calculated by dividing the total annual program cost by the number of girl participants in each year across three generations (second to current). <sup>c</sup>The average annual cost per hour is based on girls receiving an ideal programmatic dose of 104 hours annually.

#### Abriendo Oportunidades total cost per girl per recommended dose

Ideal dose (hours of participation)	Cost per girl per hour	Total
104	\$1.02	\$106.08

### 2.5.9 Monitoring and Evaluation

Monitoring of Abriendo Oportunidades consists of project monitoring with feedback throughout the project cycle to adjust project strategies, and evaluation to assess project effectiveness as measured against outcome indicators.

During 2009–2010, monitoring and evaluation involved a wide range of personnel and consultants engaged to support M&E activities. In-country staff have been engaged in the day-to-day management of data collection and entry as well as the training of girl leaders on using data tools. In August 2010, a local consultant was hired to coordinate the monitoring and evaluation activities, supported by the director, four staff mentors, and a field coordinator.

Monitoring expenses include supervision by staff mentors who visit clubs at least once per month and baseline and endline evaluation activities conducted by the field coordinator, staff mentors, and the M&E consultant, estimated at \$25,351 on average annually.

### 2.5.10 Program Outcomes

After completion of the program, girls are expected to have gained the following:

- Professional/life plans.
- Perceptions of the benefits of professional and protective asset building.
- Improved perceptions of self-efficacy, self-esteem.
- Improved perceptions of social support.
- Improved access to mentors.
- Improved access to safe spaces.
- Improved sense of autonomy, mobility.
- Greater awareness of human rights, national laws, and GBV prevention.

- Gender equitable attitudes.
- Greater reported sense of safety and support in home/community.
- Positive views of their “future.”
- Regular access to peer and social support networks.
- Identification cards (with photo, birth date, community, ethnicity, languages, etc.).
- Continuous training and education (on issues such as human rights, prevention of GBV).
- Ongoing skill building and practice/application (leadership, life skills).
- Opportunity to leave home (develop mobility, autonomy, etc.).
- Access to recreational opportunities (sports, arts, social).
- Connections to referral network for support related to GBV (physical health, mental health, legal, social, etc.).

During the pilot, core outcome indicators for girl beneficiaries included:

- Continuation of education.
- Delayed age at marriage and first birth.
- Retention of health and economic assets past discontinuation of program attendance.
- Leadership and teaming capacity.

The percentage of participants in 2009–2010 who were unmarried remained high from baseline to endline for both age groups, with very few girls marrying over the year. Compared to national data for rural indigenous girls that estimates that 88.7 percent of girls aged 13–18 have never married (2006), 97 percent of Abriendo Oportunidades participants in the same age group were unmarried at endline.

Further, very few Abriendo Oportunidades participants are mothers. There was a slight decrease from baseline to endline in the number of girls who currently have children, most likely because girls with children had too many family responsibilities to continue in the program. Girls’ future plans related to marriage and children did not change substantially from baseline to endline; most participants in both age groups hope to marry and have their first children while in their twenties.

The development of girl leaders at the community level has multiple programmatic and social benefits:

- Participants tend to relate to and more easily trust someone who speaks their language and works within their culture, and the older girl leaders or mentors become positive role models for them as they go through the program.
- Girl leaders from the community are more likely to become continuous resources for their families and communities.
- Fostering girl leadership helps to positively change the status of girls and women in the family and community, creating a safer and more supportive and equitable environment.
- At the community level, awareness of the experience of safety and development of “safe-scoping” plans and forms of community response (e.g., lighting).

### *2.5.11 Future Program Evolution*

With additional funding, the program could expand to more communities and include more peri-urban areas. In the current generation, interns would be selected from the network of girl leaders. Additionally, Abriendo Oportunidades would like to develop a pilot of parallel interventions directed at boys seeking both to create the necessary alliance structures to support the program and to build more positive gender norms among boys.

## 2.6 SIYAKHA NENTSHA (“BUILDING WITH YOUNG PEOPLE”) PROGRAM IN SOUTH AFRICA

by Eva Roca, Kelly Hallman, and Raven Brown



### 2.6.1 Program Summary

Siyakha Nentsha (isiZulu for “Building with Young People”), initiated in 2007, developed health, economic, and social capabilities among in-school female and male secondary students in grades 10 and 11 in peri-urban and rural communities in KwaZulu Natal, South Africa.<sup>28</sup> The program objective was to enhance participants’ financial skills, social support, HIV/AIDS and reproductive health knowledge and skills, and future life options.

The full participation period was 12 months, which spanned two academic years. The program met one to two times per week for two to three hours, with an ideal programmatic dose of approximately 80 hours annually, costing an average of \$1.87 per student per hour. The program was run by male and female facilitators who were brought to classrooms as guest lecturers during school hours; average class size was 34 students. In 2008–2009, a total of 1,405 male and female students were reached by the program, 50 percent of whom were female.

This phase of the program was an expanded version of the pilot phase where the majority of participants were out-of-school young people who met for four hours per week on Saturdays in groups of 25.

### 2.6.2 Target Population

In its second phase (2008–2009), the project was located in the predominantly Zulu-speaking communities of Engonyameni and Madundube—a peri-urban and rural community, respectively. These areas are situated to the south of Durban, KwaZulu-Natal (South Africa) in the Umbumbulu magisterial area, adjacent to the large township of Umlazi. Six schools within the community were included, and a control school was selected in Folweni.

Most girls in the program area were in school, unmarried, of Zulu ethnicity, and spoke isiZulu. Early pregnancy was a problem among adolescent girls, and many were HIV-affected—either infected themselves or having loved ones who were. Eighty percent of households in the area received some kind of social grant. Twenty percent of female participants had been pregnant at least once, and 38 percent had lost at least one parent. This was a predominantly Zulu population speaking isiZulu, and most had some English ability.

### 2.6.3 Project Activities

The study had three intervention arms: (1) a control group that received standard life-orientation delivered by educators in South African secondary schools; (2) a group that received an enhanced package of social, health, and stress-management skills, delivered in a participatory manner in classrooms by trained young adult mentors from the local community; and (3) a group that received a package of social, health, and financial skills delivered in the same manner as the enhanced social and health arm. Key project activities that participants received include<sup>29</sup>:

- Essential communication skills (Study intervention arms 2 and 3).
- Knowing yourself—understanding yourself, assertiveness, determination, resilience, decisionmaking, goal setting (Study intervention arms 2 and 3).



- STIs, HIV, AIDS—definitions, transmission, prevention, treatment, planning an HIV prevention campaign (Study intervention arms 2 and 3).
- Rights and responsibilities—human rights, needs versus wants, the bill of rights (South Africa), institutes that protect rights (Study intervention arms 2 and 3).
- Reproductive rights (Study intervention arms 2 and 3).
- Gender training—social and cultural aspects, violence against women (Study intervention arms 2 and 3).
- Social capital (Study intervention arms 2 and 3).
- Accessing identity documents and social grants (Study intervention arms 2 and 3).
- Stress management (Study intervention arm 2).
- Financial literacy—basics of data collection, basic statistics, data in everyday life (Study intervention arm 3).
- Managing personal finance—needs versus wants, savings and investments, planning a budget, personal financial goals, bank statements, personal income tax, salary advice schedules (Study intervention arm 3).
- Essential business skills—developing ideas and moving from ideas to implementation (Study intervention arm 3).
- Getting a job—resume building, job search, and interview skills (Study intervention arms 2 and 3).

Although mentoring the learners was not one of the key program outcomes, some learners came to the facilitators for help on personal matters such as assisting with grants, identification cards, and mentoring/support. Facilitators also referred learners to service providers when needed.

#### 2.6.4 Community Engagement

*Community engagement involved a year-long process to secure the interest of school officials and approval to work as part of the official school day and curriculum. It takes approximately two months to root the program in the community. The cost of this community dialogue and outreach is approximately \$13, 827 annually, or \$9.84 per participant.*

Networking began with school heads to assess interest in the program, and continued throughout the program period. Stakeholders were regularly briefed on program status. Numerous meetings were then held with the district manager of the Department of Education, life orientation educators in each school, school governing bodies, traditional leadership, CBOs and NGOs operating in the area, the political leadership, and members of the ruling political party's youth structure. Stakeholder input was incorporated into the program as appropriate, and stakeholders were also involved in the recruitment of facilitators and in facilitating parents' approval. There was active and sustained involvement of Population Council staff and researchers in the stakeholder meetings.

The program was delivered in school classrooms during school hours. It took the place of the Life Orientation program that would normally be delivered at that time. This change was negotiated with school heads and with the local Department of Education. The program was implemented in collaboration with educators at the school, school governing bodies, the district manager of the



Department of Education, traditional leadership, and the political youth structure in the community. There was no cost for using school facilities.

### *2.6.5 Beneficiary Enrollment and Participation Requirements*

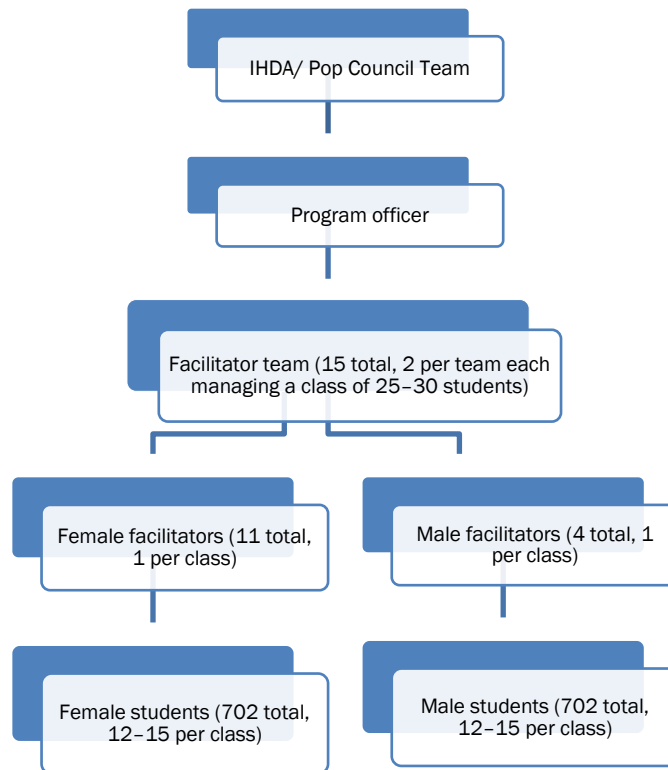
In 2008, program participants were boys and girls in grades 10 and 11 in six participating schools; the same cohort followed through 2009. Learners were informed of the program at schools, and parents were sent letters to consent to the learner's participation.

It was expected that participants would attend 90 percent of the time, that they would attend school, and that they complete all tasks and participate in program assessments. A variable number of sessions was offered by classroom, dependent on school closures, therefore the number of sessions ranged from 8 to 86, with a mean number of 37 sessions. The project had very few dropouts (17 total).

### *2.6.6 Organizational Structure*

The program was managed jointly by the Population Council and the Isihlangu Health and Development Agency (IHDA). A program officer was responsible for supervising and managing facilitators. Two facilitators were assigned per group of 25–30 learners. When possible, a male and a female were paired so students could observe respectful male-female nonsexual relationships and to help facilitate certain discussion topics that began with single-sex groups. Gender pairing during the discussion of gender-sensitive topics in the curriculum occurred in some classrooms, but this was not always possible as there were more female than male facilitators. In some classrooms, the program was implemented by two female facilitators.

**FIGURE 6** Siyakha Nentsha organizational structure



### 2.6.7 Program Facilitators

There were 25 trained male and female facilitators for the 2008–2009 phase of the program, out of which 15 remained for the entire length of the program (3 were dismissed; others secured permanent employment). Facilitators were required to have completed at least grade 12, and most were aged 19–24 when they started with the program. They were required to come from the same community and similar socioeconomic backgrounds as the learners they worked with, and to speak the local language.

Facilitators were trained on all modules by the Isihlangu Health and Development Agency over the course of four weeks before the start of the program. Facilitators received additional support and training every Saturday, and again before the beginning of each new module. This initial training period and a weekly Saturday session for ongoing mentor training cost \$33,607 annually. Facilitators were trained to prepare and deliver program modules and to be effective, and they were closely mentored and monitored.

As they were trained, facilitators developed educational, social, and financial aspirations, and they demonstrated efforts to improve their lives despite the challenges of unemployment. As the program progressed, many acquired some post-grade-12 qualifications, training, and/or enrolled at a community college.

Use (rental) of the training facilities cost approximately \$150. A total of \$4,857, or \$1.73 on average annually per program participant, was spent for the upfront and ongoing costs of training

facilitators, including two to three mentoring sessions per month per facilitator. Training materials provided per facilitator represented a one-time cost of \$1,195.

Facilitators received a beginning stipend of \$2,800 per program year (\$234/month), which increased with good performance. This includes costs for transportation and food, or \$32.94 per participant on average annually. This is comparable to stipends received within the community by a new auxiliary social worker, a community health worker, or a community development worker. Facilitators are registered with the Department of Labor, and contributions are provided to their unemployment fund.

### 2.6.8 Average Annual Program Costs

The average annual program cost over one academic school year (2008–2009) is \$210,191 or \$149.92 per participating boy and girl, or **\$1.87 per student per hour for an ideal dose of 80 hours**.

This cost excludes development of South African–accredited educational materials (\$60,000), which is considered a one-time capital cost that would not need to be replicated within South Africa in the replication or expansion of a similar program. This cost also excludes approximately \$100,000 in M&E costs that were capital, rather than recurring, costs aimed at research and learning for policymaking. This included approximately \$35,000 for studying a control group, and \$65,000 for intensive research costs for policy and learning purposes that would not be part of recurring M&E costs. It is important to note that these M&E costs, although not recurrent, are investments in understanding project impacts and helping decisionmakers choose effective and cost-effective interventions.

**TABLE 8 Siyakha Nentsha average annual program costs<sup>a</sup> (2009–2011)**

Program component	Program	Per participant <sup>b</sup>	Per hour <sup>c</sup>
Life skills	\$129,133	\$91.91	\$1.15
Monitoring and Evaluation	\$30,166	\$21.47	\$0.27
Administration	\$17,284	\$12.30	\$0.15
Training	\$33,607	\$23.92	\$0.30
<b>TOTAL</b>	<b>\$210,191</b>	<b>\$149.60</b>	<b>\$1.87</b>

<sup>a</sup>Costs are reported in US\$2011. <sup>b</sup>The average annual cost per girl is calculated by dividing the total annual program cost by the number of participants in each year across three generations (second to current). <sup>c</sup>The average annual cost per hour is based on girls receiving an ideal programmatic dose of 80 hours annually.

### Siyakha Nentsha total cost per girl per recommended dose

Ideal dose (hours of participation)	Cost per girl per hour	Total
80	<b>\$1.87</b>	<b>\$149.60</b>

### 2.6.9 *Monitoring and Evaluation*

Facilitators were closely mentored and monitored. Facilitators with no prior training required two years of supervision. Their performance was measured with one-on-one mentoring, group feedback, observations, lesson plans, and assessments for some modules.

Facilitators conducted monitoring by meeting weekly with program managers, discussing any issues that came up the previous week, and planning for the next week. They kept diaries of weekly activities and attendance sheets, and briefed the Life Orientation educators on their program.

Participants were assessed, and the summative assessment mark was included in the formal assessment of learners. Baseline and endline surveys conducted, totaling \$38,691, or \$27.54 per participant on average annually (excluding the aforementioned \$100,000 in M&E costs for studying a control group and intensive research for policymaking purposes).

### 2.6.10 *Program Outcomes*

At the end of program participation, participants were expected to know how to prevent infections, how to keep safe, where to get help and resources, and where to access treatment. They were expected to set and maintain goals, network and build social capital, understand gender power relationships, and have essential communication skills. Last, participants are expected to be able to secure ID documents and social grants, build a curriculum vitae (CV), understand savings and investments, save, open a bank account, set financial goals, and develop the ability to draw up and follow a budget.

Key outcomes of the project included:

- Significantly higher rates of discussing social grants, looking for work, starting a business, and understanding sexuality, HIV/AIDS, and gender relations, particularly among males.
- Higher rates of discussing financial decisionmaking, careers, starting a business, and looking for work, especially among females.
- More likely to have greater knowledge of the range of social grants available in South Africa, including eligibility criteria for each.
- Significantly smaller percentage of male participants (compared with control group males) initiating sexual relations between the first and second surveys.
- Among males already having sex before the study began, those in the experimental arms of the study significantly reduced their number of sexual partners, compared with males in the control group.
- Female participants reported a significant increase in confidence in the ability to find and use a condom effectively.
- Among females already having sex, more participants reported regularly using a condom with their most recent sexual partner.
- Substantial percentage of female participants started to save money for their future.
- Increased engagement with financial institutions such as banks.<sup>30</sup>

Further, the intervention is accredited by the South African Health and Welfare Sector Education and Training Authority (HWSETA). This means that participants who successfully complete the Siyakha Nentsha curriculum have an asset that could assist them in accessing jobs and other opportunities in the future.

#### *2.6.11 Program Evolution*

With more funding, the program could target additional rural areas and schools where similar programs do not exist. The program could also be expanded to target young women and men aged 14–19 and 20–24, and could follow girls through their vulnerable childbearing years given the high HIV infection rate in young women, which would be critical to sustaining gains made with girl participants.

The program could also be effective in linking participants with economic activity in the community, assisting them with job searches and starting small businesses. Inclusion of a basic counseling module in the facilitators' training provided by a social worker or psychologist would also be beneficial, with ongoing mentoring on a one-on-one and group basis.



### 3. CONCLUSION



Investments do not have to be costly for there to be positive outcomes for disadvantaged girls and benefits for whole communities, especially once effective programs have been established and are expanded or scaled-up. Further, investments can be maximized through the scaling-up and expanding of existing programs that have had positive outcomes, because of the inherent cost efficiencies that occur in subsequent generations of girl programs. Thus, to achieve positive results, it is important to invest heavily in building local partners' and governments' capacities to deliver and scale-up low-cost, well-targeted programs for girls.

We do not have the data necessary to argue that investing in the most disadvantaged girls through girl platforms is the most cost-effective use of investment dollars when compared with different types of youth programs. We do have strong evidence, however, that current youth programs do not reach the most disadvantaged girls, and we can make inferences about the programs' relative cost-effectiveness. We have established that well-targeted and well-designed girl platforms have variously produced positive outcomes for girls, reflected in increased skills, increased health information and health-seeking behavior, and delayed age at marriage. We also know that these girls grow into women who are more likely to have the power and ability to make decisions about how household money is invested, to increase positive outcomes for their children and communities, and to further maximize investment dollars. And we know that mixed-sex and poorly targeted youth programs fail to reach the most disadvantaged girls.

### 3.1 Closing the Global Financing Gap to Reach the Marginalized

There is a global financing gap for reaching marginalized populations with education and health interventions, and most countries are failing to achieve their MDGs in those areas. Increasing expenditure on existing mainstream education and youth centers, and reliance on demand-driven approaches will not reach the most disadvantaged girls. Closing the global financing gap and ensuring that allocated resources are spent most effectively requires investing in socially excluded girls through targeted girls-only programs.

For example, overall aid for education has been increasing, but commitments are falling short of the \$50 billion increase pledged by international donors in 2005, \$18 billion for Africa alone. It is estimated that 72 million children were out of school in 2007 worldwide, and 56 million children are projected to be out of school in 2015 without a change in the way investments are made. Further, 759 million adults lack literacy skills, two-thirds of whom are women (UNESCO 2010).

Programs to reach marginalized populations may require more funds than are required to reach more typical or already mainstreamed populations, but such programs may also generate a higher return on investment than additional investments in already-reached populations. Many vital services are underutilized, which is a cost in and of itself. Reaching marginalized populations can increase overall utilization and, more critically, utilization by the groups most affected. For example, when the youngest first-time mothers at highest risk of maternal mortality are now in the system, or those at the greatest risk of sexual coercion and exchanges of sex for gifts or money have the means to prevent HIV, programs may become more effective in service delivery.

Failure to take into account the additional costs associated with reaching marginalized groups has contributed to a systematic underestimation of the global financing gap. It is often more costly to

reach marginalized groups or individuals living in remote rural locations or urban slums than individuals in more mainstream areas. Replacing straight unit cost comparisons with a cost-benefit equation may be a more equitable measure of determining where to allocate resources, because the more marginalized groups are likely to benefit most from the extension of essential services (UNICEF 2009).

### 3.2 Furthering Understanding and Learning of Costs

As we look to the future of programming for disadvantaged girls and build upon existing data, there are several opportunities to further understanding and learning:

- Collection of programmatic and cost data on subsequent generations of the girl platform programs identified in this paper. As the programs evolve and additional components are added to serve new subgroups of adolescent girls, programmatic and cost data can build upon the existing data. Each additional year of programming and costs provides us with more robust data on platforms for adolescent girls. Continuous tracking of all program costs and detailed beneficiary and participant information allow us to gauge the effectiveness and efficiency of different types of programmatic evolution across subsequent generations of girls and of cascading leadership models.
- Collection of baseline data to measure medium-term and longitudinal impacts of girl platforms on direct and indirect beneficiaries. Data can be collected on the impact of girl platforms on direct beneficiaries completing primary, secondary, and tertiary education, delaying age of marriage and first child, employment, and income, etc. The economic benefits of such impacts on girls, communities, and national GDP can also be estimated, and cost-benefit analyses can be conducted to more accurately measure the cost-effectiveness of such programs.

**TABLE 9 Illustrative longitudinal impacts to be measured on direct and indirect beneficiaries**

Direct impacts on primary beneficiaries	Indirect impacts on secondary beneficiaries
Completion of primary, secondary, and tertiary education	Educational attainment of children
Maternal health status	Nutrition of children and families
Decisionmaking power within household	Attitudes of women, men, boys, and girls toward gender equality
Employment and income	Economic productivity of communities
Age at marriage and first child	Educational attainment of children

- A database can be created to capture basic information on programmatic components, costs, and impact. Expanding the collection of data to other girl platforms, as well as other youth-targeted programs and health and education programs in a centralized database can facilitate further research to inform practitioners. Investment in the development of robust programmatic and cost data can allow for further research to identify the most cost-effective delivery mechanism and models to reach disadvantaged adolescent girls.

The growing literature on reaching the most disadvantaged segments of populations living in poverty globally must include an evidence-based analysis of how to reach disadvantaged adolescent girls in the most cost-efficient and effective way. We have evidence to suggest that girl platforms that provide well-targeted and well-designed services to disadvantaged girls in single-sex environments have significant payoffs, positive outcomes, and are not very expensive. However, we need more cost data and impact data longitudinally, as well as comparisons with other types of youth programs, to prove that these types of programs are the most cost-effective.

As we look toward 2015 and see that many countries will miss meeting targets set in health, education, and gender equality, it is important that sound investment decisions are made, especially in reaching the most disadvantaged adolescent girls.

## NOTES

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- 1 Total average annual program implementation costs (2008–2011 where available from each program) are reported based on actual expenditure and projected budget for the year 2011. All costs are reported in real US 2011 dollars, accounting for inflation and exchange rates in each country.
- 2 For more detailed examples of girls' programming, see the Population Council's Transitions to Adulthood Briefs 1–40, which describe specific adolescent girls programming with results in summary <<http://popcouncil.org/publications/serialsbriefs/TABriefs.asp>>.
- 3 Project is funded primarily by USAID and PEPFAR, with some funding from Nike Foundation through UNFPA.
- 4 Conditions identified in a 2003 study conducted in slums by the Population Council and Ethiopia's Ministry of Youth and Sports.
- 5 In partnership with a local NGO, Organization for Prevention, Rehabilitation, and Integration of Female Street Children (OPRIFS).
- 6 Originally only school supplies were provided, but this was expanded based on participants' needs and demands.
- 7 ISHRAQ is also known as "Safe Spaces for Girls to Learn, Play, and Grow."
- 8 The project is funded primarily by DFID, Ford Foundation/Egypt, Save the Children/US, UN Children's Fund/Egypt, Minister for Development Cooperation of the Kingdom of Netherlands, PEP, and ITTF.
- 9 This figure is based on data collected at baseline between December 2009 and January 2010.
- 10 Program component called "Learn To Be Free" managed by Caritas-Egypt aims to provide girls with proficiency to pass the official government literacy exam (GALAE).
- 11 Center for Development and Population Activities (CEDPA) manages both New Horizons and New Visions during pilot and expansion phases only.
- 12 Population Council implements this component.
- 13 Population Council implements this component, adapted from Global Financial Education Program (GFEP), a partnership between Microfinance Opportunities, Freedom from Hunger, and the Citigroup Foundation.
- 14 Egyptian Food Bank (EFD) is a partner in providing snacks and family food rations.
- 15 In the past, preparatory school was included as criteria in the village selection process, but was dropped during scale-up to avoid restricting the pool of qualified villages and limit the program to better-off villages with schools.



- 16 Technical/vocational secondary education in Egypt is offered in three- and five-year programs and includes schools in three fields (industrial, commercial, and agricultural) to provide students with certification in practical job-market skills.
- 17 During the first four months, four sessions are held weekly.
- 18 In May 2011, a total of 1,645 girls currently enrolled in Ishraq took the government literacy exam (GALAE) and 1,386 passed. Of the 1,386 who passed, 1,043 passed the second reading and writing exam and were officially eligible to enter formal schooling (Grade 7).
- 19 Big changes are not expected with girls' own circumcision status since it occurs around the ages of eligibility for the program, but large effects with intention to circumcise one's daughter are expected.
- 20 Grants are from Empower, Emerging Markets Foundation, and H.B. Fuller Company Foundation.
- 21 Project is implemented by the Population Council and MicroSave Consulting, partnering with four financial institutions (K-Rep Bank and Faulu Kenya in Kenya, and Finance Trust and FINCA-Uganda in Uganda).
- 22 Directed by the Population Council. Funding partners include: Summit Foundation, Engender Health, Bill and Melinda Gates Foundation, William and Flora Hewlett Foundation, The Andrew W. Mellon Foundation, The Moriah Fund, United Nations Population Fund (UNFPA), UK Department for International Development (DFID), *Alianzas* by the United States Agency for International Development (USAID), United Nations Development Fund for Women (UNIFEM), and the Nike Foundation.
- 23 The program prioritizes the age segment of girls 8–18, determined to be the most vulnerable age group by a coverage exercise.
- 24 Local partners included CDRO, Pies de Occidente, PRODESCA, and Renacimiento.
- 25 Local partners included Mercy Corps and PRODESCA.
- 26 Local partners include CDRO, Ixna'ixim, Mercy Corps, PRODESCA.
- 27 Local partners include CICAM and DEMI.
- 28 Project partners include: Accudata, DFID, ESRC, Hewlett Foundation, Isihlangu Health and Development Agency, KZN Department of Education, and University of KwaZulu Natal.
- 29 Classes were randomized; some received life skills and others received financial literacy skills.
- 30 Girls in the program were significantly more likely ( $p < 0.10$ ) to have tried to open a bank account, and boys who tried to open a bank account were more successful than their counterparts who did not have access to Siyakha Nentsha.

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