

Can Economic Empowerment Reduce Vulnerability of Girls and Young Women to HIV?

Emerging Insights

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Overview

Girls and young women¹ are disproportionately affected by both poverty and HIV. Donors, policy-makers, researchers and program implementers are exploring economic empowerment programs as a strategy to improve the health and economic status of girls and young women. But the linkages between economic status and HIV status are complex, and the role that economic approaches play in preventing HIV infection and mitigating its impact is unproven.

In April 2010, the International Center for Research on Women (ICRW), with support from the Nike Foundation, convened a meeting of researchers, program implementers, policymakers and donors to explore these linkages and approaches. Discussions among participants emphasized the complexity of the issues and highlighted many challenges and questions that need further exploration.

The meeting underscored several important points. First, girls have multiple and diverse characteristics within and across various contexts, all of which contribute to their overall vulnerability to HIV. Lower economic status is only one dimension of girls' vulnerability to HIV; therefore, economic approaches may be necessary, but will not be sufficient to eliminate their vulnerability. Even "successful" economic approaches may not have a direct effect on HIV incidence, but may reduce conditions of vulnerability and improve the resilience of girls to manage risks in their environments. Therefore, meeting participants concluded that donors should be willing to fund programs that may not document change in HIV incidence during the program cycle, but that can show evidence of contributing to HIV resilience at the individual and community level. Secondly, girls – defined by both gender and generation – are different from both adult women, and from boys and men. Economic approaches need to be developed carefully to consider the needs, aspirations, constraints, and capabilities of girls and young women in various settings.

The meeting yielded several overarching principles for the development of programs for girls in the context of poverty and HIV:

- Define the population of girls and/or young women of interest in a given setting.
- Ensure that economic approaches support and complement education.
- Address violence.
- Create safe spaces and facilitate social capital.
- Engage families and communities, including men and boys.

Recommendations that apply to program designers, donors and policymakers included the following:

- Address the intersection of gender and generation by designing girl-targeted and/or girl-friendly programs.
- Improve collaboration across sectors and agencies.
- Invest in longer-term time horizons for programs.
- Develop innovative evaluation practices that will measure the reduction of vulnerability and the facilitation of resilience at the individual and community levels.

Introduction

¹ For the purposes of the meeting and this report, we refer to girls as females ages 10-19 and young women as females ages 20-24.

Globally, women and young people bear the greatest burden of the AIDS pandemic. Young people ages 15 to 24 account for almost one out of every two new HIV infections worldwide, and a higher percentage of young women than young men are living with HIV. Girls and young women's disproportionate vulnerability is most striking in southern Africa, where they are three to five times more likely to be HIV positive than their male counterparts.² As HIV rates continue to climb among girls and young women, it is urgent to develop and deploy more effective prevention and mitigation strategies.

Gender-based economic disparities in many high-prevalence countries, combined with social, cultural and political inequalities, contribute significantly to girls' and young women's vulnerability to HIV. Because economic vulnerability is a driver of HIV risk, economic empowerment programs have become an increasingly popular approach for the prevention and mitigation of HIV. However, there is limited evidence that directly links economic and HIV status and even less research linking participation in economic empowerment approaches and HIV outcomes for girls and young women.

In April 2010, the International Center for Research on Women (ICRW), with support from the Nike Foundation, convened an expert meeting of researchers, program implementers, policy-makers and donors to explore emerging insights into the linkages between economic empowerment and HIV outcomes for girls and young women. Engaging in discussions, presentations and small group work, participants examined many forms of evidence – experiential, qualitative and quantitative – to explore what we know as well as what we need to know. This report synthesizes the key insights, questions, challenges and recommendations that emerged from the meeting. It addresses two key questions:

- What are the links between economic status and HIV vulnerability of girls and young women?
- What is the role of economic empowerment in preventing and mitigating HIV among girls and young women?

Based on the meeting's exploration of these questions, the report summarizes the general principles that should apply to programs and policies aiming to address the vulnerability of girls in a context of poverty and HIV.

What are the links between economic status and HIV vulnerability of girls and young women? The relationship between economic and HIV status has been debated by researchers looking at different settings with different research models, but they have found no consistently clear link between either wealth or poverty and increased HIV risk. There has been even less rigorous research done to explore the strength of these linkages for girls and young women.³

Despite scarce evidence to show that lower economic status is invariably associated with increased rates of HIV, significant research does support the relationship between lower economic status and vulnerability of girls to HIV. Vulnerability is a concept that takes into account the extent to which the risk of HIV transmission is influenced by broader social and/or physical factors that may be beyond the control of the individuals involved. Lower economic status is an

² UNAIDS 2009, AIDS Epidemic Update 2009, UNAIDS; WHO, Geneva.

³ The background note, "Economic Empowerment as HIV Prevention – sounding the quantitative evidence," by Rachel Glennerster and Kudzai Takavarasha of the Abdul Latif Jameel Poverty Action Lab at MIT, provided an overview of the quantitative research for meeting participants.

important feature of vulnerability that can have a direct impact on HIV risk behavior.

High-risk sexual behavior is often exacerbated by economic inequality between males and females. When girls and young women are dependent on men for their economic security, they are less able or willing to demand safer sex, fearing abandonment and/or violence. Often, their relationships are formed with older men who are more likely to have more resources as well as more sexual partners, increasing both dependency and risk. Girls have cited the need for money or the desire for material goods as a motivation for having sex and/or forming relationships.⁴ A study in South Africa found that among girls and young women, aged 14 to 24, low wealth is associated with earlier sexual debut, more sexual partners, lower likelihood of condom use, as well as higher odds of non-consensual first female sexual experience and of having to trade sex for money, goods or services.⁵

Economic inequality, however, is only one dimension of girls' and young women's vulnerability to HIV. Violence, social isolation and curtailed education, among many other factors, compound their vulnerability and further increase their risks. Sexual assault increases the risk of acquiring HIV/AIDS directly from the assailant, as well as indirectly, from the emotional trauma that often leads to high-risk sexual behaviors. A positive HIV status can, in turn, heighten girls' vulnerability to violence. Even the threat of violence can reduce girls' access to prevention and treatment services.

Girls are less likely to have strong social networks than boys, and girls of lower economic status are reported to have less access to social networks than girls from higher socio-economic status. Socially isolated from their female peers and from community support, girls have less access to information, resources and support to protect themselves from HIV, or to manage an HIV-positive diagnosis. Social isolation is often exacerbated by the expectation that girls will assume caretaking burdens in the home, a heavier burden for HIV positive girls and girls living in HIV-affected households.

Girls who drop out or never attend school are further subject to violence, isolation and impeded opportunities for development. They are more likely to marry at a younger age and have more children with fewer resources to care for them. With limited knowledge of the cost of risky behavior and how to protect themselves from HIV, they are also more likely to engage in unprotected sex. With fewer opportunities to participate in productive paid employment, they are often coerced into burdensome and harmful labor, including transactional sex.

What is the role of economic empowerment in preventing and mitigating HIV/AIDS in girls and young women?

Economic disenfranchisement is often linked to increased vulnerability to HIV of girls and young women. "Economic empowerment" has been cited as a promising strategy for overcoming vulnerability. In the women's empowerment literature, empowerment is commonly defined as the ability and opportunity to make strategic choices and life decisions where they previously did not exist.

Empowerment is described as a multi-dimensional, long-term process with two essential com-

⁴ Pettifor, A., Measham, D. M., Rees, H. V., and Padian, N. S. "Sexual Power and HIV Risk, South Africa," *Emerging Infectious Diseases*, 2004 Nov;10(11):1996-2004.

⁵ Hallman, K. 2005, "Gendered Socioeconomic Conditions and HIV Risk Behaviours Among Young People in South Africa", *African Journal of AIDS Research*, vol. 4, no. 1, pp. 37-50.

ponents:

- Resources that include not only financial and productive assets, but opportunities, capabilities, social networks and other environmental factors); and
- Agency, or the ability to act in one's own best interest.⁶

The salient messages – explicit and implicit – in this literature are the following:

- 1) Empowerment is a long-term process.
- 2) Empowerment requires more than access to financial resources; it also requires control over resources.
- 3) Empowerment is multi-dimensional; therefore, economic empowerment will not necessarily lead to overall empowerment.

Applying this concept to girls raises additional cautions. Girls generally have less access to either resources or agency than do boys or adult women, so the goal of empowerment programs must be adjusted to take this into consideration. Girls "stand at the interface of gender and generation," their autonomy and abilities are limited by age and gender, as stated by Richard Mabala. Also, girls resources and abilities are inextricably connected to the well-being of their families and communities. Isolating girls from their social fabric and expecting them to be financially independent is usually neither realistic nor desirable. At the same time, girls have great innate resources and tremendous potential. Although their ability and power to acquire or use financial resources are usually limited in the near term, new information, skills and networks could help them position themselves for future financial security.

Examples of Economic Approaches

Various approaches have been adopted to strengthen the economic status or opportunities and knowledge of girls and young women, but only a few programs in these categories have been evaluated to determine their impact on HIV status or vulnerability. Four categories discussed in the meeting were: 1) livelihoods development; 2) microcredit; 3) asset transfers; and 4) savings.

Livelihoods development: A livelihoods approach develops the capabilities for and provides access to both material and social resources and activities required for a means of living. Livelihood and vocational training programs can be adapted to reach girls or young women of different ages, social positions and in different contexts. These programs often include training in general "life skills" that may convey information on health, violence and financial literacy while building group support. Participants agreed that a strong life skills component is important for all ages, but particularly for younger girls. Such programs have had some success at increasing knowledge of HIV prevention, communication skills, decision making, self-esteem and social capital. Programs for older girls and young women can help equip them to make the transition from school to work by providing vocational skills, on-the-job training (mentorships, internships

⁶ Malhotra, A. & Schuler, S. R. 2005, "Women's Empowerment as a Variable in International Development," in *Measuring Empowerment: Cross-Disciplinary Perspectives*, D. Narayan, ed., The World Bank, Washington, D.C., pp. 71-88.

⁷ Richard Mabala is executive director of Taasisi ya Maendeleo Shirikishi Arusha/Youth Participatory Development Centre (TAMASHA).

⁸ Mabala, R. 2006, "From HIV Prevention to HIV Protection: Addressing the Vulnerability of Girls and Young Women in Urban Areas", *Environment and Urbanization*, vol. 18, no. 2, pp. 407-432.

⁹ Lukas, T. 2008, Reducing Adolescent Girls' Vulnerability to HIV Infection: Examining Microfinance and Sustainable Livelihood Approaches: A Literature and Program Review, United States Agency for International Development (USAID).

and apprenticeships), along with adequate transport, child care and other social services.

The SHAZ! Program (STI/HIV Prevention for Orphan Girls in Zimbabwe aged 16-19), presented by Nancy Padian,¹⁰ is an example of a life skills and reproductive health program with a livelihoods and social support component. Padian shared results of an evaluation of Phase II of SHAZ:

The life skills component of Phase II of SHAZ included modules on HIV/ STIs, negotiation skills, strategies to avoid violence, identification of safe and risky areas in the community. The livelihoods component included vocational training, as well as a micro-grant (in-kind, rather than cash) and social support mechanisms throughout the program and following completion. Findings from the evaluation of the Phase II trial suggest that participation in the program may have improved gender equity and power in relationships, reduced experience of violence and unintended pregnancies, and improved economic outcomes, but these were not significantly different for control versus intervention group. No effect was detected for HIV/STI incidence, because the study was not adequately powered to do so. Although some "spillover" economic benefits were reported, political and social unrest during the project period posed considerable challenges to implementation. Padian suggested that economic opportunities might provide a foundation for combination prevention programs, and highlighted the need for valid "interim measures" of HIV risk, such as empowerment, violence and social norms.

Microcredit: Microcredit extends small loans to poor people for various purposes, which can include investment in their own income-generating enterprises, asset creation or even consumption. There is mixed evidence to date that providing microcredit to girls improves their financial outlook, and very little evidence that microcredit reduces their vulnerability to HIV.¹¹ Meeting participants discussed the pros and cons of extending microcredit to girls. An important risk noted is that cash and productive assets may set up incentives for girls that compete with or detract from opportunities to stay in school. In addition, girls may be more vulnerable than older women to coercion from those who wish to appropriate their assets, although there are ways to mitigate these risks, especially if assets are kept in banks or other formal financial institutions. In more extreme cases, if unable to meet their debt obligations in other ways, girls could conceivably resort to transactional sex, thereby increasing HIV risk. Thus, it was concluded that microcredit may be most beneficial if provided to mothers or other guardians, rather than directly to girls.

The IMAGE program in South Africa, presented by Julia Kim,¹² shows that when designed properly, microcredit programs can reduce conditions of vulnerability (e.g., domestic violence) and improve HIV-related knowledge and behavior among adult women.

Using a microcredit "plus" approach that included gender training and community mobilization strategies along with the provision of credit, the IMAGE program sought to reduce intimate partner violence and HIV by

¹⁰ Nancy Padian is a consultant.

¹¹ USAID Health Policy Initiative, "Reducing Adolescent Girls' Vulnerability to HIV Infection: Examining Microfinance and Sustainable Livelihood Approaches – Literature and Program Review," July 2008.

¹² Julia Kim is cluster leader on Universal Access and Millennium Development Goals for UNDP.

among women in eight villages in rural South Africa. (An explicit decision was made to work with only adult women, based on previous experiences by key partners.) After two years, risk of physical and sexual violence was reduced by 55 percent among program participants, and women's empowerment increased in several key domains. Although the program saw no change in HIV incidence, HIV risk was reduced among participants below 35 years: HIV-related communication increased, voluntary counseling and testing improved, and unprotected sex was reduced. The microcredit "plus" approach reduced intimate partner violence and HIV risk more than the program that provided microcredit alone, suggesting that group formation and community mobilization are critical elements of empowerment. As noted by Dr. Kim, "microfinance is a foothold, but not the whole ladder."

Cash and asset transfers: A transfer program involves delivery of cash or assets (e.g., property, land, equipment, etc.) on a conditional basis (such as for school attendance, accessing immunizations or other services) or unconditionally with no requirements to receive the transfer. Programs that subsidize the costs of schooling through these approaches, such as conditional cash transfers (CCTs) or provision of school uniforms, can improve education outcomes and reduce HIV risk behaviors in the short-run. Participants suggested that in order to cycle an entire generation through school and plant the seeds for sustainable impact, however, such programs would need a longer (15-year) time horizon.

The World Bank-funded Zomba Cash Transfer Program in southern Malawi, presented by Berk Özler, ¹⁴ showed impressive results in reducing HIV and other sexually transmitted infections as well as changes in high-risk sexual behavior.

The program gave girls and young women aged 13-22 and their parents up to \$15 a month if the girls attended school regularly. A second group received payments without conditions, and a control group received no cash payments. Results noted after 18 months included increases in school attendance for both dropouts and inschool girls without a significant difference between conditional and unconditional cash transfer recipients. Results also showed that girls not only had less sex but tended to choose safer (and younger) partners. The cash transfers may also have led to a reduction in transactional sex. An exciting result that has been announced since the April meeting is the reduction by 60 percent of HIV prevalence rate and lowered HSV2 infection, even among the girls who received unconditional cash transfers. ¹⁵

Savings and financial literacy: Savings programs allow participants to invest money in a savings account in either a formal financial institution or in an informal savings group. Group savings are typically pooled to provide access to credit to the group of savers. Participants agreed that the introduction of savings programs should be carefully considered based on the regulatory environment, girls' desires, the support of families and communities, and an evaluation of the

¹³ Baird, S., Chirwa, E., McIntosh, C., and Özler, B. 2009, The Short-Term Impacts of a Schooling Conditional Cash Transfer Program on the Sexual Behavior of Young People, The World Bank, Washington, D.C., 40.

¹⁴ Berk Özler is a senior economist for the World Bank.

¹⁵ These are updated results announced by the World Bank at the 2010 International AIDS Society Conference in Vienna (the HIV/HSV-2 results were not yet available at the April 2010 meeting).

potential risks to girls.

Financial literacy programs, which provide information and knowledge that enable people to make better financial decisions, are often useful for girls of different ages.

The Siyakha Nentsha adolescent HIV prevention program in KwaZulu-Natal, South Africa, presented by Eva Roca from the Population Council, 16 includes a financial education component.

This school-based financial education and social support program provided HIV and reproductive health training, life skills training, and financial education to improve functional capabilities and well-being of adolescents (15-16) at high risk of HIV. Preliminary results indicate poverty, social isolation and orphan status are the factors most associated with HIV risk behaviors. Preliminary results also showed a reduction in reported partners, increase in knowledge of how to use condoms and of STIs, and fewer sexual decisions based on drug and alcohol use.

Several consistent themes emerged through the participants' discussion of these programmatic examples: 1) economic incentives for girls should not detract from schooling; 2) evidence was limited regarding the reduction of HIV incidence, but significant regarding reduction of vulnerability; 3) linking economic programs as components of broader life skills programs seem likely to produce the most lasting benefits for girls; 4) engaging mothers and other caretakers in economic programs for girls may provide needed protection and secure more benefits.

While economic empowerment will not negate the multitude of risks that girls confront in their environments, if carefully developed and implemented, it is one strategy to enhance individual and community level resilience to HIV and AIDS. At the individual level, resilience is in place when a girl has an increased capacity to manage the risks in her environment. When community-level resilience has been improved, an individual girl is also supported by the members of her community to support her HIV, prevention, care and treatment goals.¹⁷

Principles for Programming and Policy

In contexts where both poverty and HIV rates are high, girls are vulnerable in multiple ways. There are no "quick fixes," but programming experience to date has yielded some overarching principles that are useful when developing programs or policies to address girls' vulnerability to HIV. These principles should be considered in combination, not in isolation.

Define the population: Girls and young women ages 10-24 are not a monolithic group. They represent a huge range of developmental – physical, emotional, intellectual and social – stages and circumstances that span the years from childhood to adulthood.

Identifying and recruiting the appropriate cohort of girls to target with particular economic approaches is critical. The capacities, experiences and needs of a 13-year-old girl differ vastly from those of a 20-year-old young woman. And while age is an extremely important factor to

¹⁶ Eva Roca is research consultant for Population Council.

 $^{^{17}}$ Aids2031 Social Drivers Working Group, "Revolutionizing the AIDS Response: Building AIDS Resilient Communities," April 2010, www.aids2031.org.

consider, it is not the only one: the capacities, experiences and needs of a 13-year-old in one context are rarely the same as those of a 13-year-old girl in another context. The socio-economic status of her household, and her position within that household, will have a direct impact on her ability to participate and/or benefit from an economic empowerment program. Many other factors at the household, community and macro levels will affect a girls' vulnerability to HIV, and will have a bearing on her capacity to benefit from such a program (see box).

As a first step in getting programs right, research, programs and policies must analyze, ac-

Key Characteristics of Individuals

- Age
- Orphan status
- Marital status
- Sexual status
- HIV status
- Educational attainment and schooling status
- Access and control over household resources
- Level of decision-making power within the household
- Mobility
- Life skills
- Affiliation with social networks
- Citizenship status
- Individual aspirations

Key Characteristics of Context

- Socio-economic status of household
- HIV prevalence and epidemiological context
- Political stability/conflict
- Economic stability
- Migration patterns
- Labor market conditions
- Legal environment
- Gender norms

knowledge and accommodate the diverse needs, experiences and contexts of girls and young women, and should start by consulting girls on what they want and need.

Promote education through secondary school: There is no shortage of evidence that keeping girls in school, especially through secondary level, has short and long-term benefits. Prolonging education has been shown to reduce early marriage and childbearing, to reduce dependency on older men, to bring income to families, and to increase opportunities for productive employment. Of all the intermediate factors between economic and HIV status, education has the strongest and most direct link to protection from HIV.¹⁸ We also know, however, that education neither automatically nor directly leads to productive employment and equal wages. Limited resources combined with gender discrimination and cultural attitudes that undermine their efforts to seek productive work deny opportunities for girls and women. Economic programs that complement education goals will be more likely than isolated economic programs to develop the necessary knowledge, skills, social networks and opportunities to support the financial security of women and girls.

Address violence: Because it is a barrier to economic empowerment and to HIV prevention

¹⁸ Gillespie, S. & Greener, R. 2006, *Is Poverty or Wealth Driving HIV Transmission?*, Joint United Nations Programme on HIV/AIDS (UNAIDS), Geneva, Switzerland.

and mitigation goals, all programs must address the various forms of violence (physical, sexual and psychological) that girls and young women face. HIV prevention or mitigation programs can incorporate violence prevention material in modules on violence in a life skills training course, lessons in risk assessment and self-defense, and through engaging the community in discussions about the harmful effects of violence. The IMAGE program addressed violence directly in its curriculum and group work, and was able to show a reduction in violence after two years. The prevention of violence should be made the responsibility of entire communities, not only of girls who are directly affected; programs should engage community members at all levels, ages and genders to change the social norms that perpetuate violence.

Create safe spaces and facilitate social capital: Participants returned repeatedly throughout the two days to the importance of developing an enabling environment for girls and young women to have the support they need to protect themselves from HIV infection. Strengthening the social networks of girls and young women increases their capacity to create their own communities, speak for themselves, share, explore their experiences, needs and solutions, and to manage shocks and emergencies. Schools or other youth-friendly spaces can be used as a hub of learning for girls who are in school and out of school, and involving girls in their design and construction will help ensure buy-in and participation. Getting donor support for the creation of such spaces can be difficult, as one participant pointed out, because creating a center that saves money long-term incurs far more initial cost than "posting billboards with soon forgotten mass media messages." Expanding social networks can also introduce new risks to girls, so such programs must include material on recognizing and managing risk.

Engage families and communities: Girls do not live in a vacuum. Their vulnerability to HIV is strongly influenced by families and communities, and so too are their opportunities for empowerment. Including family members, teachers and community leaders as partners in the process is critical to helping girls and young women gain the resources and agency that will reduce their vulnerability and risks. Some of the stronger evidence from the field of women's empowerment and education suggests that empowering mothers is the best way to empower girls.

Engaging families and communities will require conscious efforts to include men and boys: Men and boys are part of the social structure that perpetuates discrimination against women and girls; transforming that structure requires engaging them in programs to change social norms and promote gender equality. At the same time, boys and men are economically vulnerable in poverty-affected settings, and programs should take care not to exacerbate a feeling of exclusion or disenfranchisement that may lead to targeting of girls with violence, intimidation or theft. Boys and young men need to be shown that they also have a stake in building a more equitable world with more flexible and healthy understandings of masculinity and femininity.

Address the intersection of gender and generation – designing girl-targeted and/or girl-friendly programs: An important question to ask when considering the unique needs of girls in the population is: When should programs exclusively target girls, and when should they be designed to reach a broader population and adapted to be "girl-friendly?" While girls have specific needs because of their sex and age, girls need the support and experience of older women as female mentors and role models, as well as the support of men and boys in their lives. Empowerment programs for women or youth that are truly girl-friendly can be adapted to address girls' specific needs, such as safe spaces, schooling and social networks. For example, village savings and loans programs that target adult women might be expanded to include older adolescents. Vocational training programs for youth can be tailored to ensure that girls are be-

ing effectively recruited and included. Tailoring programs to reach multiple audiences may help ensure that limited human and financial resources are deployed effectively.

Improve collaboration across sectors and agencies: Because girls' needs are multi-dimensional, efforts to improve their status must be coordinated across development sectors. Economic development and HIV sectors tend to operate independently, and a key challenge is aligning their funding and technical capacity to better integrate programs for girls and young women. The meeting participants noted some progress within U.S. government agencies as PEPFAR, USAID and the Global Health Initiative (with its "Woman-Centered Approach") take a more integrated approach to health. Participants suggested that there might be value in creating a donor consortium to look more broadly at programming approaches, indicators and evaluation methodologies.

Invest in longer-term time horizons: There continues to be tension between a desire to see short-term results and the realities of a long-term process. Programs very often have short time frames (1-5 years), which limits their ability to document observable change in the complex social dynamics that govern vulnerability and empowerment. On the other hand, programs that do document success in a short time frame (e.g. the World Bank-funded Zomba Cash Transfer Program in Malawi) may show encouraging short-term results, but the longer-term impacts of the program on economic self-sufficiency and/or health status remain to be seen. Donors can do more to encourage and support the efforts of implementing organizations to evaluate their programs with adequate resources and longer time frames (e.g. 5-15 years). They can encourage the growing momentum to extend funding horizons to enable programmers and researchers to test the effects of complex approaches.

Develop better indicators and innovative evaluation practices: Donors have different methods and standards for determining program success. Program priorities are related to outcomes and measures of success, but there are philosophical differences of opinion – as well as tangible methodological challenges – in identifying what constitutes "good" evidence. Many of the programs reviewed in this meeting have not documented a change in HIV incidence, but they have documented a reduction in key factors of vulnerability, such as violence and social isolation. Implementers should develop programs based on a measurable theory of change that connects economic activities with change in HIV vulnerability, and, further along the impact pathway, can plausibly lead to a reduction in HIV incidence. Donors should be willing to fund programs that may not document change in HIV incidence during the program cycle, but that can show evidence of contributing to HIV resilience at the individual and community level.

Conclusion

Girls and young women are an under-resourced and under-researched group with complex and diverse needs, and policy and programming prescriptions can neither be simplistic nor generic. This meeting provided an important first step toward linking ideas and actors from the economic empowerment and HIV fields, and connecting available research and program data on economic empowerment approaches for HIV prevention and mitigation for girls and young women. It also illuminated some considerable gaps in our collective knowledge and experience. Clearly, efforts to empower girls must adopt a long-term and holistic view of resilience at the individual and community level, and girls' rights, aspirations, talents and needs must be at the forefront of planning, implementation and evaluation.

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