Towards Improved Economic and Sexual/Reproductive Health Outcomes for Adolescent Girls (TESFA), CARE Ethiopia

Overview

TESFA is a 3 year project funded by the Nike Foundation that works to improve economic, and sexual and reproductive health outcomes for ever-married adolescent girls in Ethiopia. The project, which is being implemented by CARE Ethiopia and evaluated by the International Center for Research on Women (ICRW), relies on peer-education within small group settings modeled on CARE’s village savings and loans (VSLA) approach.

Launched in 2010, TESFA has reached over 5000 ever-married adolescent girls (ages 14-19) to mitigate the effects of child marriage.

Approaches

Community support is provided by groups of 20 to 30 community members, who meet once a month to discuss how to support girls and receive their own training on gender and health. They also reach out to other community members (five families per SAA member) to share their knowledge about various program topics such as child marriage.

Research Methods

The project works through four programmatic arms:

1) Economic empowerment only, teaching saving and loans, negotiation skills, financial literacy and income generation;
2) Sexual and reproductive health only, teaching negotiation, anatomy and personal sexual health, which health services are available where, addressing gender-based violence, and the benefits of contraception;
3) Economic empowerment with sexual and reproductive health; and
4) A delayed implementation arm that will act as a comparison group. In all four arms, girls are organized into support groups in a structure modeled on CARE’s VSLA model.

Baseline

Many girls at baseline did not even know the mechanics of sex, reproduction and pregnancy. One- quarter reported their husbands had physically forced them to have sex, i.e., engaged in marital rape, in the 12 months prior to the survey. The area faces severe shortages of contraceptive methods as well as a lack of knowledge among girls and others in the community of any contraceptive method except injectables. Condoms are heavily stigmatized, as they are associated with HIV prevention, not contraception, and specifically with sex work and extra-marital sex. Because child marriage is illegal, there was concern about whether married adolescents would participate in the project, but with close collaboration and trust building on the motives of the project with
community groups (gate keepers) finding participants and engaging them with project activities was made possible.

Impacts

Findings based on preliminary analyses of the evaluation data indicate increases among project participants in correct knowledge about contraception, use of contraceptives, use of reproductive health services, support for using contraception and ability to negotiate contraceptive use with husbands. Preliminary findings also indicate sharp increases in economic activity, greater confidence in ability to deal with economic crises and increased ability to negotiate with husbands about earning money.

Impacts on Sexual and Reproductive Health

Preliminary TESFA results indicate that there has been an increase in:
- Contraceptive knowledge
- Contraceptive use
- Reports of husbands having favorable attitudes towards family planning
- Support from family members for family planning
- Proportions of births taking place in health centers (past 12 months)
- Confidence in negotiating with husbands about contraception use. 58% of program participants reported their confidence had increased “a lot”

Impacts on Economic Empowerment

TESFA participants have reported increases in:
- Ownership of household agricultural assets [particularly smaller assets such as chickens]
- Reports of work in past 6 months with greater diversity of economic activities
- Reports of having taken savings and loans
- Confidence in ability to deal with economic crises/times of need [whether they felt they could raise enough money to feed their family for 2 weeks if they had to]
- Confidence in negotiating with husbands about earning money

Other Interesting Impacts

The participants have also reported increases in
- School attendance, mobility, and mental health
- Couple communication particularly around decision making
- Reports of feeling girls’ opinion is taken into account for household decisions
- Positive perceptions of self worth [including a decline in acceptance of GBV]
- Number of people in support networks

96% of participants would recommend the program to a friend.

Some of the unanticipated benefits that have emerged based on the qualitative and monitoring data include significant increases in couple communication, changed views about women’s roles in society and best age for marriage, girls going back to school and the direct prevention by community members of at least 180 child marriages. Girls, often invisible to the community because they are home doing chores, have gained more recognition and visibility. The SAA groups have resulted in the community’s greater support for girls, and girls with problems seek help from the groups.

Read more at www.care.org/tesfa.