



WORLD EDUCATION



Girls 1st Program
ENDLINE EVALUATION REPORT
World Education, Inc.

Presented to: **The M·A·C AIDS Fund**

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EXECUTIVE SUMMARY

World Education, with its implementing partner The Ghana Red Cross, has implemented the Girls 1st program for approximately one year in the eastern region of Ghana. At the start of the program, a baseline study was conducted to ascertain the levels of knowledge and behavior regarding STI/HIV/AIDS, community participation, leadership and small business understanding. The same baseline was conducted at the termination of the project. A total of 156 girls participated in the initial baseline while 159 participated in the endline evaluation.

In analyzing the results of the endline evaluation, the overall findings indicate that girls have benefited in various ways from their participation in Girls 1st. There has been knowledge gain in the area of family planning and STI/HIV/AIDS awareness and issues of PLHIV, with a dramatic and positive change in attitude towards PLHIV. Regarding condom use, more girls use condoms now than at the beginning of the program and more girls are comfortable using condoms. However, despite this increase a disappointing 17% of the respondents still feel that condom use is not necessary, indicating that additional strategies need to be developed to address this misconception.

Community involvement and empowerment were two important components of the program. The endline evaluation shows an increase in participation at the community level with nine out of ten girls indicating that they participate in a community club or activity as a result of the program, as compared to seven out of ten at the start of Girls 1st. Further, almost all had an idea of what they wanted to do in the future and felt empowered take personal responsibility for their own futures.

One of the most interesting set of findings is in the area of vocational training and small business development. Not enough progress was made in developing skills to undertake tasks inherent in running a business. Anecdotal evidence from the field has suggested that the short time frame for training on specific vocations was a factor. This notwithstanding, there seem to have been an enormous improvement in girls understanding of the importance of saving and all of them were involved in some saving scheme at the evaluation.

Again the girls appeared to feel more confident in themselves at the endline evaluation than they were at the baseline. Overall the project has impacted positively on the lives of the girls both in knowledge and behaviour.

BACKGROUND CHARACTERISTICS OF RESPONDENTS

The evaluation covered a total of one hundred and fifty nine young girls¹. The majority were aged between 15 and 24 years. Young girls aged 20-24 constituted more than half of the sample (56%) whilst those aged 15-19 constituted a little more than a third of the sample (37%). The remaining 6% were between 25 and 30 years of age.

The majority of respondents (88%) had never married. However more than one out of ten (12%) were living with a partner. More than half (54%) were single people who did not have partners whilst more than one out of five (22%) had partners but were not living with the partners. Currently married respondents constituted seven percent of the sample whilst the remaining 5% were separated, divorced or widowed. Fifty seven percent were mothers.

As regards level of education, the majority of respondents (86%) had at least basic education. Three percent did not have any education at all whilst 11% had primary level education. Akans (69%) and Christians (82%) dominated the study sample. The remaining belonged to tribes including Guan (11%), Hausa (7%), Ewe (5%) and Mole/Dagbani (2%). Moslems constituted 17%.

Overall the characteristics of the sample at evaluation did not differ much from the sample at baseline.

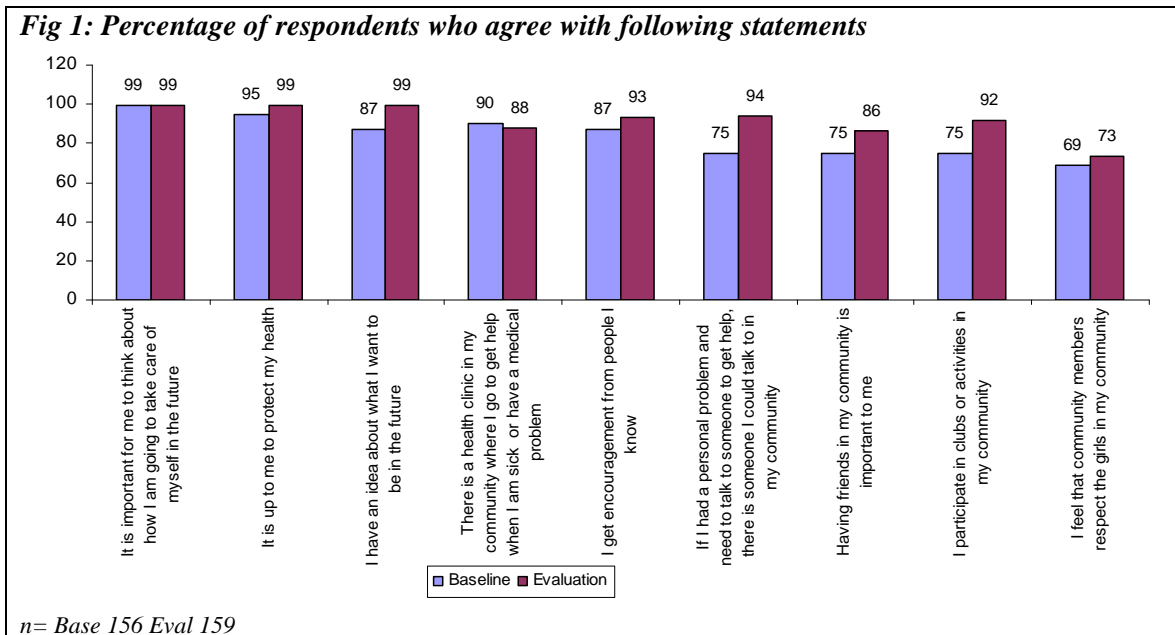
COMMUNITY INVOLVEMENT AND SELF EMPOWERMENT

	Base	Eval
Age		
15-19	-	37
20-24	-	56
25-29	-	4
>=30	-	2
Marital Status		
Single	52	54
Has a partner, but not living with partner	29	22
Living with partner	5	12
Married	8	7
Separated	3	2
Divorced	3	2
Widowed	1	1
Number of children		
0	52	47
1	37	36
2	7	12
More than 2	4	5
Level of education		
Did not attend school	3	3
Primary	17	11
JSS	72	78
SSS	7	8
Ethnicity		
Akan	64	69
Ga/Adangbe	6	6
Guan	3	11
Hausa	12	7
Ewe	8	5
Mole/Dagbani	3	2
Religion		
Christianity	85	82
Islamic	15	17

¹ 240 girls were enrolled in the Girls 1st Program.

Though high levels of agreement on attributes related to self empowerment were recorded at baseline, higher levels were recorded at evaluation an indication that some participants felt empowered during the course of the project. There was near universal agreement that the girls had the responsibility to think about how they would take care of themselves in future and protect their health. Almost all had an idea about what they wanted to be in future.

Community involvement in the lives of the girls was also higher at evaluation than at baseline. More than nine out of ten girls at evaluation reported that they participate in club or activities in their communities and that if they had a personal problem and needed to talk to someone to get help, there was someone in the community they could talk to compared to a little over seven at baseline.

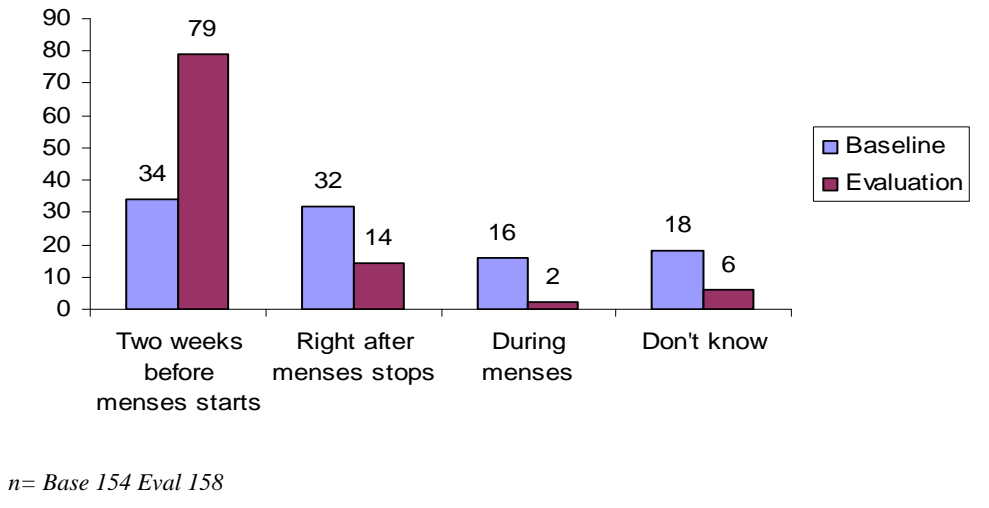


FAMILY PLANNING KNOWLEDGE

Knowledge on safe period

The data indicate an increase in knowledge among project beneficiaries with regards to knowledge on when pregnancy is most likely to occur in a woman’s monthly cycle. At baseline only a third correctly could identified that two weeks before menses are the most fertile days during a woman’s monthly cycle. However, at evaluation more than two thirds responded correctly. The percentage who reported that they did not know at baseline declined from 18% to 6% at evaluation.

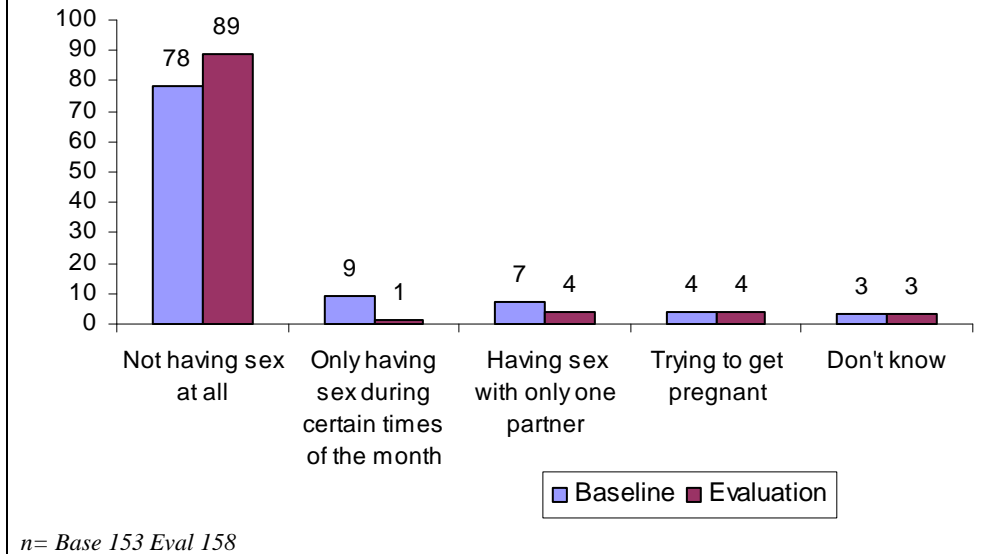
Fig 2: Percentage of respondents according to knowledge on when in a woman's monthly cycle she is most likely to get pregnant



Respondents understanding of Abstinence

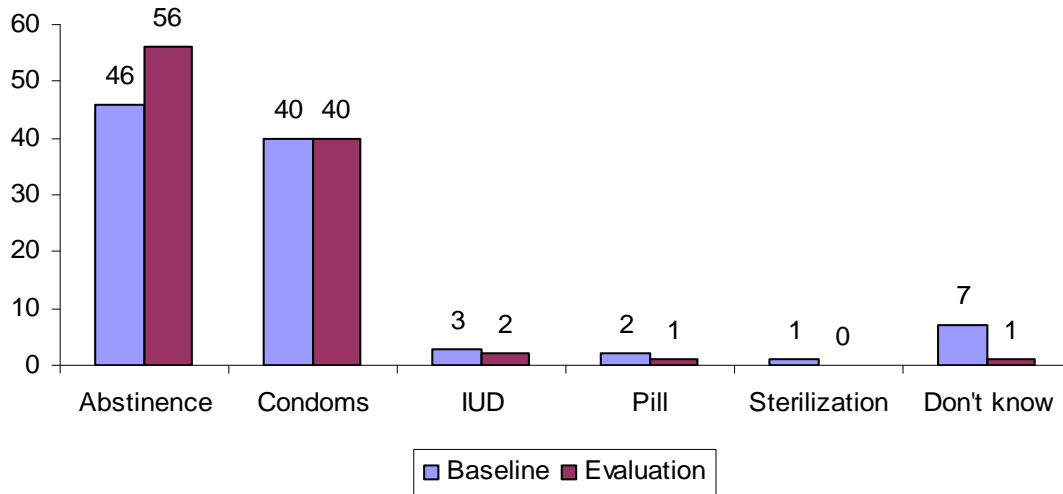
The data also suggest that respondents understanding of abstinence as not having sex at all has been enhanced during the period though not by a very large margin. The same percentage still did not know what abstinence is or that abstinence means trying to get pregnant (fig 3).

Fig 3: Percentage of respondents according to their understanding of abstinence



Most respondents are still divided between abstinence and condom use as the only certain way to avoid unwanted pregnancy and STIs, though at evaluation more respondents were sure of abstinence than at baseline (56% against 46%). The proportions certain that condom use is the only certain way to avoid unwanted pregnancy and STIs remained unchanged (Fig 4).

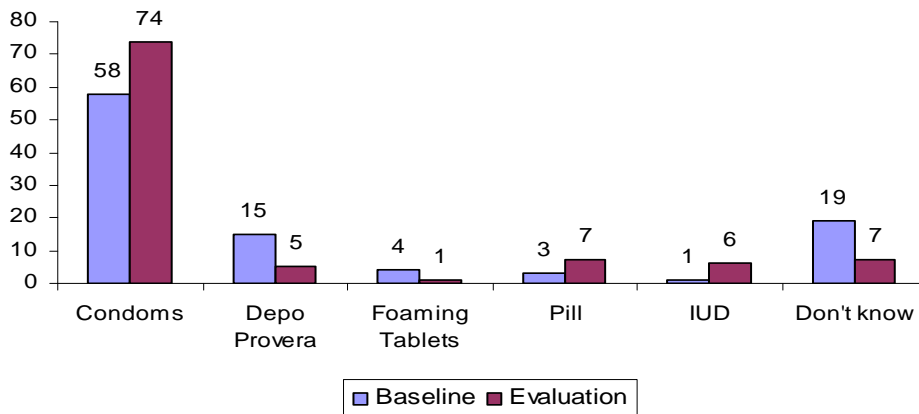
Fig 4: Percentage of respondents according to knowledge of the only certain way to avoid unwanted pregnancy and STIs



n= Base 150 Eval 159

When asked about the only family planning method that protects against STIs, more than seven out of ten (74%) correctly identified condoms. This figure represents a sixteen percentage points increase over the figure at baseline (fig 5). This notwithstanding respondents who reported the pill and IUD increased at evaluation by 4 and 5 percentage points respectively.

Fig 5: Percentage of respondents according to knowledge of the only family planning method that also protects against STIs



n= Base 149 Eval 157

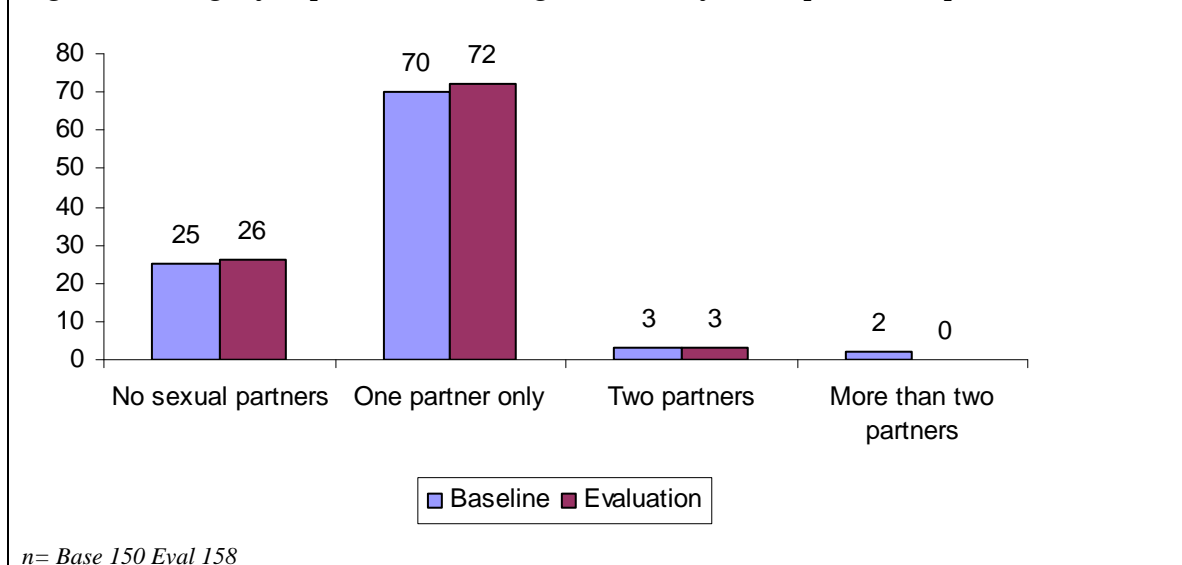
Overall the findings suggest that knowledge on how to prevent pregnancy and STIs has increased over the period.

SEXUAL BEHAVIOUR AND CONDOM USE

Sexual Partners

Number of sexual partners in the past 12 months preceding the study had not changed much between baseline and evaluation. Seven out of ten maintained one sexual partner during the period whilst about three percent had two sexual partners. There were no reports anyone having more than two partners at evaluation as against 2% at baseline. The remaining quarter had no sexual partners at all (fig 6).

Fig 6: Percentage of respondents according to number of sexual partners in past 12 months

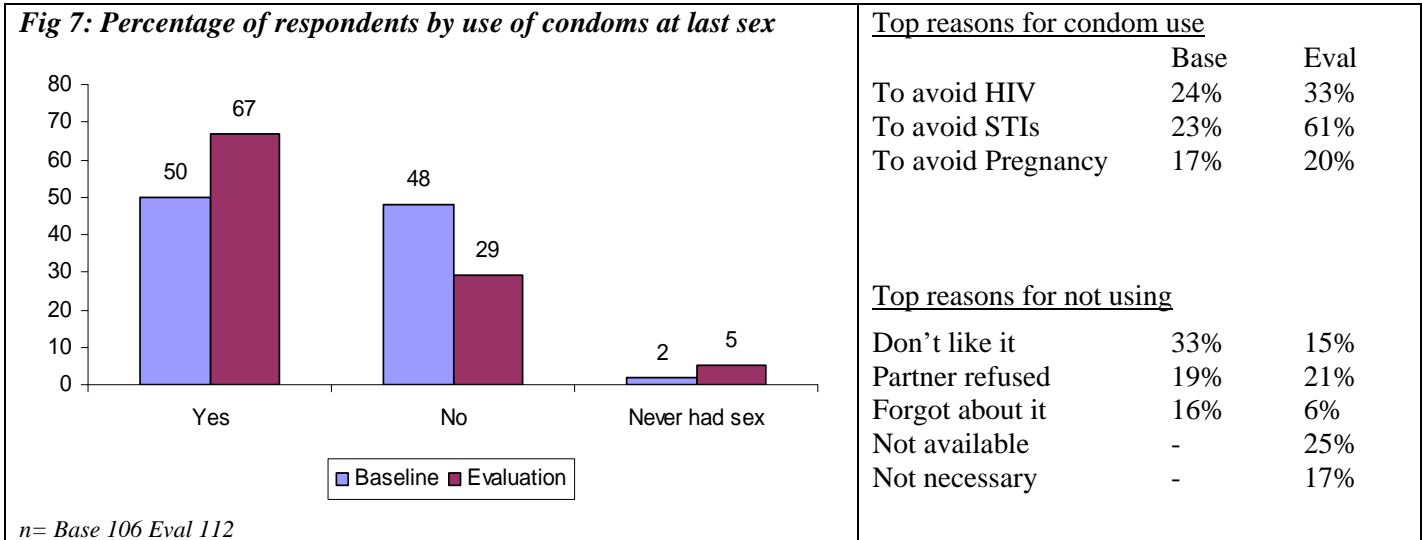


Condom Use

About two thirds of respondents reported using condoms at their last sex. This is an increase over the reported cases at baseline where half of respondents reported doing same (fig 7). Six out of ten (61%) of those who used condoms cited prevention of STIs as the main reason for usage. At baseline, only a little over two out of ten reported the same reason for condom use. The percentage who specifically cited prevention of HIV as reason for condom use increased from almost a quarter at baseline to a third at evaluation. (Fig 7). The data generally suggest that respondents were now more conscious and aware of STIs/HIV/AIDS and it is the main reason why they are careful to use a condom.

For those who did not use a condom at their most recent sexual activity, the fact that condoms were not available at the time of the sexual activity and the fact that their partners refused to use condom were the main reasons for non usage (25% and 21% respectively). It is encouraging to

note that the percentage who did not like to use condoms at baseline reduced by more than half at evaluation. Those who also forgot to use condoms at baseline also reduced from 16% to 6% at evaluation. These findings give an indication that more people are beginning to appreciate the importance of condom use. It is, however, disheartening to note that 17% of respondents at evaluation still felt that condom use is not necessary.



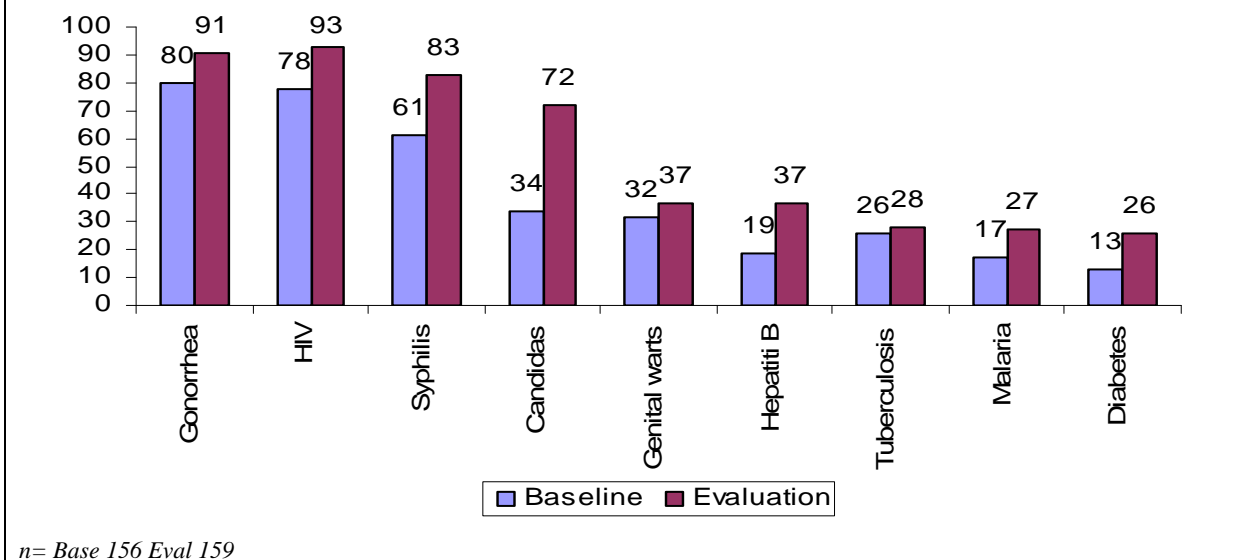
HIV AND STI AWARENESS

Knowledge of types of STIs

There has generally been an increase in knowledge of types of STIs among respondents. The data indicates an increase in the percentage of respondents who reported having knowledge for all the STIs. HIV and gonorrhoea were the commonly STIs, these were reported by over 90% of respondents. These were followed by syphilis and candidiasis (83% and 72% respectively). Greater increases were recorded among these two than the other STIs. Knowledge of candidiasis increased by more than 100% whilst syphilis increased by 38%.

Despite the increase in knowledge of the types of STIs, over a quarter of respondents believe that tuberculosis, malaria and diabetes are some form of STIs. Some increases were recorded in the percentage of respondents who reported these as types of STIs from baseline to evaluation. There is the need to disabuse this perception among respondents.

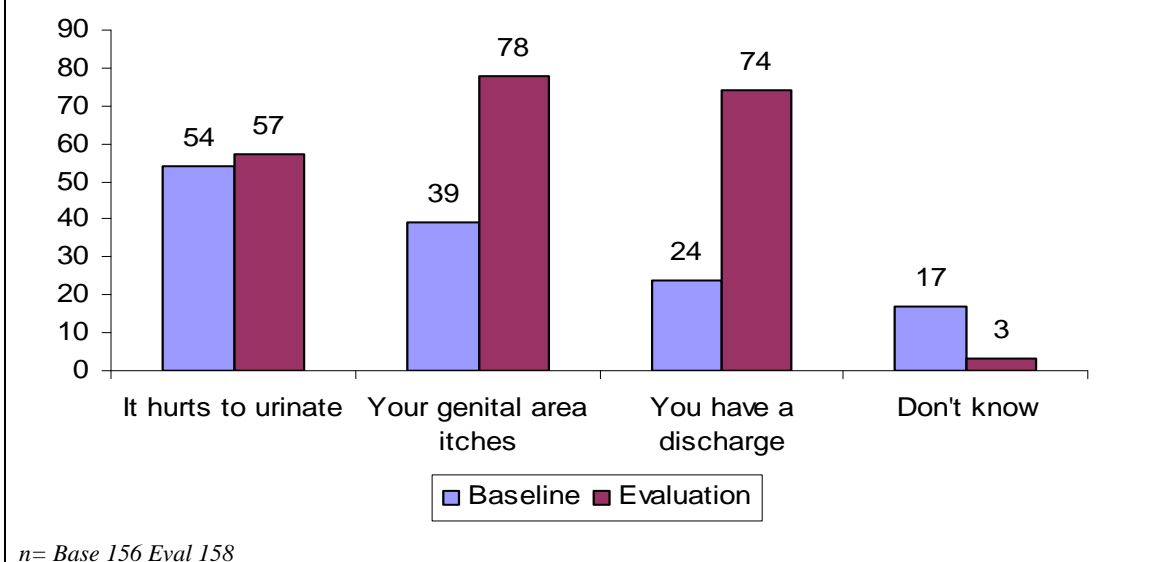
Fig 8: Percentage of respondents according to their knowledge of types of STIs



Symptoms of STIs

Itching in the genital area and discharge from the genitals were the main symptoms of STIs reported at evaluation. These were reported by more than 70% of respondents compared to 39% and 24% respectively at baseline. Pain on urination was also mentioned by more 50% of respondents. There was a significant decline in respondents who did not know any symptom of STI at all. (From 17% at baseline to 3% at evaluation (fig 9).

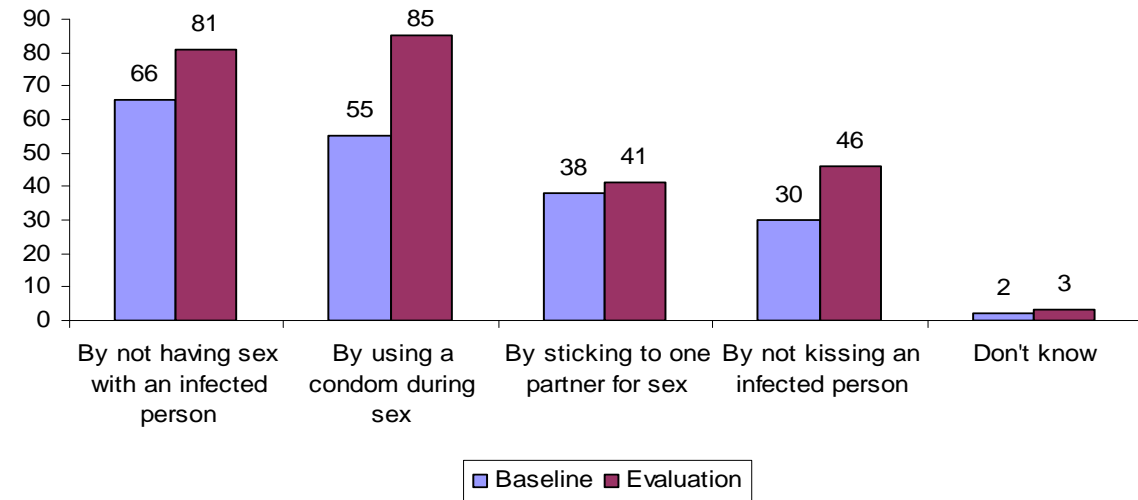
Fig 9: Percentage of respondents according to knowledge of symptoms of STIs



Prevention of STIs

The majority of the girls interviewed knew that the best way to avoid an STI was to avoid sex with an infected person or to use condoms during sex. 40% believed that sticking to one partner would also prevent the spread of STIs. Overall, the data suggest that knowledge has increased since the baseline.

Fig 10: Percentage of respondents according to knowledge on how STIs can be avoided



n= Base 156 Eval 159

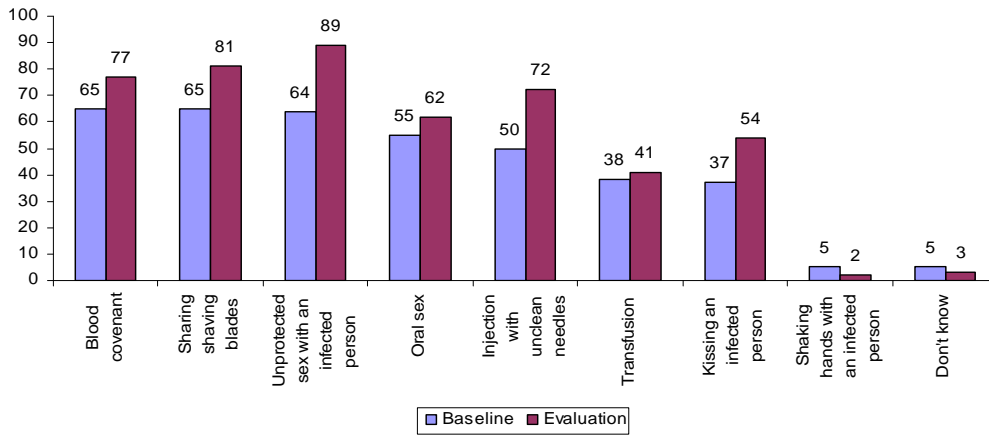
Modes of transmissions of STIs

Responses indicate that respondents equate other modes of transmission of HIV to transmission of all STIs. When asked to state how STIs are transmitted, the majority mentioned mode such as blood covenant, sharing shaving blades and injection with unclean needles as modes of transmission of STIs. Almost nine out of ten (89%) however mentioned unprotected sex with an infected person. This represents almost 40% increase over the figure at baseline (fig 11). There is still work to be done around the perceptions of kissing a person with STIs/HIV.

Encouragingly, an overwhelming majority of girls (95%) were aware that there is no cure for HIV. Again the majority of respondents (over 90%) were aware that cures are available for most STIs. Though limited awareness still exist that genital warts cannot be cured, there was an increase in knowledge among participants during the period (from 11% at baseline to 17% at evaluation)(fig 12).

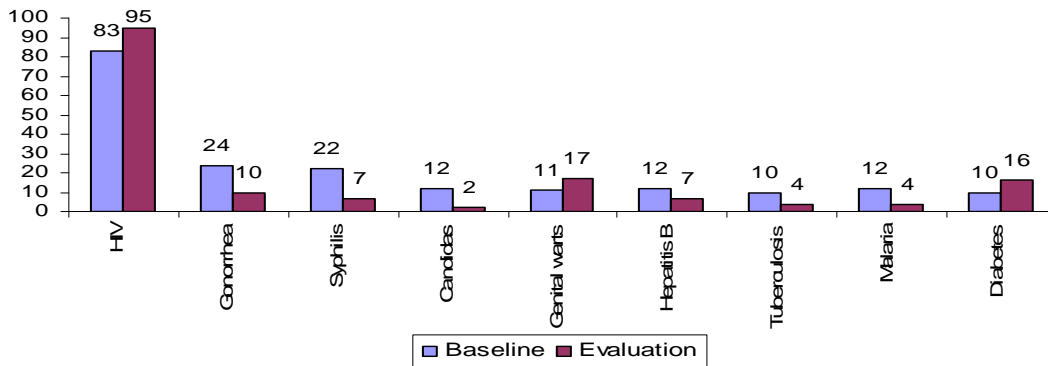
There is near universal agreement among respondents at the best course of treatment for STIs was to consult a doctor (fig 13).

Fig 11: Percentage of respondents according to knowledge on how STIs are transmitted



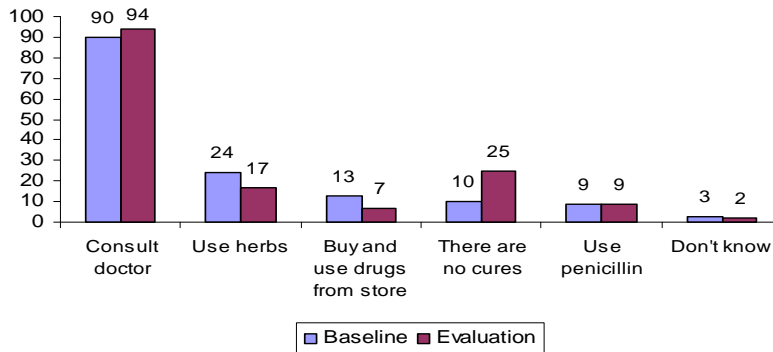
n= Base 156 Eval 159

Fig 12: Percentage of respondents according to knowledge of STIs that cannot be cured



n= Base 156 Eval 155

Fig 13: Percentage of respondents according to knowledge of how most STIs can be



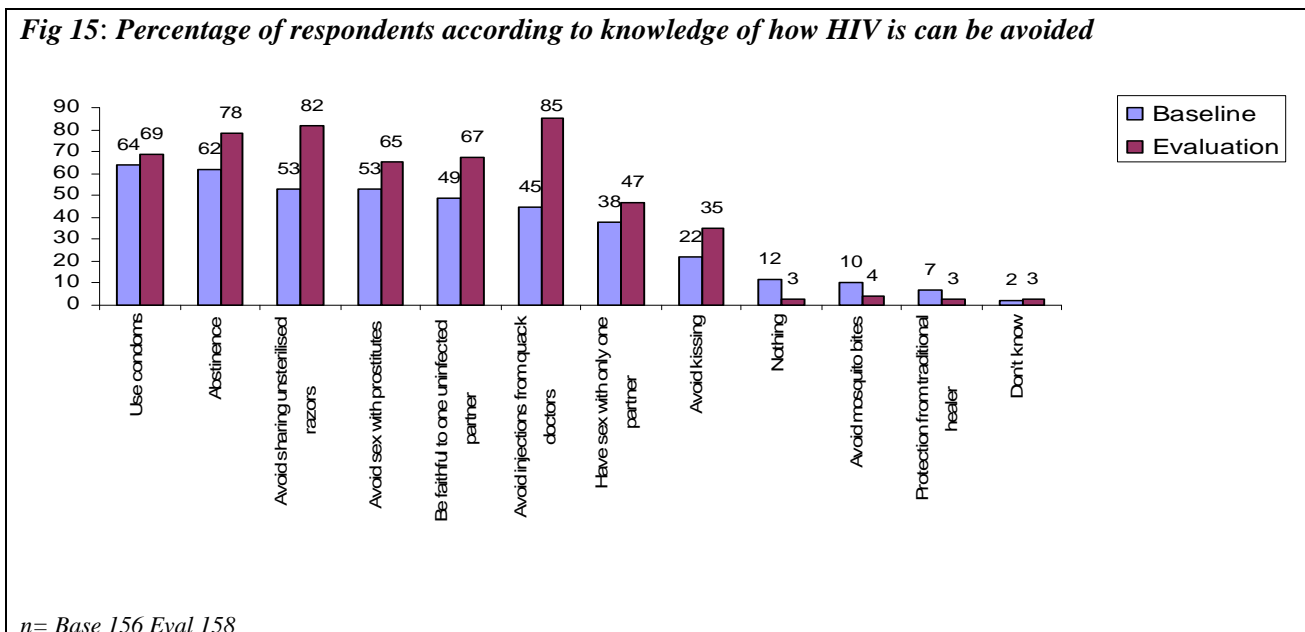
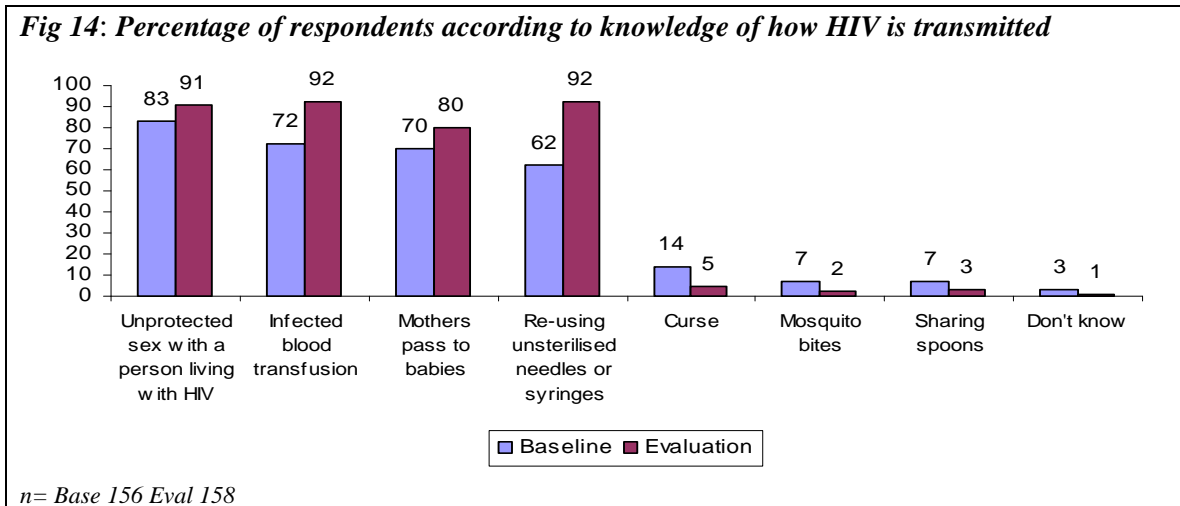
cured

n= Base 156 Eval 158

Modes of transmission of HIV

Knowledge on the modes of transmission of HIV was almost universal at evaluation. Over 90% of respondents reported unprotected sex with a People Living with HIV (PLWHIV), infected blood transfusion and re-using unsterilised needles and syringes as modes of transmission of HIV. Knowledge of mother to child transmission also increased from seventy to eighty percent (fig 14). Misconceptions about transmission of HIV appear to have been addressed to some extent. This is reflected in the fact that there was a decline in the percentage of respondents who reported that HIV can be transmitted through mosquito bites, by sharing spoons and through a curse at baseline. (fig 14).

Increase in knowledge was also observed among respondents on how HIV can be avoided (fig 15).



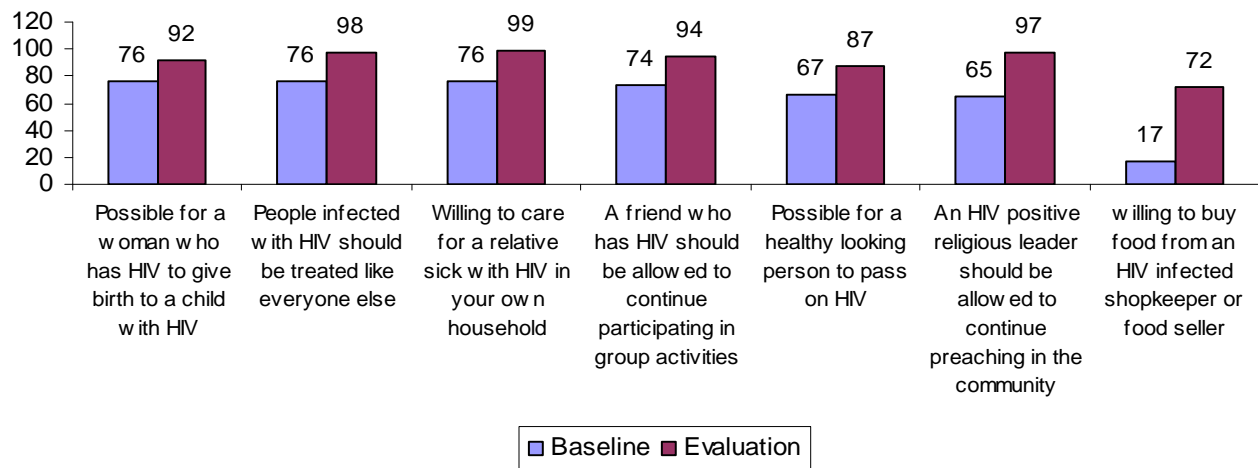
Attitude towards People Living with HIV (PLHIV)

There is a heartwarming attitude among respondents towards PLHIV. There was universal agreement that people infected with HIV should be treated like everyone else and that they were willing to care for a relative who has AIDS. There was also an almost universal agreement that an HIV positive religious leader should be allowed to continue preaching in the community and that friends who have contracted HIV should be allowed to continue participating in group activities.

Overall there has been an improvement in respondents' attitude towards PLHIV since the baseline. At evaluation, more than 70% of respondents were willing to buy food from an HIV positive shopkeeper or food seller compared to less than two out of ten at baseline (fig 16)

Respondents knowledge on the fact the healthy looking persons could pass on HIV has also increased however more than 10% still believe that this is not possible (fig 16).

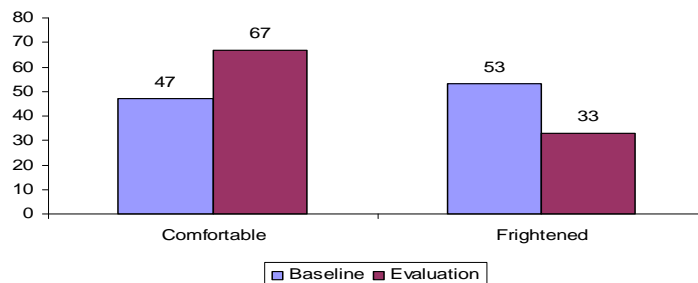
Fig 16: Percentage of respondents according to their attitude towards PLHIV



n= Base 156 Eval 159

Two thirds of respondents at evaluation indicated that they would feel comfortable knowing there was a person living with HIV/AIDS in their home compared to less than half at baseline (fig 17).

Fig 17: Percentage of respondents according to how they would feel knowing there was a person living with HIV/AIDS in their home.



n= Base 148 Eval 145

PEER EDUCATION

Almost all respondents were open to the idea of speaking to a friend as a peer educator and indicated that they would feel comfortable talking to a peer educator about health issues. Respondents' appeared to be more open about peer education at evaluation than they were at baseline

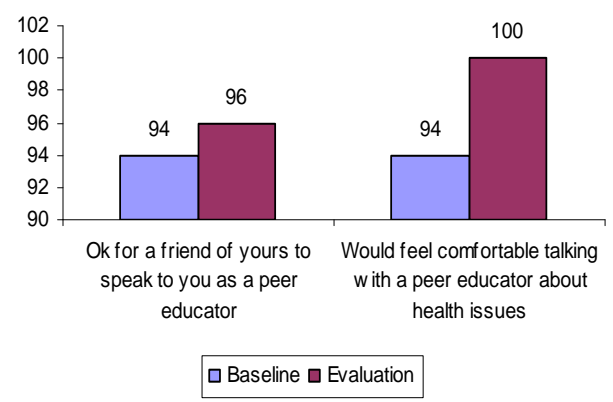
VOCATIONAL AND SMALL BUSINESS TRAINING

Type of trade

Respondents were asked to indicate the type of trade they

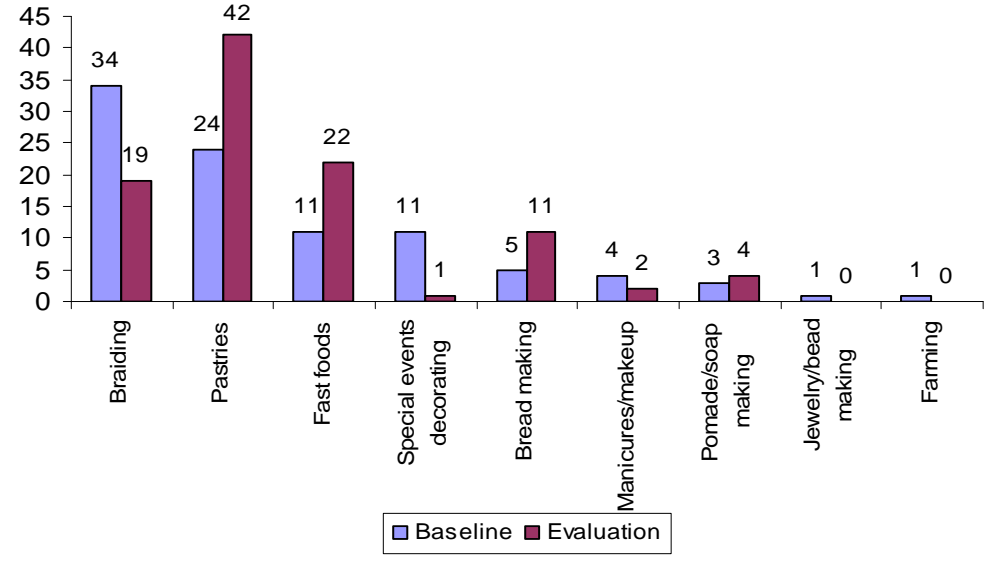
would like to learn. It appears that interest in hair braiding which dominated the sample at baseline has gone down (from 34% to 19%). The interest seems to have shifted to foods. More than seven out of ten wanted to learn how to make pastries, fast foods or bake bread. Other vocations such as special events decoration, manicure/makeup, jewelry/bead making and farming were less popular among the respondents (fig 19).

Fig 18: Percentage of respondents who agree to statements



n= Base 152 Eval 159

Fig 19: Percentage of respondents according to type of trade they would like to learn



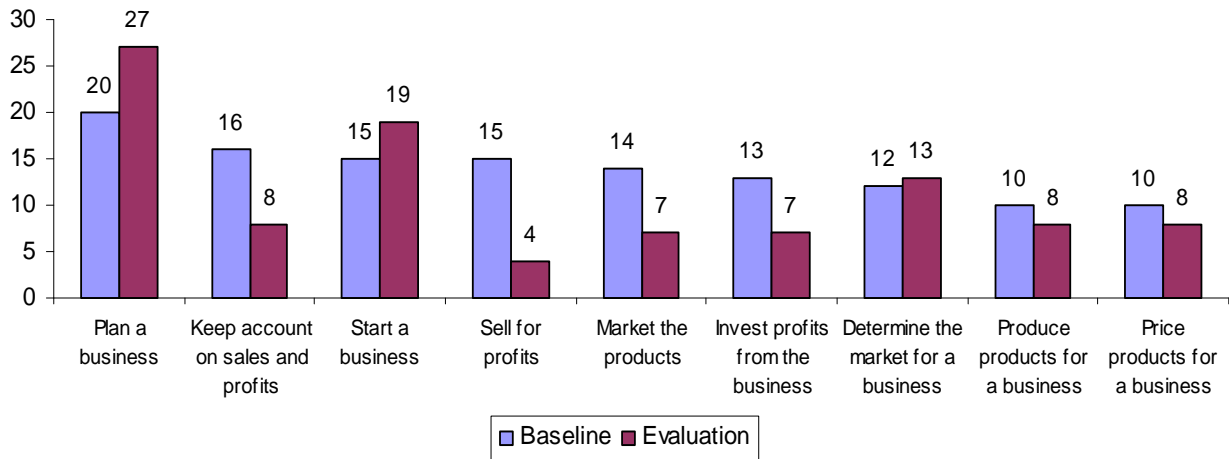
n= Base 140 Eval 122

Knowledge on running a business

Generally, respondent's knowledge on essential tasks in running a business is low. One in four believed that they can plan a business, almost one in five indicated that they can start a business whilst a little over one in ten stated that they can determine the market for a business. For all other tasks required in running a business, less than one in ten felt they had the capacity to do those tasks (fig 20).

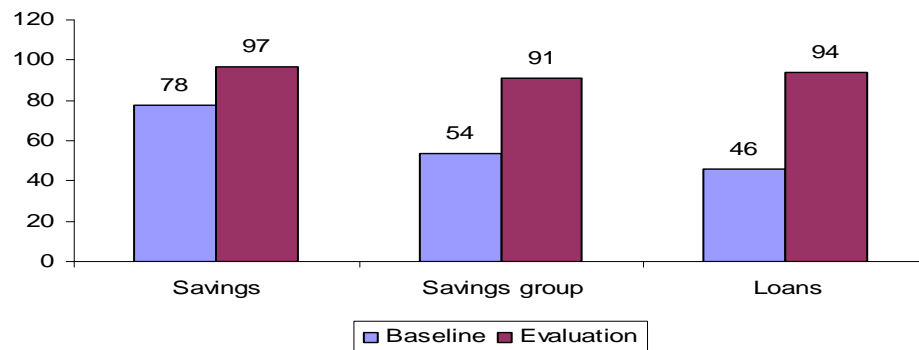
This notwithstanding, the overwhelming majority of respondents are familiar with the concept of savings either individual or group savings as well as loans. This finding represents a vast improvement in respondent's knowledge on savings since the baseline. For instance whilst less than half of respondents were familiar with loans at baseline, at evaluation, more than 90% reported that they were familiar with the concept (fig 21).

Fig 20: Percentage of respondents who have knowledge on how to do the following



n= Base 156 Eval 144

Fig 21: Percentage of respondents who are familiar with the following

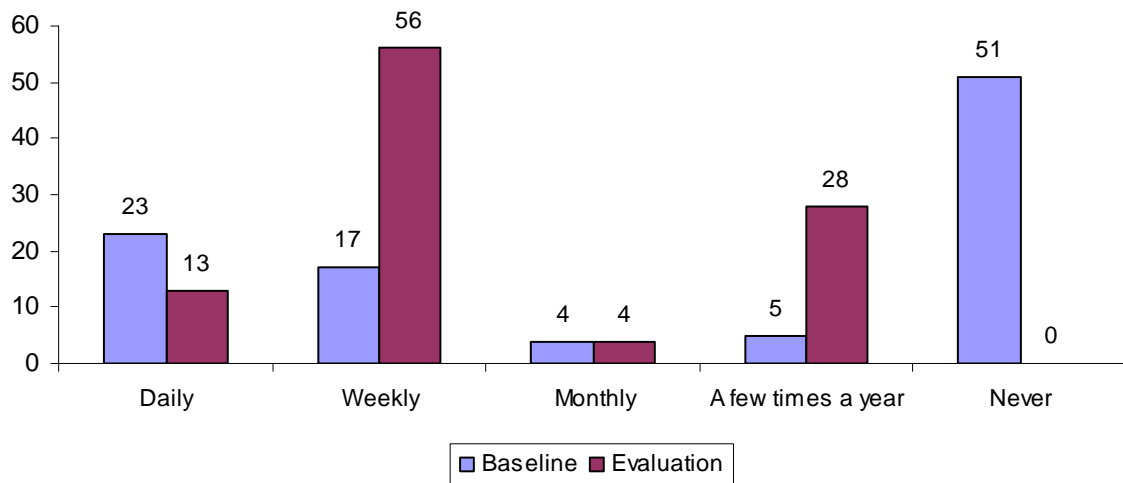


n= Base 156 Eval 159

Savings

It is encouraging to note that all the girls were involved in some form of savings at evaluation compared to about half at baseline. More than half (56%) saved weekly whilst a little more than one out of ten (13%) saved on daily basis. More than one out of four (28%) were not regular with their savings and did so only a few times in a year (fig 22). Close to nine out of ten respondents (87%) believed that saving money was important and almost six out of ten (59%) were members of a susu scheme.

Fig 22: Percentage of respondents according to how often they save money

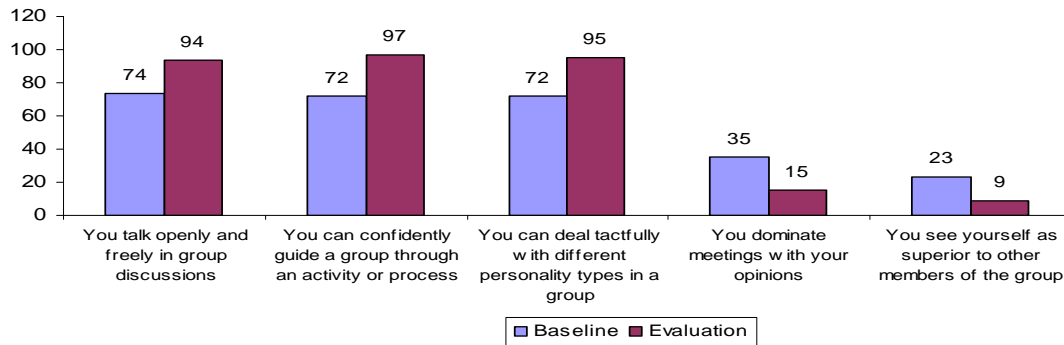


n= Base 150 Eval 151

LEADERSHIP SKILLS

The greater majority of respondents believed that one could be considered as a leader if he or she can talk openly and freely in group discussions, be able to guide a group through an activity or process and be able to deal tactfully with different personality types in a group. Over nine out of ten respondents at the evaluation agreed that a leader should have these abilities compared to seven out of ten at the baseline. A few still believe that leaders dominate meetings or see themselves as superior to others though these perceptions have declined since the baseline (fig 23).

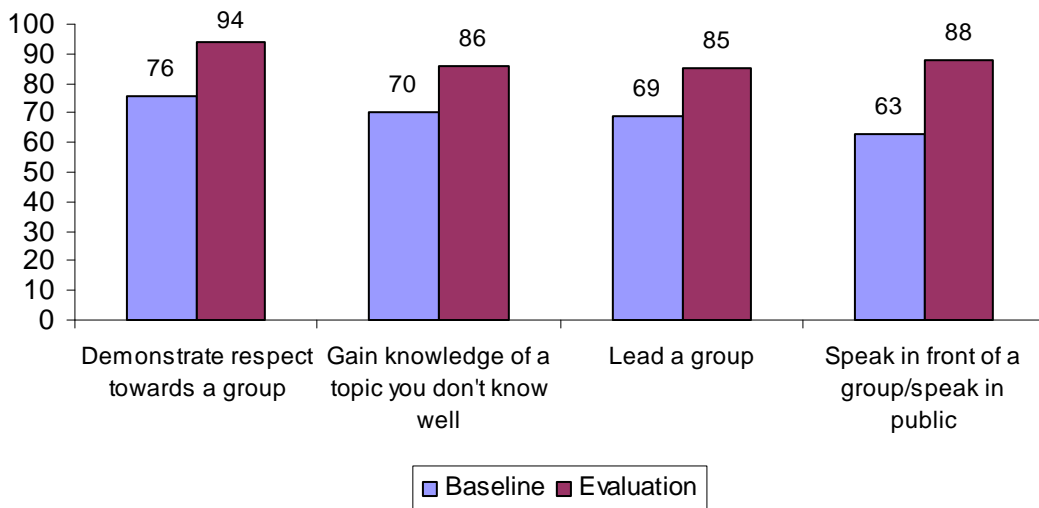
Fig 23: Percentage of respondents who agree with statements



n= Base 156 Eval 157

The data seem to suggest that the girls in the program have been empowered and are more assertive now than they were at the baseline. This is reflected in the fact that more young girls feel confident in their abilities to lead a group, speak in front of a group or speak in public. Over 80% also believed that they had the skill to demonstrate respect towards a group and gain knowledge of a topic they don't know well (fig 24).

Fig 24: Percentage of respondents who feel comfortable doing the following



n= Base 156 Eval 154

CONCLUSIONS

In conclusion, the results of the endline evaluation point to an overall improvement in key aspects of attitude and behavior change, with a surprising finding in the increase in understanding of and tolerance for persons living with HIV and AIDs. Girls also showed an increase in the level of sense of empowerment especially in taking charge of their personal health and their futures. While the findings about knowledge girls have about starting their own businesses was disappointingly low, it is very encouraging that almost all of the Girls 1st girls are involved in some form of saving scheme. These endline results bode well for the future. The program has helped to instill in the girls increased knowledge in key content areas and feelings of empowerment for their futures. Moreover, World Education and its implementing partner the Ghana Red Cross are in a stronger position to make program adaptations as we commence the second phase of Girls 1st.