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# DIME BRIEF

## The Effects of Conditional Cash Transfers on the Prevention of STIs in Tanzania

The Development Impact Evaluation Initiative is a broad-based World Bank program to generate knowledge on the effectiveness of government programs. It supports government agencies adopt a culture of real time evidence-based policy-making on the basis of rigorous impact evaluation. By testing how to make policies work, it contributes to improving policy performance.

DIME works with 300 agencies in 72 countries across 15 thematic programs to generate knowledge, improve quality of operations and strengthen country capacity for evidence-based policy-making.

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### Policy context

Using behavior change to tackle HIV/AIDS in the developing world is not easy. For years, the global community has zeroed in on behavior change as a key to fighting the global HIV epidemic. But so far, the approach has brought only limited success in reducing HIV infections in developing countries.

The frustrations are especially evident in sub-Saharan Africa, which has two-thirds of the world's HIV infections. Women and girls, in particular, are at greater risk, partly because of the biological, social and economic challenges they face. Thus, finding solutions is vital.

A large randomized trial involving cash incentives is showing promise in reducing sexually-transmitted infections (STI) in Tanzania. The trial is modeled on "conditional cash transfer" programs, which use cash payments to encourage good behaviors, such as attending schools or getting basic health care.

### Impact evaluation

The Tanzania study was designed to directly expand conditional transfers to encourage the prevention of STIs, and it differs from traditional transfer programs in two aspects. First, the participants weren't youth, but adults. Second, by conditioning quarterly cash payments to negative tests for curable STIs, it didn't pay participants to do something, but paid them not to do something: engaging in unsafe sex,

This \$1.8 million study in southwest Tanzania was designed to give cash payments to adults (men and women between 18 and 30 year old) in 10 villages to prevent STIs such as chlamydia, gonorrhea, trichomonas, mycoplasma genitalium. The trial only gave payments to those who tested negative for STIs. The cash, up to US\$60 per person over 12 months, made a difference in many households as annual earnings of study participants was around \$250.

### Impact evaluation results

The intervention worked. A year into the program, 9% of the 2,399 young enrollees eligible for the \$60 award tested positive for the infections, compared with 12% for the control group, which didn't receive payments. This is equivalent to a 25 percent reduction in prevalence, an encouraging result.

The amount of the cash transfer mattered. Half of the cash group was eligible for \$30 a year and the other half \$60. The study found that the \$30 group still



Counselors discuss safe sex practices with study participants

had the same infection rate as the control group that received no payments.

Not surprisingly, the program is more effective for people from poorer and rural areas.

## Policy recommendations

The impact evaluation in Tanzania provides evidence for using conditional cash transfers as an effective tool for HIV-prevention. The encouraging results from the trial show promising outcomes in reducing HIV and STI prevalence rates.

Such programs should be applied on a larger scale and in various settings. However, further study and testing is needed to assess their effectiveness of such programs for different scales and contexts. What works in rural Africa may not work in other regions. Testing different variations of these programs will help fine-tune the delivery mechanism of such programs.

Conditional cash transfer programs could complement current programs on behavior change. These programs can be introduced at a low marginal cost.

These innovative studies, if proven to be equally effective on a larger scale, could help make a dent in reversing the HIV epidemic.

*Source: de Walque, D., Dow, W., Nathan, R., "Evaluating Conditional Cash Transfers for HIV/STI Prevention in Tanzania" (unpublished report)*

## The role of Impact Evaluation in combating the HIV/AIDS Epidemic

**What interventions substantially reduce risky sexual behavior?** The global AIDS epidemic is fueled by risky sexual behavior. Over 80 percent of HIV infections occur through sexual contact with an infected partner and could have been avoided through the adoption of safe sexual behavior such as condom use, reduction in concurrent partnerships, abstinence and type of sexual interaction. Prevention programs appear to have been fairly successful in increasing awareness and knowledge but evidence on the link to changes in sexual behavior is weak. The question of whether HIV prevention is effective and whether the right strategies are being implemented is on everyone's mind. Are the economic and behavioral factors that drive risky sexual behavior being addressed? This is the focus of impact evaluation in HIV prevention.

**What interventions are successful in ensuring patients' high level of adherence to ART?** On the treatment side, the emphasis has been on making Antiretroviral Therapy (ART) available and increasing the number of HIV infected individuals on treatment. However, ART is only beneficial when patients have very high levels of adherence to the treatment. Without high adherence patients could be harmed by the medication and millions of dollars wasted. Learning how to secure high adherence to treatment is an enduring challenge that requires testing and rigorously evaluating multiple competing strategies. This is critical to save lives, increase productivity and ensure the effectiveness of large public expenditures in ART.



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