



# A Tool to Assess the Impact of Girls' Clubs and Savings Groups on Adolescent Girls and Young Women in Mozambique

August 2018



# A Tool to Assess the Impact of Girls' Clubs and Savings Groups on Adolescent Girls and Young Women in Mozambique

**Nena do Nascimento**, MPP, MEASURE Evaluation, Palladium  
**Susan Settergren**, PhD, MEASURE Evaluation, Palladium

August 2018

MEASURE Evaluation  
University of North Carolina at Chapel Hill  
123 West Franklin Street, Suite 330  
Chapel Hill, NC 27516 USA  
Phone: +1 919-445-9350  
measure@unc.edu  
[www.measureevaluation.org](http://www.measureevaluation.org)

This publication was produced with the support of the United States Agency for International Development (USAID) under the terms of MEASURE Evaluation cooperative agreement AID-OAA-L-14-00004. MEASURE Evaluation is implemented by the Carolina Population Center, University of North Carolina at Chapel Hill in partnership with ICF International; John Snow, Inc.; Management Sciences for Health; Palladium; and Tulane University. Views expressed are not necessarily those of USAID or the United States government. MS-18-136

ISBN: 978-1-64232-054-1



## ACKNOWLEDGMENTS

Our research team at MEASURE Evaluation, which is funded by the United States Agency for International Development (USAID) and the United States President's Emergency Plan for AIDS Relief (PEPFAR), would like to express sincere gratitude for the contributions of the following people and entities:

- Tracy Hawry, Célio Vilichane, and Nathaniel Lohman from USAID/Mozambique, and Susana Lorente from the Mozambique PEPFAR office for participating in discussions and decisions regarding this review, and development of the data collection tool
- Meghan Mattingly (USAID) for her support in conceptualizing this activity's objectives
- Jessica Fehringer (MEASURE Evaluation, University of North Carolina at Chapel Hill) for technical input on the study design and implementation
- Jenifer Chapman (MEASURE Evaluation, Palladium) for her review of technical inputs and coordination with stakeholders
- Lily Bunker (Tuya Consulting) for support with logistics and communications
- Prince Mulondo Yosia and colleagues (World Education) and partners of the Força à Comunidade e às Crianças Project (Child and Community Strengthening) for their availability to participate in interviews and share documentation relevant to this activity
- Adolfo Cambule, Claudina Lembe, and colleagues (World Vision/Strengthening Communities through Integrated Programming) for their availability to participate in interviews and share documentation relevant to this activity

We also thank the knowledge management team of MEASURE Evaluation, University of North Carolina at Chapel Hill, for editorial and production services.

Cover: Octavia Leonard with attendees of the Better Opportunities for Girls project. Photo: Plan International/Pi Frisk

## BACKGROUND

The United States President's Emergency Plan for AIDS Relief (PEPFAR) launched the Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) initiative in 2016 to accelerate reduction of HIV infections among adolescent girls and young women (AGYW) in 10 sub-Saharan African countries.

Girls' clubs and savings groups for AGYW are core HIV prevention components of the global DREAMS evidence-informed package of recommended interventions. To strengthen AGYW programming in Mozambique and inform the design, implementation, and monitoring of PEPFAR girls' clubs and savings groups globally, USAID asked MEASURE Evaluation to implement an activity with the following objectives:

- Gather information from the literature and the two projects in Mozambique implementing girls' clubs and savings groups for AGYW regarding the following:
  - The dosage (i.e., length of participation and number of sessions attended) to achieve intended program outcomes
  - Approaches used to promote consistent participation (or "retention") in these groups, and methods used to measure retention
- Summarize findings and provide data collection guidance (e.g., interview topics and suggested methods) for programs to use in improving retention in girls' clubs and savings groups for AGYW.

A report of the findings from the information gathering exercise is available on the MEASURE Evaluation website<sup>1</sup> and was presented at the DREAMS Partners' Meeting in Maputo on June 22, 2018. At that meeting, based on the findings and discussion, we determined that the most useful form of data collection guidance would be a pre-/post-assessment tool that would support partners to measure the impact of both interventions on AGYW who participate. This document provides that guidance.

---

<sup>1</sup> <https://www.measureevaluation.org/resources/publications/tr-18-260>

## CONSIDERATIONS FOR TOOL USE

This tool is designed to be used by DREAMS implementing partners to measure individual-level changes<sup>2</sup> that result from participation in girls' clubs and/or savings groups for AGYW. It is designed to be administered prior to beginning either intervention, and then again following completion of the intended participation period, which will typically be one year.<sup>3</sup>

The modules of the tool and the topics in each module are based on an exercise conducted with DREAMS partners at the DREAMS Partners' Meeting in which partners were asked to list the changes they have witnessed from AGYW who participate in girls' clubs and savings groups in Mozambique. This list was further complemented by findings from the information gathering exercise described above.

**Administration:** Partners should determine if they will administer this tool orally through short interviews with each program participant, or if it would be more appropriate to administer it as a written questionnaire. This determination can be made based on literacy and a determination of which method will result in the most valid responses, given the sensitive nature of several of these topics.

**Ethical considerations:** While data obtained from this tool are intended to be used solely for program improvement purposes, several of the topics in this guide are sensitive in nature. We strongly recommend providing clear explanations to program participants on how the findings from this assessment will be used, specifically that data will only be collected in aggregate for each girls' club/savings group and that no participant's name or other identifying information will be used or included in any analysis or presentation of the results. If data collected with this tool are intended to be published, a study protocol should be developed and submitted for IRB review. Furthermore, it will be important to explain that there is no "right" or "wrong" answer to any question and that no participant will be "rewarded" or "punished" for how they respond to specific answers.

**Selection of modules and questions:** This tool is designed to be short and rapid to administer. It can be administered as a complete tool, or individual modules may be selected from the tool. In the tool we have noted where there are scales that require joint administration, and which combination of questions can be selected if implementers would like to shorten the questionnaire. We strongly advise against adding additional questions beyond the 33 listed below, because it will impede the ability to collect data rapidly. We also strongly suggest removing questions that may not be relevant to an intervention or project.

**Analysis:** In the table below for each module, and for scales and subscales, where relevant, we have included guidance on how to analyse findings at baseline and endline. We DO NOT recommend summing "scores" across modules or creating total "scores" for beneficiaries across modules, since each module measures a different construct and cannot be combined with others. We suggest disaggregation of findings by age, specifically the DREAMS age groups (10–14 years, 15–19 years, 20–24 years), however, you may also want to further disaggregate by in-school/out-of-school and married/single. This disaggregation will require some preliminary questions on age and other statuses (e.g., schooling and marital status).

---

<sup>2</sup> We note that there are changes that may result from participation in these interventions that go beyond the individual (e.g., changes in societal gender norms), however, they cannot be measured through this type of instrument and methodology.

<sup>3</sup> We note that there may be individual-level changes that occur over a longer period of time following this intervention, this tool is not designed to measure those types of changes.

Question	Response categories	Construct (concept that is being measured)	Source	Suggested analysis
<b>Module 1 – Schooling.</b> Administer only to school-age participants. You can administer only question 1.1, or both questions 1.1 and 1.2.				
1.1. Are you currently enrolled in school?	Yes/No	School enrolment	Adapted from the PEPFAR MER Essential Survey Indicator Toolkit <sup>4</sup>	Yes =1, No = 0  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
1.2. During the last school week, did you miss any school days for any reason?	Yes/No/Not currently enrolled	School attendance		Yes =1, No = 0, Not currently enrolled = 9  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
<b>Module 2 – Health.</b> There are three submodules: HIV, contraceptives, and transactional sex (an HIV risk behavior). They can be administered separately or jointly. See notes in each section on administration.				
<b>HIV</b> Administer questions 2.1 – 2.3, or only 2.2 and 2.3				
2.1. I don't want to know the results, but have you ever been tested to see if you have the HIV virus?	Yes/No	HIV testing ever	Adapted from the PEPFAR MER Essential Survey Indicator Toolkit <sup>4</sup>	Yes =1, No = 0  Compare frequencies and percentages before starting intervention and after completion of intervention, disaggregate by age.
2.2. Have you received an HIV test within the last six months?	Yes/No/Never been tested	Recent HIV testing		Yes =1, No = 0, Never been tested =9 (if 2.1 was asked)  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
2.3. I don't want to know the results, but do you know the results of your most recent test?	Yes/No/Never been tested	HIV testing and received results		Yes =1, No = 0, Never been tested =9  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.

<sup>4</sup> <https://www.measureevaluation.org/our-work/ovc/ovc-program-evaluation-tool-kit>

Question	Response categories	Construct (concept that is being measured)	Source	Suggested analysis
<b>Contraceptives</b>				
Select any of the following questions below.				
2.4. Have you heard of any of the following ways or methods that a couple can use to delay or avoid a pregnancy? <ul style="list-style-type: none"> <li>• Female sterilization</li> <li>• Male sterilization</li> <li>• IUD</li> <li>• Injectables</li> <li>• Implants</li> <li>• Pill</li> <li>• Condom</li> <li>• Female condom</li> <li>• Emergency contraception</li> <li>• Standard days method</li> <li>• Lactational amenorrhea method</li> <li>• Rhythm method</li> <li>• Withdrawal</li> <li>• Other modern method</li> </ul>	Read (or write out) each method. Check each method that the respondent has heard of.	Contraceptive knowledge	Adapted from the 2013–2018 DHS Survey <sup>5</sup>	Calculate a score with 1 point for each contraceptive method checked (possible range 0–13). (Note: you can add or remove contraceptive methods in accordance with context.)  Compare mean number of responses before starting intervention and after completion of intervention; disaggregate by age.
2.5. Do you know where to go to obtain contraceptives or discuss with a health professional how to delay or prevent pregnancy?	Yes/No	Knowledge of where to access services to prevent unintended pregnancies	N/A	Yes = 1, No = 0  Compare frequencies before starting intervention and after completion of intervention; disaggregate by age.
<b>Transactional Sex</b>				
2.6. Have you received money or other goods in exchange for sex in the past four weeks?	Yes/No/Did not have sex in past four weeks	Engagement in transactional sex	Adapted from Priorities for Local AIDS Control Efforts (PLACE) <sup>6</sup> Survey	Yes = 1, No = 0, Did not have sex in past four weeks = 9  Compare frequencies before starting intervention and after completion of intervention; disaggregate by age.

<sup>5</sup> <https://dhsprogram.com/publications/publication-dhsq7-dhs-questionnaires-and-manuals.cfm>

<sup>6</sup> <https://www.measureevaluation.org/resources/tools/hiv-aids/place>

Question	Response categories	Construct (concept that is being measured)	Source	Suggested analysis
<b>Module 3 – Gender Norms and Attitudes.</b> <sup>7</sup> Select submodules and ask all questions from each selected module.				
<b>3.1. Violence</b>	Agree/Partially agree/Do not agree	Attitudes towards gender norms and violence in intimate relationships	Gender Equitable Men (GEM) Scale <sup>7</sup>	1=agree, 2= partially agree, 3 = do not agree  Sum scores from subscale questions and calculate mean. Compare means before starting intervention and after completion of intervention; disaggregate by age.
3.1.1. There are times when a woman deserved to be beaten.				
3.1.2. A woman should tolerate violence to keep her family together.				
3.1.3. It is alright for a man to beat his wife if she is unfaithful.				
3.1.4. A man can hit his wife if she won't have sex with him.				
3.1.5. If someone insults a man, he should defend his reputation with force if he has to.				
<b>3.2. Sexual Relationships</b>	Agree/Partially agree/Do not agree	Attitudes towards gender norms in intimate relationships	Gender Equitable Men (GEM) Scale (see footnote 7)	1=agree, 2= partially agree, 3 = do not agree.  Sum scores from subscale questions and calculate mean. Compare means before starting intervention and after completion of intervention; disaggregate by age.
3.2.1. It is the man who decides what type of sex to have.				
3.2.2. Men are always ready to have sex.				
3.2.3. Men need more sex than women do.				
3.2.4. A man needs other women even if things with his wife are fine.				
3.2.5. You don't talk about sex, you just do it.				

<sup>7</sup> Questions from this section are taken from the Gender Equitable Men (GEM) Scale—a scale that has been used with both males and females and validated in numerous countries in Latin America, Africa, and Asia. It has been associated with less self-reported partner violence, more contraceptive and condom use, and a reduction in multiple sexual partners. For more information, please see: <https://c-changeprogram.org/content/gender-scales-compendium/index.html>.

Question	Response categories	Construct (concept that is being measured)	Source	Suggested analysis
3.2.6. It disgusts me when I see a man acting like a woman.				
3.2.7. A woman should not initiate sex.				
3.2.8. A woman who has sex before she marries does not deserve respect.				
<b>3.3. Reproductive Health and Disease Prevention</b>	Agree/Partially agree/Do not agree	Attitudes towards gender norms in reproductive health and disease prevention in intimate relationships	Gender Equitable Men (GEM) Scale (see footnote 7)	1=agree, 2= partially agree, 3 = do not agree.  Sum scores from subscale questions and calculate mean. Compare means before starting intervention and after completion of intervention; disaggregate by age.
3.3.1. Women who carry condoms on them are easy.				
3.3.2. Men should be outraged if their wives ask them to use a condom.				
3.3.3. It is a woman's responsibility to avoid getting pregnant.				
3.3.4. Only when a woman has a child is she a real woman.				
3.3.5. A real man produces a male child.				
<b>Module 4. Social Support</b>				
4.1. Do you have someone in your life to turn to for suggestions about how to deal with a personal problem?	Yes/No	Social assets	PEPFAR MER Essential Survey Indicator Toolkit (see footnote 4)	1=Yes, No = 0  Sum scores from module and calculate mean. Compare means before starting intervention and after completion of intervention; disaggregate by age.
4.2. Do you have someone in your life to help with daily chores if you were sick?	Yes/No	Social assets		
4.3. Do you have someone in your life that shows you love and affection?	Yes/No	Social assets		

Question	Response categories	Construct (concept that is being measured)	Source	Suggested analysis
4.4. Do you have someone in your life to do something enjoyable with?	Yes/No	Social assets		
<b>Module 5. Financial and Economic Status.</b> We recommend questions 5.2 and 5.4 for all AGYW who participate in savings groups. That said, questions 5.1 and 5.3 will provide a more accurate picture of savings and productive use of savings and other assets.				
5.1. Do you yourself own any productive assets (for example, cattle or a sewing machine)?	Yes/No	Resources and capacities	Adapted from Women's Empowerment Scale, <sup>8</sup> Economic Security and Contribution Subscale.	1=Yes, No = 0 Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
5.2. Do you have any cash savings?	Yes/No	Resources and capacities, including savings		1=Yes, No = 0  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
5.3. Have you ever used your savings for business or money-lending?	Yes/No	Resources and capacities, including use of savings for improved economic status		1=Yes, No = 0  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.
5.4. I feel confident making financial decisions.	Agree/Partially agree/Do not agree	Financial management confidence	N/A	1=agree, 2= partially agree, 3 = do not agree.  Compare frequencies and percentages before starting intervention and after completion of intervention; disaggregate by age.

<sup>8</sup> This scale had been validated in Bangladesh and the full administration of the scale predicted current condom use. We have modified the scoring method to be in line with this tool. For more information on this scale, please see: <https://c-changeprogram.org/content/gender-scales-compendium/empowerment.html>.

## REFERENCES

Compendium of Gender Scales. n.d. Retrieved from: <https://c-changeprogram.org/content/gender-scales-compendium/index.html>.

Demographic Health Survey Model Questionnaire – Phase 7. (2015, October). Retrieved from: <https://dhsprogram.com/publications/publication-dhsq7-dhs-questionnaires-and-manuals.cfm>.

Do Nascimento, N., Settergren, S., Harris-Sapp, T. (2018). *Retaining Adolescent Girls and Young Women in HIV Prevention Programming: A Review of Girls' Clubs and Savings Groups in Mozambique*. Chapel Hill, NC, USA: MEASURE Evaluation. Retrieved from: <https://www.measureevaluation.org/resources/publications/tr-18-260>.

OVC Survey Toolkit. n.d. <https://www.measureevaluation.org/our-work/ovc/ovc-program-evaluation-tool-kit>.

PLACE: Priorities for Local AIDS Control Efforts. n.d. Retrieved from: <https://www.measureevaluation.org/resources/tools/hiv-aids/place>.

MEASURE Evaluation  
University of North Carolina at Chapel Hill  
123 West Franklin Street, Suite 330  
Chapel Hill, NC 27516 USA  
Phone: +1 919-445-9350  
measure@unc.edu  
[www.measureevaluation.org](http://www.measureevaluation.org)

This publication was produced with the support of the United States Agency for International Development (USAID) under the terms of MEASURE Evaluation cooperative agreement AID-OAA-L-14-00004. MEASURE Evaluation is implemented by the Carolina Population Center, University of North Carolina at Chapel Hill in partnership with ICF International; John Snow, Inc.; Management Sciences for Health; Palladium; and Tulane University. Views expressed are not necessarily those of USAID or the United States government. MS-18-136

ISBN: 978-1-64232-054-1

