

# PROGRAM ABSTRACT

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*TITLE* *INTERVENTION WITH MICROFINANCE FOR AIDS AND GENDER EQUITY (IMAGE)*

*SUMMARY* *IMAGE* is an innovative approach to the prevention of HIV/AIDS that explicitly addresses key structural factors driving the epidemic, such as poverty, gender-based violence and broader gender inequalities. By integrating a program of gender awareness and HIV education into an existing microfinance initiative, *IMAGE* attempts to address the HIV epidemic in settings where poverty and gender inequalities continue to pose a critical challenge to prevention efforts.

*IMAGE* is comprised a gender and HIV training curriculum called "Sisters-for-Life." A microfinance program augments the curriculum, where groups of women receive loans to establish small businesses. These groups of women meet regularly to discuss business plans and to also complete the Sisters-for-Life curriculum. Sisters-for-Life consists of two phases. Phase I is a structured series of 10 one-hour participatory training sessions that are integrated into the Loan Center meetings. Phase II moves the participants toward collective action. "Natural Leaders" are elected by their peers to participate in a one-week training workshop on leadership and community mobilization. Taking these skills back to their respective loan centers, they are responsible for developing an Action Plan, with the goal of implementing what they regard as appropriate responses to priority issues.

The *IMAGE* evaluation study used a cluster-randomized design. Eight villages in the Sekhukhuneland District of Limpopo Province, South Africa, were pair-matched and randomly allocated to receive the program. Survey responses, collected at baseline and 2-year follow-up, were compared with those of women of the same age and poverty level from control villages. Intervention effects were calculated using adjusted risk ratios employing village level summaries. Outcomes included economic well-being, past year's experience of intimate partner violence, and nine indicators of women's empowerment. HIV risk behavior was

also assessed among a subset of female participants aged 14–35 years.

After 2 years, the risk of past-year physical or sexual violence by an intimate partner was reduced by more than half (adjusted risk ratio [aRR] = 0.45; 95% confidence interval [CI] = 0.23–0.91). Improvements in all nine indicators of empowerment were observed. When compared with the control conditions, young participants had higher levels of HIV-related communication (aRR = 1.46; 95% CI = 1.01–2.12), were more likely to have accessed voluntary counseling and testing (aRR = 1.64; 95% CI = 1.06–2.56), and less likely to have had unprotected sex at last intercourse with a non-spousal partner (aRR = 0.76; 95% CI = 0.60–0.96).

*GLOBAL HIV  
ARCHIVE  
CATEGORY*

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Sexual risk reduction (Secondary)     | <input checked="" type="checkbox"/> Community mobilization (Primary) | <input type="checkbox"/> Antiretroviral adherence |
| <input checked="" type="checkbox"/> HIV testing and education (Secondary) | <input type="checkbox"/> Reproductive health                         | <input type="checkbox"/> High-risk populations    |

Primary content categories reflect the main focus of the program, while secondary content categories may be addressed in other aspects of the program.

*IMPLEMENTATION  
LEVEL*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Individual (implemented one-on-one)   | <input type="checkbox"/> Couple/ family (implemented with a couple or family) | <input checked="" type="checkbox"/> Group (implemented in small groups) |
| <input checked="" type="checkbox"/> Structural (implemented on social, economic, political, or environmental levels) |   |   |

*IMPLEMENTATION  
SETTING*

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Community (implemented through community-based organizations) | <input type="checkbox"/> School (implemented in schools) | <input type="checkbox"/> Clinic (implemented in clinics) |
|---|--|--|

*ORIGINAL  
TARGET  
POPULATION*

Participants in the original implementation of IMAGE were impoverished women living in South Africa's rural Limpopo province.

*PROGRAM  
COMPONENTS*

- |   |   |
|---|---|
| <input type="checkbox"/> Booster sessions for participants                                  | <input checked="" type="checkbox"/> Formalized curriculum               |
| <input checked="" type="checkbox"/> Community outreach/mobilization                         | <input type="checkbox"/> Medication adherence and routine clinic visits |
| <input checked="" type="checkbox"/> Condom demonstration                                    | <input type="checkbox"/> Motivational interviewing                      |
| <input type="checkbox"/> Continual assessment of progress                                   | <input type="checkbox"/> Multi-year program                             |
| <input type="checkbox"/> Educational materials (e.g., leaflets, posters, comics, magazines) | <input type="checkbox"/> Needs assessment                               |
| <input type="checkbox"/> Electronic media (e.g., radio, cell phones, internet, videos)      | <input checked="" type="checkbox"/> Peer education/ counseling          |
|   | <input type="checkbox"/> Presentations                                  |
|   | <input checked="" type="checkbox"/> Role Plays                          |
|   | <input type="checkbox"/> Stakeholder investment                         |
|   | <input type="checkbox"/> STI/HIV testing                                |

*PROGRAM  
LENGTH*

*IMAGE* is delivered to participants every two weeks during established group-based microfinance meetings. Phase 1 and Phase 2 each last for approximately 6 months each for a total combined length of approximately one year.

*STAFFING  
REQUIREMENTS/  
TRAINING*

Trained facilitators are responsible for delivering *IMAGE* to participants. In the original implementation, four women openly living with HIV were recruited and trained as facilitators. Additionally, management and field staff training workshops were conducted to raise awareness and knowledge around key issues; to allow program staff to become better acquainted; and to begin generating a shared vision and ownership for *IMAGE*. See Getting Started on page 12 for further details on how to prepare staff for program implementation.

*PROGRAM  
MATERIALS*

The *IMAGE* program package contains most of the materials needed to implement the two-phase gender and HIV training curriculum as part of established, ongoing microfinance activities. It will, however, be necessary to obtain the following items:

- Nametags;
- Flip chart and markers;
- Pens/pencils and paper;
- Condoms; and
- Penis proxy (for the condom demonstration during the training).
- Additionally, for Session 8 of the Natural Leaders and Session 3 of the Sisters for Life Phase II trainings, facilitators may choose to bring photos clipped from a local newspaper or magazine.

Implementers must also identify a microfinance program to augment *IMAGE*, if one has not already been established.

*A NOTE ABOUT  
ADAPTATION*

The Global HIV Archive program package includes a Customized Adaptation Handbook to help program staff successfully adapt *IMAGE* for new settings and target populations. The Adaptation Handbook details a set of pragmatic, easy-to-follow steps to facilitate making changes to the program, while preserving the components that made – or are believed to have made – it effective in the first place.

*A NOTE ABOUT  
EVALUATION*

Each Global HIV Archive program package contains the evaluation instruments used in the original program. In the original evaluation of *IMAGE*, the instruments were administered by female interviewers who had received four weeks of intensive training, including technical, ethical, and safety considerations in conducting research.

The program package also includes an Evaluation Resource Guide, containing select questions to assess relevant HIV outcomes such as sexual risk behaviors. If you would like to conduct an evaluation survey with your population, it is important to assess the applicability of survey questions to your context/setting. For instance, some questions contain region-specific language and terminology that you would need to adapt to be relevant to your population. Pre-test the instrument with a small group of individuals representative of your population prior to administering it to the entire group. This pre-test may reveal in advance potentially problematic questions.

*PROGRAM  
ACQUISITION  
AND  
IMPLEMENTATION  
COSTS*

Global HIV Archive program packages are available in boxed, flash-drive, and downloadable formats. The cost of this Global HIV Archive program package includes:

- *Quick Guide to Program Package* – a roadmap to get oriented to *IMAGE* and tips for how to get started
- *User's Guide* – an overview of the program including information about implementation and evaluation

***Phase I***

- *Sisters for Life: Gender and HIV Training Manual* – a guide to implement the gender and HIV curriculum

***Phase II***

- *Natural Leaders Training Manual* – a guide to implement the community mobilization component of the program
- *Sisters for Life Phase II Manual* – a guide to implement the second phase of the program
- *Customized Adaptation Handbook* – a guide for adapting *IMAGE*
- *Original Evaluation Materials* – all surveys and fieldworker training manuals used to measure the effectiveness of the original implementation
- *Evaluation Resource Guide* – a set of survey questions for evaluating HIV-prevention program effectiveness

The following program materials are also available in Northern Sotho (translation included in English version of Original Evaluation Materials):

- *Original Evaluation Materials* – all surveys and field worker training manuals used to measure the effectiveness of the original implementation

*CONTACT  
INFORMATION*

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