



Original article

Do Savings Mediate Changes in Adolescents' Future Orientation and Health-Related Outcomes? Findings From Randomized Experiment in Uganda

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 A B S T R A C T

Purpose: This present study tests the proposition that an economic strengthening intervention for families caring for AIDS-orphaned adolescents would positively affect adolescent future orientation and psychosocial outcomes through increased asset accumulation (in this case, by increasing family savings).

Methods: Using longitudinal data from the cluster-randomized experiment, we ran generalized estimating equation models with robust standard errors clustering on individual observations. To examine whether family savings mediate the effect of the intervention on adolescents' future orientation and psychosocial outcomes, analyses were conducted in three steps: (1) testing the effect of intervention on mediator; (2) testing the effect of mediator on outcomes, controlling for the intervention; and (3) testing the significance of mediating effect using Sobel–Goodman method. Asymmetric confidence intervals for mediated effect were obtained through bootstrapping—to address the assumption of normal distribution.

Results: Results indicate that participation in a matched Child Savings Account (CSA) program improved adolescents' future orientation and psychosocial outcomes by reducing hopelessness, enhancing self-concept, and improving adolescents' confidence about their educational plans. However, the positive intervention effect on adolescent future orientation and psychosocial outcomes was not transmitted through saving. In other words, participation in the matched CSA program improved adolescent future orientation and psychosocial outcomes regardless of its impact on reported savings.

Conclusions: Further research is necessary to understand exactly how participation in economic strengthening interventions, for example, those that employ matched CSAs, shape adolescent future orientation and psychosocial outcomes: what, if not savings, transmits the treatment effect and how?

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IMPLICATIONS AND CONTRIBUTION

This study shows that participation in a matched Child Savings Account intervention improved adolescents' future orientation and psychosocial outcomes, regardless of one's level of saving. Further research is necessary to understand what, if not savings, mediate the positive effects of participation in savings-led interventions, such as matched Child Savings Accounts.

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Adolescent future orientation plays an important role in developing adolescents' resiliency [1] and overall psychological well-being [2], thus impacting adolescents' successful transition to adulthood. Prior studies show a strong association between family socioeconomic status (including poverty) and adolescent future orientation [3,4]. Moreover, assets development theory

[5,6] posits that people's behaviors and attitudes are affected by access to and ownership of assets such as financial savings, education (human capital development) and income generating opportunities (economic capital), that is, assets that lead to accumulation of other assets. These assets have important psychosocial benefits, including higher self-esteem, greater feeling of control over one's life, and greater future orientation. This, in turn, affects the asset owner's freedom to make choices and develop his/her human capability [7]. Thus, asset-based development—a construct within asset theory—emphasizes efforts that enable people with limited economic opportunities to acquire and accumulate long-term productive assets.

Against that backdrop, the Suubi-Maka intervention being evaluated here employs an asset-based development approach. The intervention uses such assets as children's savings accounts, family microenterprises, and scholarships to fight poverty and promote health and social functioning. Assets theorists employing an asset-based development approach would predict that an orphaned adolescent with no belief that he/she has the economic means to afford postprimary education is more likely to have high levels of depression, academic difficulties, and consequently dropout of school [5,8]. Moreover, this adolescent is less likely to be able or have the desire to avoid negative health consequences. However, provided with the economic means, this adolescent may think and behave differently, staying in school, and avoiding health-risk behaviors. The assumptions advanced by asset-based development theorists are consistent with other behavioral and psychosocial theories (e.g., theory of reasoned action [9], social learning theory [10], problem behavior theory [11]). Prior studies have illustrated the relationship between asset ownership and adolescents' health and educational outcomes [11–15].

Within that context, our article tests the proposition that an economic strengthening intervention for families caring for AIDS-orphaned adolescents would positively affect adolescent future orientation and psychosocial outcomes through increased asset accumulation (in this case, family savings).

Importance of future orientation for adolescent development

Developmentally, adolescents are capable of envisioning their future. This is referred to as “future orientation” [16,17]. To measure adolescent future orientation—defined as attitudes and behaviors that lead to forming expectations for the future and setting goals and aspirations [18]—studies examine adolescent hope and optimism about the future, career prospects, belief in their control over future events, and view of “possible selves” defined as positive and negative images of self in a future state [19].

Adolescent future orientation may be a significant predictor for a range of educational, health, and psychosocial outcomes. Hopelessness is a key factor that increases the likelihood of adolescents engaging in problem behaviors [11]. Adolescents with a negative future orientation are less concerned about the consequences of risk-taking behavior and consequently are less likely to avoid health risk-taking behavior. On the other hand, adolescents with a positive future orientation are less likely to engage in health risk-taking behavior including substance abuse [20] and sexual risk taking [21].

Effect of orphanhood and poverty on adolescent future orientation

Adolescents' outlook about their future can be learned through social interactions, including family communication.

Studies show that relationships with caring adults facilitate development of positive future orientation in adolescents [1,22]. Conversely, lack of caring adults may impair the development of adolescents' positive future orientation. Within that context, several studies have documented low future expectations, hopefulness, and self-esteem among orphaned adolescents compared with nonorphaned adolescents [23,24].

Currently, about 2.7 million children and adolescents in Uganda are orphans; and more than one third of these are AIDS orphans [25]. Very often, orphaned adolescents live in poverty. Many live in either child-headed households or with their extended family members with limited financial resources. Living in poverty negatively impacts adolescent future orientation [21,26]. Poverty has the potential to discourage adolescents from thinking positively about their future [27]. Adolescents from poor families have lower educational expectations due to their inability to pay for school. Without an education, poor adolescents envision restricted career prospects. Consequently, these adolescents are less optimistic about their future [4].

Conversely, accumulation of financial assets may improve future orientation by leading to higher self-esteem and the feeling of increased control over one's life [6,13,28,29]. However, this argument—advanced by asset theory (described earlier)—has not been extensively tested specifically among adolescents whose decisions early in life are likely to impact them for many years to come [30]. Thus, this article (1) tests the impact of a family economic strengthening intervention, Suubi-Maka, on future orientation and psychosocial outcomes of adolescents orphaned by AIDS and (2) ascertains the extent to which accumulation of financial assets (through savings) mediates the observable intervention effects.

Methods

Data

We use longitudinal data collected from a cluster-randomized experiment (hereafter, *study*) called Suubi-Maka. The study was situated in 10 public primary schools in Rakai and Masaka Districts of Uganda—two districts heavily affected by HIV/AIDS. The 10 schools included in the study were selected from 42 primary schools within the Diocese of Masaka (in Rakai and Masaka Districts) with the following specifications: (1) location (rural or peri-urban); (2) student population (average 600 students in primary Grades 1–7); and (3) comparable level of performance based on Primary Leaving Examinations—a nationally administered examination for all students transitioning from primary school to high school in the Ugandan education system.

Randomization was conducted at the school level. Five schools ($n = 179$ dyads, i.e., adolescents and their caregivers) were randomly assigned to the treatment group, and five schools ($n = 167$ dyads) were randomly assigned to the control group. To be included into the study, each adolescent had to meet the following criteria: (1) an AIDS orphan, having lost one or both parents to HIV/AIDS; (2) enrolled in the last 2 years of primary school; and (3) living within a family setting. In addition, each adolescent together with his/her guardian/parent had to express an interest in participating in the study and had to provide informed assent (in case of adolescents) and informed consent (in case of guardians/parents) [31].

The study received institutional review board approval from Columbia University (AAAD2525) and from the Uganda National

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