Evidence for all types of interventions considered show a positive effect on HIV outcomes, such as increased HIV related knowledge, attitudes, and reduced sexual risk-taking behaviour.

What is the aim of this review?
This Campbell systematic review summarises 11 studies of six financial education interventions for high risk youth to reduce HIV.

According to UNAIDS and the World Health Organization, HIV is the leading cause of youth mortality in Africa, and the second cause of death among young people worldwide. Global commitments to reverse the HIV epidemic will only be achieved if strategies focus on children and youth. There is some positive evidence linking economic interventions and HIV reduction.

What is this review about?
This systematic review summarises outcome evidence of financial education for young people and plural interventions (financial combined with sexual and reproductive health education) aimed to reduce HIV vulnerability for youth, orphans and vulnerable children in low and middle-income countries (LMICs).

What studies are included?
Eligible studies evaluated financial education, with and without savings services, as well as plural interventions with and without social supports (such as mentoring).

Experimental and quasi-experimental research methods were considered, where data was gathered at baseline and at least six months after the end of the intervention.

Sixteen moderate- to higher-quality studies representing 10 interventions were identified, mostly focusing on HIV-vulnerable girls in Sub-Saharan Africa. However, meta-analysis of odds ratios is restricted to the 11 studies (on six interventions) that had comparable measures.

What are the main findings of this review?
Evidence for all types of interventions considered – financial education with and without savings, plural education with self-efficacy supports and with and without savings – all show a positive effect on outcomes such as increased HIV-related knowledge and attitudes, and reduced sexual risk-taking behaviour.
The evidence also shows improved self-efficacy from these interventions, the changes in confidence and social conditions that enable people to act on knowledge.

However, while some studies show positive effects on savings and improved attitudes toward saving, generally interventions showed mixed effects on the full range of financial and economic outcomes such as assets, and mixed effects on engagement in an income-generating activity.

**What do the findings of this review mean?**

This review supports the growing evidence that plural interventions are associated with positive health and economic outcomes for vulnerable youth and children in LMICs. Even so, as a body of evidence, it is not clear which components are effective at producing favourable outcomes.

Asset theories linking financial education and asset building with favourable outcomes for vulnerable youth are not as clear as may be commonly assumed.

Self-efficacy is also unclear but seems important as both a set of conditions to support reduced vulnerabilities and a way to measure them in terms of outcomes.

Quality evidence is needed in more settings separating out economic, health and self-efficacy components to better understand pathways and effects on outcomes.

Experimental methods are appropriate to segment components for better analysis and understanding. Mixed methods and qualitative methods will be important complements to experimental research, to enhance our understanding of how to build assets and self-efficacy in HIV-vulnerable youth, orphans and other vulnerable children.