**The impact of cash transfers: A review of the evidence on poverty, education, health, savings and production, work and empowerment outcomes**

**in low- and middle-income countries**

**Annotated Bibliography**

**Introduction**

This document provides the complete references and additional information (e.g. on the interventions covered, methodology and main findings) of the full list of studies that reached and passed the searches, retrieval and assessment stages of this cash transfer review.

Final screening of the studies retrieved involved assessing studies for risk of bias (for quantitative impact studies) and/or against quality measures (for qualitative papers, permitted under the searches for studies on the effects of design and implementation features) against a pre-defined set of criteria. The objective was to ensure that the review of evidence is based upon studies that meet certain minimum standards in order to be able to draw sufficiently reliable inferences from their results.

For quantitative impact studies, the final stage of screening included assessing studies against the following parameters: selection bias and confounding factors, attrition bias, statistical significance, and any other bias. To pass, these studies had to demonstrate “low” risk of bias or “low” and “unclear” risk of bias.

Qualitative studies were assessed against: clarity and transparency, credibility of findings, acknowledgement of potential internal bias and limitations, and external validity. Studies passed if they were considered to have either “no concerns” or “no concerns” and “some concerns”.

The total number of studies passing the stages of searches, retrieval and assessment, as included in this Annotated Bibliography, is 199. For each study a full reference is given, along with information on the intervention(s) and country/countries covered, core programme details as reported in the study itself, the evaluation methodology used, and overall findings.

With a view to being a useful tool for researchers and policy-makers, the full list below also reports the outcome areas (of the six outcome areas the review covers) each study is relevant to. It also provides a list of main indicators covered by a study. It is important to note that not all of the studies below were included in the review of evidence, which focuses on a number of specific indicators within each of the outcome areas.

Acronyms used in the Evaluation Methodology sections:

DID Difference-in-difference

IPW Inverse Probability Weighting

OLS Ordinary Least Squares

PSM Propensity Score Matching

RCT Randomised Control Trial

SD Single Difference

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| **Citation** | Adato, M., de la Brière, B., Mindek, D. and Quisumbing, A., 2000. The impact of PROGRESA on women's status and intrahousehold relations. Final report. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | Progresa is a CCT which began in 1997 with the aim of addressing the immediate needs of extreme poverty and break its intergenerational transmission. By 1999 it had reached 2.6 million families. Eligibility is determined by a proxy means test for household poverty. The transfer has two components: health and education. Transfer receipt is conditional on the immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual check-ups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. |
| **Evaluation methodology**  | This study uses a quasi-experimental design. The treatment effect is estimated using a multinomial logit model (with pooled data across panel waves and also by year) where the outcome is the person responsible for making decisions on various topics. The data come from a special purpose panel survey to evaluate the programme. The sample used in this evaluation contains 25,000 households. |
| **Overall findings** | Transfers decrease husband's sole decision-making for five out of eight types of decision. The transfer slightly increased women's control over spending their own money. The transfer improved school attainment of children.  |
| **Reported outcome areas** | Education; Empowerment |
| **Indicators reported** | Bargaining power: Who tells the child to go to school; Who takes the child to the doctor if sick; Who decides on expenditures; Who decides on house repair; Who decides on durables purchase; Who decides how to spend woman's extra income; Does the wife need permission from the husband to visit someone. Education: deviation of each child's years of schooling from the cohort mean. |

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| **Citation** | Aguilar Esteva, A.A., 2012. Essays in Development and Labor Economics: The Medium-Term Impact of a Conditional Cash Transfer Program on Child Physical and Cognitive Development: Evidence from Progresa. Doctoral dissertation. Harvard University, Cambridge, Massachusetts. |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | CCT, which started in 1997, and is aimed at supporting poor households to foster the capacities of their members and expand their alternatives to reach higher levels of wellbeing by improving their options to access education, health and nutrition. By 2012, it reached a coverage of 5.8 million households who were targeted adopting a PMT methodology. Programme has three main components: education (conditional on enrollment and attendance), nutrition (conditional on attendance to informational sessions) and health (conditional on regular health check-ups). |
| **Evaluation methodology**  | RCT, using DID and regression discontinuity. The main outcomes used in the study come from the 2003 Progresa follow-up survey (2,049 households) and administrative data. |
| **Overall findings** | Overall, the results give weak evidence of medium-term effects on preschool children’s anthropometric, cognitive, and motor skill development for exposure to Progresa during early stages of life. |
| **Reported outcome areas** | Education; Health |
| **Indicators reported** | Cognitive development (long term memory, short term memory, visual-spatial, language); Anthropometrics (Height, stunting, weight, BMI, overweight); health and behavioural (haemoglobin, days sick, depression, aggression); motor skills |

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| **Citation** | Ahmed, A., Adato, M., Kudat, A., Gilligan, D., Roopnaraine, T. and Colasan, R., 2007. Impact Evaluation of the Conditional Cash Transfer Program in Turkey: Final Report. International Food Policy Research Institute |
| **Name of programme(s) and country/countries** | Social Risk Mitigation Project (Turkey) |
| **Programme details as reported in the study** | The intervention evaluated here is a CCT which was introduced in 2004 designed to mitigate the effects of the 2001 economic crisis on the poorest households. The transfer is targeted at households with children aged 0-6 years, school-aged children 6-17 years, and child bearing-age women in the poorest 6% of society. In total 1.1 million beneficiaries were intended to be targeted (it is not clear whether this had been met at the time of the study). Eligibility is proxy means-tested on indicators which are highly correlated with household expenditure. Households self-select into programme by submitting application to office then 70% of eligible households are randomly selected for treatment. The education grant is between 18 YTL and 39 YTL per school child, the health grant is 17 YTL per child, and the pregnancy component is 17 YTL per pregnant woman and 55 YTL after giving birth in hospital. Payments are made monthly and the recipient can be in the programme for nine to 12 months. Cash is collected from bank or post office. Continued receipt of the education grant is conditional on 80% attendance and the child must not repeat a grade more than once. The health grant is conditional on regular check-ups, depending on age. Pregnant beneficiaries receive regular health checks, hospital birth, post-partum check-ups.  |
| **Evaluation methodology**  | The study is mixed methods, using both quasi-experimental quantitative analysis and qualitative analysis. The quantitative component uses regression discontinuity design (RDD) using data from a special purpose cross-section and separate panel. The qualitative analysis draws on data from in-depth interviews, stakeholder interviews, focus groups, participant observation, and ethnographies (the sample is several hundred in quantity). |
| **Overall findings** | The transfer raised girls' school enrolment and children's test scores. There was no statistically significant impact on the rate of progression from primary to secondary school. There was no statistically significant impact on adult work patterns. The transfer reduced probability of pregnancy by around 2-3%. |
| **Reported outcome areas** | Education; Empowerment |
| **Indicators reported** | School enrolment, school attendance, test scores; Likelihood of pregnancy. |

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| **Citation** | AIR, 2014. Zambia's Child Grant Program: 36-month Impact Report. American Institutes for Research, Washington, D.C. |
| **Name of programme(s) and country/countries** | Child Grant Cash Transfer Programme (Zambia) |
| **Programme details as reported in the study** | This study reports on the Child Grant Cash Transfer Programme, an unconditional cash transfer programme, with the objective to reduce extreme poverty. The programme has been running since 2010 and employs categorical targeting: it targets household with children under the age of five. Programme participation is set at a maximum of five years. Transfers are bi-monthly and paid in cash. Transfers amount to 60 ZMW ($12) per month, equivalent to one meal a day per household member for one month. |
| **Evaluation methodology**  | The study is based on a RCT, utilising the panel data that was collected alongside the RCT. To analyse impact, they use a DID approach. The final analysis is based on a sample of 2469 households (2% attrition). |
| **Overall findings** | The study finds a number of positive and significant impacts, as well as some non-significant impacts. Participation in the Child Grant programme is shown to have a positive and significant impact on expenditure, poverty reduction (i.e. a decrease in the headcount), food security, infant and young child feeding, school enrolment of younger children (but not older ones), asset ownership, housing conditions and owning a non-farm enterprise. They also found a significant decrease in loans. No significant impacts were found for the following indicators: anthropometric scores; school enrolment for older children; profits made by the enterprise. |
| **Reported outcome areas** | Poverty; Health; Education; Savings, investment and production; Employment |
| **Indicators reported** | Expenditure; poverty head count; food security; anthropometric scores; infant and young child feeding; school enrolment; taking a loan; asset ownership; housing conditions; owning non-farm enterprise; profits made by enterprise |

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| **Citation** | Aker, J. C., Boumnijel, R., McClelland and A., Tierney, N., 2014. Payment mechanisms and anti-poverty programs: Evidence from a mobile money cash transfer experiment in Niger. Unpublished working paper |
| **Name of programme(s) and country/countries** | Mobile money experimental cash transfer (Niger) |
| **Programme details as reported in the study** | This study evaluates the impact of different payment mechanisms which were part of an UCT intervention in Niger in 2010. The intervention was intended to provide relief to households affected by a drought. The transfer had reached 10,000 households by the time of the study, of whom women were the primary beneficiary. Villages were pre-selected and then randomly allocated to each treatment arm (described subsequently). Households were selected using a proxy means-test based on vulnerability indicator (assets, household size etc). The transfer consists of 22,000 CFA per month for five months. The experimental feature of the intervention is that there are three different treatment arms: 1. Cash distributed in envelopes from central distribution point; 2. Electronic transfer via mobile phone (recipients given m-transfer enabled phone; 3. Cash distributed in envelopes but recipients also given an m-transfer enabled phone (known as the ‘placebo’ group). |
| **Evaluation methodology**  | This study is a RCT. The impact of the transfer is estimated using OLS linear and logistic regression with baseline levels characteristics as controls. The data come from a special purpose panel survey designed to evaluate the programme, combined with a village-level survey, a price information dataset, and endline anthropometric data for a subsample of households. The main survey has 1081 respondents in both panel waves. |
| **Overall findings** | Mobile transfer treatment arm had higher dietary diversity and children's food consumption. The mobile transfer had time-saving benefits and also increased women's decision making power in the household. |
| **Reported outcome areas** | Poverty; Education; Health; Savings and investment; Empowerment |
| **Indicators reported** | Use of transfer to buy food and non-food items; use of transfer to pay school fees or pay health expenses (productive investment); household food security and dietary diversity; child weight-for-height and wasting; asset ownership; decision-making regarding spending |

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| **Citation** | Aker, J. C., Boumnijel, R., McClelland, A., Tierney, N., 2011. Zap It to Me: The Short-Term Impacts of a Mobile Cash Transfer Program. Working paper 268, Centre for Global Development.  |
| **Name of programme(s) and country/countries** | Mobile money experimental cash transfer (Niger) |
| **Programme details as reported in the study** | This study evaluates the impact of different payment mechanisms which were part of an UCT intervention in Niger in 2010. The intervention was intended to provide relief to households affected by a drought. The transfer had reached 10,000 households by the time of the study, of whom women were the primary beneficiary. Villages were pre-selected and then randomly allocated to each treatment arm (described subsequently). Households were selected using a proxy means-test based on vulnerability indicator (assets, household size etc). The transfer consists of 22,000 CFA per month for five months. The experimental feature of the intervention is that there are three different treatment arms: 1. Cash distributed in envelopes from central distribution point; 2. Electronic transfer via mobile phone (recipients given m-transfer enabled phone; 3. Cash distributed in envelopes but recipients also given an m-transfer enabled phone (known as the ‘placebo’ group). |
| **Evaluation methodology**  | This study is a RCT. The impact of the transfer is estimated using OLS linear and logistic regression with baseline levels characteristics as controls. The data come from a special purpose panel survey designed to evaluate the programme, combined with a village-level survey, a price information dataset, and endline anthropometric data for a subsample of households. The main survey has 1081 respondents in both panel waves. |
| **Overall findings** | Mobile transfer led to more dietary diversity. There was no difference between treatments in expenditure on non-food items. The mobile transfer made no difference to coping strategies used or purchase of durable assets but it did increase ownership of non-durable assets. The mobile transfer increased female decision-making power in some cases but this depended on ethnic group. |
| **Reported outcome areas** | Poverty; Education; Health; Savings and investment; Empowerment |
| **Indicators reported** | Expenditures on various items; Coping strategies in times of food shortage; investment and production (planting of cash crops); recipient awareness of total amount or duration of transfer; receipt of private transfers; person responsible for spending the transfer. |

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| **Citation** | Akresh, R., de Walque, D. and Kazianga, H., 2012. Alternative Cash Transfer Delivery Mechanisms: Impacts on Routine Preventative Health Clinic Visits in Burkina Faso. Working Paper, 17785, National Bureau of Economic Research. |
| **Name of programme(s) and country/countries** | Nahouri Cash Transfers Pilot Project (Burkina Faso) |
| **Programme details as reported in the study** | The intervention studied here was introduced in 2008 and targets families with children aged 0 to 59 months old with either a conditional and unconditional transfer, the aim of which is to improve health and education outcomes for children in poor families. Random allocation of the treatment happens at the village level and household eligibility within the village is determined using a proxy means test on poverty status of household. The mother or the father is randomly selected to receive the transfer (the idea being to test whether different expenditure preferences exist by gender). The transfer amount is composed of a base level of 1000 FCFA per quarter plus 2000 FCFA for each child aged 7-10 and 4000 FCFA per quarter for each child aged 11 to 15, with no cap on the total amount. The payment is distributed quarterly for a maximum duration of two years. For those in the CCT group, transfer receipt is conditional on quarterly visits to the health clinic for children under 6 and school enrolment and at least 90% attendance rate for children 7-15. |
| **Evaluation methodology**  | This study is a randomised control trial and uses OLS linear regression with individual-level fixed effects to estimate the treatment effect. The data come from a household panel survey with three waves used for the official evaluation of this programme. The sample size is 1155 households (540 treatment, 615 control). |
| **Overall findings** | Conditional cash transfers have a larger effect on the number of routine health clinic visits for children in a given year. The impact only applies for older children (2 years and up). There was very little or no difference in outcome depending on the gender of the transfer recipient or on the gender of the child. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Number of routine preventative health clinic visits for child. |

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| **Citation** | Akresh, R., de Walque, D., Kazianga, H., 2013. Cash transfers and child schooling: evidence from a randomized evaluation of the role of conditionality. Policy Research Working Paper Series, 6340. The World Bank |
| **Name of programme(s) and country/countries** | Nahouri Cash Transfers Pilot Project (NCTPP) (Burkina Faso) |
| **Programme details as reported in the study** | The intervention studied here was introduced in 2008 and targets families with children aged 0 to 59 months old with either a conditional and unconditional transfer, the aim of which is to improve health and education outcomes for children in poor families. Random allocation of the treatment happens at the village level and household eligibility within the village is determined using a proxy means test on poverty status of household. The mother or the father is randomly selected to receive the transfer (the idea being to test whether different expenditure preferences exist by gender). The transfer amount is composed of a base level of 1000 FCFA per quarter plus 2000 FCFA for each child aged 7-10 and 4000 FCFA per quarter for each child aged 11 to 15, with no cap on the total amount. The payment is distributed quarterly for a maximum duration of two years. For those in the CCT group, transfer receipt is conditional on quarterly visits to the health clinic for children under 6 and school enrolment and at least 90% attendance rate for children 7-15. |
| **Evaluation methodology**  | This study is a randomised control trial and uses difference-in-difference analysis to estimate the treatment effect. The data come from a household panel survey with three waves used for the official evaluation of this programme. |
| **Overall findings** | UCTs and CCTs improve school enrolment in a similar way for children of core school-going age, boys, and more able children. CCTs are more effective for improving enrolment of marginal children (girls, lower ability etc). No significant effect of the treatment is observed on most learning outcomes. |
| **Reported outcome areas** | Education |
| **Indicators reported** | School enrolment, school attendance rate, scores in mathematics and French |

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| **Citation** | Alam, A. and Baez, J., 2011. Does cash for school influence young women's behavior in the longer term? Evidence from Pakistan. Policy Research Working Paper 5669, The World Bank |
| **Name of programme(s) and country/countries** | Female School Stipend Programme (Pakistan) |
| **Programme details as reported in the study** | This evaluation concerns a CCT first implemented in Pakistan in 2003 with the aim of improving the educational attainment among girls and decrease gender inequities. Its target is school-age girls enrolled in grades 6 to 8 in the worst-performing parts of the country in terms of educational attainment. Eligibility is determined at the district level (districts with lowest literacy levels) and all girls in the relevant grades are eligible. Approximately 245,000 girls had benefited from the transfer at the time of the survey. The transfer amount is 600 PKR per student, four times a year, and continued receipt of the transfer is conditional on 80% school attendance. Transfer allocation is not randomised, therefore the comparison group is composed of girls in non-stipend districts (those district just above the cut-off point for eligibility on the basis on literacy levels). |
| **Evaluation methodology**  | Since no control group was built into the programme design, a quasi-experimental approach is used to estimate the treatment effect, namely regression discontinuity design (RDD). The data come from a variety of sources: a school level dataset including 4000 eligible schools; special purpose panel survey; cross-sectional nationally representative household surveys; census and administrative data. Around 20,000 individuals are represented in the sample. |
| **Overall findings** | Girls' school enrolment increased by nearly 9 percentage points. Beneficiary girls were more likely to progress through school and to work less in terms of days per month. Participation in the programme delayed marriage and decreased the likelihood of pregnancy. Participation increased the rate of matriculation into higher education institutions. |
| **Reported outcome areas** | Education; Empowerment; Employment |
| **Indicators reported** | Probability of marriage; of giving birth; age at marriage; number of children; school enrolment; completion of certain grades; labour force participation; work intensity (days worked per month). |

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| **Citation** | Alzua, M. L., Cruces, G. and Ripani,L., 2013. Welfare programs and labor supply in developing countries: experimental evidence from Latin America. *Journal of Population Economics*, Vol 26, pp. 1255-1284 |
| **Name of programme(s) and country/countries** | PRAF (Honduras) - PROGRESA (Mexico) – RDS (Nicaragua) |
| **Programme details**  | The paper covers CCTs in three countries: PRAF (Honduras), PROGRESA (Mexico) and RDS (Nicaragua). All three programmes targeted rural areas in poor regions of the respective countries and used a combination of geographic and household targeting. All three programmes also are conditional, that is, include behavioural requirements for beneficiaries in the areas of education and health. The transfer amounts ranged from: PRAF: 4%, RPS: 20%, to PROGRESA: 40% of total household consumption.  |
| **Evaluation methodology**  | The study looks at the effect of CCTs on work incentives and adult labour supply in three countries, building on experimental evaluations of three CCTs in rural areas. Exploiting the random assignment of localities in the context of the three programs and the availability of repeated observations, the study uses a differences-in-differences estimation technique. With respect to the estimation methodology, the empirical results are based on linear models for binary dependent variables (e.g. labour-force participation) and for continuous variables (e.g. hours of work). |
| **Overall findings** | Comparable results for the three countries indicate that the effects that the programs have had on the labour supply of participating adults have been mostly negative but are nonetheless small and not statistically significant. However, the evidence does point to the presence of other effects on labour markets. In the case of PROGRESA, there is a small positive effect on the number of hours worked by female beneficiaries and a sizeable increase in wages among male beneficiaries and a resulting increase in household labour income. Moreover, PROGRESA seems to have reduced female labour-force participation in ineligible households. These results imply that large-scale interventions may have broader equilibrium effects |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Work/not work/employment status; number of individual hours of work per week; total hours worked by adults in the household, per adult; employment in agricultural activities  |

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| **Citation** | Angelucci, M., 2008. Love on the Rocks: Domestic Violence and Alcohol Abuse in Rural Mexico. *The B.E. Journal of Economic Analysis & Policy*, 8(1) Article 43. |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades is a CCT that started in 1997 and aims to improve child school attendance and health. The programme targets poor households within poor communities with bi-monthly cash transfers given to the mother of the family with a view to targeting the funds towards improving children’s education and nutritional status. Transfers are conditional on school attendance and annual health checks for adults (and more frequent for children and pregnant or lactating women). Women are also required to attend nutrition and health workshops called “platicas”. Transfers were from 100 pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos. Complementary interventions involved nutrition and health workshops and annual health check-ups for adults. |
| **Evaluation methodology**  | The study uses the 1998 round of Oportunidades experimental data and uses a linear probability model and Heckman Selection Model to estimate the effect of different transfer sizes on domestic violence and alcohol abuse. |
| **Overall findings** | Transfers reduced the likelihood of alcohol abuse overall. There were heterogeneous effects on drunken violence: transfers reduced violent behaviour in households on the minimum transfer and with husbands that completed primary school, but the programme caused an increase in violence committed by uneducated husbands, especially when married to younger women, if their wives were entitled to large transfers. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Alcohol abuse, violence by the husband. |

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| **Citation** | Angelucci, M. 2004., Aid and migration: An analysis of the impact of PROGRESA on the timing and size of labour migration. IZA Discussion Paper No. 1187, IZA |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA is a CCT which targets poor rural households and was later expanded to the urban population. Its main monetary component is in the form of schooling subsidies to children attending the last four grades of primary school and the first three grades of secondary school. All transfers are paid bimonthly and the schooling subsidy is received upon proof of attendance of at least 85% of classes. The size of the education transfer grows with the school grade, and is estimated to correspond to two thirds of the wage earned by a teenager in full time employment.  |
| **Evaluation methodology**  | The study estimates the impact of PROGRESA on labour migration, defined as the act of leaving one’s hometown to seek employment elsewhere. It groups the PROGRESA cash transfers into two: unconditional and conditional transfers (the nutrition support and primary school grant in the first, the subsidy to secondary education in the second) and studies the impact of both types of transfers as well as of variations in the level of transfer on migration. The approach exploits village randomization to compute average treatment on the treated effects.  |
| **Overall findings** | The study shows that PROGRESA is associated with an increase in international migration, which is also a positive function of size of the transfer. The grant may loosen financial constraints. At the same time, fine-tuned conditional grants targeting prospective migrants (in the form of secondary school subsidies) reduce the short-term migration probability. As regards medium-term migration, secondary school beneficiaries are not more likely to migrate than the control group after they complete the subsidised education cycle. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Migration levels, domestic, international; at individual and household level.  |

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| **Citation** | Angelucci, M., De Giorgi, G., Rangel, M.A., Rasul, I., 2010. Family networks and school enrolment: Evidence from a randomized social experiment. *Journal of Public Economics*, 94 (3-4), pp. 197-221 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | CCT programme, running since 1997, transferring 20% of the value of monthly consumption expenditures pre-programme conditional on children's attendance in primary and secondary school grades and on attendance at local health facilities. |
| **Evaluation methodology**  | RCT piggybacking on evaluation data plus surname-matching algorithms |
| **Overall findings** | PROGRESA only raises secondary enrolment among households that are embedded in a family network. Eligible but isolated households do not respond. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Secondary school enrolment rates; primary enrolment rates (by connected and isolated households) |

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| **Citation** | Angelucci, M, Attanasio, O, Di Maro, V, 2012. The Impact of Oportunidades on Consumption, Savings and Transfers. *Fiscal Studies*, 33 (3) pp. 305-34. |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | The study focuses on Oportunidades, a conditional cash transfer, which has been in operation since 1998. It targets poor households in rural and urban areas. It has education, nutrition and health components. The nutrition component consists of a monthly cash transfer for all beneficiaries (worth around 165 Pesos in 2004, ~$14) with nutritional supplements for pregnant and lactating mothers and families of small children. This transfer is conditional on regular attendance of health centres. Additional payments are conditional on school attendance. The maximum transfer for a household from a combination of grants for different children is 1,445 pesos. |
| **Evaluation methodology**  | This study uses a quasi-experimental research design. Using the ENCELURB panel survey, it employs a PSM approach, considering both urban and rural households. The sample size is 7903 households. |
| **Overall findings** | Participation in the programme is found to have a positive effects on consumption of non-durable and durable goods, an increase in savings coupled with a drop in the number and values of loans, and a reduction of in-kind transfers received by households in treatment areas. |
| **Reported outcome areas** | Poverty; Savings, investment and production |
| **Indicators reported** | Total expenditure; food expenditure; other expenditure; savings; loans; transfers received |

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| **Citation** | Ardington, C., Case, A. and Hosegood, V., 2009. Labor Supply Responses to Large Social Transfers: Longitudinal Evidence from South Africa. *American Economic Journal: Applied Economics*,1:1, pp. 22-48 |
| **Name of programme(s) and country/countries** | South Africa Old-Age Pension (South Africa) |
| **Programme details**  | South Africa’s Old Age Pension is a non-contributory pension. In principle it is means tested, and the amount received depends on the recipient’s other income, but in practice it pays the maximum each month (currently 940 Rands) to women and men who reach pension age without access to a private pension. It pays more than twice median per capita African (Black) income and represents an important source of income for a third of all African households in the country. |
| **Evaluation methodology**  | The study quantifies the labour supply responses of prime-aged adults to the presence of pensioners in their households, using longitudinal data collected in South Africa. It compares households and individuals before and after pension receipt and pension loss, which allows to control for a host of unobservable household and individual characteristics that may determine labour market behaviour. It relies on multiple waves of data collected on approximately 100,000 people followed by the Africa Centre Demographic Information System (ACDIS) in one of the poorest districts in KwaZulu-Natal, north of Durban. It reports results from both cross-sectional and longitudinal analysis.  |
| **Overall findings** | The study finds large cash transfers to the elderly lead to increased employment among prime-aged adults, which occurs primarily through labour migration. The pension’s impact is attributable to the increase in household resources it represents, which can be used to stake migrants until they become self-sufficient, and to the presence of pensioners who can care for small children, which allows prime-aged adults to look for work elsewhere.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Change in employment status; change in labour migrant status. |

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| **Citation** | Asfaw, S., Davis, B., Josh, D., Handa, S. and Winters, P., 2014. Cash Transfer Programme, Productive Activities and Labour Supply: Evidence from a Randomised Experiment in Kenya. *The Journal of Development Studies*, 50 (8), pp. 1172-1196.  |
| **Name of programme(s) and country/countries** | Cash Transfer for Orphans and Vulnerable Children Programme (Kenya) |
| **Programme details**  | UCT which started in 2004 to build human capital and improve the care of Orphans and Vulnerable Children (OVCs). Those eligible are households that are ultra-poor and contain OVCs, defined as household residents up to 17 years old with at least one deceased parent, or a parent who is chronically ill, or whose main caregiver is chronically ill. Child-headed households received highest priority in targeting, followed by households headed by the elderly. The programme reached over 150,000 households across the country as of December 2012. Seven districts were chosen for inclusion based on poverty levels and prevalence of HIV/AIDS and community-based targeting is then used to identify beneficiary households. Transfers are a flat monthly transfer of Ksh1500 (approximately US$ 21; increased in the 2011/2012 budget from Ksh1500 to Ksh2000). The value of the transfer represented an average of 14 per cent of the expenditures of the beneficiary households in 2011. Due to inflation, the real value of the transfer declined by 40 per cent between 2007 and 2009, and by an additional 15 per cent between 2009 and 2011. |
| **Evaluation methodology**  | The study was designed as a RCT, with DID used to estimate impacts, or where baseline data were not available, SD combined with inverse probability weighting (SD-IPW). The full sample covers 1811 households. |
| **Overall findings** | Results show that the programme had a positive and significant impact on food consumption coming from home production, accumulation of productive assets, especially on the ownership of small livestock, and on formation of nonfarm enterprise, especially for females. The programme has provided more flexibility to families in terms of labour allocation decisions, particularly for those who are geographically isolated. The programme was also found to reduce child labour, an important objective of the programme. However, They find very little impact of the programme on direct indicators of crop production. |
| **Reported outcome areas** | Poverty; Health; Savings, investment and production; Employment |
| **Indicators reported** | Consumption of different food groups (including whether from own production), proportion of households owning large livestock/small livestock/poultry, total quantity of livestock owned, proportion of households growing crops/improved maize/using seed/using pesticide/using organic fertiliser/using inorganic fertiliser, expenditure per acre on seeds/pesticide/ organic fertiliser/inorganic fertiliser, whether received a loan or sought credit, household participation in non-farm enterprise, wage labour participation, days worked per year, participation in own farm labour, days worked per month, participation in own farm labour by children |

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| **Citation** | Attanasio O., Gómez, L. C., Heredia, P. and Vera-Hernández M., 2005. The short-term impact of a conditional cash subsidy on child health and nutrition in Colombia. Report Summary: Familias 03, The Institute for Fiscal Studies, London. |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details**  | The study reports on a CCT that started in 2002 to break the intergenerational transmission of poverty. Transfers were targeted to households in extreme poverty, with the programme covering 1.5 million by late 2008. Households were selected with the help of a proxy means-test on household wealth. Transfers were on average around US$30 per month, paid monthly. Transfers were conditional upon school attendance and health clinic visits for participating children under 17 years of age. The health clinic condition only applied to children born before the family's registration date. In addition to the transfers there was a complementary health programme. |
| **Evaluation methodology**  | Impacts were estimated using a quasi-experimental approach, using DID and controlling for observable differences at the town and individual level. The study drew on a special purpose panel survey. |
| **Overall findings** | The study estimates the impact on nutrition and health-related indicators for children in the short term, roughly one year after its implementation and find that the programme improved the nutritional status and lowered morbidity of young children. In particular, it increased their consumption of protein and vegetables and substantially increased attendance at growth-monitoring visits. The effect of the programme on child nutrition was varied with respect to the probability of participating in already-existing nutritional programmes. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Child height-for-age Z-score; new-born weight; probability of diarrhoea and respiratory disease; number of days eating specific food groups; probability of complying with a Growth and Development Programme and DPT vaccination schedule |

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| **Citation** | Attanasio, O ; Battistin, E ; Mesnard, A, 2012. Food and Cash Transfers: Evidence from Colombia. IFS Working Paper W09/15, Institute for Fiscal Studies, London.  |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details as reported in the study** | Familias en Acción is a conditional cash transfer that has been operational since 2002. Its objective is to break the intergenerational transmission of poverty and as such it targets households in extreme poverty. Targeting is done on the basis of a proxy means-test of household wealth. The programme had 1.5 million beneficiaries by late 2008. The monthly benefits have an average value of US$30 per month. Transfers are conditional on school attendance and health clinic visits for participating children under 17 years of age. Health clinic condition are only applied to children born before the family's registration date. It is supplemented with a health programme. |
| **Evaluation methodology**  | The study employs a quasi-experimental approach, using DID with a special purpose panel data covering 5218 households. |
| **Overall findings** | The authors find a positive impact of Familias en Acción on consumption and a positive impact on share of food in total expenditure, possibly because the transfer was targeted towards women. |
| **Reported outcome areas** | Poverty |
| **Indicators reported** | Total and food consumption expenditure; share of budget devoted to food consumption; Engel curves |

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| **Citation** | Attanasio, O., Fitzsimons, E., and Gomez, A., 2005. The impact of a conditional education subsidy on school enrolment in Colombia. Report Summary. IFS, Centre for the Evaluation of Development Policies, London. |
| **Name of programme(s) and country/countries** | Familias en Acción (FA) (Colombia) |
| **Programme details as reported in the study** | CCT (conditional on children attending school), running since 2001, aimed at helping to mitigate the effects of the economic crisis on the wellbeing of poor households and protect and promote human capital formation. Eligibility requirements include having a household welfare indicator that is below a predefined level, having at least one child between 7 and 17 years old, and living in a treatment area. Operates in 57 communities of rural Colombia, targeting around 20% of households and transferring around $10 for primary and $20 for secondary school kids through banks to women. |
| **Evaluation methodology**  | Quasi-experimental methodology (as the programme was not randomly assigned, control areas were selected for the purpose of the evaluation so as to be comparable to treatment areas on the basis of a number of pre-programme dimensions). Analysis was based on a linear parametric regression framework. |
| **Overall findings** | Programme has been effective at increasing enrolment, particularly amongst 14- to 17-year-olds, in both urban and rural areas. Further, males have generally benefited more than females from the programme.  |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates  |

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| **Citation** | Attanasio, O., Oppedisano, V. and Vera-Hernandez, M., 2015. Should Cash Transfers Be Conditional? Conditionality, Preventive Care, and Health Outcomes. *American Economic Journal: Applied Economics,* 7 (2), pp. 35-52 |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details as reported in the study** | Familias en Acción is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a proxy means-test on household wealth to determine eligibility. The transfer is equivalent to approximately US$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under 17 years of age. The health clinic visitation condition only applies to children born before the family's registration date and this ‘loop-hole’ is exploited in order to demonstrate the effect of enforcement of conditions on uptake of health centre visits.  |
| **Evaluation methodology**  | The study makes use of a quasi-experimental design in which data from a special purpose panel survey is analyses using linear regression with fixed effects. The total sample size covers 2641 households. |
| **Overall findings** | Preventive care visits of children who are not subject to the conditionality requirement (in households which receive the transfer anyway) are 50 percent lower than for those to whom the condition applies. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Morbidity (diarrhoea or respiratory infections), nutrition (stunting, weight-for-age, height-for-age, weight-for-height, at risk of being wasted (very low weight-for-height), index of overall health |

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| **Citation** | Attanasio, O., Fitzsimons, E., Gomez, A., Gutierrez, M. I., Meghir, C. and Mesnard, A., 2010. Children's Schooling and Work in the Presence of a Conditional Cash Transfer Program in Rural Colombia. *Economic Development and Cultural Change*,  |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details**  | Familias en Acción is a CCT, implemented since 2002 in rural parts of Colombia with the aim of alleviating poverty by fostering human capital accumulation among the poorest households. The targeting took place in two stages: first municipalities, then households. The largest component of the programme is the education transfer, targeted at families with children aged 7 to 17 years. Its receipt is conditional on fulfilling certain health care requirements, including vaccinations and growth and development check-ups for children, and attendance at courses on nutrition, hygiene and contraception by the children's mothers. |
| **Evaluation methodology**  | The study estimates the effects of Familias en Acción within a difference-in-difference framework, using pre- and post-programme data on outcomes and conditioning on a large range of household- and municipality-level characteristics. It uses survey data from a sample of randomly sampled households from 122 municipalities (57 of which are treatment and 65 of which are controls). In each municipality 100 eligible households were randomly for inclusion in the evaluation sample. The final sample of around 11,300 households were interviewed between June and October 2002.  |
| **Overall findings** | The study finds that Familias en Acción increased the school participation rates of 14—17-year-old children quite substantially, by between around 5 and 7 percentage points. It also had non-negligible effects on the enrolment of younger children, of between 1.3 and 2.8 percentage points, despite their already high participation rates in the absence of the programme. Effects are larger in urban areas, where school attendance goes up by between 3.8 hours per day for older children and 4.5 hours per day for younger children, compared to 1 hour for older rural children and 2.5 hours for younger rural children. The effects on domestic work participation are largest in urban areas, where participation is around 10 and 13 percentage points lower after the program, at 61% and 62% for older and younger children, respectively. Time spent at work (mainly domestic work) was reduced by less than the increase in time spent at school. As there is very little evidence that the programme in Colombia decreased significantly the time spent by children in income-generating activities, it seems unlikely that household income has been negatively affected through this channel. |
| **Reported outcome areas** | Employment; Education |
| **Indicators reported** | School enrolment; child participation in domestic work and in paid work |

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| **Citation** | Attanasio, O ; Mesnard, A, 2005. The Impact of a Conditional Cash Transfer Programme on Consumption in Colombia. Report by the Institute for Fiscal Studies, London, UK. |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details as reported in the study** | Familias en Acción is a conditional cash transfer that has the objective to foster the accumulation of human capital. It is targeted at the poorest 20% of households in selected areas in rural Colombia and had around 340,000 beneficiaries in 2004, two years after its inception. The programme has three main components: health, nutrition and education. The nutritional component is worth around $15 monthly and is conditional on participation in health programmes. The education component is conditional on school enrolment and attendance and transfers are $5.5 monthly per primary school child and $11 per secondary school child. |
| **Evaluation methodology**  | This study employs a quasi-experimental research design. It uses a DID approach to measure impact and they control for observable variables both at the individual and at the town level. The data is based on a special purpose panel survey that covered 11,500 households (with 6% attrition).  |
| **Overall findings** | The authors find a positive impact on total and food consumption, an increase in protein-rich consumption and a positive impact on education and children’s' clothes expenditure. On the other hand, no significant impact was found for the share of food in total expenditure and expenditure on alcohol and tobacco. |
| **Reported outcome areas** | Poverty; Education |
| **Indicators reported** | Total consumption expenditure; food expenditure; expenditure on other components; share of food consumption |

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| **Citation** | Baez, J.E.; Camacho, A., 2011. Assessing the Long-term Effects of Conditional Cash Transfers on Human Capital: Evidence from Colombia. Policy Research Working Paper 5681. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Familias en Acción (FA) (Colombia) |
| **Programme details as reported in the study** | CCT, designed as an instrument to help mitigate the effects of the economic crisis on the wellbeing of poor households and protect and promote human capital formation. The programme consists of PMT-targeted subsidies to education, nutrition, and health conditional on specific behaviours associated with school participation and attendance to health checks. The program, which transfers $12,000 pesos (approximately $7) for each child attending primary school (grades 1-5) and $24,000 pesos ($14) for those in secondary school (grades 6-11), was piloted in a few municipalities in 2001, but was scaled up in the second half of 2002. |
| **Evaluation methodology**  | Quasi-experimental evaluation, using single difference (using OLS) with matching and fuzzy RDD for analysis. Data sources include: a household survey, a census of the poor, and a database with administrative records of the program. Matching analysis draws only from the baseline survey which interviewed 6,722 households in 57 treatment municipalities and 4,562 households in 9 control municipalities. |
| **Overall findings** | Robust evidence that the FA programme increases school attainment by helping participant children to finish high school. Indeed, treated children are on average between 4 and 8 percentage points – equivalent to an increase of 8-16 percent – more likely to graduate from high school relative to those in the control group. |
| **Reported outcome areas** | Education |
| **Indicators reported** | High school completion, test scores |

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| **Citation** | Baird S J; Garfein R S; McIntosh C T; Ozler B, 2012. Effect of a cash transfer programme for schooling on prevalence of HIV and herpes simplex type 2 in Malawi: a cluster randomised trial. The Lancet, 379, pp. 1320-29 |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer Programme (Malawi) |
| **Programme details as reported in the study** | The Zomba cash transfer is a programme designed to keep girls and young women in school. It began in 2008 in Malawi and also incorporates an experimental design where one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted to school age girls and young women in school and who recently dropped out of school – in total it has reached 1225 girls and young women at the time of the survey. Enumeration areas (EA) were randomly allocated to treatment or control status. Within treatment EAs conditional and unconditional transfers were randomly allocated. Households were first identified if they had a girl or young woman between the ages of 13 and 22 and never-married as of baseline. All eligible girls/ young women were then allocated the treatment, in treatment EAs. To determine the individual transfer amount, girls participated in a lottery where they picked bottle caps out of an envelope to win an amount between $1/month and $5/month. Payment is distributed monthly for two years. The cash payment points were chosen to take place at centrally located and well-known places, such as churches, schools, etc. For each EA, they were selected so that no recipient has to travel for more than 5 kilometres to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it.Some recipients received the transfer on condition of 'satisfactory' school attendance (more detailed criteria not given). |
| **Evaluation methodology**  | The programme is a RCT so the treatment effect is estimated here using single-difference estimation through a logit model. The data come from the panel survey intended for the evaluation of the programme. The sample size is 1328 (501 in the treatment group, 827 in the control). |
| **Overall findings** | The treatment group were more likely to be enrolled in school. Baseline drop-outs were more likely to re-enrol in treatment group. The pooled treatment group had a much lower incidence of intercourse at least once a week with at least one partner and of having a sexual partner aged 25 years or older. There was no difference between pooled treatment and control groups regarding marriage, pregnancy, sexual debut, multiple partners, syphilis, HIV, and HSV-2 prevalence. There were differences in magnitude of effect between UCT and CCT groups but the only significant difference was for current pregnancy. The transfer slightly decreased the prevalence of HIV and HSV-2 in beneficiaries. |
| **Reported outcome areas** | Health; Education; Empowerment |
| **Indicators reported** | Enrolled in school; Ever married; Currently pregnant; 'Sexual debut' (ever had sexual intercourse); Unprotected sex; Sexual intercourse once per week; Partner aged >25 years; HIV status; HSV-2 (herpes) status; Syphilis status. |

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| **Citation** | Baird, S., de Hoop, J. and Özler, B., 2013. Income shocks and adolescent mental health. *Journal of Human Resources*, 48 (2), pp.370-403 |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer (Malawi) |
| **Programme details as reported in the study** | This study seeks to identify whether a conditionality requirement makes any difference the impact of a cash transfer. The transfer in question was introduced in Malawi in 2007 and targets school age girls and young women who recently dropped out of school with the aim of keeping them in school or causing them to re-enrol. There is a CCT group and a UCT group with a total reach of 1225 beneficiaries. Enumeration areas (EA) are randomly selected to conditional treatment, unconditional treatment or to control group. All girls and young woman between the ages of 13 and 22 and never-married as of baseline are eligible for the transfer. Within treatment EAs, to determine the individual transfer amount, beneficiaries participate in a lottery where they pick bottle caps out of an envelope to win an amount between $1/month and $5/month. Transfers are made monthly for two years and are collected from payment points, such as churches or schools. No beneficiary has to travel more than 5km to a payment point. Security guards are present to make sure that the money is secure and each recipient is given a sealed envelope with her name on it.CCT recipients receive the transfer on condition of 'satisfactory' school attendance (more detailed criteria are not given). |
| **Evaluation methodology**  | The impact estimation strategy is quasi-experimental, using OLS linear and logistic regression with baseline levels characteristics as controls. The data come from the special two-wave purpose survey used to evaluate the programme (follow-up is after one year). The sample size in both waves is 2080 individuals. |
| **Overall findings** | The transfer reduced psychological distress in adolescent girls. This effect was driven by increased consumption, school attendance and leisure time resulting from the transfer. Increased transfer size led to a reduction in the positive effect on mental health. There was a negative spill-over effect on non-recipients. All programme effects were short-lived. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Mental health indicator (a twelve component indicator based on self-reported responses to questions about behaviour). |

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| **Citation** | Baird, S., McIntosh, C. and Özler, B., 2009. Designing cost-effective cash transfer programs to boost schooling among young women in Sub-Saharan Africa. Working paper 5090. The World Bank. Washington, D.C. |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer Programme (Malawi) |
| **Programme details as reported in the study** | The Zomba Cash Transfer Programme started in 2008 with the aim of incentivising girls and young women to stay in (or return to) school. The programme has both a CCT and UCT arm. Transfer receipt is randomised at the ‘enumeration area’ level. To determine the individual transfer amount, girls participate in a lottery where they pick bottle caps out of an envelope to win a monthly amount between $1 and $5. In total 1225 girls and young women are allocated treatment. In the conditional arm, receipt is conditional on 'satisfactory' school attendance (more detailed criteria are not given). |
| **Evaluation methodology**  | The study uses panel data from the baseline and at one year follow-up collected for the purposes of this study. The study is a RCT but difference-in-difference (DID) regression using individual fixed-effects is used to account for differences in treatment and control groups. The full sample consists of 3,805 girls and young women who were between the ages of 13 and 22 and never-married at baseline. |
| **Overall findings** | Transfer improved attendance and literacy overall. This effect was much starker for baseline dropouts (i.e. those who were school age but not currently attending at baseline). Transfer size made no substantial difference to either outcome, except in the case of the conditional transfer. In general conditionality did not have an effect on impact. |
| **Reported outcome areas** | Education |
| **Indicators reported** | School enrolment, literacy in English |

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| **Citation** | Baird, S., McIntosh, C., Özler, B., 2011. Cash or Condition? Evidence from a Cash Transfer Experiment. Quarterly Journal of Economics, 126 (4), pp. 1709-53 |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer (Malawi) |
| **Programme details as reported in the study** | This study seeks to identify whether a conditionality requirement makes any difference the impact of a cash transfer. The transfer in question was introduced in Malawi in 2007 and targets school age girls and young women who recently dropped out of school with the aim of keeping them in school or causing them to re-enrol. There is a CCT group and a UCT group with a total reach of 1225 beneficiaries. Enumeration areas (EA) are randomly selected to conditional treatment, unconditional treatment or to control group. All girls and young woman between the ages of 13 and 22 and never-married as of baseline are eligible for the transfer. Within treatment EAs, to determine the individual transfer amount, beneficiaries participate in a lottery where they pick bottle caps out of an envelope to win an amount between $1/month and $5/month. Transfers are made monthly for two years and are collected from payment points, such as churches or schools. No beneficiary has to travel more than 5km to a payment point. Security guards are present to make sure that the money is secure and each recipient is given a sealed envelope with her name on it.CCT recipients receive the transfer on condition of 'satisfactory' school attendance (more detailed criteria are not given). |
| **Evaluation methodology**  | The impact estimation strategy is quasi-experimental, using OLS linear and logistic regression with baseline levels characteristics as controls. The data come from the special two-wave purpose survey used to evaluate the programme (follow-up is after one year). The sample size is 2284 at baseline, 2,089 at follow-up. |
| **Overall findings** | There was a large reduction in school dropout rate in the CCT group and a more modest reduction in the UCT group. Bigger improvements were observed in reading comprehension in the CCT group. Teen pregnancy and marriage were much lower in the UCT group and this difference is driven by the effect of girls who dropped out of school. |
| **Reported outcome areas** | Education; Empowerment |
| **Indicators reported** | School outcomes (School enrolment, literacy in English), marriage, childbearing |

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| **Citation** | Baird, S. J., Chirwa, E., de Hoop, J., Özler, B., 2013. Girl Power: Cash Transfers and Adolescent Welfare. Evidence from a Cluster-Randomized Experiment in Malawi. Working paper. National Bureau of Economic Research (NBER). |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer Programme (Malawi) |
| **Programme details as reported in the study** | The programme is designed to keep girls and young women in school. It began in 2008 and incorporates an experimental design where one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted to school age girls and young women in school and who recently dropped out of school – in total it has reached 1225 girls and young women at the time of the survey. Enumeration areas (EA) were randomly allocated to treatment or control status. Within treatment EAs conditional and unconditional transfers were randomly allocated. Households were first identified if they had a girl or young woman between the ages of 13 and 22 and never-married as of baseline. All eligible girls/ young women were then allocated the treatment, in treatment EAs. To determine the individual transfer amount, girls participated in a lottery where they picked bottle caps out of an envelope to win an amount between $1/month and $5/month. Payment is distributed monthly for two years. The cash payment points were chosen to take place at centrally located and well-known places, such as churches, schools, etc. For each EA, they were selected so that no recipient has to travel for more than 5 kilometres to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it. Some recipients received the transfer on condition of 'satisfactory' school attendance (more detailed criteria not given). |
| **Evaluation methodology**  | This study benefits from having been designed as a RCT. OLS regression is used to identify the programme impact. The data used come from the official survey to evaluate the programme which consists of a two wave panel with a pre-programme baseline and follow-up after one year. The sample is between roughly 300 and 2000 individuals per regression. |
| **Overall findings** | The transfer reduces early marriage and makes respondents feel that their education and health are more valued in the household than before. The programme increases the target beneficiary's expenditure on herself. There was a small increase in consumption of protein and a small increase in rate of sleeping under a bed net. Programme effects were generally stronger for baseline drop-outs (not enrolled in school). |
| **Reported outcome areas** | Poverty; Education; Health; Empowerment. |
| **Indicators reported** | Expenditure on respondent herself over last 30 days (amount in USD); who decides how transfer is spent; participation in health training; preferred fertility timing (months until next child); ideal number of children over lifetime; self-perceived standing in the household (whether household cares more about respondent's education/ health than 12 months ago); nutrition (number of time ate protein in past 7 days); respondent usually sleeps under a bed net; test scores |

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| **Citation** | Baird, S., Chirwa, E., McIntosh, C., Özler, B., 2010. The Short-Term Impacts of a Schooling Conditional Cash Transfer Program on the Sexual Behaviour of Young Women. Health Economics, 19, pp. 55-68 |
| **Name of programme(s) and country/countries** | Zomba Cash Transfer Programme (Malawi) |
| **Programme details as reported in the study** | The programme was designed to keep girls and young women in school. It began in 2008 and incorporates an experimental design where one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted to school age girls and young women in school and who recently dropped out of school – in total it has reached 1225 girls and young women at the time of the survey. Enumeration areas (EA) were randomly allocated to treatment or control status. Within treatment EAs conditional and unconditional transfers were randomly allocated. Households were first identified if they had a girl or young woman between the ages of 13 and 22 and never-married as of baseline. All eligible girls/ young women were then allocated the treatment, in treatment EAs. To determine the individual transfer amount, girls participated in a lottery where they picked bottle caps out of an envelope to win an amount between $1/month and $5/month. Payment is distributed monthly for two years. The cash payment points were chosen to take place at centrally located and well-known places, such as churches, schools, etc. For each EA, they were selected so that no recipient has to travel for more than 5 kilometres to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it. Some recipients received the transfer on condition of 'satisfactory' school attendance. |
| **Evaluation methodology**  | This study benefits from having been designed as a RCT. Difference-in-difference (DID) estimation is used to identify the programme impact. The data used come from the official survey to evaluate the programme which consists of a two wave panel with a pre-programme baseline and follow-up after one year. The sample is as large as 2700 individuals depending on the model. |
| **Overall findings** | The transfer decreased early marriage, pregnancy and self-reported sexual activity. For beneficiaries who were not in school at baseline the decline in marriage and pregnancy were especially striking. |
| **Reported outcome areas** | Education; Empowerment |
| **Indicators reported** | School enrolment (in school); marital status (never married); Pregnancy (ever pregnant); sexual intercourse; number of partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older. |

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| **Citation** | Barber S. L. and Gertler P. J., 2010. Empowering women: how Mexico's conditional cash transfer programme raised prenatal care quality and birth weight. *Journal of Development Effectiveness*, 2 (1), pp. 51-73 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | The programme is designed to address short-term and long-term poverty by providing cash transfers conditional on family members, especially pregnant women and young children, obtaining preventive medical care from public clinics, on attending pláticas (educational talks) about health-related topics, and on school-aged children attending school. Transfers include an income transfer, meant to address immediate needs such housing, food security and medical care needs, whereas conditioning the transfer on health and education is intended for investments in children’s human capital. Oportunidades is one of the largest programmes of its kind. In 2004, it distributed approximately US$3 billion to more than five million households – including approximately one-third of all rural families in Mexico. |
| **Evaluation methodology**  | The study uses data from a controlled randomised trial to evaluate the impact Oportunidades on the birth weight of children from poor rural families and examine the pathways by which the improvements occurred. The study uses random effects regression with a panel survey covering 840 women. |
| **Overall findings** | Birth weights average 127.3 grams higher, and low birth weight incidence is 44.5 per cent lower among beneficiary mothers. Better birth outcomes are explained entirely by better quality prenatal care. Oportunidades affected quality through empowering women with information about adequate healthcare content to expect better care, and with skills and social support to negotiate better care. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Birthweight; low birth weight; pre-natal care seeking; number of pre-natal visits |

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| **Citation** | Barber S. L. and Gertler, P. J., 2008. The impact of Mexico's conditional cash transfer programme, Oportunidades, on birthweight. *Tropical Medicine and International Health*, 13 (11), pp. 1405-1414 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | The intervention is a CCT that started in 1997. By 2007, it covered approximately five million low income families (more than one in five of all families in Mexico) in both rural and urban settings. Beneficiaries were selected using a proxy means-test based on estimated income and were eligible if their income fell below a food-based poverty line (identifying extreme poverty) or below a capabilities based poverty line (identifying poverty) that included health and education expenses. Transfers included a health transfer, fixed at approximately US$15 per household per month. The education transfer was based on school grade and sex. The maximum monthly benefit cap for health and education together equalled approximately US$ 90 and US$160 for families with primary and high school children, respectively. Total transfers for health and education averaged 17–20% of pre-programme rural per capita household consumption. Transfers were paid bi-monthly and were conditional on each family member obtaining regular clinic consultations, and attending ‘platicas’ (health education talks) and monthly meetings for the principal beneficiary, usually the mother in the household. Health requirements varied by age. For pregnant women, five pre-natal visits were required. Transfers were also conditional on children attending school. Oportunidades required that households prove compliance via certification at public clinics and schools. A range of complementary health-related interventions were also included, including prenatal care, growth monitoring and immunisations. |
| **Evaluation methodology**  | The study involved a quasi-experimental approach drawing on a baseline census and subsequent fertility survey and using IV estimation. The sample included 804 women. |
| **Overall findings** | Beneficiary status was associated with 127.3 g higher birthweight amongparticipating women and a 4.6 percentage point reduction in low birthweight. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Birthweight; receipt of pre-natal care; number of pre-natal care visits |

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| **Citation** | Barber S. L. and Gertler, P. J., 2009. Empowering women to obtain high quality care: evidence from an evaluation of Mexico's conditional cash transfer programme. *Health Policy and Planning*, 24, pp. 18-25 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | The intervention is a CCT that started in 1997. It is a poverty-reduction programme to break the intergenerational transmission of poverty by providing incentives for parents to invest in the human capital of children. Cash transfers from Oportunidades are conditional on family members obtaining health and education services. Coverage expanded from some 300 000 rural families in 1997 to approximately 2.6 million in 2000. Currently, the programme covers approximately 5 million low-income families (more than 20% of all families in Mexico) living in both urban and rural areas |
| **Evaluation methodology**  | The study adopts a quasi-experimental approach using a panel survey with fixed effects regression. A total of 892 women were included in the sample (180 non-beneficiary and 712 beneficiary births). |
| **Overall findings** | Beneficiaries received 12.2% more prenatal procedures comparedwith non-beneficiaries. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Percentage of prenatal care procedures received (history taking and diagnostics, physical examination, prevention and case management) |

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| **Citation** | Barham, T., Macours, K. and Maluccio, J.A., 2013. More Schooling and More Learning? Effects of a Three-Year Conditional Cash Transfer Program in Nicaragua after 10 Years. IDB Working Paper 432. Inter-American Development Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details as reported in the study** | CCT, running since 2000, designed to address both current and future poverty. Households were targeted using a PMT and eligible for a food security transfer that provided a fixed amount per household regardless of the household’s size and composition. Households with children aged 7–13 years who had not yet completed the fourth grade of primary school were also eligible for an additional fixed bimonthly cash transfer contingent on enrolment and regular school attendance of those children and an annual transfer intended for school supplies. Over 30,000 families received bi-monthly transfers equivalent to 18 percent of pre-programme expenditures. Programme also had strong social marketing message that the money was intended to be used for human capital and small supply-side transfer for schools and teachers.  |
| **Evaluation methodology**  | Quasi-experimental methodology, based on multivariate regressions. Data sources included: a baseline census roster, short-term panel surveys with last survey 10 years later, and administrative data. |
| **Overall findings** | Paper focuses on a cohort of boys aged 9–12 years at the start of the programme in 2000, finding that the short-term programme effect of a half grade increase in schooling for boys was sustained after the end of the programme and into early adulthood. In addition, results indicate significant and substantial gains in both math and language achievement scores, an approximately one-quarter standard deviation increase in learning outcomes for the now young men. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates, grades attained, days of school missed, standardised test scores (by age and sex) |

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| **Citation** | Barham T., Maluccio, J. A., 2009. Eradicating Diseases: The Effect of Conditional Cash Transfers on Vaccination Coverage in Rural Nicaragua. *Journal of Health Economics*, 28, pp. 611-621 |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details**  | The intervention is a CCT implemented from 2000 to reduce both current and future poverty through conditional cash transfers for health and education attainment. To identify eligible households a poverty index was created for each locality and seven groups of six localities with similar wealth rankings were created. From each of these sets of six, three localities were randomly selected for inclusion in the treatment group and three in the control group. By 2000 the programme covered six poor rural municipalities of central Nicaragua. During the first two years, the average annual family transfer was US$ 272 dollars, or approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately US$ 37 every 2 months (a total of US$ 224 a year) if every health conditionality was met. The education transfer included US$ 112 per household per year and a per beneficiary child transfer for school supplies of US$ 21 per year. Transfers were made bi-monthly. The mother in the beneficiary household received the cash transfer for health contingent on her (1) bringing her children to scheduled preventive health care appointments—once a month for children under two years of age, and bi-monthly (every other month) for those between two and five; (2) attending bimonthly health educational workshops and; (3) ensuring adequate weight gain for her children. |
| **Evaluation methodology**  | The study is a quasi-experimental one using a DID approach with a special purpose longitudinal survey of 2229 individual-level observations. |
| **Overall findings** | The programme led to large increases in vaccination coverage, and these resulted in vaccination levels greater than 95% for some vaccines. Effects were especially large for children who are typically harder to reach with traditional supply-side interventions. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Vaccination rate (various vaccination types) |

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| Citation | Barrera-Osorio, F., Bertrand, M., Linden, L., and Perez-Calle, F., 2011. Improving the Design of Conditional Transfer Programs: Evidence from a Randomized Education Experiment in Colombia*. American Economic Journal: Applied Economics*. 3(2), pp. 167-195 |
| **Name of programme(s) and country/countries** | Conditional Subsidies for School Attendance (Subsidios Condicionados a la Asistencia Escolar) (Colombia) |
| **Programme details as reported in the study** | This study focuses on a CCT which began in 2005, intended to improve school attendance and enrolment and to encourage matriculation in tertiary education. Two types of transfer are available: the basic transfer for students who have completed grades 6 to 8 and the tertiary transfer for students who completed grades 9 to 11. Eligibility is determined by age (between grades 5 and 11) and means test (child's family had to have been classified into the bottom two categories on Colombia’s poverty index, the SISBEN). Treatment allocation was random, conducted in public through a lottery. For the basic transfer there were two treatments: 1) 30,000 pesos paid in lump sum each month conditional on child attending school at least 80 percent of the days that month, and 2) 20,000 pesos per month and the remaining 10,000 pesos held back each month then made available in a lump sum (savings) at beginning of next school year. The tertiary transfer consisted of a 20,000 peso monthly transfer then a lump sum of 600,000 upon graduation (US$300 or 73 percent of the average cost of the first year at a vocational school) if they enrol in a tertiary institution. If they don't enrol straight away this payment is delayed for one year. The maximum duration of participation is three years. For both of the basic transfer treatments, receipt is conditional on 80% attendance per month and students are removed from programme altogether if they fail to matriculate to the next grade twice or fail attendance condition 2 months in a row or are expelled. Payments are transferred by bank transfer using a dedicated debit card. |
| **Evaluation methodology**  | The study uses an experimental approach, and estimates impacts using a single-difference estimator , controlling for socio-demographic and school characteristics. In some models school-level fixed effects are used. The data come from a special purpose survey for this study conducted in two waves, also the national SISBEN poverty database containing household information, and observational data from school visits. In the San Cristobel survey site the sample was 6,875 treatment and 4,072 control individuals; in the Suba survey site it was 2,857 treatment and 3,505 control. |
| **Overall findings** | All of the designs significantly increase attendance. Treatment 2 (postponing part of the transfer) increases re-enrolment while the basic treatment has no effect. Treatment 3 also increases matriculation rate in tertiary institutions. The two non-standard versions of the CCT are concluded to be superior. The added effect of these problems is driven entirely by their effect on the most at-risk students. Negative effects observed on enrolment of eligible but non-treated children in the household. |
| **Reported outcome areas** | Education; employment; health |
| **Indicators reported** | Monthly rate of school attendance (% of days they attend when they are meant to); enrolment in school; number of meals eaten in a day; number of meals with a common source of protein; expenditure on education; number of hours worked in the last week that the child worked and the amount of money earned during that week |

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| **Citation** | Barrera-Osorio, F., Bertrand, M., Linden, L. and Perez-Calle, F.,2008. Conditional Cash Transfers in Education Design Features, Peer and Sibling Effects Evidence from a Randomized Experiment in Colombia. Working paper 13890. National Bureau of Economic Research |
| **Name of programme(s) and country/countries** | Conditional Subsidies for School Attendance (Subsidios Condicionados a la Asistencia Escolar) (Colombia) |
| **Programme details as reported in the study** | This study focuses on a CCT which began in 2005, intended to improve school attendance and enrolment and to encourage matriculation in tertiary education. Two types of transfer are available: the basic transfer for students who have completed grades 6 to 8 and the tertiary transfer for students who completed grades 9 to 11. Eligibility is determined by age (between grades 5 and 11) and means test (child's family had to have been classified into the bottom two categories on Colombia’s poverty index, the SISBEN). Treatment allocation was random, conducted in public through a lottery. For the basic transfer there were two treatments: 1) 30,000 pesos paid in lump sum each month conditional on child attending school at least 80 percent of the days that month, and 2) 20,000 pesos per month and the remaining 10,000 pesos held back each month then made available in a lump sum (savings) at beginning of next school year. The tertiary transfer consisted of a 20,000 peso monthly transfer then a lump sum of 600,000 upon graduation if they enrol in a tertiary institution. If they don't enrol straight away this payment is delayed for one year. The maximum duration of participation is three years. For both of the basic transfer treatments, receipt is conditional on 80% attendance per month and students are removed from programme altogether if they fail to matriculate to the next grade twice or fail attendance condition 2 months in a row or are expelled. Payments are transferred by bank transfer using a dedicated debit card. |
| **Evaluation methodology**  | The study uses an experimental approach, estimating single difference estimators and instrumental variable regressions. The data come from a special purpose survey for this study conducted in two waves, also the national SISBEN poverty database containing household information, and observational data from school visits. In the San Cristobel survey site the sample was 6,875 treatment and 4,072 control individuals; in the Suba survey site it was 2,857 treatment and 3,505 control. |
| **Overall findings** | Treated students are more likely to attend school, to remain enrolled, to matriculate to the next grade, to graduate and to matriculate to a tertiary institution. Negative spill-over was observed on the education of children that were registered but not selected for treatment by the lottery. |
| **Reported outcome areas** | Education; Employment; Health |
| **Indicators reported** | Monthly rate of school attendance (% of days they attend when they are meant to); enrolment in school; number of meals eaten in a day; number of meals with a common source of protein; expenditure on education; number of hours worked in the last week that the child worked and the amount of money earned during that week |

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| **Citation** | Barrientos, A. and Villa J. M., 2013. Anti-poverty transfers and labour participation effects. BWPI Working Paper N. 185. University of Manchester |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details**  | Familias en Acción is a conditional cash transfer, introduced in 2001 with the aim of supporting the poorest households in the human capital investment of their children. Eligibility is determined by a proxy-means test. In 2010, the programme provided monthly transfers for each child attending school of US$7.5 and US15, respectively, in rural and urban areas. Transfers for children in secondary schools in large cities were higher, averaging US$25 per month. In addition, households with children aged 0 to 6 were entitled to a monthly transfer of US$30. Transfers were paid bimonthly to the mother and are conditional on minimum school attendance, immunisation, health check-ups, and on mothers attending nutrition and health sessions. |
| **Evaluation methodology**  | The study examines labour market outcome effects of Familias en Acción in urban areas. It relies on regression discontinuity design and a large panel dataset.  |
| **Overall findings** | The paper finds significant and largely positive effects on labour market outcomes. These effects are heterogeneous in household composition and gender, confirming that the effects of antipoverty transfers on labour supply reflect a re-organisation of household productive resources in response to the transfer. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Labour market outcome variables, including labour force participation, employment, health insurance status and job search |

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| **Citation** | Bazzi, S., Sumarto and S.,Suryahadi, A.,2012. Evaluating Indonesia's unconditional cash transfer programme, 2005-2006**.** Grantee Final Report**.** 3ie |
| **Name of programme(s) and country/countries** | Unconditional cash transfer to mitigate the effect of the removal of a fuel subsidy (Indonesia) |
| **Programme details as reported in the study** | The intervention studied here is an UCT targeted to low income households to mitigate the shock of a fuel subsidy removal that raised the average price of fuel products by 114 percent. Eligibility depended on a quasi-means testing process whereby local officials devised a list of potential recipients using their own discretion and community-based records and then these households were means tested on the basic of income and asset data collected on them. The transfer size is officially 300,000 Rupiah but in practice some local officials extracted a tax (not clear what amount). Payment timings are irregular, with two payments happening roughly within a year of each other (although some beneficiaries are still awaiting the second payment at the time of the study). It is not clear who in the household is the main recipient. |
| **Evaluation methodology**  | The study uses a quasi-experimental design consisting of difference-in-difference estimation with reweighting according to the likelihood of receiving treatment (a propensity score). A multinomial logit model with four outcomes relating to poverty status is also used. The data come from the nationally representative household-level pane, *Susenas* (National Socioeconomic Survey).A balanced panel is achieved of 9,048 households of which 639 have received one transfer, 1805 have received two transfers and the remainder are the control group. |
| **Overall findings** | No difference was found in per capita expenditure growth and changes in labour supply per adult between those who received the full transfer and the control group. Lower expenditure growth and reduction in labour supply were observed among the group still expecting their final transfer. Receipt of any transfer (one or two) is associated with movement out of poverty. |
| **Reported outcome areas** | Poverty; Employment |
| **Indicators reported** | Log difference of total consumption expenditure (per capita) before and after transfer; log difference in expenditure on various food and non-food items; poverty status (chronic poverty, moving into poverty, moving out of poverty, never poor); mean hours worked by household members not currently enrolled in school. |

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| **Citation** | Bazzi, SA, 2013. It’s All in the Timing: Cash Transfers and Household Expenditures in a Developing Country. PhD dissertation. University of California, San Diego. |
| **Name of programme(s) and country/countries** | Temporary UCT (Indonesia) |
| **Programme details as reported in the study** | This paper considers a temporary unconditional cash transfer that was implemented in 2005 to compensate poor households for a sudden cost in fuel resulting from removal of fuel subsidies. It was targeted at low income households and used a targeting approach that involved local officials devising a list of potential recipients, using "own-discretion and community-based records". These households means tested on the basis of income and asset related criteria, using a PMT. Transfers were paid quarterly, for one year, at the post office. Each payment was worth about $30 (1/8 of mean household expenditure). |
| **Evaluation methodology**  | This study employs a quasi-experimental research design. It uses a difference-in-difference approach with reweighting according to propensity score of receiving treatment. The data used comes from a nationally representative household-level panel data from the National Socioeconomic Survey (Susenas). The study uses a balanced panel of 9,048 households. |
| **Overall findings** | The author finds no mean difference in expenditure growth between control and beneficiary household who received timely transfers, but the growth in expenditure is lower for those households still awaiting second payment.  |
| **Reported outcome areas** | Poverty |
| **Indicators reported** | Growth in log total household expenditure per capita; growth in log expenditure for different expenditure groups; growth in log total household expenditure by length of delay |

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| **Citation** | Behrman, J.R., Parker, S.W., and Todd, P.E., 2009. Medium-term impacts of the Oportunidades conditional cash transfer program on rural youth in Mexico in ‘Poverty, Inequality, and Policy in Latin America’ eds. Klasen, S., and and Nowak-Lehmann, F., The MIT press: Boston, Massachusetts |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Mexico’s flagship CCT, operating since 1997, with five million families participating in the programme by 2006. Targeted using a marginality index to identify the poorest families, the programme transfers varying amounts conditional on regular school attendance and attendance at a health talk once a month for high school students. Programme rules allow students to fail each grade once. |
| **Evaluation methodology**  | RCT evaluation assessing programme impacts using a DID approach combined with a density reweighting method to take into account attrition occurring between the baseline and follow-up surveys. Data sources include the 2003 Rural Evaluation Survey (ENCEL2003), the 1997 pre-programme Survey of Household Socioeconomic Characteristics (ENCASEH) and school-level data on characteristics that reflect school quality from the Ministry of Education. Sample: youth who were aged 9 to 15 prior to the programme, where attrition was reconstructed. |
| **Overall findings** | Youth in the treatment group have about 0.2 more years of schooling than youth in the control group, both for boys and girls. Larger effects on the order of 0.5 years are observed for the subset of youth who were near the transition between primary and secondary school at the time the programme was introduced. Estimates also suggest that boys with longer programme exposure progressed significantly faster through school. |
| **Reported outcome areas** | Education; Employment; Empowerment |
| **Indicators reported** | Enrolment rates, grades of schooling completed, achievement test scores, employment rates, marriage rates, migration (*including variations with quality of schooling*). |

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| **Citation** | Behrman, J. R. and Hoddinott, J., 2005. Programme Evaluation with Unobserved Heterogeneity and Selective Implementation: The Mexican PROGRESA Impact on Child Nutrition. *Oxford Bulletin of Economics and Statistics*, 67 (4), pp. 547-569. |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | The programme is a large Mexican rural anti-poverty and human resource programme, introduced by the Federal Government of Mexico as part of an effort to break the intergenerational transmission of poverty. The programme had various objectives, mainly aimed at improving the educational, health and nutritional status of poor families and particularly children and their mothers, initially in poor rural communities with less than 2500 inhabitants. The programme comprised of conditional cash transfers, participation in *platicas* (meetings at which health and nutrition issues were discussed), and nutrition supplements (*papillas*) , which were provided to pregnant and lactating women and children between 4 months and 2 years (and 2 to 5 years if they were malnourished). The bi-monthly transfers were conditional upon regular visits by pre-schoolers to health clinics and regular school attendance by school-aged children. Transfers were equivalent to about 20% of household consumption. |
| **Evaluation methodology**  | The study considers the impact of PROGRESA on child nutrition with a quasi-experimental approach, using data from the *Instituto Nacional de Salud Publica* to estimate child-level fixed effects regressions. The sample covers the original 506 randomly assigned localities across seven south-central states as part of the formal evaluation, and includes 2712 children. |
| **Overall findings** | When they examine the impact of PROGRESA based on the presumption of randomized allocations, they find that PROGRESA had no effect or even a negative impact on child nutrition. However, child fixed-effects estimates that control for unobserved heterogeneity that is correlated with access to nutritional supplements indicate a significantly positive and fairly substantial programme effect of the nutritional supplements on children 12–36 months. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Child height |

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| **Citation** | Behrman, J. R. and Parker, S. W., 2013. Is Health of the Aging Improved by Conditional Cash Transfer Programs? Evidence From Mexico. *Demography.* 50(4), pp.1363-1386 |
| **Name of programme(s) and country/countries** | PROGRESA/Oportunidades (health and nutrition component) (Mexico) |
| **Programme details as reported in the study** | This study evaluates the impact of a CCT which began in 1997 with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). The treatment is randomised at the community level and household eligibility is determined through means-testing on per capita household income and other household characteristics. The transfer consists of two possible components: education and health. The education component of the programme initially provided grants for children between grades 3 to 9 but in 2001 the scope was expanded to included grades 10-12. Education transfers of between 105 and 660 per child, depending on their school year, are made to beneficiary households. At Grades 7 and above, the grants are slightly higher (by about 13 percent) for girls than boys. Transfers are conditional on regular school attendance (85% of the time) and on family members visiting health clinics for check-ups. If a student fails a grade twice then their transfer is stopped altogether. The health component consists of 180 pesos per month for mothers with children aged 4 months to 2 years and women who are pregnant or lactating. For the health component, beneficiaries are required to attend monthly health and nutrition talks. Payment is wired to a nearby office where it is collected in cash. For the health component, there are complementary information sessions on health and nutritional supplements for children aged 2-3 if malnourished. In 2000, after approximately one and a half years of the programme running, the control group communities also began to receive benefits, meaning that this study tests the impact of differential exposure lengths. The programme has approximately five million beneficiaries at the time of the study. |
| **Evaluation methodology**  | A quasi-experimental approach is used consisting of difference-in-difference estimation with propensity score matching of treatment and controls. The data come from a special purpose household panel survey used to evaluate the programme. The overall sample is 8,500 individuals. |
| **Overall findings** | Positive impacts from the transfer on all health outcomes; larger impacts for women than men and particularly for the elderly (70 or older). |
| **Reported outcome areas** | Health; employment |
| **Indicators reported** | Probability of attending clinic in previous 12 months; Days reported sick in previous 4 weeks; Days unable to carry out normal activities in previous 4 weeks; Proportion with diabetes (self-reported); Proportion with high blood pressure (self-reported); Proportion able to carry out vigorous activities, such as running or carrying heavy objects; Distance (in km) able to walk before getting tired; Proportion working in the previous week in activity contributing to family income. |

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| **Citation** | Behrman, R., Parker, S.W. and Todd, P.E., 2004. Medium-Term Effects of the Oportunidades Programme Package, including Nutrition, on Education of Rural Children Age 0-8 in 1997. Technical Document Number 9 on the Evaluation of Oportunidades 2004. Mexico, D.F. |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Operating in small rural communities since 1997, the programme provides cash grants to families in exchange for regular school attendance of children and youth as well as regular health clinic attendance and nutritional supplements for infants and very young children and for pregnant and lactating women. Its central objective is of linking monetary transfers to investments in the human capital of poor children and family members and at time of writing covered a total of 5 million families (with payments ranging from 105-660 pesos), about one quarter of all families in Mexico. Impact on education could be mediated by several programme components including: cash transfers to the mothers in the treatment households, participation in ‘platicas’ (educational talks), nutritional supplements, growth monitoring and conditionality. |
| **Evaluation methodology**  | RCT, using a) DID for the original treatment and control groups for children who were of school age (6-8) in 1997 and treatment-control difference estimates for children who were of pre-school age (0-5) in 1997, and b) matching estimates between those who had obtained treatment in 1998 and the 2003 matched comparison group. Analysis is based on data provided in the 2003 Rural Evaluation Survey (ENCEL), which is linked with the 1997 pre-programme Survey of Household Socio-economic Characteristics (ENCASEH) data. |
| **Overall findings** | The evidence thus far shows strong impacts for children aged 6 to 8 in 1997 on their level of schooling attainment and smaller impacts for children below this age group. Impacts for the older children likely derive from the receipt of grants, whereas younger children by and large were not eligible yet or eligible for only a short period of time for the grants by 2003. |
| **Reported outcome areas** | Education |
| **Indicators reported** | (*Children 0-8 in 1997*) Enrolment rates, ever-failing, progressing on-time, grades schooling completed, entering secondary school,  |

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| **Citation** | Behrman, J. R., Parker, S. W., Todd, P. E., 2005. Long-Term Impacts of the Oportunidades Conditional Cash Transfer Program on Rural Youth in Mexico. Discussion Paper 122. Ibero-America Institute for Economic Research, Georg-August-Universität, Göttingen |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | CCT, operating since 1997, that provides grants for primary and secondary school children conditional on enrolment ad attendance - with grant amounts slightly higher (by about 13%) for girls than boys in secondary and high school. The programme also provides grants for school supplies and a fixed transfer linked to regular health clinic attendance. Five million families, targeted using a marginality index, were enrolled at time of the study.  |
| **Evaluation methodology**  | RCT using DID and density reweighting method, based on a sample of youth who were aged 9 to 15 in 1997 just prior to the programme intervention. Data sources were Oportunidades’ special purpose panel surveys and the 2003 follow-up rural evaluation survey (ENCEL2003). |
| **Overall findings** | Significant positive impacts of long-term (5.5 years) exposure to the programme on school grades completed. On average, youthin the treatment group have about 0.2 more years of schooling than youth in the control group, both for boys and girls. However, no effect on cognitive tests and negative effects on employment (reduction in work) for boys and insignificant effects for girls. |
| **Reported outcome areas** | Education; Employment; Empowerment |
| **Indicators reported** | (*All long term impact on kids aged aged 9 to 15 prior to programme*) Enrolment rates, grades of schooling completed, cognitive test, juvenile employment, average monthly income, marriage rates |

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| **Citation** | Behrman, J. R., Parker, S. W. and Todd, P. E.,2011. Do conditional cash transfers for schooling generate lasting benefits? A five-year follow-up of PROGRESA/Oportunidades. *Journal of Human Resources*, 46(1), pp. 93-122 |
| **Name of programme(s) and country/countries** | PROGRESA/Oportunidades (Mexico) |
| **Programme details as reported in the study** | This study evaluates the impact of a CCT which began in 1997 with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). The treatment is randomised at the community level and household eligibility is determined according to criteria that are not explained. In its initial phase the programme provided grants for children between grades 3 to 9 but in 2001 the scope was expanded to included grades 10-12. Transfers of between 105 and 660 per child, depending on their school year, are made to beneficiary households. At Grades 7 and above, the grants are slightly higher (by about 13 percent) for girls than boys. Transfers are conditional on regular school attendance (85% of the time) and on family members visiting health clinics for check-ups. If a student fails a grade twice then their transfer is stopped altogether. In 2000, after approximately one and a half years of the programme running, the control group communities also began to receive benefits, meaning that this study tests the impact of differential exposure lengths. The programme has approximately five million beneficiaries at the time of the study. |
| **Evaluation methodology**  | A quasi-experimental approach is used consisting of difference-in-difference estimation with propensity score matching of treatment and controls. The data come from a special purpose household panel survey used to evaluate the programme. The sample consists of 8,894 programme eligible individuals in wave 1 and 5,591 in wave 2. |
| **Overall findings** | The transfer has positive effect on school grade attainment and reduction in child labour but increases the likelihood of being in work for older girls and also shifts from agricultural to non-agricultural employment. Longer exposure to the programme increases the positive effect. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | School grades accumulated; probability of child/ young person being employed (in market employment); probability of child/ young person working in agriculture |

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| **Citation** | Behrman, J. R., Sengupta, P., Todd, P., 2005. Progressing through PROGRESA: An impact assessment of a school subsidy experiment in rural Mexico. *Economic Development and Cultural Change*, 54 (1), pp. 237-275 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | The broad objective of PROGRESA, introduced in 1997, is to improve the conditions of education, health, and nutrition for poor families, particularly for children and their mothers, by providing cash transfers conditional on regularly sending children to school (as well as other requirements not relevant to the paper). At the time of writing, PROGRESA provided aid to approximately 2.6 million poor families and operated in over 50,000 localities in 31 states. The benefit levels for the time period covered by the data range from 70 to 255 pesos per month, with an average of US$55 per month , over a fifth of average family income. |
| **Evaluation methodology**  | RCT evaluation design, adopting DID matching for analysis. Data sources: PROGRESA’s special purpose panel survey (baseline surveys administered in October 1997 and March 1998 and two follow-up surveys administered at approximately 1-year intervals). There are over 30,000 eligible children participating in the experiment, but study’s data sets pertain to over 75,000 children because, within each community, data collection was exhaustive and data are available on children from families that were ineligible for the subsidies. The data analysed covers only the first 2 years of the operation of PROGRESA, but longer term impacts are simulated using a Markov schooling model to predict the effects of multiple years of exposure to the programme. |
| **Overall findings** | Enrollment rates reveal effects of the programme only for older children, with the greatest changes observed in the age ranges and grade levels for which the school subsidies are greatest. For children ages 6–10, programme participation is associated with less grade repetition and better grade progression. For children ages 11–14, the programme decreases the dropout rate, particularly during the transition from primary to secondary school, and encourages school re-entry among those who have dropped out. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates, age at time of matriculation, grade repetition, and dropout rates, and school re-entry rates among dropouts |

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| **Citation** | Behrman, J.R., Gallardo-Garcia, J., Parker, S.W., Todd P.E., Velez-Grajales, V., 2012. Are Conditional Cash Transfers Effective in Urban Areas? Evidence from Mexico. *Education Economics*, 20 (3), pp. 233-259.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | CCT, operating since 1997, targeted at poor families as measured by a marginality index. The programme has two main subsidy components: a health and nutrition subsidy and a schooling subsidy. To receive the health and nutrition benefit, household members have to attend clinics for regular check-ups and attend informational health talks. To receive the school subsidy, children or youth in participating households have to attend school in one of the subsidy-eligible grade levels (grades 3–12) for at least 85% of school days. At time of writing, 30 million households received the benefits, which amount to about US$35–40 monthly. |
| **Evaluation methodology**  | RCT, evaluating impact by using DID matching, as this allows for time-invariant unobservable differences between the participant and nonparticipant groups that may affect participation decisions and outcomes. The main parameter of interest in this paper is the average impact of treatment on the treated, for various subgroups of children/youth defined by age, gender and pre-programme poverty status. Specifically, the analysis focuses on girls and boys who were 6–20 years old in 2002. The analysis sample come from the Urban Evaluation Survey data, gathered in three rounds (baseline 2002, 2003 and 2004). |
| **Overall findings** | In the short term (1-2 years) the programme is successful in increasing school enrolment, schooling attainment, and time devoted to homework for girls and boys and in decreasing working rates of boys. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Schooling attainment levels, school enrolment rates, time devoted to homework, working rates and monthly wages |

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| **Citation** | Behrman J. R.; Parker, S. W.; Todd, P. E., 2009. Schooling Impacts of Conditional Cash Transfers on Young Children: Evidence from Mexico. *Economic Development and Cultural Change*, 57 (3), pp. 439-77.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | CCT, operating since 1997, and conditional on a) the whole family (including pre-schoolers) regularly visiting health clinics and school-aged children attending school, b) attending regular meetings (pláticas) during which health and nutritional issues and practices are discussed. Beneficiaries receive bi-monthly cash transfers equivalent on average to 20 to 30 percent of household consumption. The programme also delivers nutritional complements for pregnant and lactating women and children between six months and two years, and enforces growth monitoring – all potential channels of impact. |
| **Evaluation methodology**  | RCT, using DID with randomised allocation and DID with matching. Data sources include: ENCEL (the Oportunidades Evaluation Survey) from 2003, linked with earlier data, particularly the 1997 pre-programme Survey of Household Socio-Economic Characteristics (ENCASEH97). Sample: children ages 0–8 pre-programme where attrition was reconstructed. |
| **Overall findings** | The empirical findings show positive programme impacts on reducing ages at entering school for the younger children as well as on accumulated grades of schooling after 5.5 years of benefits for older children, with estimates implying a 1% reduction in the age of entry to primary and an increase in grades of schooling completed to date of about 8%-9%.  |
| **Reported outcome areas** | Education |
| **Indicators reported** | (*All medium term impact group of children ages 0–8 pre-programme)* school progression, grades attained,  |

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| **Citation** | Benedetti, F. and Ibarrarán, P., 2015. Do education and health conditions matter in a large cash transfer? Evidence from a Honduran experiment. Working Paper IDB-WP-577. Inter-American Development Bank |
| **Name of programme(s) and country/countries** | Bono 10,000 (Honduras) |
| **Programme details as reported in the study** | This study evaluates the impact of the third incarnation of a conditional cash transfer programme that began in the 1990s. This particular intervention began in 2010 and targets children, pregnant and lactating mothers in poor households. Randomisation of treatment allocation occurred at the village level and household eligibility is means-tested on per capita consumption. Beneficiary households receive 1,946 Lempiras per capita or (equivalent to 18% of median consumption). For children, only one child needed to be enroled in school and to satisfy the attendance condition for all children to receive the transfer. The health transfer is conditional on being registered in a health centre but this condition only applies if there is no child eligible for an education transfer. Transfers are made three times per year |
| **Evaluation methodology**  | A quasi-experimental approach is used consisting of difference-in-difference estimation. The data come from a special purpose household panel survey intended for the evaluation of the programme. The total sample size is 4,416 households. |
| **Overall findings** | Some effects are observed on school enrolment, child labour participation and use of health services but these are smaller than in an earlier pilot possibly because conditionality was reduced compared to before. |
| **Reported outcome areas** | Poverty; Education; Employment; Health |
| **Indicators reported** | Per-capita consumption (expenditure?); food and non-food consumption; education expenditure; likelihood of being in poverty; household income per capita; labour force participation; school enrolment; infants had been recently weighed; reason for last health centre visit was a regular check-up; percentage of children with a full set of immunisations; incidence of health problems (e.g. diarrhoea). |

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| **Citation** | Benhassine, N., Devoto, F., Duflo, E., Dupas, P. and Pouliquen, V., 2013. Turning a Shove into a Nudge? A "Labeled Cash Transfer" for EducationWorking Paper, 19227. National Bureau of Economic Research. |
| **Name of programme(s) and country/countries** | Tayssir (Morocco) |
| **Programme details as reported in the study** | The Tayssir intervention aims to improve school attendance among poor children and increase human capital accumulation and consists of a labelled cash transfer (LCT) and a conventional CCT. It is targeted to school-aged children in poor rural communities (detailed eligibility criteria are not given). The transfer is either made to the father or mother depending on a randomised allocation process at the school level, first to treatment or control group and within the treatment group to either CCT-to-father, CCT-to-mother, LCT-to-father, or LCT-to-mother. Parents have to self-enrol in the programme at the school to be considered. The transfer is equal to 60 Moroccan dirhams (MAD) per child 6-7 years old, 80 MAD for each child 8-9 years old, and 100 MAD for each child 10-11 years old, per month (up to 10 months per year). The total amount is distributed in three lump sums throughout the year for two years, in cash from the local post office or a programme official. In the case of the CCT, the child has to be enrolled in school and not have more than four absences in a given month, to remain eligible. In the LCT group, the transfer is explicitly stated to be for education but no conditions were formally imposed or enforced. |
| **Evaluation methodology**  | The study -uses a randomised experimental design to test the different interventions using OLS linear and logistic regression with baseline level characteristics as controls to estimate the treatment effect. The dataset combines a school level dataset (data collected during surprise visits), household level dataset, individual level dataset comprising arithmetic scores from one child per household and data from an additional 'awareness' survey. Depending on the model the sample is between 400 and around 4000 observations. |
| **Overall findings** | The transfer led to large increases in school enrolment and attendance overall. Conditionality and differences in targeting (male versus female recipient) made almost no difference to the results. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Attending school by end of year 2; Never Enrolled in school by end of year 2; Dropped out by end of year 2; Attendance rate during surprise school visits; Completed primary school; Time (minutes) spent on school, homework, chores, work, social activities etc.; score on arithmetic test. |

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| **Citation** | Bertrand, M., Mullainathan, S. and Miller, D., 2003. Public Policy and extended families: Evidence from pensions in South Africa. *World Bank Economic Review*, 17 (1), pp. 27-50 |
| **Name of programme(s) and country/countries** | South Africa Old-Age Pension (South Africa) |
| **Programme details**  | South Africa’s Old-Age pension (UCT), dates back to the 1920s, when it was only for white South Africans. Following major reforms after 1992, eligibility was determined primarily by age: only women over 60 and men over 65 years of age. It is also means-tested. The pension pays lump-sum cash transfers, roughly twice the average per capita income in African households, to eligible men and women.  |
| **Evaluation methodology**  | The study examines how the Old-Age Pension affects the labour supply of prime-age individuals living with an elderly household member. It uses data from the Integrated Household Survey of South Africa, a survey of a random sample of 9,000 households conducted in 1993. Results are presented from simple OLS regressions and from regressions that instrument the pension income variable with the number of age-eligible men and women in the household.  |
| **Overall findings** | The study finds a sharp drop in working hours of prime-age individuals in households when women turn 60 years old or men turn 65, the ages at which they become eligible for pensions. It also finds that the drop in labour supply is much larger when the pensioner is a woman, suggesting an imperfect pooling of resources. The allocation of resources among prime-age individuals depends strongly on their absolute age and gender as well as their relative age. The oldest son in the household reduces his working hours more than any other prime-age household member.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Working hours and employment status of 16-50 year-olds; who benefits from the transfer/resource pooling |

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| **Citation** | Blattman C., Fiala N., and Martinez S., 2012. Employment generation in rural Africa: Mid-term results from an experimental evaluation of the Youth Opportunities program in Northern Uganda. Discussion Paper 1201, DIW Berlin |
| **Name of programme(s) and country/countries** | Youth Opportunities Programme (Uganda) |
| **Programme details**  | The intervention is a CCT for youth vocational training, tools and business start-up costs, commencing in 2008, forming part of the Northern Uganda Social Action Fund (NUSAF). The two main aims are to raise youth incomes and employment, and to improve community reconciliation and reduce conflict. The programme is targeted to poor and underemployed “youth” (16 to 35) with a minimum capacity to benefit from vocational training. Applicants had to form groups of roughly 15 to 25 young adults interested in a vocation and submit a proposal for purchasing skills training, tools, and other materials required to start an enterprise. Groups were otherwise free of supervision or oversight in the actual spending On average, successful groups received a lump sum cash transfer of $7,108 to a jointly held bank account—roughly $374 per group member, which is more than 20 times the average monthly income of the youth at the time of the baseline survey. Payments were a one-off transfer to a group bank account, after which members were allocated their share. In 2008, the government determined that it had funding for 265 of 535 eligible groups (with an average of 22 members each). |
| **Evaluation methodology**  | The study was designed as a RCT, using ANCOVA to estimate programme impacts. The special purpose panel survey included a final sample of 2675 individuals. |
| **Overall findings** | Mid‐term results after two years suggest four main findings. First, despite a lack of central monitoring and accountability, most youth invest the transfer in vocational skills and tools. Second, the economic impacts of the transfer are large: hours of non-household employment double and cash earnings increase by nearly 50% relative to the control group. The authors estimate the transfer yields a real annual return on capital of 35% on average. Third, the evidence suggests that poor access to credit is a major reason youth cannot start these vocations in the absence of aid. Much of the heterogeneity in impacts is unexplained, however, and is unrelated to conventional economic measures of ability, suggesting we have much to learn about the determinants of entrepreneurship. Finally, these economic gains result in modest improvements in social stability. |
| **Reported outcome areas** | Savings, investment and production; Employment; Empowerment; Health; Poverty |
| **Indicators reported** | Value of tools and machines/stock of raw materials acquired, cash earnings from past 4 weeks, monthly cash earnings adjusted for hourly earnings, index of wealth score, hours spent on all economic/market activities in the past 4 weeks, number of group memberships, attendance at community meetings, whether active in community meetings, whether a community leader or community mobiliser, locus of control index, access to basic services, expected 5-year change in power position, optimism index, index of depression and distress symptoms |

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| **Citation** | Blattman, C., Green, E. P., Jamison, J., Lehmann, M. C. and Annan, J., 2015. The returns to cash and microenterprise support among the ultra-poor: A field experiment in post-war Uganda. Available at SSRN: http://ssrn.com/abstract=2439488. |
| **Name of programme(s) and country/countries** | Women's Income Generating Support (WINGS) (Uganda) |
| **Programme details**  | WINGS was an experiment from 2009 providing war-affected individuals (particularly women) in northern Uganda with an enterprise grant equivalent to US$150, plus five days of business skills training and ongoing supervision. The objective was to support sustainable enterprises in war-torn areas. The programme was implemented in 120 villages in Kitgum and Gulu districts where 10 to 17 marginalised villagers from each village were selected using community-based targeting and categorical targeting followed by interviews. Three quarters of them were to be women aged 14-30. The cash was framed as funds to implement business plans, the development of which was a condition of receiving the transfers, which were paid in two equal instalments, two and six weeks after training. |
| **Evaluation methodology**  | The study investigated a wide range of impacts, including the effect of complementary self-help group training and supervision through a RCT and use of DID and SD regressions, drawing on a special purpose panel survey. The sample included 1800 individuals, comprised of 896 phase-1 treatment group and 904 in the delayed entry control group. |
| **Overall findings** | 16 months after grants, participants had doubled their microenterprise ownership and incomes, mainly from petty trading. The effect of receiving group training was a doubling of earnings, but with no effect on consumption. When the control group received cash and training 20 months later, supervision was varied and a year later, supervision had increased business survival but not consumption. |
| **Reported outcome areas** | Employment; Poverty; Health; Savings, investment and production; Empowerment |
| **Indicators reported** | Occupational choice (e.g. any non-farm self-employment, started enterprise, average work hours/chores per week); income and food security (e.g. index of income measures, earnings last harvest, monthly cash earnings, durable assets, monthly non-durable consumption, times went hungry, no. of meals per day); member of community group; financial access (e.g. transfers/loans to/from other households, member of savings group, total savings/debts); Health (physical health index, mortality); social relationships (community participation, social support received); empowerment (autonomy in purchases, physical/emotional abuse, degree of partner control, partner relationship quality, female and lives with partner). |

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| **Citation** | Blattman, C; Fiala, N ; Martinez, S, 2013. The economic and social returns to cash transfers: evidence from a Ugandan aid program. Working paper, Columbia University, Department of Political Science and International & Public Affairs. |
| **Name of programme(s) and country/countries** | Youth Opportunities Programme (YOP) (Uganda) |
| **Programme details as reported in the study** | This study considers the Youth Opportunity Programme, which began operating in 2008. It us framed as an enterprise start-up programme targeted at poor and underemployed youth to reduce poverty and promote social cohesion and stability. In first instance it was self-targeted. Individuals were encouraged to apply in small groups and had to submit a proposal and budget (not monitored). A sub-sample of these were selected by government according to non-specified indicators. The 2675 youth were randomly selected to participate, in order to achieve a RCT research design. Beneficiaries received one payment of $382 on average (roughly an annual income), which was distributed as a bank transfer. The transfer was conditional on vocation training but this was not monitored. |
| **Evaluation methodology**  | The study is designed as a RCT. It employs a DID approach, using a special purpose panel survey with a total sample of 11,288 individual (5,828 control, 5,460 treated). |
| **Overall findings** | Most invest the transfers in vocations and earnings rise by at least 40%, especially among the more credit-constrained, patient, and risk-averse, higher relative returns for females |
| **Reported outcome areas** | Poverty; savings; investment and production; empowerment; employment |
| **Indicators reported** | Participation in training; investment in capital stocks; savings; income; consumption; wealth; hours of employment; sector of employment; subjective wellbeing; kin integration; community participation; interpersonal aggression and disputes; political participation  |

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| **Citation** | Bobonis, H. J., 2011. The impact of conditional cash transfers on marriage and divorce. *Economic Development and Cultural Change*, 59 (2), pp. 281-312 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | Progesa is a CCT, which began in 1997, intended to improve child school attendance and health. At the time of the study it had reached over 2.6 million children. The programme has both an education and a health component. The education transfer amount begins at 100 pesos per month for households with no eligible children and increases by an additional amount between 70 to 255 pesos per month per child depending on grade level and gender up to a maximum of 625 pesos (amounts differ depending on exchange rate used). The health transfer consists of roughly 12 pesos per month and includes nutritional supplements for pregnant and breast-feeding women, newborns, and malnourished children. The amount is typically equivalent to around 20 to 30 percent of household income. The transfer is conditional on school attendance (where applicable) and bi-annual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. |
| **Evaluation methodology**  | This study uses a quasi-experimental design in which OLS regression is used to estimate the treatment effect. The data come from the official panel survey used to evaluate the programme. The sample size here is approximately 15,376 households. |
| **Overall findings** | The programme didn't affect the overall proportion in marital unions however there was more ‘turnover’ in treatment villages, meaning more divorces and new unions. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Proportion of women in a marital relationship; proportion of marital dissolutions among couples who were married at baseline; proportion of new unions among mothers who were single at baseline. |

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| **Citation** | Bobonis, G.,Castro, R., Gonzalez-Brenes, M., 2013. Public Transfers and Domestic Violence: The Roles of Private Information and Spousal Control. American Journal: Economic Policy, 5 (1), pp. 179-205 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades began as Progresa in 1997 (it was renamed in 2001) as a CCT intended to improve child school attendance and health. At the time of the study it had reached over 2.6 million children. The programme has both an education and a health component. The education transfer amount begins at 100 pesos per month for households with no eligible children and increases by an additional amount for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). The health transfer consists of roughly 12 pesos per month and includes nutritional supplements for pregnant and breast-feeding women, newborns, and malnourished children. The transfer is conditional on school attendance (where applicable) and bi-annual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. |
| **Evaluation methodology**  | This study uses a quasi-experimental method to evaluate the programme impact. The empirical method uses a regression model with a binary outcome (Logit) and fixed effects to isolate the impact of the transfer on the various outcomes. The data come from a nationally representative household survey and the sample size here is roughly 2800 women.  |
| **Overall findings** | Beneficiaries were much less likely to be victims of physical abuse but more likely to receive violent threats without associated abuse. This suggests attempts from the male partner to extract rents from the female beneficiary because her ‘threat point’ has been raised, i.e. she has more resources to bargain her way out of violence which in turn creates an incentive for the male partner to seek out these rents. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Incidents of domestic violence: physical, sexual and emotional abuse. |

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| **Citation** | Braido Luis, H. B., Olinto, P. and Perrone H., 2012. Gender Bias in Intrahousehold Allocation: Evidence from an Unintentional Experiment. *The Review of Economics and Statistics*, 92 (2) pp. 552-565 |
| **Name of programme(s) and country/countries** | Bolsa Alimentação (Brasil) |
| **Programme details as reported in the study** | Bolsa Alimentação is a CCT which began to be implemented in 2001 with the intention of reducing infant mortality and nutritional deficiencies among children from very poor families. The target group is pregnant women and mothers of children under the age of 7 in poor families (with monthly per capita income below a certain threshold). The designated beneficiary is the highest-ranking woman in the household. Household eligibility is proxy means-tested based on estimated per capita income. This study exploits a fault where there were multiple errors in the registration process which led to eligible households being randomly excluded from treatment. The transfer amount is 15, 30, or 45 BRL per month depending on number of qualifying children. Typically this is equivalent to around 8% of household expenditure. Payment is made monthly and is deposited onto an ATM card given to each beneficiary allowing money to be withdrawn from certain banks and retail stores. Receipt of the transfer is conditional on compliance with vaccination schedules and regular visits to public centres for prenatal care, child-growth monitoring, and health education classes. |
| **Evaluation methodology**  | The study design is quasi-experimental and uses several different models to estimate the treatment effect, specifically difference-in-difference with matching and instrumental variable regression. The data come from a special purpose survey and the sample size used here is 1000 households. |
| **Overall findings** | The transfer increased the consumption of vegetables, fruit and grains; the effect was not driven by the targeting of women as transfer beneficiaries. |
| **Reported outcome areas** | Poverty; Health; Empowerment |
| **Indicators reported** | Log of expenditure. Expenditure on various items (general services, family items, vices, grains, vegetables, fruit, dairy, meat, oils and spices). |

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| **Citation** | Brenes-Camacho G., 2011. Favourable changes in economic well-being and self-rated health among the elderly*. Social Science & Medicine*, 72 issue, pp. 1228-1235 |
| **Name of programme(s) and country/countries** | Non-contribution pensions (Costa Rica) |
| **Programme details**  | The programme is a national non-contributory pension targeted to low socioeconomic status elderly individuals. Pensions are targeted by age and based on a socioeconomic means test. After the presidential inauguration in 2006, the cash transfers were raised from 16,000 colones (approximately US$32) per month to 35,000 colones (approximately US$70) per month. The non-contributory pensions were raised again to 50,000 colones (approximately US$100) after July 2007. In addition to the pensions, beneficiaries were eligible for free access to public health care. |
| **Evaluation methodology**  | The study is a quasi-experimental one, estimating random-effects ordered Probit regressions using a nationally representative longitudinal study of 2827 adults born in 1945 or before. A total of 1556 respondents were used in the analysis. |
| **Overall findings** | People who experienced the full increase in the level of non-contributory pension reported a greater improvement in self-rated health between waves than those who experienced a smaller increase than the rest of the interviewees. Results suggest that increases in income may lead to a greater improvement in self-rated health |
| **Reported outcome areas** | Health |
| **Indicators reported** | Self-reported health (Excellent, Very Good, Good, Fair, Bad) |

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| **Citation** | Buser, T., Oosterbeek, H., Plug, E., Ponce, J. and Rosero, J., 2014. The impact of positive and negative income changes on the height and weight of young children. Discussion Paper 8130. IZA |
| **Name of programme(s) and country/countries** | Bono Desarollo Humano (Ecuador) |
| **Programme details as reported in the study** | This study evaluates an intervention that began in 1999 which was designed as a CCT but in practice had no punitive consequences for non-compliance with the conditionality. The aim of the intervention is to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. Targeting is intended to reach the poorest 40% of households therefore eligibility is means-tested on household wealth as determined by an index constructed using census data. The initial transfer was 15 US$ per month which increased to 30 US$ in 2007 and then again to 35 US$ in 2009. Transfers are collected by the mother from local bank. |
| **Evaluation methodology**  | A quasi-experimental method using regression discontinuity design (RDD) is used to estimate the treatment effect. The data come from a special purpose cross-sectional survey used for this evaluation which a total sample size of 2645 (for height and weight measurements the sample reduces to 1374). |
| **Overall findings** | Losing the transfer had negative effects on height and weight of infants; starting to receive the transfer had no effect on height and weight of infants (measured after 2 years); Food expenditure declined in those that lost the transfer and this decline was similar to the size of the transfer. |
| **Reported outcome areas** | Poverty; Health; Employment |
| **Indicators reported** | Child height-for-age; weight-for-age; weight-for-height; child is stunted; child is underweight; likelihood of receiving health check; change in household food expenditure; change in non-food expenditure; mother's labour supply (hours worked); mother's score on depression scale. |

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| **Citation** | Bustelo, M., 2011. Three Essays on Investments in Children's Human Capital. Chapter 3: Who Else Benefits from Conditional Cash Transfer Programs? Indirect Effects on Siblings in Nicaragua. PhD Dissertation. University of Illinois, Illinois.  |
| **Name of programme(s) and country/countries** | Red de Proteccion Social (RPS) (Nicaragua) |
| **Programme details as reported in the study** | CCT, operating from 2000-2002, with three specific goals: (1) supplement household income for up to three years to increase expenditures on food, (2) reduce school desertion during the first four years of primary school, and (3) increase the nutritional status of children under age 5. Grants received, conditional on enrolment in school, attending preventive healthcare appointments and attending educational workshops, depended on family composition and amounted to 21% of the total annual household expenditures in beneficiaries’ households in the pre-intervention year. Programme also included a small supply-side transfer for teachers. |
| **Evaluation methodology**  | RCT, using DID to estimate impacts based on a special purpose panel survey. Target sample is of 1,764 households, including 2,867 targeted children, 481 younger non-targeted siblings, and 1,884 older non-targeted siblings.  |
| **Overall findings** | Results show that the RPS programme increases school participation of non-targeted siblings aged 14 to 17. Grade progression also shows significant gains with the programme for both male and female siblings aged 14 to 17, who progressed two years in primary education during the intervention.  |
| **Reported outcome areas** | Education |
| **Indicators reported** | (*Focus on non-targeted siblings*) Enrolment rates, grade progression  |

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| **Citation** | Cameron, L. and Shah, M., 2014. Can Mistargeting Destroy Social Capital and Stimulate Crime? Evidence from a Cash Transfer Program in Indonesia. *Economic Development and Cultural Change*, 62 (2), pp. 381-415 |
| **Name of programme(s) and country/countries** | Bantuan Langsung Tunai (Indonesia) |
| **Programme details as reported in the study** | The Bantuan Langsung Tunai is a UCT which began to be implemented in 2005 with the aim of compensating poor households for a sudden cost in fuel resulting from removal of fuel subsidies. Target beneficiaries are poor households, who are identified as such for having (monthly?) expenditures less than Rp175,000 per capita. Eligibility was supposed to be proxy means-tested on an index of household wealth indicators using data collected by local enumerators. In practice the criteria was very inconsistently enforced. In total the transfer reached 15 million households at the time of the study. The transfer consists of Rp100,000 per month and is distributed once a month for six months in cash which is collected from the post office.  |
| **Evaluation methodology**  | The evaluation relies on a quasi-experimental method consisting of logistic regression with fixed effects. The dataset is composed of nationally representative household-level cross-sectional data from two sources. The total sample size is 262,476 individuals. |
| **Overall findings** | The study focuses on the impact of the transfer on crime. It was found that leakage of the transfer to non-poor (non-eligible) recipients leads to an increase in social unrest and experience of crime. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | A member of the household was a victim of crime (binary). |

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| **Citation** | Canavire Bacarreza, G. and Vásquez-Ruiz, H., 2013. Labour Supply Effects of Conditional Transfers: Analyzing the Dominican Republic.s Solidarity Program. Documentos de Trabajo Economia y Finanzas CIEF. Universidad EAFIT, Medellin, Colombia |
| **Name of programme(s) and country/countries** | Dominican Republic's Solidarity Programme (Dominican Republic) |
| **Programme details**  | The Solidarity programme is a conditional cash transfer which provides cash assistance, subject to beneficiary compliance with certain requirements, and aims to address problems related to poor levels of education, malnutrition and infant mortality. It consists of two main components: a health component and an education component. The health component "Comer es Primero" grants thehousehold $18 U.S. dollars per month to heads of households in extreme and moderate poverty; the money must be used exclusively for the purchase of food. The education component, or School Attendance Incentive (ILAE), is transferred to beneficiary households with children between the ages of six and sixteen who are enrolled in basic education between first and eighth grade. Such transfers can only be used to purchase school supplies, books, uniforms and medicine. The amount transferred depends on the number of eligible children.  |
| **Evaluation methodology**  | The study analyses the impact of the Solidarity programme on labour market outcomes (labour market participation, income and informality). It uses matching techniques (propensity score matching) and data from the Dominican Republic's Evaluation of Social Security Survey 2010 to estimate the differences in average effect on treatment of the treated. |
| **Overall findings** | The results show a negative but very small impact of the different components of the programme on labour market indicators, especially for the components related to children. However, the estimates show some heterogeneity in the effects on the most vulnerable sectors of the population. The reduction in labour supply is more significant for women relative to men and amongindividuals living in rural areas compared with urban areas. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Earnings; participation in the labour market; desire to work |

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| **Citation** | Cluver, L., Boyes, M., Orkin, M., Pantelic, M., Molwena, T. and Sherr, L., 2013. Child-focused state cash transfers and adolescent risk of HIV infection in South Africa: a propensity-score-matched case-control study. *Lancet Global Health*, 1 (6), pp. 362-370 |
| **Name of programme(s) and country/countries** | South Africa Child Support Grant and Foster Grant (South Africa) |
| **Programme details as reported in the study** | This study assesses the impact of an unconditional child grant designed to alleviate child poverty in South Africa. The grants are targeted to households containing children who are orphaned, abandoned, at risk, or neglected. There is also a means test for eligibility based on household income. The grants are given to the primary caregiver of children in the household. At the time of the study the child support grant had reached 11.2 million children and the foster grant, 537,000 children. The child support grant consists of a lump sum of ZAR 280 per month and the foster grant, ZAR 770 per month. The transfers are distributed monthly (the payment mechanism is not specified) until the child is 18 (or 21 if still attending school).  |
| **Evaluation methodology**  | The study uses a quasi-experimental method which consists of logistic regression with propensity score matching of treatment and control groups. The data come from a panel survey intended for the evaluation of this programme. The sample size is 3401 in both waves (of whom 72% received transfer). |
| **Overall findings** | For girls, the transfer was associated with reduced incidence and prevalence of transactional sex and age-disparate sex. No consistent effects were observed for boys. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Transactional sex, age-disparate sex, sex after drinking alcohol or taking drugs, unprotected sex, having multiple partners. |

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| **Citation** | Coffey, D., 2014. Costs and consequences of a cash transfer for hospital births in a rural district of Uttar Pradesh, India. Social Science and Medicine, 114, pp. 89-96 |
| **Name of programme(s) and country/countries** | Janani Suraksha Yojana (India) |
| **Programme details as reported in the study** | This study evaluates the impact of a CCT, which began in 2008, intended to encourage women to give birth in health facilities. The programme targets pregnant women in poor, rural districts who are not intending or able to give birth in a medical facility. Eligibility is determined at the district level, with districts deemed eligible if 'low-performing' in terms of pre-programme health facility delivery rates. The transfer, of 1400 Rupees, is made once on proof of delivery in an accredited health centre and must be collected by the husband in the form of a cheque. |
| **Evaluation methodology**  | This evaluation was qualitative, consisting of 114 semi-structured interviews (with 20 women) and 18 key informant interviews (with 8 informants). |
| **Overall findings** | No effect was found on maternal mortality rates or maternal and infant health in districts implementing the programme. The lack of impact may be because the programme does nothing to restructure the incentives of service providers in a dysfunctional health system. Government workers try to capture rents from the transfer and the standard of care is extremely poor. Families have to scrape together money from relatives in order to be admitted to the hospital since the payment is received afterwards. |
| **Reported outcome areas** | Health |
| **Indicators reported** | N/A |

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| **Citation** | Covarrubias, K., Davis, B. and Winters, P., 2012. From protection to production: Productive impacts of the Malawi Social Cash Transfer scheme. *The Journal of Development Effectiveness*, 4 (1), pp. 50-77 |
| **Name of programme(s) and country/countries** | Social Cash Transfer Scheme (Malawi) |
| **Programme details**  | The intervention is an UCT which started as a pilot in Mchinji district in 2006. It targets households that were both ultra-poor and labour constrained. Programme objectives were to reduce poverty, hunger and starvation, and improve school enrolment and attendance and health and nutrition of children among the poorest 10 percent of households.At the time of writing, the programme reached 28,000 households and was expected to serve 300,000 households with 910,000 children by 2015. Transfer values ranged from US$4 per month for a household with one eligible member to US$13 per month for households with four or more eligible members. The programme also offered a schooling attendance bonus ranging from US$1.30 per month for primary school age children to US$2.60 per month for secondary school age children. Average monthly per-capita income in the initial target district was around US$7.80, meaning the transfers represented a significant increase in regular income for beneficiaries. |
| **Evaluation methodology**  | The study uses a RCT covering a full sample of 751 households. Impacts were estimated using DID and DID combined with PSM. |
| **Overall findings** | Finds that the SCT generates agricultural asset investments, reduces adult participation in low skilled labour, and limits child labouroutside the home while increasing child involvement in household farm activities. The paper dispels the notion that cash support to ultra-poor households in Malawi is charity or welfare, and provides evidence of its economic development impacts. |
| **Reported outcome areas** | Savings, investment and production; Employment; Education |
| **Indicators reported** | Ownership of a range of inputs and livestock, participation in various forms of labour and employment, income from various sources, whether children were pulled from school to work for food/money, attendance at school, days of school missed in previous month |

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| **Citation** | Cruz, M. and Ziegelhofer, Z., 2014. Beyond the income effect: impacts of conditional cash transfer programs on private investments in human capital. Policy Research Working Paper Series, 6867. The World Bank |
| **Name of programme(s) and country/countries** | Bolsa Familia (Brazil) |
| **Programme details as reported in the study** | The intervention evaluated here is a CCT which began in 2003 with the aim of improve school attendance and child nutrition. It targets poor families with children up to the age of 17 and also pregnant women and had 57.5 million individuals including almost 27.8 million children by 2009. Eligible households are identified using a means- test based on household per capita income. The transfer is equivalent to around 9 USD in the first year, rising to $27 by 2007 (it is not clear whether this is the monthly or annual transfer amount). An extra stipend is allocated to extremely poor families (30 USD) and in 2008 an extra $30 adolescent grant is added for 16 and 17 year olds. Payments are deposited monthly in a bank account and withdrawn using a *Bolsa Familia* card. Receipt of the transfer is conditional on meeting a school attendance rate (at least 85% for under 15s or 75% for over 15s) and/ or on health clinic attendance for pregnant women. |
| **Evaluation methodology**  | The study design is quasi-experimental and estimates the treatment effect using a range of different models including OLS regression, instrumental variable analysis (instrument = non-labour income), and RDD. The data come from a national household cross-sectional level survey of 55,976 households. |
| **Overall findings** | In general the transfer achieves a positive impact beyond pure income effect on the outcomes of interest; conditionalities affect spending behaviours; the gender of the recipient makes no difference to how the transfer is spent. The biggest effect is increased food expenditure. |
| **Reported outcome areas** | Education; Health |
| **Indicators reported** | Household expenditure shares on nutrition, education, school materials, healthcare |

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| **Citation** | Dabalen, A., Kilic, T. and Wane, W., 2008. Social Transfers, Labour Supply and Poverty Reduction: The Case of Albania. World Bank Policy Research Working Paper, No. 4783 |
| **Name of programme(s) and country/countries** | Ndihma Ekonomike (Albania) and the Old Age Pension (Albania) |
| **Programme details**  | The Ndihma Ekonomike (NE) was introduced in 1993 and extended to all poor households in 1995 with the objective of lifting poor households out of poverty. It was originally designed to support urban families without income, and rural households with small landholdings. The programme was extended to all poor households in 1995. In 2002, the average NE benefit was 2389 Lek, roughly 50 percent of the poverty line, and 25 percent of the monthly minimum wage. |
| **Evaluation methodology**  | The paper estimates the effects of participation in the Ndihma Ekonomike on objective and subjective measures of household poverty and on labour supply response. It uses the nationally representative Albanian Living Standards Measurement Surveys carried out in 2002 and 2005 and propensity score matching methods. The final sample is a balanced panel of 2,329 individuals of whom 1,734 (74.4 percent) are women. The sample is heavily skewed towards women because households are overwhelmingly headed by males. |
| **Overall findings** | The paper finds that Ndihma Ekonomike households, particularly urban residents, have lower per capita consumption and are more likely to be discontented with their lives, financial situation, and consumption levels than their matched comparators. The paper finds that the negative impact of NE participation on welfare is driven by a negative labour supply response among work-eligible individuals. This negative labour response is larger among women and urban residents. |
| **Reported outcome areas** | Poverty; Employment |
| **Indicators reported** | Objective and subjective poverty measures; individual labour supply; likelihood of labour force participation; likelihood of working on own account, of working on household farm  |

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| **Citation** | Daidone, S., Davis, B., Dewbre, J., González-Flores, M., Handa, S., Seidenfeld, D. and Tembo, G., 2014. Zambia's Child Grant Program: 24-month impact report on productive activities and labour allocation. Food and Agriculture Organisation, Rome. |
| **Name of programme(s) and country/countries** | Child Grant Programme (CGP) (Zambia) |
| **Programme details**  | The programme is an UCT that started in 2010, designed to increase food security and human capital development, with a focus on children under 5. The programme was implemented in three of the poorest districts of the country with the highest rates of mortality, morbidity, stunting and wasting of children under 5 years old. It targeted households with a child under 5 years old that had not participated in a cash transfer programme in the past. The primary recipient of the transfer was the female in the household. The CGP reached 20,000 ultra-poor households across three districts at the time of study. Beneficiary households receive 60 Kwacha (ZMK) a month (equivalent to US$ 12); an amount intended to cover one meal a day for everyone in the household for one month. The amount of the grant was the same regardless of household size. Transfers were made bi-monthly.  |
| **Evaluation methodology**  | The study employs a RCT, using DID or SD with IPW to estimate effects, using the special-purpose survey which covers 2298 households. |
| **Overall findings** | The findings reveal overall positive impacts of the CGP across a broad spectrum of outcome indicators, and suggest that the programme is achieving many of its intended objectives. Specifically, the authors find strong positive impacts on household food consumption and investments in productive activities, including crop and livestock production. The programme is associated with large increases in both the ownership and profitability of non-farm family businesses; reductions in household debt levels; increases in household savings; and concordant shifts in labour supply from agricultural wage labour to better and more desirable forms of employment. The analysis reveals important heterogeneity in programme impacts, with estimated magnitudes varying over household and individual characteristics. |
| **Reported outcome areas** | Savings, investment and production; Poverty; Employment |
| **Indicators reported** | Expenditure on and ownership of a range of agricultural inputs, amount of land farmed, production and value of range of crops produced, market position of household, ownership of livestock owned, expenditure on livestock inputs, ownership and value of assets, savings, repayment of loans, purchases on credit, receipt of loans, food consumption/non-food consumption/total consumption, operation of and revenues from non-farm enterprise, provision of labour in various sources of employment (incl. child labour), earnings from various sources. |

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| **Citation** | Daidone, S., Davis, B., Dewbre, J. and Covarrubias, K., 2014. Lesotho's Child Grant programme: 24-month impact report on productive activities and labour allocation. Lesotho country case study report. Food and Agricultural Organisation, Rome. |
| **Name of programme(s) and country/countries** | Child Grant Programme (Lesotho) |
| **Programme details**  | The CGP is an UCT programme starting in 2009. Transfers are aimed towards the poorest households in the country and aim to supplement household income so as to promote greater levels of education, health and nutrition – especially for children. The two eligibility criteria for the CGP are that a given household must a) have at least one resident child aged 0-17 and; b) be among the poorest in the community, based on use of a PMT and community validation. The programme started with 1,250 households and expanded to five districts and approximately 20,000 households by end of 2013. In addition, and independently, village heads identify the households they deem to be worst-off in their respective communities. Originally the transfer was LSL 120 (US$ 12) per month irrespective of the number of children. In April 2013 the amount was indexed to the number of resident children as follows: 1-2 children: LSL 360 (US$ 36); 3-4 children: LSL 600 (US$ 60); 5+ children: LSL 750 (US$ 75). Transfers are paid quarterly. While the transfer is unconditional the CGP features strong messaging conveying the programmes intended purpose and desired outcomes. To the extent possible beneficiaries are urged to spend the cash for the betterment of their children. |
| **Evaluation methodology**  | The study evaluates the programme using a RCT, with impacts estimated using either DID or SD with Inverse Probability Weighting. The full sample includes 2,150 households (10,456 individuals). |
| **Overall findings** | The findings reveal mixed impacts of the CGP across a broad spectrum of livelihood indicators. While no effects have been detected on agricultural assets, such as tools and livestock, the programme is associated with higher use of inputs, especially pesticides that prevented major crop losses after a severe armyworm outbreak. The CGP contributed to increase production, both for the home garden and for main staple crops, including maize. The programme did not impact labour participation, apart from reducing the intensity of adult participation in paid occasional and irregular work. Finally, the CGP had a significant impact in strengthening the informal risk-sharing arrangements in the community, particularly around food. |
| **Reported outcome areas** | Savings, investment and production; Employment |
| **Indicators reported** | Use or purchase of a range of agricultural inputs, whether household produces a range of crops, amounts harvested, market position with respect to agricultural production, livestock ownership, expenditure on livestock inputs, ownership of an off-farm business, savings or borrowing from a range of sources, receipt or offering of private transfers, labour and employment. |

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| **Citation** | Dammert, A C, 2008. Heterogeneous Impacts of Conditional Cash Transfers: Evidence from Nicaragua. Working paper. IZA |
| **Name of programme(s) and country/countries** | Atención a Crisis (Nicaragua) |
| **Programme details as reported in the study** | This study evaluates the impact of Atención a Crisis, a conditional cash transfer with the objective to improve health outcomes for young children in poor families. It targets children in poor families with geographic targeting of impoverished communities and household eligibility determined with an expenditure means test. It covers 3,000 households. The basic transfer is paid bi-monthly, conditional on health check-ups (not enforced) and households with children aged 7-15 can also receive the school attendance transfer, conditional on school enrolment and regular attendance (enforced). The basic transfer is on average 13% of annual per capita household expenditure ($224); the school attendance transfer is $112, with an additional annual school supplies lump sum ($21). Beneficiaries are also encouraged to attend information sessions on diet, health and education.  |
| **Evaluation methodology**  | This study employs a quasi-experimental research design, using the special purpose panel survey with 1,359 households over three rounds. The quantiles of treatment effect methodology is used to measure impact. |
| **Overall findings** | The author finds heterogeneity in the impacts on total and food expenditure: households at the lower end of the expenditure distribution experienced a smaller increase in expenditures. The author also finds that boys experienced a larger positive impact of the programme participation on schooling and a negative impact on the probability of engaging in labour activities and hours worked. |
| **Reported outcome areas** | Poverty; Education; Employment |
| **Indicators reported** | Expenditure; Food expenditure; school enrolment; engaging in labour; hours of employment |

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| **Citation** | Davis, B., Handa, S., Ruiz-Arranz, M., Stampini, M., and Winters, P., 2002. Conditionality and the Impact of Programme Design on Household welfare: Comparing two diverse cash transfer programmes in rural Mexico. Working Paper 02-10. Agricultural and Development Economics Division of the Food and Agriculture Organization of the United Nations (FAO-ESA) |
| **Name of programme(s) and country/countries** | PROGRESA/ PROCAMPO (Mexico) |
| **Programme details as reported in the study** | This study evaluates and compares the impact of two interventions: Procampo and Progresa. Progresa Targets poor households within poor communities with transfers which are given to the mother of the family, a strategy built on the assumption that women have expenditure preferences that are most conducive to improving the children’s education and nutrition. At the time of the study the transfer has reached around 2.6 million households. Eligibility is determined first at the community level (poor communities) and at the household level by a proxy means test (on what indicators it is not clear). On average, the bimonthly payments to households are equivalent to 29% of average per capita household income. Continued receipt of transfers is conditional on school attendance and health clinic visits.Procampo Began in 1994 with the aim of alleviating poverty and food insecurity and promoting rural development, specifically to off-set the negative effects of the NAFTA on farmers. Eligibility is determined by the total number of hectares of nine key crops on a farmer’s land. Almost 3 million farmers receive the transfer at the time of the study and the transfer is very large, equivalent to around US$329 per recipient and US$68 per hectare (presumably per year although this is not stated). Payments are made twice a year on the condition that the land continue to be used to grow the specified crops. |
| **Evaluation methodology**  | The study uses a quasi-experimental method consisting of OLS linear and logistic regression with baseline levels characteristics as controls on a pooled panel dataset. The sample size is up to 22,000 households depending on model. |
| **Overall findings** | The programmes do not differ much in their effect on total and food consumption expenditure but PROGRESA leads to greater schooling expenditure and school attendance as well as increased health outcomes. Conditionality had little effect in terms of short-term welfare outcomes, but influences both longer-term (human capital) and medium term (productive) investment. |
| **Reported outcome areas** | Poverty; Education; Health; Savings, investment and production |
| **Indicators reported** | Total per capita consumption expenditure (estimated from income data) and expenditure on food, school expenses, health and hygiene, children's clothes, adult clothes, energy and other goods; total investment, agricultural investment and business investment (meaning expenditure on these activities); child school enrolment (binary); use of medical services (binary). |

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| **Citation** | de Brauw, A. and Peterman A., 2011. Can conditional cash transfers improve maternal health and birth outcomes? Evidence from El Salvador's Comunidades Solidarias Rurales. Discussion Paper 1080. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | Comunidades Solidarias Rurales (El Salvador) |
| **Programme details**  | The programme is a CCT implemented from 2005. Households were eligible for the health transfer if either a member was pregnant at the time of the census or a child residing in the household was five years of age or younger. To be eligible for education transfers, households were required to have children aged 6 - 15 residing in the household who had not completed primary school. The programme was primarily geographically targeted, being initially rolled out in the poorest 15 municipalities in the country. Beneficiaries received US$15 per month where eligible for the health transfer, and $20 per month if eligible for both the health and education transfers. Transfers were conditional on growth-monitoring visits every two months and vaccinations for children, and prenatal monitoring for pregnant women. In addition to transfers, beneficiaries could attend monthly information sessions (capacitaciónes) at local village centres on topics such as education, nutrition, health, and women’s or children’s rights. The government also implemented a series of supply-side improvements in the water and sanitation infrastructure of the communities as well as making health systems investments. Improvements in health systems took place in almost all municipalities participating in the programme. |
| **Evaluation methodology**  | The study was quasi-experimental in nature, estimating effects through DID using a RDD. The study drew on a special purpose longitudinal survey covering 3000 households. |
| **Overall findings** | Robust impacts were found on outcomes at time of birth (skilled attendance and birth in facility), while no impacts are found on health seeking behaviour pre- and post-birth (prenatal and postnatal care). |
| **Reported outcome areas** | Health |
| **Indicators reported** | Adequate prenatal care; skilled attendance at birth; birth in a health facility; postnatal check-up in first two weeks after birth |

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| **Citation** | de Brauw, A., and Gilligan, D., 2011. Using the regression discontinuity design with implicit partitions: The impacts of Comunidades Solidarias Rurales on schooling in El Salvador. Discussion Paper 01116. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | Comunidades Solidarias Rurales (El Salvador) |
| **Programme details as reported in the study** | CCT, operating since 2005, targeted both categorically and geographically. Households with children 5 years of age and under are targeted for a health transfer meant to improve health and nutrition among children in that age bracket, while households with children between the ages of 6 and 15 who had not completed primary school are targeted for an education transfer. Transfer size is US$15 per month and receipt is conditional on all children aged 6-15 being enrolled in school and attending more than 80 percent of the time each month. |
| **Evaluation methodology**  | Application of RDD and partitioned cluster analysis, to identify similar groups within data, classifying individual observations into similar clusters of observations. The evaluation uses children in *municipios* entering in 2006 as the treatment group and children entering in 2007 as the control group. Data sources include the evaluation of CSR surveys and the sixth National Census of El Salvador (Censo Nacional de Poblacion y Vivienda de 2007). The entire dataset includes 2,775 rural households. |
| **Overall findings** | The programme increased both parvularia and primary school enrollment among children aged 6 to 12 years old. Among children of primary school age, enrollment gains were largest among younger children and older girls. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates (including pre-school) |

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| **Citation** | de Brauw, A., Gilligan, D. O., Hoddinott, J. and Roy, S., 2014. The Impact of Bolsa Familia on Women's Decision-Making Power. *World Development*, 59 pp. 487-504 |
| **Name of programme(s) and country/countries** | Bolsa Familia (Brazil) |
| **Programme details as reported in the study** | Bolsa Familia is a CCT which began in 2003 and by 2012 had reached over 12 million households. There are two parts to the transfer: and UCT to poor households below a certain income threshold and a CCT dependant on number of children aged 0–15 years, for up to three children, or pregnant women. Potential recipients must register to be considered for the transfer therefore there is an element of self-selection into the programme. Within a municipality, the probability of selection into the programme is dependent on the number of applicants: if oversubscribed then eligibility is determined by a means test of income and number of children. This study takes advantage of the self-selection element of the targeting process. Continued receipt of the CCT element is conditional on school attendance (85% for under 15s, 75% for over 15s) or health clinic attendance for pregnant women. If children identified as at risk of child labour (according to Programme to Eradicate Child Labor (PETI)) they must attend special service provided by PETI with at least 85% attendance. The transfer is equivalent to around 9 USD in the first year, rising to $27 by 2007 (it is not clear whether this is the monthly or annual transfer amount). An extra stipend is allocated to extremely poor families (30 USD) and in 2008 an extra $30 adolescent grant is added for 16 and 17 year olds. Payments are deposited monthly in a bank account and withdrawn using a *Bolsa Familia* card. |
| **Evaluation methodology**  | The evaluation method is quasi-experimental, since the treatment was not randomly allocated. However, by using propensity score matching the authors are able to rely only on single-difference estimates of the treatment effect. The data come from a special purpose panel survey and the sample size ranges roughly between 2000 and 3000 depending on the model. |
| **Overall findings** | The transfer improved women's decision-making power over contraception. The effect is entirely driven by urban households, where the transfer significantly increased women's decision-making power over children's school attendance, health expenses, household durable goods purchase, and contraception. In rural households there was no increase but a possible reduction in decision-making power. |
| **Reported outcome areas** | Health; Empowerment; Savings, investment and production |
| **Indicators reported** | Woman is sole decision-maker on: clothes for self; clothes for children; school attendance; children's health expenses; durable goods; own labour supply; contraception |

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| **Citation** | de Brauw, A. and Hoddinott, J., 2011. Must Conditional Cash Transfer Programs Be Conditioned to Be Effective? The Impact of Conditioning Transfers on School Enrollment in Mexico. *Journal of Development Economics*. 96 (2), pp. 359-70 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | Progresa is a CCT which began in 1997 intended to address the immediate needs of extreme poverty and break its intergenerational transmission. At the time of the study it had reached 2.6 million families. The transfer has two parts – health and education – which typically provide approximately 20 to 30 percent of household income in beneficiary households. Payment is made every two months and is paid in cash by programme officials at a central location. The education component analysed in this study is conditional on school attendance (85%). This study exploits an error whereby some households were not issued forms to record attendance making their education transfer essentially unconditional. |
| **Evaluation methodology**  | The method of the study is quasi-experimental and uses a probit regressin with propensity score matching to estimate the treatment effect. Administrative data and special purpose cross-sectional survey from official programme evaluation were use in the evaluation. The sample contains between 700 and 5000 households depending on model. |
| **Overall findings** | Where the transfer was de facto unconditional, the likelihood of transitioning from primary to secondary school (as opposed to dropping out) was lower, implying that conditionality is effective. Enrolment rates were lower in general among 'UCT' recipients. Parental education level also played a significant role. |
| **Reported outcome areas** | Education |
| **Indicators reported** | School enrolment (binary) |

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| **Citation** | de Groot, R., Handa S., Park, M., Osei Darko, R., Osei-Akoto I., Bhalla, G., Ragno, L.P. 2015. *Heterogeneous Impacts of an Unconditional Cash Transfer Programme on Schooling: Evidence from the Ghana LEAP Programme*. Innocenti Working Paper. Office of Research, UNICEF. Florence. |
| **Name of programme(s) and country/countries** | Livelihood Empowerment Against Poverty (LEAP) (Ghana) |
| **Programme details as reported in the study** | LEAP is Ghana’s flagship social protection programme that started in 2008 and reached more than 116,000 extremely poor households by October 2015. The programme aims to alleviate short-term poverty and to improve human capital development by providing regular cash transfers, complementary National Health Insurance (NHIS) and encouraging school enrolment. LEAP targets extremely poor households that contain either an orphan or vulnerable child (OVC), elderly poor, or a person with extreme disability unable to work. At the time of the study, households received a bimonthly transfer of Ghanaian cedi (GH¢) 16 - 30 (approximately US$ 11 – 21), depending on the number of eligible household members. The transfer size is low compared to similar cash transfer programmes, representing just over 11 per cent of household consumption at baseline and 7 per cent of household consumption by 2012. Due to operational delays, Beneficiaries also only received 20 months of payments during the study period, which were distributed irregularly without following the bimonthly payment pattern. Transfers for the elderly poor and with disabilities are unconditional, but transfers to households with OVCs are conditional on child enrolment and attendance, having a NHIS card, registering new born babies, adhering to an immunisation programme and ensuring that no child is trafficked or engaged in any activities constituting the worst forms of child labour. In practice, household compliance with conditions is not verified. |
| **Evaluation methodology**  | The paper uses a quasi-experimental evaluation to estimate the impact of LEAP on schooling outcomes. It uses a PSM approach to create a comparison group and a longitudinal dataset through which to estimate DID results. The sample includes a total of 1504 households that were interviewed in both survey rounds. |
| **Overall findings** | The results show that Ghana’s LEAP programme had strong impacts on children’s schooling, in particular on certain subgroups. Among older (secondary-age) children where out-of-pocket costs are highest, the programme increased enrolment by 8 percentage points, with the largest impacts on boys. In contrast, among younger children where enrolment rates are already high, programme impacts are on the intensive margin, increasing full attendance by 11 percentage points, again with slightly stronger effects for boys. A slightly negative impact on enrolment was found among younger boys, driven by the combination of catch-up in the comparison group and a ceiling effect in the treatment group where the baseline enrolment rate was already 97 per cent. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment, missing school, cognitive ability, schooling expenditures |

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| **Citation** | De Holanda Barbosa, A. L. N. and Leite Corseuil, C. H., 2014. Conditional cash transfer and informality in Brazil. *IZA Journal of Labour and Development*, 3:37 |
| **Name of programme(s) and country/countries** | Bolsa Familia (Brazil) |
| **Programme details**  | The Bolsa Familia is a national conditional cash transfer programme which aims to improve the welfare of poor families. In 2013 it covered 13 million households. Its targeting is based on self-declared income to capture socioeconomic status and family composition.  |
| **Evaluation methodology**  | The study analyses the impact of the Bolsa Familia on the allocation of labour inputs regarding formal and informal activities. It relies on a discontinuity in the programme eligibility rule regarding children’s age to attain the identification of a LATE parameter. It uses Brazil’s PNAD nationally representative household survey.  |
| **Overall findings** | Results suggest that the cash transfer does not affect the occupational choice of Brazilian adults neither among formal and informal jobs nor the allocation of hours across sectors.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Number of hours worked in the informal sector; occupational choice of household head |

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| **Citation** | de Janvry, A., Finan, F., Sadoulet, E., Vakis, R., 2006. Can conditional cash transfer programs serve as safety nets in keeping children at school and from working when exposed to shocks? *Journal of Development Economics, 79* (2), pp. 349-373 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | Progresa was introduced in 1997 offering cash transfers to poor mothers in marginal rural communities, conditional on their children using health facilities on a regular basis and attending school between third grade of primary and third grade of secondary. The programme was renamed Oportunidades in 2000, and expanded to sixth grade of secondary school and to semi-urban areas. In 2004, it serviced 5 million families. The payment schedule is tailored to grade and gender, with primary school children receiving, in 1998, from $70/year in 3rd grade to $135 in 6th grade, and secondary school children receiving from $200/year for boys in first grade and $210 for girls, to $220 for boys in third grade and $255 for girls. |
| **Evaluation methodology**  | RCT, estimating impacts using a linear probability model with fixed effects. Data source was Progresa’s special purpose panel survey, and specifically a sub-sample of 52,719 poor children that were 5–17 years old in November 1997. |
| **Overall findings** | Considering shocks one at a time, we see that an unemployment or illness shock for the household head reduces the child’s probability of enrolment by an average 1.7 percentage points, but that Progresa largely (unemployment) or fully (illness) mitigates these negative effects. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrolment rates, employment rates (*in response to specific shocks*) |

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| **Citation** | de Janvry, A., Vakis, R. Sadoulet, E. and Finan, F., 2004. Can Conditional Cash Transfer Programs Improve Social Risk Management? Lessons for Education and Child Labour Outcomes. World Bank SP Discussion Paper, N. 0420 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA is a conditional cash transfer programme, first implemented in 1997, that in 2003, reached 4 million families. The transfer payment schedule is tailored to grade and gender, with primary schoolers receiving from $70/year in 3rd grade to $135 in 6th grade, and secondary schoolers receiving from $200/year for boys in first grade and $210 for girls to $220 for boys in third grade and $255 for girls. The transfers are paid to poor mothers in marginal rural communities, conditional on their children using health facilities on a regular basis and attending school between third grade of primary and third grade of secondary. Children cannot miss more than three days of school per month without losing the transfer, and will not receive the transfer if they have not visited a health centre. |
| **Evaluation methodology**  | The paper explores the role of PROGRESA in serving as a risk management instrument for the poor. It focuses on the school and labour choices of children 8 to 16 years old over the period 1997-2000. Identification of the programme’s impact is based on a difference-in-difference model using panel data for PROGRESA villages with random treatments and controls.  |
| **Overall findings** | The study suggests that PROGRESA transfers and the conditionality on school attendance serve to deter using child labour as a risk coping strategy. Impact on school enrolment is higher for girls than for boys. Effects of the programme for secondary school and primary school children: overall, the impacts are positive but smaller; an indication that the decision to enrol into secondary school is the biggest hurdle and the grade at which PROGRESA has its greatest effect. The most dramatic impact on child labour occurs among children 12-14 years old in 1997. PROGRESA reduces the probability that boys work by 7 percentage points on average and has a larger absolute impact on boys than on girls, which is not surprising given that girls work less.  |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | School enrolment; child worked in previous week |

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| **Citation** | De Silva, I. and Sumarto, S., 2015. How do Educational Transfers Affect Child Labour Supply and Expenditures? Evidence from Indonesia of Impact and Flypaper Effects. *Oxford Development Studies*, 43 (4) |
| **Name of programme(s) and country/countries** | Bantuan Siswa Miskin (BSM; cash transfer for poor students) (Indonesia) |
| **Programme details**  | The BSM CCT was introduced in 2008 and covers all education levels from elementary school to university. It provides cash transfers to cover education-related costs (such as books, school transportation and uniforms) for students from poor households who are selected by school administrators. It is fully financed by the central government and does not require any contributions or cost-sharing on the part of students as beneficiaries, nor from local governments or the schools themselves. The key objectives of the programme are to remove barriers preventing marginalised students from participating in education, to assist poor students in gaining appropriate access to education services, to prevent school drop-outs, to help in meeting the educational needs of at-risk children, as well as to support the Government’s Nine Years Compulsory Education programme. In 2009, the BSM programme covered around 3.6 million students. Coverage increased to eight million students in 2013 across the country, ranging from primary school to tertiary education level. In 2009, the unit cost per scholarship ranged between US$30 to US$60 depending on the level and type of school the student was attending. Poor students enrolled in madrasah (Islamic) schools received a higher amount than those in regular schools. Disbursement of the transfer was done at the beginning of the academic year (usually in the months of July or August). |
| **Evaluation methodology**  | The study uses a large nationally representative household survey – the Indonesia Social and Economic Survey (Susenas) from July 2009 - to analyse how the receipt of educational transfers, scholarships and related assistance programmes affects the labour supply of children and the marginal spending behaviour of households on children’s educational goods. It uses a quasi-experimental approach relying on a propensity score methodology to estimate the impact of transfers on child labour supply and educational expenditure.  |
| **Overall findings** | The study finds strong effects on the reduction in the labour supply of children at the bottom of the welfare distribution due to Indonesia’s education cash transfers and related assistance. Households receiving educational transfers, scholarships and assistance were also found to spend more at the margin on voluntary educational goods. At the mean, households receiving educational transfers, scholarships and assistance spend 10–14% more on their children’s voluntary educational goods at the margin, than they would have spent without any additional educational support. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Working/attending school (treated as simultaneous decision; analysed using a bivariate probit model)) - child labour supply and school attendance; child education spending |

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| **Citation** | de Walque, D., Dow, W. H. and Nathan, R., 2014. Rewarding safer sex: conditional cash transfers for HIV/STI prevention. World Bank Policy Research Working Paper 7099. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Rewarding Sexually Transmitted Infection Prevention and Control (Tanzania) |
| **Programme details**  | The intervention was a CCT that aimed to reduce risky sexual activity among young people, male and female, who are at high risk of HIV infection. Those eligible were males and females, aged 18-30 (and spouses aged 16 or over, with spousal pairs assigned the same intervention arm) residing in one of 10 selected villages within the Kilombero/Ulanga districts. Three exclusion criteria included: being pregnant at the time of registration, having the intention to permanently migrate out of the study area within the next year, and unwillingness to participate if assigned to the control arm. The study was a small pilot study in 10 villages where individuals were randomly allocated to treatment or control. The intervention group was further split up into those receiving $60 over the course of the study ($20 payments every four months) and the other receiving a lower value payment of up to $30 ($10 payments every four months). Transfers were given every four months over the 12 months of the study. Transfers were conditional on negative results of periodic screenings for sexually transmitted infections. |
| **Evaluation methodology**  | The study was designed as a RCT and effects were estimated using Logistic regression. The total sample size was 2,399 participants. |
| **Overall findings** | Results indicate a significant reduction in sexually transmitted infections in the group that was eligible for the (higher) US$20 payments every four months, but no such reduction was found for the group receiving the (lower) US$10 payments. The effects were stronger among the lower socioeconomic and higher risks groups. A post-intervention follow-up survey conducted one year after the intervention indicated a sustained effect among males, but not among females. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Prevalence of a range of STIs |

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| **Citation** | Del Carpio, X. V. and Macours, K., 2009. Leveling the intra-household playing field: Compensation and specialization in child labor allocation. World Bank Policy Research Working Paper Series, No. 4822. Washington, D.C. |
| **Name of programme(s) and country/countries** | Atención a Crisis (Nicaragua) |
| **Programme details** | The programme was a one-year pilot programme implemented between November 2005 and December 2006, implemented as safety-net in the aftermath of severe drought to reduce the impact of the shock on human and physical capital investments. It was also intended to increase long-run upward mobility and poverty reduction through asset creation and income diversification. The programme was targeted to adult females from within six drought-affected municipalities with high a prevalence of extreme rural poverty based on a national poverty map. 3000 households within six municipalities in the northwest of Nicaragua were selected to participate and randomly allocated either a basic conditional transfer, the same transfer plus a scholarship for an occupational training or the transfer plus a grant for productive investments. The transfers were ‘sizeable’ and paid bi-monthly. For the basic transfer they were conditional on child primary school and health service attendance. For groups receiving productive investment grants they were conditional on developing a business plan. |
| **Evaluation methodology**  | The study employed a RCT design and used household random and fixed-effects regressions to estimate effects. It used a special purpose panel survey with a sample of 4253 households. |
| **Overall findings** | Households that received a cash transfer reduced child labour more for older boys who used to work more, and for boys who were further behind in school. Households that randomly received an additional productive investment grant (targeted to women) showed an increased specialisation of older girls in non-agricultural and domestic work, but no overall increase in girls' child labour.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Number of hours worked per week spent on different activities (e.g. non-agricultural, agriculture and livestock, domestic work, etc.)  |

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| **Citation** | Del Carpio, X. V., 2008. Does Child Labour Always Decrease with Income? An Evaluation in the Context of a Development Program in Nicaragua. World Bank Policy Research Working Paper No. 4694, The World Bank |
| **Name of programme(s) and country/countries** | CCT programme targeted in a shock prone region in the northern-central part of Nicaragua (Nicaragua) [intervention name not provided by the paper] |
| **Programme details**  | The CCT was implemented in a shock prone region in the northern-central part of Nicaragua where beneficiaries were randomly assigned to one of three treatment groups. The selection of beneficiaries relied on a proxy-means approach. The intervention provides income transfers and some in-kind benefits (e.g., training) to poor families in the region to improve their human capital (i.e., education, nutrition, training, health) and physical capital (e.g., inventory for businesses, equipment). The approximate value of the cash transfers is in the range of 25 to 45 percent of household income, depending on which package the household receives. Two-thirds of randomly selected families receive one of two productive options: a training programme or a matching grant for a productive investment such as a small-start-up business. The conditionality of all three interventions requires that the primary female of the household attend group meetings and collect payments while school-age children attend school regularly.  |
| **Evaluation methodology**  | The study analyses the impact of the programme on child labour, measured by the total number of hours worked and on type of labour (physical and non-physical work). It uses a two-round panel (2005 and 2006) data-set from a detailed household survey designed for the programme and Tobit regression analysis. The data contain information for 4,200 households in six municipalities located in the north-central part of Nicaragua. The sample of children included in the study is restricted to kids who are currently 8 through 15 years of age in 2006.  |
| **Overall findings** | The CCT has a decreasing effect on total hours of work for the full sample of children. Disentangling labour into two types – physically demanding labour and non-physical labour – reveals that the programme has opposite effects on each type: it decreases physically demanding labour while increasing participation in non-physical (more intellectually oriented) tasks for children. The study concludes that child labour does not always decrease with income. The relationship is complex and exhibits an inverted-U shape. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Number of hours worked by child; various types of child labour (physical labour, non-physical labour, total labour hours) |

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| **Citation** | Del Carpio, X. V. and Loayza N. V., 2012. The Impact of Wealth on the Amount and Quality of Child Labour. World Bank Policy Research Working Paper No. 5959 |
| **Name of programme(s) and country/countries** | Atencion a Crisis (Nicaragua) |
| **Programme details**  | The CCT consists of three packages of private cash transfers to poor rural households in Nicaragua, conditional on children’s school attendance and health check-ups, over a one year period. It was implemented for one year among poor rural households during 2006 as a pilot to be fully evaluated, thus featuring all the relevant characteristics of an experimental, randomized trial. The objectives of the programme were: in the short-term to help households cope with the adverse effects from the drought, as a safety net mechanism, and, in the longer term, to improve the human capital of beneficiary households. For a subset of beneficiary households the programme was also aimed at improving their asset base through the creation of a new economic activity.  |
| **Evaluation methodology**  | The study analyses the impact of Atencion a Crisis and of its different transfer components on child labour in poor households. Using data collected from a sample of about 3,000 eligible households in the treatment group, and a random sample of about 1,000 eligible households in the communities that were randomly assigned to the control group, the study examines the impact of the transfer on number of hours worked per child in the week previous to the survey and the number of days in which any amount of work was done per child during the 12 months previous to the survey. The regression on child labour hours is estimated using a Tobit procedure. The study also carries out a pre/post treatment evaluation of the differences (difference-in-difference estimation) in child labour between treatment and control groups.  |
| **Overall findings** | Atencion a Crisis affected the volume and quality of child labour, reducing it in the aggregate and steering it towards skill-forming activities. The programme appears to have reduced the use of child labour for household chores and farm work, while increasing it for the non-traditional, skill-forming activities related to commerce and retail. Moreover, the paper finds that the source behind the increase in skill-forming child labour is not the basic transfer component, which provides a transfer for paying for schooling and health services, but it’s the business-grant component, which provides a household grant for the creation of a micro business or a new economic activity.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Various types of child labour, including household chores, farm work, and non-farming activities; number of hours worked per child in the week previous to the survey, number of days in which any amount of work was done per child during the 12 months previous to the survey. |

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| **Citation** | Department of Social Development, South African Social Security Agency and UNICEF, 2011. Child Support Grant Evaluation 2010: Qualitative Research Report. UNICEF South Africa |
| **Name of programme(s) and country/countries** | Child Support Grant (South Africa) |
| **Programme details as reported in the study** | This study evaluates an UCT, intended to improve child health and wellbeing outcomes, which began in 1998. The intervention targets children under 18 in poor households (in its first phase it targeted only children under 7). Eligibility is means-tested on the income of beneficiary (child), applicant (caregiver) and her partner. Eligibility is re-assessed annually. In its first phase the programme offered R100 per child but increased incrementally to R250 at time of study (for up to six children). Transfers are made monthly and are collected by the primary caregiver in person at an office or from a bank, ATM or shop. |
| **Evaluation methodology**  | This evaluation was qualitative, using data from focus group discussions and key informant interviews. |
| **Overall findings** | The diversity of grant collection points means it is becoming easier to obtain the cash. The grant is primarily used as an income top-up. The female caregiver is generally responsible for spending of grant. A potential role is sighted for transfer in reducing school drop-out but there is no conclusive evidence of this. Health care is generally cheap or free so the grant makes little difference except that some used it for private healthcare. There is no evidence that the grant reduced child labour participation. There is some speculation that the grant may reduce risky sex among adolescent girls. |
| **Reported outcome areas** | Poverty; Education; Employment; Health; Empowerment |
| **Indicators reported** | N/A |

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| **Citation** | Djebbari, H ; Smith, J, 2008. Heterogeneous Impacts in PROGRESA*. Journal of Econometrics*, 145 (1-2), pp. 64-80 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | This study considers Progresa, the conditional cash transfer targeted at Mexico’s *rural* poor. In 1999 (its second year) its coverage was 2.6 million families or about 40% of rural households. Targeting has two stages: geographic targeting of remote and poor communities and selection of households within these communities using a poverty index. The transfer consists of two components. A food cash transfer, conditional on visits to the health centre and participation in health talks. An education component for households with school age children with varying transfer levels depending on age and sex of the children, conditional on school attendance. Transfers are paid bi-monthly.  |
| **Evaluation methodology**  | This study employs a quasi-experimental research design and uses OLS linear and logistic regression with fixed effects. The data used is drawn from the special purpose longitudinal survey, covering about 10,188 households. |
| **Overall findings** | The authors find positive impact on consumption for all but a small fraction of beneficiaries. They also highlight systematic variation in impacts: impacts associated with the extensions of eligibility to less poor villages and/or less poor individuals are smaller than those for the population already covered. |
| **Reported outcome areas** | Poverty; empowerment |
| **Indicators reported** | Household expenditure; decision-making power of the female household head |

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| **Citation** | Dubois, P., de Janvry, A., and Sadoulet, E., 2012. Effects on School Enrollment and Performance of a Conditional Cash Transfer Program in Mexico. *Journal of Labor Economics*, 30 (3), pp. 555-589 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | CCT, operating since 1997, aimed at creating incentives to increase the human capital of children of poor rural households, thus attempting to break the intergenerational inheritance of poverty. To do this, the programme provides cash transfers and in-kind benefits to poor households, conditional on the child’s school attendance and on regular visits to health centres. On average, these cash transfers represent 22% of the income of beneficiary families. The programme was covering 2.6 million rural families in extreme poverty in 2000, corresponding to about 40% of all rural families in Mexico. |
| **Evaluation methodology**  | Using the randomised experimental data from PROGRESA, the analysis is based on a dynamic model of education demand incorporating the Progresa grants system. Data sources were: ENCASEH97 (Encuesta de Caracterısticas Socioeconomicas de los Hogares) and ENCEL (Encuesta de Evaluacion) of March 1998 and October 1998. |
| **Overall findings** | We find that Progresa had a positive impact on school continuation at all grade levels, whereas for performance it had a positive impact at the primary school level but a negative effect at the secondary school level. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Performance, school continuation (enrolment)  |

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| **Citation** | Edmonds, E.V, and Schady, N. 2008. Poverty Alleviation and Child Labour. Policy Research Working Paper. World Bank. Washington, D.C. |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (BDH) (Ecuador) – formerly Bono Solidario |
| **Programme details as reported in the study** | UCT with strong social marketing campaign, in place since 1998. While the intent of the programme was to assist poor families during an economic crisis, the programme continued well past the crisis. Means-tested as of 2001, based on the ‘Selben Index’, the BDH transfers $15 per month, slightly less than 1/10 of the monthly income of recipient households. |
| **Evaluation methodology**  | RCT, with impact estimated using an instrumental variable approach. Data from special purpose panel survey, with randomisation at the household level. |
| **Overall findings** | Random assignment of the BDH income is associated with less work for pay, less involvement in the family farm or business, increased schooling, and fewer children working in some way without attending school. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrollment rates, child labour rates |

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| **Citation** | Edmonds, E. V., Mammen, K. and Miller, D. L., 2004. Rearranging the Family? Income Support and Elderly Living Arrangements in a Low-Income Country. Working paper 10306. National Bureau of Economic Research (NBER) |
| **Name of programme(s) and country/countries** | Old age pension (South Africa) |
| **Programme details as reported in the study** | The South African old-age pension is an UCT which was introduced to ensure a minimum income for the elderly. It was originally only accessible to whites but was extended to black and coloured elderly persons following the end of apartheid. The transfer is targeted at women over the age of 60 and men over the age of 65. Eligibility is determined by a means test of household wealth (the mechanism is not specified here). The transfer amount is equivalent to approximately twice the median per capita monthly household income of a black household. Payment is distributed monthly (the mechanism is not specified). |
| **Evaluation methodology**  | The study takes advantage of the age-based eligibility criteria to estimate the treatment effect through a regression discontinuity design. The data are taken from a population and housing census and the sample size in this study is approximately 137,295 individuals. |
| **Overall findings** | In expectation of the transfer, potential beneficiaries alter their household structure: prime-working-age women depart and children and young women join, suggesting that an externality of the pension is that working age women are enabled to take up better livelihood opportunities. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Number of children in household, number of working-age women in house, births in household in past year, household size, lives alone (or with spouse) |

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| **Citation** | Edmonds, E. V. and Schady, N. 2011. Poverty Alleviation and Child Labor. Final version of article accepted in American Economic Journal: Economic Policy. |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | The BDH transfer is $15 per household per month, 7 percent of monthly expenditures for recipient households. The amount does not vary across eligible families. The transfer is paid to mothers, and does not have any conditions attached. |
| **Evaluation methodology**  | The study draws on data from an experimental evaluation in which parishes were first randomly selected and, within them, households were randomly allocated to treatment or control groups. The sample covers 1883 children. The study focuses on intent-to-treat effects given high non-compliance with the experiment. The results are based on an IV approach, instrumenting receipt of transfer with lottery assignment and so they are relevant for children whose likelihood of receiving transfers was affected by the lottery. |
| **Overall findings** | The BDH results in reductions in all kinds of child work, including paid employment. The declines in paid employment are large, and are concentrated among children who were students at the time of random assignment. Lottery-induced take-up of the BDH is associated with a 41 percent decline in paid employment for the full sample, and a 78 percent decline for children who were students at baseline. Child labour declines with the BDH even though the size of the transfer is less than foregone child labour earnings. Fewer than 2 percent of children in paid employment report earning less than $15 a month and median earnings are $80 per child per month. The authors argue that the rigidities in hours in paid employment and in the length of the school day explain why paid employment declines despite the fact that the transfer does not cover foregone earnings. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Child participation in various types of employment (paid and unpaid), hours worked in various economic activities and household chores, monthly earnings and school enrolment |

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| **Citation** | Evans, D. K., Hauslade, S., Kosec, K. and Reese, N., 2014. Community-based conditional cash transfers in Tanzania: results from a randomized trial. World Bank Study. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Tanzania Social Action Fund (Tanzania) |
| **Programme details**  | The programme was a pilot starting in 2010 to test how a CCT programme could be implemented through a social fund using a community-driven development approach. The pilot targeted the poorest and most vulnerable districts based on ranking of indicators (poverty, food insecurity, primary school enrolment, access to safe water, health facilities, roads and AIDS prevalence) and an index of relative poverty and deprivation. The study covered three districts and 80 communities (40 treatment and 40 control). Beneficiaries had to be vulnerable households and were identified using a combination of community management committees and proxy means test as a cross-check. Transfers ranged from a minimum of US$12 to a maximum of US$36 every two months, depending on the number of people in the household. Transfers were made to a community-managed account with community management committees manually distributing to beneficiaries. To receive transfers, children from beneficiary households had to attend school and the elderly and children had to visit health facilities. Failure to comply met with warning, then reduction in transfers and eventual removal. There was a case management system for appeals and complaints such as exclusion errors, payments and quality of services. |
| **Evaluation methodology**  | The study was designed as a RCT, with impacts estimated using a DID approach. The final sample included 3436 households. |
| **Overall findings** | The CCT led to improvements in health, use of health insurance to finance medical care, attendance and completion of primary school (particularly for girls). There was also a significant increase in ownership of livestock and improvement in community trust. There was no difference in expenditure on food or non-food household items and the programme did not significantly affect savings or spending on average. |
| **Reported outcome areas** | Health; Education; Poverty; Employment |
| **Indicators reported** | Health facility visits; visit to hospital or taking medication if sick; use of health insurance if sick; reported sickness in past 4 weeks; duration of sickness; child anthropometrics (height, weight, middle-upper-arm circumference, oedema, height for age, weight for age, weight for length, BMI), educational (child literacy, school attendance, taken exam, completed specific education levels); annual household expenditure on different items; value of food consumption in past week; child household activities; ownership of assets; savings and credit (ownership of bank account, non-bank savings, taken out a loan); community trust; community participation and perceptions of public service quality; value of transfers received from other sources and given out; ownership of land, durable assets and livestock; housing conditions |

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| **Citation** | Feldman, B. S., Zaslavsky, A. M., Ezzati, M., Peterson, K. E. and Mitchell, M., 2009. Contraceptive Use, Birth Spacing, and Autonomy: An Analysis of the Oportunidades Program in Rural Mexico. *Studies in Family Planning*, 40 (1), pp. 51-62 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades began as Progresa in 1997 and is a CCT which aims to alleviate poverty in order to improve health and education outcomes for the next generation. Eligible communities were first selected based on census data, then the eligibility of individual households was determined based on the same census data. Seventy-eight percent of households in treatment areas were eligible and of these almost all enrolled (there was an element of self-selection). The transfer amount is roughly equivalent to 20% of a household’s pre-programme expenditures. Continued receipt of the transfer is conditional on school enrolment for children aged 8–18 and attendance of 85%; health check-ups for all family members dependent on age group; attendance of primary beneficiary at public health seminars; pregnant women attending five antenatal visits and both they and their children younger than two years of age taking nutritional supplements; post-partum visits to health centre and check-ups for new-borns. The frequency and method of payment are not specified. |
| **Evaluation methodology**  | The study uses a quasi-experimental method to estimate the treatment effect. Panel data from the evaluation survey of the programme are pooled and logistic regression and proportional hazards survival models are used to estimate the overall impact and the effect of the programme on women with different fertility patterns. The sample is between 8000 and 1700 individuals depending on the model. |
| **Overall findings** | Beneficiaries were more likely to use modern contraceptives in the short-run, although the difference disappeared over time. Birth spacing was very similar between treatment and control groups. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Log odds of using modern contraception; likelihood of giving birth during the programme period |

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| **Citation** | Fernald, L. C. H., Gertler P. J. and Hou, X. H., 2008. Cash component of conditional cash transfer program is associated with higher body mass index and blood pressure in adults. *Journal of Nutrition*, 138, pp. 2250-2257 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are pre-determined according to their share of poor, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount ranges from roughly 100 pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). Payments are made on a bi-monthly basis. The transfer is conditional on school attendance and bi-annual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed.  |
| **Evaluation methodology**  | The study relies on a quasi-experimental design which includes the use of OLS linear and logistic regression and instrumental variable analysis. The data come from a special purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The total sample size is 3688 (2039 in early intervention group, 1649 in later intervention/control group). |
| **Overall findings** | Increasing the cumulative cash transfer to the household was associated with higher BMI, the likelihood of being overweight or obese and the likelihood of hypertension. Results could be explained by leakage of fortified food supplements intended for pregnant women to other household members. |
| **Reported outcome areas** | Health |
| **Indicators reported** | BMI; overweight (binary); obesity grade; diastolic blood pressure; systolic blood pressure; hypertension; self-reported health (self-reported distance a person can walk without tiring). |

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| **Citation** | Fernald, L. C. H., Gertler P. J. and Neufeld, L. M., 2008. Role of cash in conditional cash transfer programmes for child health, growth, and development: an analysis of Mexico's Oportunidades. *Lancet*, 374 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are pre-determined according to their share of poor, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount ranges from roughly 100 pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). At the time of the study, 4 million households had partaken in the programme. Re-targeting happens every three years. ). Payments are made on a bi-monthly basis. The transfer is conditional on school attendance and bi-annual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. There are special complementary programmes for children, adolescents and pregnant, lactating or post-partum women (some of which are also compulsory although this is not specified). |
| **Evaluation methodology**  | The study relies on a quasi-experimental design which includes the use of OLS linear and logistic regression. The data come from a special purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The total sample size is 2449. |
| **Overall findings** | Larger cumulative transfers are associated with significantly better outcomes in child physical, cognitive, and language development. All children had been in programme for their entire lives so this study showed that longer exposure to the programme continued to lead to marginal improvements year on year. |
| **Reported outcome areas** | Health; Education |
| **Indicators reported** | (All indicators are for children) Height-for-age Z score; Stunted; BMI for age percentile; Overweight or obese; Haemoglobin; Sick days in the 4 weeks before the survey; motor skills test; cognitive memory tests; language development. |

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| **Citation** | Fernald, L. C. H., Gertler P. J. and Neufeld, L. M., 2009. 10-year effect of Oportunidades, Mexico's conditional cash transfer programme, on child growth, cognition, language, and behaviour: a longitudinal follow-up study. *Lancet*, 371, pp. 828-838 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are pre-determined according to their share of poor, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount ranges from roughly 100 pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). At the time of the study, 4 million households had partaken in the programme. Re-targeting happens every three years. ). Payments are made on a bi-monthly basis. The transfer is conditional on school attendance and bi-annual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. There are special complementary programmes for children, adolescents and pregnant, lactating or post-partum women (some of which are also compulsory although this is not specified). |
| **Evaluation methodology**  | The study uses a quasi-experimental design that relies on multivariate linear regression. The data come from a special purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The sample size is 2093 (1093 early intervention, 700 late intervention).  |
| **Overall findings** | No statistically significant differences are observed between early and late intervention groups in the outcome variables except with regard to behavioural problems. When interacted with maternal education, a positive treatment effect on height for age is observed for early intervention cases where the mother has low or no education. |
| **Reported outcome areas** | Health; Education |
| **Indicators reported** | (All indicators are for children) Height-for-age Z score; BMI for age score; verbal assessment score; cognitive assessment score; behaviour problems score |

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| **Citation** | Fernald, L. C. H. and Gunnar, M. R., 2009. Poverty-alleviation program participation and salivary cortisol in very low-income children. *Social Science & Medicine*, 68, pp. 2180–2189.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | Oportunidades is a large-scale CCT which began in 1997 and was designed to relieve extreme poverty in Mexico. Unrestricted cash payments – typically worth about 20–30% of household income – were distributed by the programme only if children, pregnant women, lactating women, and other family members complied with a series of requirements, including prenatal care, well baby care and immunization, nutrition monitoring and supplementation, and participation in educational programmes regarding health, hygiene and nutrition. |
| **Evaluation methodology**  | The study employed a quasi-experimental approach, using multi-level regression to estimate impacts on cortisol levels. A health visit was made to random sample within the already randomised sample of treatment and control households. The total sample covered 1197 children. |
| **Overall findings** | There was a large and significant programme effect of lowering cortisol in children of mothers with high depressive symptoms but not in children of mothers with low depressive symptomatology. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Salivary cortisol levels |

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| **Citation** | Fernald, L. C. H. and Hidrobo, M., 2011. Effect of Ecuador's cash transfer program (Bono de Desarrollo Humano) on child development in infants and toddlers: A randomized effectiveness trial. *Social Science & Medicine*, 72, pp. 1437-1446 |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details**  | The programme was an UCT rolled-out using a randomised design from 2004. Mothers of children aged 0-16 years qualified for the programme if they were in the bottom two poverty quintiles according to the Sistema de Selección de Beneficiarios (SELBEN). There was a random community-level assignment to treatment or control groups. In 2006 the transfer was US $15/month (and did not depend on the number of children in the household). This was approximately 6-10% of an average household’s pre-transfer expenditure for households in the bottom two poverty quintiles. Transfers were distributed via private banks. Technically recipients were expected to take children to preventive health check-ups and required a minimum level of attendance at school for school-aged children. The BDH, however, is actually more similar to a UCT due to the lack of verification of compliance with the conditions set out in the program’s mandate.  |
| **Evaluation methodology**  | The study was designed as a RCT and used OLS and Probit estimation to investigate the programmes impacts. A total of 1196 children were covered in the sample. |
| **Overall findings** | Results indicate that in rural areas, being randomized to receive the BDH in very early childhood led to significantly better performance on the number of words a child was saying, and on the probability that the child was combining two or more words. There were no significant effects on language development for children in urban areas and there were no effects on height-for-age z-score or haemoglobin concentration in rural or urban areas. |
| **Reported outcome areas** | Education; Health |
| **Indicators reported** | Child score on Spanish version of the short form of the MacArthur-Bates Communicative Development Inventory (CDI) language test; height-for-age; haemoglobin levels;  |

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| **Citation** | Ferre C. and Sharif, I., 2014. Can conditional cash transfers improve education and nutrition outcomes for poor children in Bangladesh? Evidence from a pilot project. World Bank Policy Research Working Paper 7077. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Shombhob (Bangladesh) |
| **Programme details**  | Shombhob was a pilot CCT which ran from April 2012 to December 2013. It aimed to reduce household poverty levels, to increase school attendance at primary school, and improve nutritional status of children. Eligible households included very poor households with children aged 0 to 36 months or children attending primary school. Targeting was done using a Proxy Means Test. Three types of transfers were set up depending on the household demographic composition. Beneficiary households received: (i) a transfer of BDT 400 (approximately US$ 5) per household if the household members included one or more children aged 0 to 36 months; (ii) BDT 400 per household if eligible families had one or more children going to primary school; and (iii) BDT 800 for those households with children below 36 months of age as well as children going to primary school. These transfers were a flat amount and did not vary with the number of children in either category. Thus the maximum benefit amount a household could receive was BDT 800 per month (about 14 percent of the lower poverty line and 18 percent of the 2010 food poverty line). Transfers were given bi-monthly. An electronic payments system was used, which provided cash cards to beneficiary mothers to make transfers electronically to their accounts with the Post Office. For those with children aged 0-36 months, it required monthly attendance at growth monitoring, and a (non-mandatory) nutrition session for mother/caregiver. For those with children going to primary school, it required regular school attendance (at least 80 percent every month). School attendance was monitored at the school level by Shombhob officers using the attendance sheets supplied by the schools. Transfers were complemented with growth monitoring and nutrition sessions. |
| **Evaluation methodology**  | The study used a quasi-experimental approach employing DID to estimate the impacts of the pilot. A longitudinal survey was used covering 2718 households. |
| **Overall findings** | Given implementation challenges the intervention was not able to improve school attendance. However the analysis shows that the pilot had a significant impact on the incidence of wasting among children who were 10–22 months old when the programme started, reducing the share of children with weight-for-height below two standard deviations from the World Health Organization benchmark by 40 percent. The pilot was also able to improve nutrition knowledge: there was a significant increase in the proportion of beneficiary mothers who knew about the importance of exclusively breastfeeding infants until the age of six months. The results also suggest a significant positive impact on food consumption, especially consumption of food with high protein content. |
| **Reported outcome areas** | Poverty; Education; Health |
| **Indicators reported** | Household consumption; household food consumption; school attendance for primary-school-aged (6-15 years old) beneficiary children; incidence of underweight, wasting and stunting among beneficiary children aged below 3 years old; nutrition-related knowledge and practices in beneficiary households with at least one child aged 0 to 36 months |

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| **Citation** | Ferreira, F.H.G., Filmer, D., Schady, N., 2009. Own and sibling effects of conditional cash transfer programs: theory and evidence from Cambodia. Policy Research Working Paper 5001, Impact Evaluation Series No. 36. The World Bank, Washington D.C. |
| **Name of programme(s) and country/countries** | CESSP Scholarship Programme (CSP) (Cambodia) |
| **Programme details as reported in the study** | ‘Labelled' CCT Scholarship operating in 100 of the approximately 800 middle schools in Cambodia, for a total of 3800 scholarships offered in 100 of 800 schools (selected where poverty rates were highest).Households were targeted using PMT-like scoring and given a modest scholarship worth between 2-3 % of the total expenditures of the average recipient household. Money was handed out by the principal at school and did not include any monitoring of compliance to conditionality. |
| **Evaluation methodology**  | RCT using RDD to estimate impact, based on a special purpose panel survey of 3453 randomly selected applicants and their families in five provinces. |
| **Overall findings** | Scholarship recipients were more than 20 percentage points more likely to be enrolled in school and 10 percentage points less likely to work for pay. However, the school enrolment and work of ineligible siblings was largely unaffected by the program.  |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrollment rates, child labour rates (recipients and siblings) |

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| **Citation** | Ferro, A. R. and Nicollela, A. C., 2007. The impact of conditional cash transfer programmes on household work decisions in Brazil. Unpublished; University of Sao Paulo, Brazil |
| **Name of programme(s) and country/countries** | Brazilian educational CCTs (Brazil) |
| **Programme details**  | The study examines the impact of Brazil’s CCTs with an educational component, that is, conditional on school attendance. These are programmes that target families with children from 6 to 15 years of age. Each family is able to receive grants for up to three children. Eligibility is determined based on household per capita monthly income and families are required to sign-up for programmes. The conditionality requires children attend at least 85% of school days. Beneficiaries are regularly recertified and eligibility verified.  |
| **Evaluation methodology**  | The study uses a nationally representative household survey – the PNAD 2003 – and a quasi-experimental approach to estimate the labour supply (decision to work and number of hours worked) impact of CCTs on both children and their parents. It estimates the impact of CCTs on the decision to work and on number of hours worked. Labour force participation conditional on grants is estimated using a Probit model. For the hours equations, a Heckman selection model is used.  |
| **Overall findings** | The results show that CCTs reduce the probability of work for children but not their time spent in the labour market, and that the programme is more efficient for girls than for boys. Three years after being adopted nationally, the CCTs seem to have the expected depressing effect on child labour. This result was obtained for four groups: 6-10 years girls from both urban and rural areas, 11-15 urban boys and 11-15 rural girls. For the 6-10 age group, CCT programs reduce the probability of work for urban girls by 0.6 percentage points and by 4.0 percentage points for rural girls. The effect is not significant for boys in this age group. For 11-15 year-old rural girls, we find larger effects of CCTs: a decrease of 12.9 percentage points in the probability of working. In urban areas, an additional benefit may reduce the proportion of working boys aged 11 to 15 by 4.8 percentage points. Parents’ labour participation is not affected but their working hours change as a result of CCTs. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Decision to work/labour participation; weekly hours worked (children and their parents)  |

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| **Citation** | Filmer, D., and Schady, N., 2008. Getting Girls into School: Evidence from a Scholarship Program in Cambodia. Policy Research Working Paper 3910. The World Bank, Washington D.C. |
| **Name of programme(s) and country/countries** | Japan Fund for Poverty Reduction (JFPR) scholarship programme (Cambodia) |
| **Programme details as reported in the study** | CCT Scholarship (conditional on enrolment, passing the grade, and less than 10 days absence per year), which started operations in 2004, attempting to increase the fraction of girls who make the transition from primary school to lower secondary school and to encourage girls to complete the lower secondary school cycle. Targeted at poor girls (PMT-like scoring, but loosely applied) who were completing sixth grade (last grade of primary school) within 93 lower secondary schools, and, within each of these schools, approximately 45 girls. Scholarships amounted to $45 each, almost exactly equivalent to average household spending per student in lower secondary school, and were delivered for 3 years of the lower secondary cycle. |
| **Evaluation methodology**  | Quasi-experimental evaluation, using PSM to estimate impact. Two data sources: application forms to the scholarship programme and data on school enrolment and attendance from an unannounced school visit. Full sample 3623 girls; trimmed sample 3065 girls. |
| **Overall findings** | The scholarship programme increased the enrolment and attendance of recipients at programme schools by about 30 percentage points. Larger impacts are found among girls with the lowest socioeconomic status at baseline. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates, attendance rates |

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| **Citation** | Filmer, D. and Schady, N., 2009. Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999, The World Bank. |
| **Name of programme(s) and country/countries** | CESSP Scholarship Programme (Cambodia) |
| **Programme details as reported in the study** | This study is concerned with a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The large transfer is equivalent to US $60 and the small to US$45 per year. Payment is distributed three times per year at a public ceremony. The transfer is conditional on school enrolment and regular attendance.  |
| **Evaluation methodology**  | The impact is estimated using a quasi-experimental method, namely regression discontinuity design (RDD). The data come from a special purpose cross-section survey at baseline, data from unannounced visits to verify attendance, and a follow-up cross-section after 18 months. There are 26537 individuals in the initial baseline and 3500 in follow up. |
| **Overall findings** | Compared to no transfer, receiving any transfer greatly increased the likelihood of the child being present in school on a given day. Little difference in attendance was observed when comparing different transfer levels ($60 or $45) suggesting diminishing returns to increasing transfer level. |
| **Reported outcome areas** | Education |
| **Indicators reported** | School attendance (child's presence at school during unannounced visit). |

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| **Citation** | Filmer, D. and Schady, N., 2011. Does More Cash in Conditional Cash Transfer Programs Always Lead to Larger Impacts on School Attendance? Journal of *Development Economics*, 96, pp. 150-157 |
| **Name of programme(s) and country/countries** | CESSP Scholarship Programme (Cambodia) |
| **Programme details as reported in the study** | This study is concerned with a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The large transfer is equivalent to US $60 and the small to US$45 per year. Payment is distributed three times per year at a public ceremony. The transfer is conditional on school enrolment and regular attendance. |
| **Evaluation methodology**  | The impact is estimated using a quasi-experimental method, namely regression discontinuity design (RDD) in a range of iterations, for example controlling for school fixed effects, and reducing the sample to those only around the cut-off point. The data come from a special purpose cross-section survey at baseline, data from unannounced visits to verify attendance, and a follow-up cross-section after 18 months. There are 26538 individuals in the initial baseline and 3500 in follow up. |
| **Overall findings** | School drop-out was much lower for non-recipients: those receiving the lowest transfer were 23 to 28 percentage points more likely to be in school. Raising the transfer level only achieves a further increase in attendance likelihood of 1 to 2 percentage points. |
| **Reported outcome areas** | Education |
| **Indicators reported** | School attendance (child's presence at school during unannounced visit). |

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| **Citation** | Fitzsimons, E. and Mesnard, A., 2014. Can Conditional Cash Transfers Compensate for a Father’s Absence? *The World Bank Economic Review*, 28 (3), pp. 467–491. |
| **Name of programme(s) and country/countries** | Familias en Accion (Colombia) |
| **Programme details as reported in the study** | CCT which has been in place in several rural areas of Colombia since 2002 and has since expanded to cover urban areas. The programme aims to alleviate poverty by fostering human capital accumulation among the poorest households through conditional subsidies for investments in education, nutrition, and health. |
| **Evaluation methodology**  | RCT, with analysis performed using a fixed-effects linear probability model and addressing non-random attrition. Data from the special purpose panel survey from the programme evaluation (2002, 2003, 2006), including 11,500 households in the full sample (sub-sample includes households with at least one child aged 7–14 years at the baseline and present throughout 3 rounds). |
| **Overall findings** | This paper investigates how the permanent departure of the father from a household affects children's school enrolment and work participation in rural Colombia. The results indicate that the permanent departure of the father decreases children's school enrolment by approximately 5 percentage points and increases child labour by 3 percentage points. This paper explores the rollout of a conditional-cash-transfer programme during the period of study and shows that this programme counteracts these adverse effects.  |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | (*In cases of permanent departure of the father*) Enrolment rates, work participation rates |

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| **Citation** | Galiani, S ; Gertler, P ; Bando, R, 2014. Non-Contributory Pensions. Working paper, IDB. |
| **Name of programme(s) and country/countries** | Programa de Atención a Adultos Mayores en Zonas Rurales (Assistance for Older Rural Adults Program) (Mexico) |
| **Programme details as reported in the study** | This study considers a Mexican non-conditional cash transfer targeted on the basis of categorical criteria (beneficiary has to be at least 70 years of age) and geographical criteria (only elderly in rural communities of up to 20,000 inhabitants are eligible). The programme was introduced in 1997 and has 2.1 million beneficiaries. The bi-monthly transfer is 1000 Pesos ($90). Complementary activities include workshops and social development activities.  |
| **Evaluation methodology**  | This study uses a quasi-experimental research design. The authors use DID with two different comparison groups. The data source is a panel survey collected by National Public Health Institute, covering 3556 individuals. |
| **Overall findings** | Mental health is significantly improved; proportion of treated individuals doing paid work is reduced (and instead do more unpaid work inside the household) ; treated households show higher levels of consumption expenditures |
| **Reported outcome areas** | Empowerment; employment; poverty |
| **Indicators reported** | Geriatric Depression Scale ; proportion in paid work; proportion doing unpaid work in home enterprises; hours worked per week; household consumption; marginal propensity to consume pension |

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| **Citation** | Galiani, S. and McEwan P.J., 2013. The Heterogeneous Impact of Conditional Cash Transfers. *Journal of Public Economics*, 103, Pp.85-96 |
| **Name of programme(s) and country/countries** | Programa de Asignación Familiar (PRAF) (Honduras) |
| **Programme details as reported in the study** | CCT, operating since the early 1990s in its Phase 1, offering an education grant (about US$50 per year) for children between 6 and 12 and a health grant for children under 3 or pregnant mothers (about US $40 per year). During the two years of implementation, transfers were distributed in November 2000, May-June 2001, October 2001, and late 2002. Conditions included enrollment in school (enforced) regularly attending grades 1 to 4 and regularly visiting a health centre (not enforced). Supply side funds to schools were also planned but badly implemented. |
| **Evaluation methodology**  | RCT (randomised by municipality), with impact estimated using a single cross-section with OLS. Data sources include the 2001 Honduran Census, matched to municipal-level treatment data. |
| **Overall findings** | The Honduran CCT increased the enrolment of eligible children by 8 percentage points, a 12% increase over the control group enrolment rate. It also decreased the proportion of children who work outside the home by 3 percentage points (or 30%), and decreased the proportion who work inside the home by 4 percentage points (or 29%). |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrolment rates, work inside and outside home |

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| **Citation** | Gee, K. A., 2010. Reducing Child Labour Through Conditional Cash Transfers: Evidence from Nicaragua’s Red de Protecci*ó*n Social. *Development Policy Review*, 28 (6), pp. 711-732 |
| **Name of programme(s) and country/countries** | Red de Proteccion Social (RPS) (Nicaragua) |
| **Programme details**  | The RPS is a CCT which was first implemented in 2000 as a cluster-randomised experiment that included 42 eligible districts in rural Nicaragua. It is conditional on children’s regular school attendance and health care visits.  |
| **Evaluation methodology**  | The study estimates the causal impact of a CCT offer on both the incidence and duration of child labour. It uses data from the International Food Policy Research Institute (IFPRI) of Nicaragua’s cluster-randomised CCT, RPS, to evaluate whether or not a CCT offer does, in fact, reduce the occurrence and duration of child labour. The study also compares its findings with those on four other CCT programmes carried out across Latin America and discusses how the structure of each programme’s incentives, including differences in targeting, subsidy amounts and educational requirements, might contribute to the variation in their effectiveness in reducing child labour. It uses data from 2000 (baseline), 2001 and 2002.  |
| **Overall findings** | The study finds that the offer of an RPS subsidy causes the estimated probability that a child will engage in work activities to be reduced by approximately 10.6%. The offer of an RPS subsidy reduces the hours that a child will engage in work activities, given that the child is currently working, by 3.7 hours, on average.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | Probability that a child is working; number of hours a child has worked during the immediate past seven days (not including Saturday and Sunday) post-randomisation |

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| **Citation** | Gertler, P.J. and Fernald, L.C., 2004. The Medium Term Impact of Oportunidades on Child Development in Rural Areas.  National Institute of Public Health, Cuernavaca, Mexico |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades, operating since 1997, is a means tested CCT conditional on the household engaging in a set of behaviours designed to improve health and nutrition, including prenatal care, well baby care and immunization, nutrition monitoring and supplementation, preventive checkups, and participation in educational programs regarding health, hygiene and nutrition. An additional cash transfer is given to households with school-aged children if the children are enrolled and attend school. At the time of the paper, the CCT provided benefits to some 4.2 million families. |
| **Evaluation methodology**  | RCT evaluation, estimating impact using PSM. Specifically, to estimate medium-term effects of the CCT, the paper tests the outcomes on three different groups: those who started receiving benefits in 1998 (original treatments), those who started receiving benefits about a year and a half after the first cohort (original controls) and those who never received benefits (new controls). Data sources were Oportunidades’ ENCEL panel surveys (Encuesta de Evaluacion de los Hogares) and the 2000 census to identify new controls with retrospective info. The original ENCEL sample consisted of a panel of approximately 24,000 households in 506 communities. |
| **Overall findings** | Overall, the study finds large and lasting impacts of Oportunidades on motor and behavioural development. Specifically, it finds a 15 percent improvement in motor skills averaged across the eight skills tests in boys and a 10 percent average increase across the eight skills tests in girls and an improvement of about 9 percent in the socio-emotional development of girls and a positive but non-significantly improvement in boys. |
| **Reported outcome areas** | Education |
| **Indicators reported** | (*Medium term impact, 3 to 6 years on the program, in rural areas*) Motor skills, socio-emotional development; cognitive development |

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| **Citation** | Gertler P. J., 2004. Do Conditional Cash Transfers Improve Child Health? Evidence from PROGRESA's Control Randomized Experiment. *The American Economic Review*, 94 (2), pp. 336-341 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | This study concerns a CCT, which began in 1997, intended to address the immediate needs of extreme poverty and break its intergenerational transmission. At the time of the study 2.6 million households were enrolled in the programme. The targeting mechanism is not described in this study although it is clear that randomisation is used. The transfer is typically equivalent to around 20 to 30 percent of household income and is distributed every two months. Receipt is conditional on the immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, the attendance of other family members for annual check-ups, and the attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. |
| **Evaluation methodology**  | A quasi-experimental method is used, which makes use of a longitudinal household survey and OLS linear and logistic regression. The sample sizes are 7703 for the morbidity analysis and around 2000 for the anaemia and weight analysis. |
| **Overall findings** | Children in the treatment group experienced large reduction in illness over time compared to control group. Children born into intervention families were less likely to be ill than those in non-intervention families. Anaemia was also much lower in treatment children. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Child morbidity (mother reports that the child experienced illness in the last 4 weeks; height; stunting; anaemia |

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| **Citation** | Gertler, P J; Martinez, S W; Rubio-Codina, M, 2012. Investing Cash Transfers to Raise Long-Term Living Standards. *American Economic Journal: Applied Economics*, 4 (1), pp. 164-92.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades was established in 1997 with the objective to break the intergenerational transmission of poverty by alleviating current poverty while investing in the human capital of the next generation. In 2010 it had 5.8 million beneficiaries. Targeting involves two stage: targeting of marginalised rural communities and then selection of households within these communities using a proxy means test. Beneficiary households receive transfers for three years, before being recertified. At a minimum they then continue to receive the transfer for six more years (i.e. a programme duration of minimum of 9 years). The cash transfer has two components. The first component is fixed cash transfer of 90 pesos per month, conditional on family members obtaining preventive medical care. The second component – for those households with school age children - comes in the form of education scholarships and is conditional on school attendance and outcomes. The transfer level depends on the age and sex of the child and ranges from 50-225 Pesos. |
| **Evaluation methodology**  | This study utilises a RCT research design and uses DID to estimate effects. It draws on the ENCELURB panel survey with a sample size of 12,302 households (7658 treated, 4,644 control). |
| **Overall findings** | The authors find a range of positive impacts, including increased ownership of productive farm assets; increased agricultural production; a greater likelihood of starting non-agricultural microenterprises as well as significantly higher agricultural income and household expenditure. There is no significant impact on long-term health outcomes. |
| **Reported outcome areas** | Savings, investment and production; Poverty; Health |
| **Indicators reported** | Ownership of productive assets (animals, land); agricultural production; having non-agricultural microenterprise; credit; household consumption; agricultural income; transfers from friends; sick days; inactivity; ability to perform activities |

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| **Citation** | Gilligan, D. O., Margolies, A., Quiñones, E. and Roy, S., 2013. Impact evaluation of cash and food transfers at early childhood development centres in Karamoja, Uganda. Final Impact Report. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | WFP Karamoja cash transfer pilot (Uganda) |
| **Programme details**  | The paper reports on a one year pilot CCT study starting in 2011 which arose out of a desire to understand the relative effect of cash transfers versus food transfers on household and child food security. It also sought to investigate the impact of participation in Early Childhood Development (ECD) centres separately and joint with cash or food transfers on child development and nutrition. The pilot covered 98 villages across three districts. Intended beneficiaries of the intervention included all households with a child aged 3‐5 years who participated in an ECD centre. Each ECD centre was randomly allocated either to act as a control, cash or food transfer group. The monthly transfer per child was 25,500 UGX in total (roughly $10.25 USD), equal to the estimated amount of cash required to purchase a basket similar to the food transfer though regularity of payments varied in practice. Payments were made electronically to parents through a card. In the original design, it was intended that transfers would be conditional on preschool children maintaining 80% attendance rates at the ECD centre, though due to difficulties monitoring attendance rates, the transfers were made conditional only on children being *enrolled* in the ECD centres. |
| **Evaluation methodology**  | The study was a RCT, randomised at the level of the ECD. A total of 2838 households were surveyed at both baseline and follow-up. Analysis of Covariance models were used to estimate the impacts of the intervention. |
| **Overall findings** | The overwhelming conclusion from the evidence is that food transfers affected very few outcome measures whereas cash transfers had broad impacts across a range of outcomes. On topics including household food security, frequency of child food consumption, anaemia prevalence, ECD participation and child cognitive and non-cognitive development, cash transfers consistently caused positive impacts for key outcomes, while food transfers had surprisingly few positive impacts (e.g. on frequency of child consumption of corn soya blend), and appears to have caused a worsening anaemia status in some children. |
| **Reported outcome areas** | Health; Poverty; Education |
| **Indicators reported** | Dietary diversity index; dietary diversity score; food consumption score; number of days child consumed a food group in last 7 days; household daily calorie intake; household monthly food consumption; household value of food consumption; household value of total consumption; anthropometrics (stunted, underweight); child participation in ECD centres; cognitive and non-cognitive development |

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| **Citation** | Gitter, S. R. and Caldes, N., 2010. Crisis, food security, and conditional cash transfers in Nicaragua. Working Paper Series 2010-07. Towson University, Department of Economics. |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details**  | This CCT programme was designed to lift poor households out of poverty and also to mitigate the long term consequences of negative economic shocks by providing a safety net. Poverty-based geographic targeting was employed, after which 21 communities across two departments in the Northwestern part of the country were randomly selected as beneficiaries and 21 selected as control communities. Transfers were given to women in beneficiary households, with the average household receiving C$ 3,885 (US$302), or about 18% of total annual household consumption expenditures. The transfers consisted of two parts: a C$ 2,880 ($224) annual food security transfer and, for households with children aged 7-13 who had not completed the fourth grade, a bi-monthly transfer for school attendance of C$ 1,440 per year and an additional C$275 for school supplies. Transfers were conditional on a number of things, including households attending bimonthly health education workshops, taking children under 5 to health care appointments, ensuring adequate weight gain for children younger than 4 years, having up-to-date vaccinations for all children under 5 years, ensuring school enrolment and 85% attendance rates for those children between 7 and 13 years old that had not completed 4th grade of primary school, and grade progression at the end of school year. Additional complementary activities included the bi-monthly health workshops, child growth monitoring, provision of anti-parasite pills, vitamins and iron supplements and vaccinations for children up to age 5. |
| **Evaluation methodology**  | The study was designed as a cluster RCT, covering a sample of 1045 households. Impacts were measured using DID. |
| **Overall findings** | RPS was able to increase food consumption and variety. Additionally, nutrition education programs provided by RPS appear to have been successful, as household expenditure share on food increased (although not significantly). |
| **Reported outcome areas** | Poverty; Health |
| **Indicators reported** | Total per capita food expenditure; food diversity; food expenditure by food group; percentage of household budget spent on food |

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| **Citation** | Gitter, S. R. and Barham, B.L., 2008. Women's Power, Conditional Cash Transfers, and Schooling in Nicaragua. *World Bank Economic Review*, 22 (2), pp. 271-90 |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details as reported in the study** | The Red de Protección Social transfer is a CCT designed to alleviate poverty following a financial crisis. Starting in 2001 it consists of a basic transfer for poor households and an additional transfer for households with children aged 7-13 who have not completed the fourth grade. Treatment and control areas are selected randomly and there are also household eligibility criteria which are not specified. The transfer consists of a health and nutrition basic transfer plus an education stipend and grant for school supplies if applicable. On average the total transfer is C$3,885 per year or 18 percent of annual household consumption. Payment is made bimonthly. For the health and nutrition basic transfer all recipients had to attend bimonthly health and nutrition lectures and take children under 5 to preventative health care checks. Education grant conditional on enrolment and regular attendance of all eligible children that had not completed the fourth grade. |
| **Evaluation methodology**  | The study uses a quasi-experimental design with difference-in-difference used to estimate the treatment effect. The data come from a special purpose panel survey containing approximately 4500 households. |
| **Overall findings** | The transfer increased school enrolment. When the recipient was female, her education level was positively linked to better education outcomes for boys. There was no such relationship for girls, suggesting the returns for the mother from their daughters' labour are larger. |
| **Reported outcome areas** | Education; Empowerment; Poverty |
| **Indicators reported** | School enrolment; per capita expenditures for food, education, and milk. |

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| **Citation** | Green, E., Blattman, C., Jamison, J. and Annan, J., 2015. Women's entrepreneurship and intimate partner violence: A cluster randomized trial of microenterprise assistance and partner participation in post-conflict Uganda. *Social Science & Medicine*, 133 pp. 177-188.  |
| **Name of programme(s) and country/countries** | Women's Income Generating Support (WINGS) (Uganda) |
| **Programme details**  | The WINGS programme involved four days of business skills training plus a start-up grant of US$150 and follow-up support by trained field staff. The training taught participants how to create a business plan, budget, market goods and services and keep basic financial records. As a variant of the programme, participants were invited to participate with their partners, in which case an additional day of training was given to cover barriers to female entrepreneurship, communication and joint-problem solving.  |
| **Evaluation methodology**  | The study estimates impacts on economic and social outcomes by using two cluster-randomised pragmatic superiority trials. The study estimated effects using OLS regression with a single cross-section, but based on the special purpose survey and randomised allocation. In total there were 1800 participants (896 treatment and 904 delayed entry control households). |
| **Overall findings** | The study investigates in particular the effect of a cash transfer programme on preventing intimate-partner violence. When they included household partners (often husbands) in the beneficiary process they found small, non-significant decreases in abuse and marital control, and large increases in the quality of relationships, but no effects on women's attitudes toward gender norms and a non-statistically significant reduction in autonomy. |
| **Reported outcome areas** | Empowerment; Employment; Savings, investment and production |
| **Indicators reported** | Empowerment (e.g. Partner support index, partner relationship index, physical/emotional abuse in past eight months, marital control in past eight months, perception of women's autonomy/rights, self-reported autonomy/influence in purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours a week, monthly cash earnings, durable assets, non-durable consumption) |

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| **Citation** | Ham A., 2014. The Impact of Conditional Cash Transfers on Educational Inequality of Opportunity. *Latin American Research Review*, 49 (3), pp. 153-175 |
| **Name of programme(s) and country/countries** | PRAF, PROGRESA and RPF (Mexico, Honduras, Nicaragua) |
| **Programme details as reported in the study** | Three CCTs implemented in rural areas, encouraging the accumulation of human capital and relatively short-term (one to three years in their pilot phase). Only RPS provided additional supply-side incentives, since these were not implemented in PRAF and not contemplated during PROGRESA’s initial phase. PRAF and RPS focused on primary school attendance, while PROGRESA included incentives for children in secondary school. |
| **Evaluation methodology**  | RCT, estimating impacts with DID. However, since assignment (and not participation) is random, the estimated parameters actually capture the Intention to Treat (ITT) effect on the population of compliers. The available data for these programs correspond to baseline and follow-up surveys in the targeted communities. Each survey constitutes a representative sample of individuals in the selected villages, except in Mexico, where the information constitutes a census. Once homogenized, the PRAF survey contains data for 3,227 children (from 2000 and 2002). The survey for PROGRESA contains baseline information (1997-1998) for approximately 24,885 young children across three follow-ups six months apart. Finally, the data for Nicaragua's RPS contain a baseline (collected in 2000) and two follow-ups in 2001 and 2002, providing information for 2,038 children. |
| **Overall findings** | The findings indicate that CCT programs seem to differentially favour disadvantaged groups. These results are further reinforced by an observed improvement in the enrolment distribution between groups. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates and attendance rates (by 'opportunity') |

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| **Citation** | Handa, S; Park, M; Osei Darko, R; Osei-Akoto, I; Davis, B; Daidone, S, 2014. Livelihood empowerment against poverty program impact evaluation. Report. Carolina Population Center |
| **Name of programme(s) and country/countries** | Livelihood Empowerment Against Poverty (Ghana) |
| **Programme details as reported in the study** | LEAP is an unconditional cash transfer established in 2008 with the objective to alleviate short term poverty and improve long-term human capital development. It targets poor households, employing categorical targeting criteria: those households with orphan or vulnerable child (OVC), elderly poor, or person with extreme disability unable to work (PWD). In 2014 coverage was 70,000 households. Transfers are bi-monthly and range from 8-15 Ghanaian Cedis, depending on family size. Beneficaries also receive free participation in the NHIS health insurance scheme. |
| **Evaluation methodology**  | This study has a quasi-experimental research design and uses PSM and multivariate analysis to assess impact. The data source is the nationally representative ISSER household survey and a follow-up of sub-sample of 1,613 households.  |
| **Overall findings** | This study assesses the impact of LEAP on a wide range of outcomes and generally has mixed findings. It finds no impact on total consumption, but positive impacts on non-consumption (savings) and some productivity indicators. The authors also find positive impacts on health insurance coverage, but mixed results on morbidity and health care seeking behaviour. Education impacts were positive: the authors show increased primary and secondary school attendance and reduced grade repetition amongst primary and secondary school children. |
| **Reported outcome areas** | Poverty; education; health; savings, investment and production; employment |
| **Indicators reported** | Total expenditure; expenditure for different expenditure groups; school enrolment; grade repetition; school attendance; health insurance coverage; morbidity; health seeking behaviour; happiness; debt repayment; loan holding; credit given to others; gifts received and given; savings; labour supplied and hired; seed expenditure. |

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| **Citation** | Handa, S., Tucker Halpern, C., Pettifor, A. and Thirumurthy, H., 2014. The government of Kenya's cash transfer program reduces the risk of sexual debut among young people age 15-25. *PLoS ONE*, 9 (1), e85473 |
| **Name of programme(s) and country/countries** | Kenya CT-OVC (Kenya) |
| **Programme details as reported in the study** | The Kenya CT-OVC is an unconditional child grant which was introduced in 2007  To provide support for orphaned and vulnerable children. The transfer is targeted to orphans (at least one biological parent deceased) and vulnerable children (either chronically ill or whose main caregiver is chronically ill). The transfer had reached 134,000 households and 280,000 orphaned and vulnerable children by 2012. Eligibility is proxy means-tested using data on wall and floor material, access to potable water, type of lighting fuel and ownership of small assets. Eligible households are selected by a local committee based on this poverty criteria. Households are then enumerated by central body. Child-headed households are prioritised. The transfer is equivalent to US$20 per month which is distributed monthly and collected in cash from the post office. |
| **Evaluation methodology**  | The study uses a quasi-experimental method. The estimation model is a logistic regression controlling for various factors. The data come from a special purpose panel survey used to evaluate the programme and the sample size is 1433 overall and 350 in the sub-sample which was sexually active. |
| **Overall findings** | Participating in the programme reduced the odds of sexual debut by 31 percent. Among those who were sexually active there were no differences between beneficiaries and non-beneficiaries with regard to risky sexual behaviours. Since the transfer goes to the caregiver not the child these impacts are indirect, possibly through prolonged school enrolment. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Ever had sexual intercourse, condom use, ever given or received gifts in exchange for sex, had two or more different partners in the last 12 months, had unprotected sex acts in last three months. |

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| **Citation** | Handa, S., Peterman, A. Davis, B., Stampini, M., 2009. Opening Up Pandora's Box: The Effect of Gender Targeting and Conditionality on Household Spending Behavior in Mexico's Progresa Program. *World Development*, 37 (6), pp. 1129-1142.  |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | Progresa is a CCT which began in 1997 with the aim of developing the human capital of poor, rural households by improving education, health, and nutrition outcomes. By 1999 it had reached 1999 households. The transfer has two components: health and education. Communities were targeted based on a marginality measurement constructed using census data (indicators included share of illiterate adults, access to water and drainage, availability of electricity and population working in the primary sector.) Households in marginal communities were then selected on the basis of a poverty means test. The transfer amount is typically 19.5% of household expenditure. The education component is conditional on school attendance (85%). The food grant component is conditional on regular check-ups and nutritional talks every two months. |
| **Evaluation methodology**  | The study uses a quasi-experimental method in which OLS linear and logistic regression with fixed effects is used to estimate the treatment effect. The data come from a special purpose longitudinal survey (for this programme) containing 10,188 households. |
| **Overall findings** | The transfer led to increase in food expenditure and consumption. It increased women's decision-making power through the ability to spend her own extra cash. However when the transfer increased general income, women's spending patterns did not change, suggesting that cash transfers crowd out intra-household transfers between husband and wife. |
| **Reported outcome areas** | Poverty; Education; Empowerment. |
| **Indicators reported** | Per capita household expenditure; Decision-making power of the female household head; schooling expenditure (and other disaggregated expenditures) |

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| **Citation** | Palermo, T.; Alvia, C.; Davis, B. ; Handa, S.; Hurrel, A.; Hussein, A.; Musemb, D; Ochieng, S.; Pearson, R.; Pellerano, L.; Visra, A.; Ward P., 2012. The impact of the Kenya Cash Transfer Program for Orphans and Vulnerable Children on household spending. *Journal of Development Effectiveness*, 4 (1), pp. 9-37. |
| **Name of programme(s) and country/countries** | Cash Transfer Programme for Orphans and Vulnerable Children (CT-OVC) (Kenya) |
| **Programme details as reported in the study** | This programme considers the OT-OCV programme that was set up in 2007 with the objective to provide regular cash transfers to families living with OVC to encourage fostering and retention of children and to promote their human capital development. It targets those who are ultra-poor and contain an OVC. By 2011, it covered 130,000 households and 260,000 orphans and vulnerable children. The programme uses geographical targeting of districts based on overall poverty levels and prevalence of HIV/AID. Community members then compile a list of potentially eligible households; then a proxy means test is applied by officials. The monthly transfer was Ksh 2000 in 2011/12. |
| **Evaluation methodology**  | This study employs a RCT research design and uses DID to measure impact. The data source is a special purpose panel survey of 2759 households (two thirds of those received the treatment). |
| **Overall findings** | As a result of the programme, participating households had significantly higher expenditure than control households on food, health, and clothing and significantly less spending on alcohol and tobacco. Programme impacts were also seen on spending in four of seven food groups. |
| **Reported outcome areas** | Poverty |
| **Indicators reported** | Expenditure elasticities for different expenditure categories (Engel curves); expenditure levels for food and other expenditure categories |

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| **Citation** | Haushofer, J., Reisingerz, J. and Shapiro, J., 2015. Your Gain Is My Pain: Negative Psychological Externalities of Cash Transfers. Princeton University and Busara Center for Behavioral Economics, New Jersey, USA  |
| **Name of programme(s) and country/countries** | Give Directly cash transfer RCT (Kenya) |
| **Programme details as reported in the study** | UCT pilot, launched in 2011, and designed as an experiment to address several long-standing questions in the economics literature. Targeted to villages with a high proportion of households living in thatched roof homes (rather than metal). Within villages, eligibility was based on living in a house with a thatched roof. Transfer size and frequency were randomly allocated: USD 404 vs. USD 1,520 ($404 represented at least twice the monthly average household income in the area) and one-off vs monthly over 9 months. Transfers were made through mobile money system M-Pesa. |
| **Evaluation methodology**  | RCT, reporting OLS estimates of heterogenous effects for treated households and untreated households, based on data from the programme evaluation’s special purpose panel (control villages only surveyed at endline). |
| **Overall findings** | The study finds that changes in wealth have sizable effects on psychological wellbeing, in particular life satisfaction. Individuals are generally more satisfied with their life when their own wealth increases. They become, however, less satisfied when the average wealth of others in their village increases, and this effect might more than offset the direct impact from changes in their own wealth. However, no additional impact of changes in inequality on life satisfaction above and beyond the impacts of changes in one’s own wealth or the average wealth of the village, while reported changes in satisfaction dissipate quickly over time. |
| **Reported outcome areas** | Health; Poverty; Savings, investment and production; Employment; Empowerment |
| **Indicators reported** | Health (happiness, life satisfaction, depression, stress, cortisol, psychological wellbeing index, medical expenditure past month); Poverty (total food consumption, non-durable expenditure); Education (education expenditure); savings, investment production (value of non-land assets, value of livestock, value of durable goods, value of savings, land owned); employment (wage labour primary income source, own farm primary income source, non-agricultural business primary income source, total monthly revenue/expenses/profit); empowerment (physical violence, sexual violence, emotional violence, justifiability of violence, female empowerment index) |

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| **Citation** | Haushofer J. and Shapiro J, 2013. Household response to income changes: Evidence from an unconditional cash transfer program in Kenya. Publisher not stated. |
| **Name of programme(s) and country/countries** | GiveDirectly experiment (Kenya) |
| **Programme details as reported in the study** | This study assesses the two-year GiveDirectly experiment in Kenya. This programme, an unconditional cash transfer ran from 2011-2013, with the objective to alleviate poverty and test cash transfer design parameters. Targeting involved geographic targeting of area and village; then random selection of beneficiaries and their treatment at the village level amongst those with a thatched roof. The transfer level is $404 to $1,520, depending on treatment. Payment frequency is monthly or lump-sum, depending on treatment. Payments are made for a maximum of 9 months and are paid electronically. |
| **Evaluation methodology**  | Utilising a RCT research design, the authors employ OLS to measure impacts. They use a special purpose panel survey with two rounds and a sample size of 1,008 households (503 treated across 3 treatment arms; 508 control). |
| **Overall findings** | The authors find positive effect on monthly consumption and psychological wellbeing and female empowerment, as well as a reduction of cortisol production (i.e. lower stress). The gender of the recipient doesn't affect outcomes.  |
| **Reported outcome areas** | Poverty; Savings, investment and production; Empowerment; Health |
| **Indicators reported** | Household consumption; Engel curves; expenditure elasticities for different expenditure items; investment in assets; food security; psychological wellbeing (happiness, life-satisfaction, stress, depression); cortisol production; female empowerment |

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| **Citation** | Hidrobo, M., Hoddinott, J., Peterman, A., Margolies, A. and Moreira, V., 2012. Cash, food or vouchers? Evidence from a randomized experiment in northern Ecuador. Discussion Paper 1234. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | WFP Colombian refugee RCT (Colombia) |
| **Programme details**  | This short-term CCT programme ran between April 2011 to September 2011 for urban-based refugees through a WFP initiative to address the food security and nutrition needs of Colombian refugees and to support their integration into Ecuadorian communities. It was implemented in seven urban centres in the provinces of Carchi and Sucumbíos (both border provinces that receive high influxes of Colombian refugees and cross-border traffic). Neighbourhoods within these urban centres were chosen for the intervention by WFP in consultation with the United Nations High Commissioner for Refugees (UNHCR) as areas that had large numbers of Colombian refugees and relatively high levels of poverty. Household targeting was carried out by visiting each household in the selected neighbourhood and administering a one-page questionnaire, used to develop a proxy means test to define programme eligibility. Based on point scores by nationality, all Colombian and mixed-nationality households were enrolled In addition, all households who reported receiving the government’s social safety-net transfer program, the Bono de Desarrollo Humano (BDH), were automatically excluded from eligibility. Transfers were equivalent to US$40 per month per household and transferred monthly onto pre-programmed bank cards. All participants participated in nutrition training, and transfers were conditional on attendance. The programme also involved nutrition sensitization aimed at influencing behaviour change and increasing knowledge of recipient households, especially in regard to dietary diversity. In addition to monthly meetings, posters and flyers on nutrition were developed and posted at distribution sites, including supermarkets, banks, and community centres, to further expose participants to knowledge messaging. |
| **Evaluation methodology**  | The study was a RCT, covering a total of 2122 households. Impacts were estimated using analysis of covariance models. |
| **Overall findings** | Cash transfers significantly improved the quantity and quality of food consumed as measured by the value of per capita food consumption, per capita caloric intake and dietary diversity measures. |
| **Reported outcome areas** | Poverty; Education; Health |
| **Indicators reported** | Value of food consumption; health and education expenditures; non-food expenditures; value of per capita food consumption; per capita caloric intake; per capita caloric intake by food group; household dietary diversity score/index/food consumption score; number of days in last week household consumed (food groups) |

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| **Citation** | Hidrobo, M., Peterman, A. and Heise, L., 2013. The effect of cash, vouchers and food transfers on intimate partner violence: Evidence from a randomised experiment in northern Ecuador. Working paper. International Food Policy Research Institute. |
| **Name of programme(s) and country/countries** | Cash transfer to vulnerable refugees and poor Ecuadorians in urban areas (Ecuador) |
| **Programme details as reported in the study** | This intervention is a short-term UCT, introduced in 2011, to improve the food security of vulnerable refugees and poor Ecuadorians in urban areas and to improve the role of women in household decision-making. The target groups are vulnerable refugees, poor households in refugee areas and women are unofficially targeted to be primary beneficiary. Urban areas were selected on percentage of refugees and poverty level. A census was then taken of the areas and a proxy means-test then used to determine eligibility (based on household demographics, nationality, labour force participation, food security, and asset ownership.) Households were excluded if receiving the *Bono de Desarrollo Humano*. Treatment and control status was then randomised across *barrios*. Treatment consisted of three arms: cash, food voucher, food transfer. Each of the treatments was equivalent to $40 per month per household. Retargeting took place during the six months that the transfers lasted: the wealth threshold was raised to exclude households deemed too well-off. The transfer was paid monthly through a pre-programmed ATM card given to each beneficiary each month allowing money to be withdrawn from certain banks. Receipt was conditional on attending nutrition training (delivered at time of monthly distribution). Nutritional recipes were also distributed throughout the six months. Posters and flyers made available advertising nutrition and sanitation information. |
| **Evaluation methodology**  | This study benefits from the programme having been designed as a RCT. The estimation method is analysis of Covariance (ANCOVA) estimation. The data come from a special purpose panel survey to evaluate the programme. The total sample size is 1231 women in both panel waves. |
| **Overall findings** | The cash transfer significantly decreased controlling behaviour and moderate physical violence by partner. For women with low decision-making power the effect of the transfer is only significant for physical violence. The cash transfer slightly decreased women's sole decision-making over family planning (for some reason this result is not discussed). |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Women make sole or joint decision on: own work, children's education, children's health, own health, food purchases, asset purchases. Domestic abuse by partner (controlling, emotional, physical/ sexual) |

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| **Citation** | Hidrobo, M., Hoddinott, J., Margolies, A., Moreira, V., Peterman, A., 2012. Impact Evaluation of Cash, Food Vouchers, and Food Transfers among Colombian Refugees and Poor Ecuadorians in Carchi and Sucumbíos Final Report. International Food Policy Research Institute. |
| **Name of programme(s) and country/countries** | Cash transfer to vulnerable refugees and poor Ecuadorians in urban areas (Ecuador) |
| **Programme details as reported in the study** | This intervention is a short-term UCT, introduced in 2011, to improve the food security of vulnerable refugees and poor Ecuadorians in urban areas and to improve the role of women in household decision-making. The target groups are vulnerable refugees, poor households in refugee areas and women are unofficially targeted to be primary beneficiary. Urban areas were selected on percentage of refugees and poverty level. A census was then taken of the areas and a proxy means-test then used to determine eligibility (based on household demographics, nationality, labour force participation, food security, and asset ownership.) Households were excluded if receiving the *Bono de Desarrollo Humano*. Treatment and control status was then randomised across *barrios*. Treatment consisted of three arms: cash, food voucher, food transfer. Each of the treatments was equivalent to $40 per month per household. Retargeting took place during the six months that the transfers lasted: the wealth threshold was raised to exclude households deemed too well-off. The transfer was paid monthly through a pre-programmed ATM card given to each beneficiary each month allowing money to be withdrawn from certain banks. Receipt was conditional on attending nutrition training (delivered at time of monthly distribution). Nutritional recipes were also distributed throughout the six months. Posters and flyers made available advertising nutrition and sanitation information.  |
| **Evaluation methodology**  | Due to the randomisation of treatment allocation this study is a RCT. The treatment impact is estimated using analysis of covariance (ANCOVA) estimation. The data are taken from a special purpose panel survey collected to evaluate the programme. The sample contains 3331 households at baseline and 2122 at follow-up (30% were excluded from the programme part way through due to re-targeting). |
| **Overall findings** | The cash transfer increased per capita food consumption but slightly less than the voucher and food basket interventions. The cash transfer increased dietary diversity, decreased feelings of discrimination and increased trust in institutions and people - the impacts are larger for Colombians than Ecuadorians. Anaemia significantly lower in cash beneficiary children compared to control group. Cash transfer led to significant decrease in physical/ sexual violence and controlling behaviour by partner. |
| **Reported outcome areas** | Poverty; Health; Empowerment |
| **Indicators reported** | Log value of per capita food consumption; Log per capita caloric intake; dietary diversity; number of days out of the last 7 that household consumed: cereals, veg, fruit, meat, eggs etc. Log of household expenditure on: personal care, house items, transport, water, entertainment, clothing, education, health, luxuries etc. Trust of individuals and institutions (e.g. would go to police if victim of crime; trust in neighbours and government etc.); experience of discrimination on the basis of race, gender etc; participation in community groups. Anaemia measures for children and adolescents. Women make sole or joint decision on: own work, children's education, children's health, own health, food purchases, asset purchases. Domestic abuse by partner (controlling, emotional, physical/ sexual) |

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| **Citation** | Hidrobo, M., Fernald, L., 2013. Cash Transfers and Domestic Violence. *Journal of Health Economics*, 32, pp. 304-319 |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | The Bono de Desarrollo Humano was introduced in 1999 to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. It is targeted to the poorest 40% of households. Eligibility is means-tested on household wealth as determined by an index constructed using census data. Treatment was allocated randomly to half of eligible households. The transfer value was initially 15 US$ per month, increasing to 30 US$ in 2007, then to 35 US$ in 2009. In total it is equivalent to around 9% of household expenditure. Cash is collected from the local bank every month. Despite being designed as a CCT, in practice there are no punitive consequences for non-compliance with the conditionality. In the study sample, 27% of respondents believed that school attendance was a condition of receipt. |
| **Evaluation methodology**  | Treatment was randomly allocated so this study is a RCT which estimates the treatment effect using single difference estimation. The data are taken from a special purpose panel survey to evaluate the programme. The sample was restricted only to mothers living with their husbands at baseline with a total sample size of 1250 (836 in the treatment group, 414 in the control group). |
| **Overall findings** | The cash transfer had a different impact depending on the woman's education level: for women with above primary education the transfer decreases psychological violence by partner; for women with primary or less the transfer impact depends on her partner's education relative to hers; for women with education equal to or above partner's the transfer increases emotional violence. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Emotional violence; Controlling behaviour by male partner; Physical violence; Sexual violence |

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| **Citation** | Hoddinott, J., Skoufias, E. and Washburn, R., 2000. The impact of PROGRESA on consumption: a final report. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA was a national anti-poverty programme adopted by the Federal government in 1997. The programme included cash transfers linked to children’s enrolment and regular school attendance and clinic attendance. The programme also included in-kind health benefits and nutritional supplements for children up to five and pregnant and lactating mothers. Cash transfers were targeted specifically at the mother of the family. As of 1999, PROGRESA covered approximately 2.6 million families (about 40% of all rural families and about one-ninth of all families in Mexico). The programme operated in almost 50,000 localities, more than 2,000 municipalities in 31 states, with a budget of approximately $777 million for 1999, equivalent to 0.2% of GDP |
| **Evaluation methodology**  | The study draws on the RCT evaluation of PROGRESA, covering 24,000 households from across 506 communities. The study uses fixed effects regression using the panel survey associated with the RCT. |
| **Overall findings** | The PROGRESA programme appears to have sizeable and significant effects on the consumption of beneficiary households. For example, household consumption is around 15% higher among beneficiary households. The value of food consumption was marginally higher (2%). Median caloric acquisition per capita rose by 8% and dietary diversity also improved. |
| **Reported outcome areas** | Health; Poverty |
| **Indicators reported** | Total calories available per person per day (from different food groups); non-food expenditures |

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| **Citation** | Hoddinott, J. and Wiesmann D., 2008. The impact of conditional cash transfer programs on food consumption in Honduras, Mexico and Nicaragua. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | Study reports findings on: (1) Programa de Asignación Familiar (PRAF); (2) Oportunidades; and (3) Red de Protección Social (RPS) |
| **Programme details**  | No programme details given. |
| **Evaluation methodology**  | The study draws on the randomised design of PRAF and Oportunidades, using special purpose panel data to estimate DID effects. For RPS, the study again uses DID, with an annual household panel survey from before and after the programme. Overall sample sizes for the different programme estimates are: PRAF -3,300 households, Oportunidades - 13,200, and RPS – 800. |
| **Overall findings** | Overall, PRAF, PROGRESA, and RPS have only small effects on caloric acquisition at the household level. There are no statistically significant effects of PRAF or RPS and PROGRESA raises caloric acquisition by only 3.6 percent. However, there are larger and statistically significant effects on dimensions of diet quality. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Total calories consumed; calories from different food groups; number of foods |

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| **Citation** | Hoddinott, J. and Skoufias, E., 2004. The Impact of PROGRESA on Food Consumption. *Economic Development and Cultural Change*, 53 (1), pp. 37-61 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA (later called Oportunidades) provided cash transfers linked to children’s enrolment and regular school attendance and to clinic attendance. The programme also included in-kind health benefits and nutritional supplements to children up to five years old and pregnant and lactating women and instructional meetings (*platicas*) on health and nutrition issues. PROGRESA targeted the mother of the family and by 2000 reached approximately 2.6 million families (around 40% of all rural families). The programme operated in around 50,000 localities and over 2,000 municipalities in 31 states with a budget equivalent to around 0.2% of GDP. |
| **Evaluation methodology**  | The study uses a longitudinal sample of around 24,000 households and exploits the random allocation of households to treatment status to investigate the impact of PROGRESA on household diets. The study estimates impacts using fixed effects regression. |
| **Overall findings** | By November 1999, beneficiary households in treatment localities obtained 6.4% more calories than did comparable households in control localities. The authors find that the impact is greatest on the acquisition of calories from vegetable and animal products—a finding consistent with the view of respondents themselves that PROGRESA was enabling them to ‘eat better’.  |
| **Reported outcome areas** | Health |
| **Indicators reported** | Per capita household caloric availability (total calories, calories from grains, calories from fruit and vegetables, calories from animal products, calories from other foods) |

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| **Citation** | Jones, N. Samuels, F., 2015. The role of cash transfers in maximising schools' protective effects for children in extreme settings: An ecological approach. *International Journal of Educational Development*, 41, pp. 217-225 |
| **Name of programme(s) and country/countries** | Cash Transfer for Orphans and Vulnerable Children (CT-OVC) (Kenya) Palestinian National Cash Transfer Programme (PNCTP) (Palestine) Juntos (Peru) |
| **Programme details as reported in the study** | This study qualitatively evaluates three interventions, all intended to address the needs of poor and vulnerable households, with a focus on children. The Kenyan CT-OVC is a quasi-CCT which began in 2009 and reaches 150,000 extremely poor households supporting a vulnerable child or orphan. Households receive a lump sum of Ksh 4000 every two months (regardless of household size) which they collect in cash from the post office. To comply with the programme’s conditions, caregivers officially must send the child to school, immunise them, take for health monitoring and attend awareness-raising sessions however the conditions are not enforced. The Palestinian PNCTP is a UCT which began in 2010/ 2011 and reaches 150,000 extremely poor households, female headed HHs and household with vulnerable people. Households receive between 750 to 1800 NIS quarterly which is paid into a bank account or given by cheque. The Peruvian Juntos programme is a CCT which began in 2005 and reaches 455,000 households below poverty line with children under 14 years. Households receive a lump sum of 100 soles (same amount for every household) on a monthly basis which is collected in cash from a bank. Transfer receipt is conditional on school attendance, obtaining civic documentation, health checks, and attending awareness-raising sessions (these conditions are enforced). |
| **Evaluation methodology**  | The impact of these interventions is explored using qualitative methods, namely community mapping, focus groups, interviews, key informant interviews, and observational case studies. The sample size in Kenya is 91 respondents; in Palestine, 161 respondents; and in Peru, 64 respondents. |
| **Overall findings** | There is a positive impact of receiving the cash transfer on children's confidence and self-esteem and encourage school attendance. Supply-side shortcomings are identified, such as low education quality which is still a persistent problem.  |
| **Reported outcome areas** | Education |
| **Indicators reported** | N/A |

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| **Citation** | Karlan, D., Osei, R., Osei-Akoto, I. and Udry, C., 2014. Agricultural decisions after relaxing credit and risk constraints. *The Quarterly Journal of Economics*, 129 (2), pp. 597-652 |
| **Name of programme(s) and country/countries** | Innovation for Poverty Action randomised trial (Ghana) |
| **Programme details**  | The study reports on several experiments carried out in northern Ghana from 2009 in which farmers were randomly assigned to receive cash grants, grants of or opportunities to purchase rainfall index insurance, or a combination of the two. Farmers were given unconditional grants of around US$85 per acre (an average of $420 per recipient) as cash grants and the rainfall insurance grants were equivalent to US$47 per acre. Transfers were made according to preferences, e.g. if beneficiary stated half would be spent on seed and half on harvest labour then half was given before planting and half before harvest. The trial was conducted over three years. |
| **Evaluation methodology**  | The study was evaluated using a RCT, with effects estimated using an IV approach. The sample frame for the study was from communities in northern Ghana where maize farming was dominant and households with some maize farming but not > 15 acres land. 502 households in total participated and were allocated to one of the four groups (including a control group). |
| **Overall findings** | The study finds that cash transfers, when combined with access to weather index, has a higher impact on certain outcomes, including the value of chemical inputs used and involvement and employment in non-farm income-generating activities. |
| **Reported outcome areas** | Employment; Savings, investment and production; Poverty; Health |
| **Indicators reported** | Land preparation costs, number of acres cultivated, value of chemicals used, wages paid to hired labour, total costs invested on farm, value of harvest, proportion of land planted with maize, average weekly orchard income, non-farm income generating activity (yes/no), no. of household members working in non-farm income generating activity, average weekly enterprise income, total farm revenue, post-harvest assets (livestock + grain), missed a meal in past 12 months, total expenditure in 12 months, utility expenses in past 12 months, school expenses in past 12 months, borrowed in past 12 months. |

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| **Citation** | Kassouf, A. L. and De Oliveira, P. R., 2012. Impact evaluation of the Brazilian non-contributory pension program Benefício de Prestação Continuada (BPC) on family welfare. Partnership for Economic Policy (PEP) Working Paper |
| **Name of programme(s) and country/countries** | Benefício de Prestação Continuada (BPC) (Brazil) |
| **Programme details**  | The BPC, first introduced in Brazil in 1996, is a non-contributory pension (old-age and disability). The old-age component provides a minimum wage to individuals 65 years old or more with a per capita family income no greater than 25% of the current minimum wage. In 2008, the BPC programme benefitted almost 3 million people (elders and disabled).  |
| **Evaluation methodology**  | The paper evaluates the effects of the BPC on household composition and on labour market outcomes of the elders and their co-residing relatives. Using data from Brazil’s nationally representative household survey, PNAD (2001-2008), it implements a regression discontinuity design and various econometric models to explore the ‘discontinuity’. The discontinuity arises because poor elders become eligible when they turn 65 years old. This is the current cut-off, changing over time (it was 70 from 1996-1997, 67 until 2003 and 65 since then). In addition to regression discontinuity, other methods used in the study include propensity score matching and difference-in-difference estimations.  |
| **Overall findings** | The study reports results on the effects of the BPC on labour and educational outcomes of beneficiaries and their co-residents. It finds that there are no changes in household composition due to the programme. It finds decreases in the labour force participation of the elders, indicating that the programme makes it possible for these poor elders to retire. Also, the study reports a drop in labour force participation of co‐residents. However, the effect is heterogeneous and the effect is concentrated for adults over 30 years old, while there is no effect for young adults. When analysing only rural areas, the study reports a decrease in labour participation of elders and co‐residents from 18 to 50 years old receiving BPC. The study also reports a decrease in child labour. |
| **Reported outcome areas** | Employment; Education |
| **Indicators reported** | Changes in household composition; labour force participation (beneficiaries and co-residents) - participating in labour force and number of hours worked per week; child labour and school attendance. |

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| **Citation** | Kohler, H. P. and Thornton, R. L., 2012. Conditional cash transfers and HIV/AIDS prevention: Unconditionally promising? *World Bank Economic Review*, 26, pp. 165-190 |
| **Name of programme(s) and country/countries** | Malawi Incentive Programme (Malawi) |
| **Programme details as reported in the study** | This study evaluates a CCT, which began in 2006, with the specific aim of reducing risky sexual behaviour and hence the spread of HIV infection. The intervention targets 1307 men and women at risk of HIV. Respondents are randomly selected from a sample of men and women who participated in an earlier longitudinal study and had agreed to an HIV test at an earlier stage. Transfer amounts are randomly allocated and range from zero to approximately four months' wages. The transfer consists of a voucher given at the start of the year which is redeemable at end of year if (negative) HIV status is maintained at which point a lump sum payment is given. If enrolled as a couple, both parties have to maintain their HIV status. If one member of a couple is already HIV positive, he or she would automatically receive the money at the end providing the other has maintained negative status.  |
| **Evaluation methodology**  | A quasi-experimental design is used, consisting of logistic regression on individual-level panel survey data collected for the project. The sample size is between 1748 and 3258 depending on the analytical model. |
| **Overall findings** | The prospect of receiving a cash transfer increased some risky behaviours among men and reduced some risky behaviours in women. There is no consistent pattern to the impact of the (anticipation of the) transfer, even taking into account the individual's income. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Risky sexual behaviours |

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| **Citation** | Langendorf, C., Roederer, T., de Pee, S. … and Grais, R. F., 2014. Preventing Acute Malnutrition among Young Children in Crises: A Prospective Intervention Study in Niger. *PloS Medicine*, 11 (9), pp. 1-15 |
| **Name of programme(s) and country/countries** | A prospective nutrition intervention study (Niger) |
| **Programme details**  | The study was prospective intervention study conducted between August and December in 2011 in 48 rural villages located within 15 km of a health centre. The study was set up to allow a controlled comparison between different strategies aimed at preventing malnutrition in young children. The target population was households with children in Madarounfa health district in the Southern part of Maradi region. Households were randomly allocated to receive either cash transfers alone (equivalent to US$59), or cash plus one of a specific type of nutritional supplements (equivalent to US$52 for the cash plus supplementary foods). Transfers were made monthly. In addition to transfers and/or food supplements, beneficiaries were also given nutritional information on purchasing food for children, including diet diversity. |
| **Evaluation methodology**  | The study was a RCT covering 4176 children. Impacts on moderate acute malnutrition, severe acute malnutrition and mortality were estimated as adjusted Hazard Ratios.  |
| **Overall findings** | The incidence of moderate acute malnutrition was about twice as high among children who received the cash-only intervention as among those who received any of the food supplement plus cash. However, the incidence of severe acute malnutrition was about three times higher among the children who received the Super Cereal+ only intervention than among those who received the SC+ plus cash intervention. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Moderate Acute Malnutrition, Severe Acute Malnutrition, Mortality |

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| **Citation** | Leroy, J. L., Gadsden, P., Gonzalez de Cossio, T. and Gertler, P., 2013. Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico. *The Journal of Nutrition*, 143 (3), pp. 378-383 |
| **Name of programme(s) and country/countries** | Programa de Apoyo Alimentario (Mexico) |
| **Programme details**  | PAL was launched in 2003 to attend to the needs of communities that were not eligible for Oportunidades. Most PAL beneficiary households received in-kind transfers (food baskets), though others received cash transfers. All transfers were conditional upon attending nutrition and health education sessions and participating in programme-related logistic activities, though these were never strictly enforced. Households in targeted communities were eligible if they fell below a ‘needs’ poverty line as defined by the Ministry of Social Development. Beneficiaries received either a monthly food basket equivalent to around US$ 14. Households received the transfers every two months. The objectives of the programme were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households dietary and health practices. |
| **Evaluation methodology**  | The study employed a cluster RCT and estimate the differential impact of the cash and in-kind transfers. 208 eligible communities were randomly assigned to one of four groups: food basket without education; food basket with education; cash transfer with education; or control. Impacts were estimated using DID on a full sample of 3010 women. |
| **Overall findings** | With respect to the control group, the programme increased women's weight (420 +/- 230 g; P = 0.032); this was equivalent to 53% increase in weight gain over that observed in the control group in a 23-month time period. The greatest impact was found in already obese women: 670 +/- 320 g (p = 0.019). The impact was marginally significant in women with a pre-programme BMI between 25 and 30 kg/m2: 540 +/- 360 g (p = 0.067). No programme impact was found in women with a BMI <25 kg/m2. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Body weight |

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| **Citation** | Leroy, J. L., Gadsden, P., Rodriguez-Ramirez, S. and Gonzalez de Cossio, T., 2010. Cash and in-kind transfers in poor rural communities in Mexico increase household fruit, vegetable, and micronutrient consumption but also lead to excess energy consumption. *The Journal of Nutrition*, 140 (3), pp. 612-617. |
| **Name of programme(s) and country/countries** | Programa de Apoyo Alimentario (PAL) (Mexico) |
| **Programme details**  | PAL is a conditional cash and in-kind food support programme launched in 2003 to meet needs of communities that were not eligible for PROGRESA (i.e. where there was no nearby school or health clinic). The objectives were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households dietary and health practices. PAL was targeted to communities that do not receive benefits from other federal food aid programs, have less than 2500 inhabitants, and have a high level of marginalisation based on multidimensional poverty. Households within these communities were eligible if they fell below the “needs” poverty line as defined by the Mexican Ministry of Social Development. Beneficiaries were given a monthly transfer of cash or food equivalent to US$ 14 at the time. Beneficiary households were required to attend nutrition and health education sessions and had to participate in programme-related logistic activities to receive the benefits. These programme conditions, however, were not strictly enforced. |
| **Evaluation methodology**  | A community RCT was used to evaluate the impact of the programme. A random sample of 208 communities were selected, within which 33 households were randomly selected. The communities were then assigned to one of four study groups: food basket without education, food basket with education, cash transfer with education or control. The final sample included 5823 households. A DID approach was used to estimate the effects.  |
| **Overall findings** | The programme was associated with increases in the consumption of total energy (5%), energy from fruits and vegetables (24%), and energy from animal source foods (24%). It also affected iron, zinc, and vitamin A and C consumption (p< 0.05). |
| **Reported outcome areas** | Health |
| **Indicators reported** | Energy consumption (incl. from various specific sources); nutrient consumption (incl. range of specific nutrients) |

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| **Citation** | Leroy, J. L., Garcia-Guerra, A., Garcia, R., Dominguez, C., Rivera, J. and Neufeld, L. M., 2008. The Oportunidades program increases the linear growth of children enrolled at young ages in urban Mexico. *The Journal of Nutrition*, 138 (4), pp. 793-798 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | Oportunidades is a large-scale poverty alleviation programme that provides conditional cash transfers and includes a strong nutrition component. The primary goal of Oportunidades is to increase human capital through the simultaneous investment in health, education and nutrition. Beneficiary families receive a monthly cash transfer to improve their purchasing power. It also provides milk-based micronutrient fortified foods targeted to children and pregnant and lactating women. The programme’s health component also includes the provision of obligatory, preventative and curative health services such as the immunisation of children, child growth monitoring and pre-natal and post-partum care visits. The programme started operating on a small scale in rural areas but was since expanded to urban areas in 2002 and has enrolled a total of 5 million households in all regions of the country.  |
| **Evaluation methodology**  | This study focused specifically on urban households as part of the urban roll-out of Progresa. The study uses a quasi-experimental approach, drawing on a special purpose longitudinal study and employing DID and PSM techniques. The full sample covers 432 children who were under 24 months old at baseline, from 733 households. |
| **Overall findings** | There was no overall association between programme participation and growth in children aged 6 to 24 month of age. However, children in intervention families younger than 6 months of age at baseline grew 1.5 cm (P < 0.05) more than children in comparison families, corresponding to 0.41 height-for-age Z-scores (P < 0.05). They also gained an additional 0.76 kg (P < 0.01) or 0.47 weight-for-height Z-scores (P < 0.05). Children living in the poorest intervention households tended (0.05 < P < 0.10) to be taller than comparison children (0.9 cm, 0.27 HAZ).  |
| **Reported outcome areas** | Health |
| **Indicators reported** | Child height (cm); height-for-age score; weight (kg); weight-for-height score |

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| **Citation** | Levy, D. and Ohls, J., 2007. Evaluation of Jamaica’s PATH Program: Final Report. Mathematica Policy Research, Inc. Washington, D.C. |
| **Name of programme(s) and country/countries** | Programme of Advancement Through Health and Education (PATH) (Jamaica) |
| **Programme details**  | PATH was established in 2001 in response to concerns about poverty levels in Jamaica. The aim was to target households that were among poorest in the country. By 2002 the programme had become nationwide and at the time of the report, about 245,000 individuals had signed up for PATH, of whom about 180,000 received benefits in a typical month. To participate in the programme, a household had to apply to its Ministry of Labour and Social Security parish office and provide detailed information about its demographic and socio-economic characteristics. They would then be given a score on a scale used to determine eligibility. Transfers included: (1) Child assistance grants for health and education up to age 17 (each child only eligible for one type - health if 0-5 and education if 6-17). Average monthly benefits per child in 2005 was about US$6.50; (2) Social assistance grants for adults provided grants to poor pregnant or lactating mothers, elderly poor (over age 65), and poor, disabled, and destitute adults under age 65. The average monthly benefit per person was the same as the benefit in the child assistance grants. As a reference, the minimum wage in Jamaica for general workers was about US$160 per month at the time of reporting. Households received grants every two months, based on the number of eligible members, disbursed through cheques sent to them through the local post office. Health grants were conditional on children up to age six visiting a health clinic and the education grants were conditional on regular school attendance. Initially, the receipt of benefits was conditional on adults making regular health clinic visits but this changed shortly after the programme was launched and benefits for adults are no longer conditional. There is a compliance assessment for the education- and health-based conditions. |
| **Evaluation methodology**  | The study used a quasi-experimental approach to estimating the programme’s impacts, employing RDD. It makes use of a special-purpose longitudinal survey conducted for the evaluation. Sample sizes for education outcomes included 7751 individuals and that for health outcomes was 3756 children and 1379 for the elderly. |
| **Overall findings** | PATH has increased school attendance by approximately half a day per month. The estimated increase is about three percent over the baseline level, and it is statistically significant. Health care visits for children 0-6 increased by approximately 38 percent as a result of PATH. The impact of PATH on health care visits by the elderly show no evidence of effects on this group. While PATH was successful at increasing school attendance and preventive health visits, there is no evidence that it was able to affect longer term outcomes such as grades, advancement to next grade or health care status |
| **Reported outcome areas** | Education; Health |
| **Indicators reported** | Number of days attended school; number of visits to a health centre for preventative reasons in past 6 months |

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| **Citation** | Lincove, J. A. and Parker, A., 2015. The influence of conditional cash transfers on eligible children and their siblings. *Education Economics* |
| **Name of programme(s) and country/countries** | RPS (Nicaragua) |
| **Programme details**  | Nicaragua’s RPS CCT pilot was implemented from 2000 to 2002 with the objective of supplementing income, reducing school drop-out and improving the health and nutrition of children. The transfer represents on average 20% of beneficiary income and is made up of 3 transfers: a food security transfer (the bono alimentario), a school attendance transfer (the bono escolar) and a school supplies transfer. The pilot programme followed an experimental design to facilitate evaluation.  |
| **Evaluation methodology**  | The paper estimates the direct effects of the RPS on eligible and ineligible children, as well as the indirect effects of sibling eligibility. It estimates programme effects through difference-in-differences (DID) models that estimate the effects of the treatment on changes in outcome measures for the treated.  |
| **Overall findings** | The paper finds positive effects on all eligible children and ineligible boys when an eligible sibling is present. This is driven by a larger income effect for boys than girls in a setting where boys are more likely to be out of school and engaging in work. This suggests that extra income induced parents to provide more human capital investments for all male children, while female children benefited only if they were eligible for CCTs.  |
| **Reported outcome areas** | Employment; Education |
| **Indicators reported** | probability of working and number of weekly hours worked by age group and sex (boys and girls); probability of attending school by age and sex; impact on type of work (available upon request) |

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| **Citation** | Lovo, S., 2011. Pension transfers and farm household technical efficiency: evidence from South Africa. *American Journal of Agricultural Economics*, 93 (5), pp. 1391-1405 |
| **Name of programme(s) and country/countries** | Old Age Pension Programme (South Africa) |
| **Programme details**  | The intervention is a non-contributory pension which was the result of the extension to the black population of the white social pension system established during apartheid. All women over the age of 60 and men over 65 are eligible, though the programme incorporates a means test based on recipient wealth. In practice it covers most black African households. Transfers are about twice the median per capita income of an African household, paid monthly. |
| **Evaluation methodology**  | Impacts are estimated using quasi-experimental methods – the use of IV with the third wave of the KwaZulu-Natal Income Dynamic Survey (KIDS). The full sample used covers 549 households. |
| **Overall findings** | The receipt of a pension from the Old Age Pension Programme has a positive and relevant effect on farm household technical efficiency. The pension transfer, therefore, improves the ability of farm households to make use of the best available technologies. |
| **Reported outcome areas** | Savings, investment and production |
| **Indicators reported** | Technical efficiency, measured using 6 outputs (maize production, value of vegetable/fruit/other production, income from animals and off-farm income) and 6 inputs (male household members, female members, land, hired labour, livestock and cost of inputs) |

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| **Citation** | Macours, K., Schady, N. and Vakis, R., 2012. Cash transfers, behavioural changes, and cognitive development in early childhood. *American Economic Journal: Applied Economics*, 4 (2), pp. 247-273 |
| **Name of programme(s) and country/countries** | Atención a Crisis (Nicaragua) |
| **Programme details as reported in the study** | The study evaluates a CCT which began in 2005, designed to improve health outcomes for young children in poor families. At the time of the study the transfer has reached 3000 households. Treatment allocation is randomised at the community level and household eligibility determined by an expenditure-based means test (90% of households are eligible). At a public lottery households are randomly assigned one of three treatments: 1) a basic transfer equivalent to on average 15% of annual per capita household expenditure; 2) the basic transfer plus a scholarship for a vocational course; 3) the basic transfer plus a lump sum to start a non-agricultural business. The basic transfer is distributed every two months for one year. To receive the basic transfer, households with children aged 0-5 must attend regular health check-ups (but this is not enforced) and in households with children aged 7-15 who had not finished primary school those children had to meet school enrolment and regular attendance conditions. As complementary programmes, information sessions on diet, health and education are offered. |
| **Evaluation methodology**  | The quasi-experimental method makes use of a panel survey (baseline, endline, and after transfer had stopped for 2 years) and uses OLS linear and logistic regression models to estimate the transfer impact. The sample size is 4245 in total but 2400 for most indicators. |
| **Overall findings** | Higher expenditure levels observed in households that received the lump sum payment - this effect does not disappear even after the transfers have ended. There is no difference observed on child cognitive outcomes between transfer types. |
| **Reported outcome areas** | Poverty; Health, Education |
| **Indicators reported** | Child cognitive outcomes (memory, language, motor skills etc); height and weight for age; percentage of total expenditures that is on food, on staples, on animal proteins, and on fruit and vegetables.  |

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| **Citation** | Macours, K., Premand, P. and Vakis, R., 2012. Transfers, Diversification and Household Risk Strategies: Experimental Evidence with Lessons for Climate Change Adaptation. World Bank Policy Research Working Paper, No. 6053. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Atención a Crisis (Nicaragua) |
| **Programme details**  | The *Atención a Crisis* programme was a one-year pilot programme implemented between November 2005 and December 2006. It was implemented in the aftermath of a severe drought and had two objectives. First, it aimed to serve as a short-run safety net by providing cash transfers to reduce the need for adverse coping mechanisms (e.g. taking children out of school or reductions in food consumption). Second, the programme intended to promote long-run upward mobility and poverty reduction by enhancing the asset base and income diversification capacity of households. 3,000 households were selected to participate in the programme and allocated to one of three different: (i) a basic CCT; (ii) the basic CCT plus a scholarship for an occupational training; and (iii) the basic CCT plus a grant for productive investments. The basic CCT was conditional on children’s primary school and health service attendance during the one-year time period. Households received a transfer of US $145 even if they did not have children while those with children between 7 and 15 enrolled and attending in primary school received an additional US $90 per household and an additional US $25 per child (all amounts referring to the total transfer received over the year). The school enrolment and attendance requirement was carefully monitored though child visits to the health centres were not monitored. Transfers were provided bi-monthly. |
| **Evaluation methodology**  | The study is designed as a RCT, using OLS and IV approaches to estimate impacts of the transfers. A total of 3918 households are included in the sample. |
| **Overall findings** | Two years after the end of the intervention, households eligible for the complementary interventions were better protected against the negative impact of drought shocks. For total and food consumption, as well as for income, the negative impact of shocks is completely offset. These results hold for the intervention that provided households with a productive grant to invest in a non-agricultural self-employment activity, as well as for the other complementary intervention aimed at building skills through vocational training. In addition, for household eligible for the productive investment grant there was a significant positive impact on consumption and income at average levels of drought. This intervention hence helped to both increase and smooth consumption and income. The paper further shows that the complementary interventions increased households’ participation in non-agricultural activities, as well as returns from such activities. |
| **Reported outcome areas** | Poverty; Savings, investment and production; Employment |
| **Indicators reported** | Total consumption, per capita income, total food consumption per capita, total non-food consumption per capita, participation in non-agricultural wage / self-employment, non-agricultural wage income, profits of non-agricultural business, value of livestock sold or self-consumed, value of business assets, increase in profits in 12 months |

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| **Citation** | Macours, K. and Vakis, R., 2009. Changing households' investments and aspirations through social interactions: Evidence from a randomized transfer program. World Bank Policy Research Working Paper No. 5137. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Atención a Crisis (Nicaragua) |
| **Programme details**  | The *Atención a Crisis* programme was a one-year pilot programme implemented between November 2005 and December 2006. It was implemented in the aftermath of a severe drought and had two objectives. First, it aimed to serve as a short-run safety net by providing cash transfers to reduce the need for adverse coping mechanisms (e.g. taking children out of school or reductions in food consumption). Second, the programme intended to promote long-run upward mobility and poverty reduction by enhancing the asset base and income diversification capacity of households. 3,000 households were selected to participate in the programme and allocated to one of three different: (i) a basic CCT; (ii) the basic CCT plus a scholarship for an occupational training; and (iii) the basic CCT plus a grant for productive investments. The basic CCT was conditional on children’s primary school and health service attendance during the one-year time period. Households received a transfer of US $145 even if they did not have children while those with children between 7 and 15 enrolled and attending in primary school received an additional US $90 per household and an additional US $25 per child (all amounts referring to the total transfer received over the year). The school enrolment and attendance requirement was carefully monitored though child visits to the health centres were not monitored. Transfers were provided bi-monthly. |
| **Evaluation methodology**  | The study was implemented as a RCT. The sample included a total of 3932 households (6333 child-level observations) with impacts estimated using multiple regression. The study was restricted to the six drought-prone municipalities where the pilot was implemented. |
| **Overall findings** | Study compares outcomes across different packages received. The authors find that those leaders receiving cash plus a productive investment package have some statistically higher rankings on certain economic outcomes, such as income from non-agricultural activities and value of animal stock, as well as slightly more positive mental attitudes. |
| **Reported outcome areas** | Education; Health; Savings, investment and production |
| **Indicators reported** | Human capital investment (attending school, number of days absent, school expenditure, share of food expenditures for animal products/vegetables and fruit); Economic activities (income from non-agricultural self-employment, income from commercial activities, income from agricultural wages, value animal stock, total income); Attitudes (positive expectations about the future, happy, feeling of moving forward in life, sum of positive feelings, depression scale, no risk management) |

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| **Citation** | Maluccio; John A. 2010. The Impact of Conditional Cash Transfers on Consumption and Investment in Nicaragua. *Journal of Development Studies*, 46 (1), pp. 14-38 |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details as reported in the study** | Red de Protección Social is a conditional cash transfer programme set up in 2000 (discontinued in 2006) with the objective to increase food expenditure, reduce primary school dropout rates and improve nutritional status. Targeting involved geographic targeting of poor communities based on a marginality index and a means test of households within those communities. Transfers are bi-monthly. During the first two years, the average annual family transfer was $ 272 dollars, or approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately $ 37 every 2 months (a total of $ 224 a year) if every health conditionality was met. The education transfer included $ 112 per household per year and a per beneficiary child transfer for school supplies of $ 21 per year. |
| **Evaluation methodology**  | The authors use a DID approach to analyse impact, using a special purpose longitudinal survey of 5 waves (1764 households in 2000, with some attrition in subsequent years). |
| **Overall findings** | The programme increased current expenditures, but didn’t increase agricultural or non-agricultural investment. The marginal propensity to *consume* out of the transfers is nearly one. |
| **Reported outcome areas** | Poverty; Education; Savings, Investment and Production; Employment |
| **Indicators reported** | Total expenditure; food expenditure ; education expenditure ; marginal propensity to consume; number of consumer durables; value of consumer durables; number of agricultural goods; value of agricultural goods ; has any expenditure on agricultural or non-agricultural equipment ; expenditure on agricultural or non-agricultural equipment ; number of types of animals owned ; value of animals owned ; tropical livestock units ; If non-agricultural home production for sale ; if resell/ retail purchased goods ; if sell services of some sort (not day labour); (was down as relevant to employment – double check if missing any employment indicators?) |

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| **Citation** | Maluccio, J. A., 2005. Coping with the “Coffee Crisis” in Central America: The Role of the Nicaraguan Red de Protección Social. Food Consumption and Nutrition Division Discussion Paper 188. International Food Policy Research Institute, Washington, D.C. |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details**  | The programme began in 2001 as a CCT modelled after PROGRESA and was designed to address both current and future poverty via cash transfers targeted to households living in extreme poverty. Specific objectives included: (1) supplementing household income for up to three years to increase expenditures on food, (2) reducing school desertion during the first four years of primary school, and (3) increasing the health-care and nutritional status of children under age 5. For the pilot, the government selected the departments of Madriz and Matagalpa from the northern part of the Central Region, on the basis of poverty as well as on their capacity to implement the program. Within these departments, 6 out of 20 municipalities were chosen. Transfers were composed of: (1) a food security transfer (equivalent to C$2,880 per household per year (US$ 224)). On its own, the food security transfer represented about 13 percent of total annual household expenditures in beneficiary households before the programme; and (2) a school attendance transfer (equivalent to C$1,440 per household per year ($112)) plus an additional annual cash transfer for school supplies (equivalent to C$275 per child ($21)). Over the two years, the actual average monetary transfer was approximately $300 (or 18 percent of total annual household expenditures). Transfers were made bi-monthly. The food security transfer was contingent upon attendance at bimonthly health educational workshops held within the community and on taking children under the age of 5 to preventive health-care appointments. The specific health-care services required by the programme were provided free of charge to beneficiary households and included growth monitoring, vaccination, and provision of anti-parasites, vitamins, and iron supplements. The school attendance transfer was contingent on enrolment and regular school attendance of children aged 7–13 who had not completed fourth grade. The school supplies lump sum was contingent on enrolment only. To enforce compliance with programme requirements, beneficiaries did not receive the food and/or education component(s) of the transfer if they failed to carry out any of the conditions described above. During the first two years of delivering transfers, approximately 10 percent of beneficiaries were penalized at least once. |
| **Evaluation methodology**  | The pilot was evaluated using a RCT study, which gathered longitudinal survey data covering a total of 4188 households. The study estimates the impacts of the programme using DID. |
| **Overall findings** | The programme was found to have protected households against declines in per capita expenditures and, while not significantly depressing labour supply relative to before the program, muted additional labour supply for beneficiaries in coffee-growing areas, relative to their counterparts without the program. |
| **Reported outcome areas** | Poverty; Employment; Education; Health |
| **Indicators reported** | Per capita real annual expenditure; per capital real annual food expenditure; total hours worked in past week; average hours per worker worked last week; Total hours dedicated to agriculture last week; fraction of labour allocated to agriculture last week; engaged in small business activity; primary school enrolment; child labour; height-for-age; participation in the coffee sector. |

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| **Citation** | Maluccio, J. A. and Flores, R., 2005. Impact Evaluation of a Conditional Cash Transfer Program: The Nicaraguan *Red de Protección Social*. IFPRI Research Report 141.  |
| **Name of programme(s) and country/countries** | RPS (Nicaragua) |
| **Programme details**  | Nicaragua’s RPS CCT was introduced in 2000 and expanded in 2002 for another 3 years. It is designed to address both current and future poverty via cash transfers targeted to households living in poverty in rural Nicaragua. RPS’s specific objectives include supplementing household income for up to three years to increase expenditures on food, reducing school dropout rates during the first four years of primary school, and increasing the health care and nutritional status of children under five years of age. The transfers are conditional and households are monitored to ensure that they undertake the prescribed actions intended to improve their children’s human capital. During the first year of operation, about 10 percent of beneficiaries were penalized at least once and therefore did not receive a (full) transfer. Over the 2 years, the actual average education monetary transfer (excluding the teacher transfer) was approximately 17 percent of total annual household expenditure). The bono escolar or “school attendance transfer” is paid every other month, contingent on enrolment and regular school attendance of children ages 7–13 who have not completed fourth grade of primary school. In addition, for each eligible child, the household received an annual cash transfer intended for school supplies, contingent on enrolment. To increase resources available to the schools, there was also a small cash transfer, known as the bono a la oferta or “teacher transfer”.  |
| **Evaluation methodology**  | The evaluation design is based on a randomised, community-based intervention with measurements before and after the intervention in both treatment and control communities. It relies on data from a randomized, community-based intervention with measurements before and after the intervention in both treatment and control communities. Data used for the evaluation were drawn from an annual household panel data survey implemented in both intervention and control areas of RPS before the start of the program, in 2000, and after the programme began operations, in 2001 and 2002. The study estimates programme effects through difference-in-difference models that estimate the effects of the treatment on changes in outcome measures for the treated.  |
| **Overall findings** | Examining separately women and men (15 years+), there were no significant changes in labour participation in the previous week. There was a small decline (of about 3 hours) in reported hours worked in the last week by adult women living in intervention comarcas, consistent with increased responsibilities associated with the programme-however, the double-difference estimated effects, while negative, are small and insignificant. For men, there is evidence of a reduction of hours worked in the last week, of about 6 hours in both years. In sum, labour market participation was apparently little changed with the programme over time, although there was an indication of slightly fewer hours worked by men in the last week, relative to the control group.  |
| **Reported outcome areas** | Poverty; Health; Education; Employment |
| **Indicators reported** | per capita annual total household expenditures; per capita annual food expenditures; food shares (%); composition of food expenditures; hours worked last week; remittance behaviour; school enrolment rates; school attendance; school advancement; child labour working/not working; child health care: percentage taken to a health-care provider, % weighed, % with updated vaccination; child nutritional status; child wasting, % children underweight, iron supplement, anaemia, average haemoglobin. |

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| **Citation** | Maluccio, J., 2003. Education and Child Labour: Experimental Evidence from a Nicaraguan Conditional Cash Transfer Program. IFPRI unpublished |
| **Name of programme(s) and country/countries** | RPS (Nicaragua) |
| **Programme details**  | Nicaragua’s RPS, piloted in 2000 and extended in late 2002 for three years, is designed to address both current and future poverty via cash transfers targeted to households living in poverty in rural Nicaragua. RPS’s specific objectives include: supplementing household income for up to 3 years, reducing school dropout rates during the first four years of primary school and increasing the health care and nutritional status of children under five years of age. The RPS is made up of two main components: an education component and a health, nutrition and food security component.  |
| **Evaluation methodology**  | The study uses household and individual data collected before and after RPS was implemented in both the intervention and control *comarcas.* It uses the double-difference method to calculate ‘average programme impact’. It relies on two data sources: the RPS baseline (2000, carried out before the start of the programme) and the RPS follow-up (2001). Both were conducted in all 42 intervention and control *comarcas*. |
| **Overall findings** | The study finds that RPS has a significant and substantial effect on schooling matriculation and enrolment during its first year of operation. Moreover, it led to a substantial reduction in child labour for the school age population. It is therefore possible for a cash transfer programme aimed at education to reduce child labour, even during a general economic downturn such as occurred during this time.  |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Matriculation rates, continued enrolment, grade progression, percentage working, number of hours worked/week. |

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| **Citation** | Manley, J. Fernald, L. and Gertler P., 2015. Wealthy, healthy and wise: does money compensate for being born into difficult conditions? *Applied Economics Letters*, 22 (2), pp. 121-126 |
| **Name of programme(s) and country/countries** | Oportinidades (Mexico) |
| **Programme details**  | Oportunidades is a CCT established in 1997 (when it was known as PROGRESA). It involves monetary transfers to poor households conditional on the household members’ coming in for medical check-ups, sending children to school and/or attending educational discussions with care providers. The transfer consists of three parts: a grant for consumption of food, awarded conditional on attendance at scheduled visits to health centres; a per-child grant for school materials, awarded yearly, and a per-child grant awarded monthly. The amount of the last portion of the transfer varies according to the grade the child is in. |
| **Evaluation methodology**  | The study uses quasi-experimental methods to estimate the impact of Oportunidades on health and educational outcomes, using an IV approach and the original programme evaluation data. |
| **Overall findings** | Improvements in child development are more linked to the transfers themselves than to other portions of the programme, which involve medical check-ups as well as educational sessions for mothers. |
| **Reported outcome areas** | Health; Education |
| **Indicators reported** | Height-for-age; BMI; test scores (verbal, cognitive and strengths and difficulties questionnaire) |

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| **Citation** | Martinez, S., 2004. Pensions, Poverty and Household Investments in Bolvia. Unpublished paper. University of California at Berkeley. |
| **Name of programme(s) and country/countries** | Bono Solidario *(*BONOSOL) (Bolivia) |
| **Programme details**  | The BONOSOL pension programme started in 1997 and emerged as part of the ambitious social and economic reforms implemented by the Bolivian government during the mid-1990s. The pension was designed as an annuity of $248 US dollars to all Bolivians age 65 and older. The transfer was a substantial amount of money, equivalent to 27% of national per capita income, 50% of annual income for the poor and 85% of annual income for the extreme poor. In 2001 the transfer payment was reduced to $120 US dollars, still a sizeable transfer for poor households, at 13% of per capita annual income. |
| **Evaluation methodology**  | The study estimates the effect of the BONOSOL transfer on consumption using a quasi-experimental approach. DID RDD is used to compare eligible and non-eligible households, using two nationally representative repeated cross-section household surveys. The full sample includes 96,237 individuals from 21,221 households for both rounds of data. |
| **Overall findings** | This study finds positive effects of the programme on household consumption and children’s human capital, consistent with previous research on cash transfer programs in developing countries. However, the increase in food consumption for impoverished households in rural areas is equivalent to over one and a half times the value of the pension. A significant fraction of this increase is derived from consumption of home produced agricultural products such as meats and vegetables. These results suggest that cash transfers to poor and liquidity constrained households may facilitate productive investments which boost consumption through multipliers on the transfer. This proposition is supported by evidence that beneficiary households in rural Bolivia increase animal ownership, expenditures on farm inputs, and crop output, although the specific choice of investment differs according to the gender of the beneficiary. These results are consistent with the presence of credit constraints that limit poor households’ ability to invest, and suggest that cash transfers may be an effective way to reduce extreme poverty, as poor households with under-capitalized assets and opportunities put the transfer to work. |
| **Reported outcome areas** | Poverty; Education; Health; Savings, investment and production |
| **Indicators reported** | Value of monthly food consumption, value of monthly home-produced food consumption, food consumption by food group, value of monthly home-produced consumption by food group, monthly non-food consumption, ownership of specific animals and number of animals owned, monthly expenditure on agricultural inputs, enrolment in school.  |

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| **Citation** | Masino, S. and Nino-Zarazua, M. 2014. Social service delivery and access to financial innovation: The impact of Oportunidades' electronic payment system in Mexico. WIDER Working Paper 2014/034. Helsinki. |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Oportunidades (formerly PROGRESA) is Mexico’s flagship anti-poverty social protection programme launched in 1997 to cover 300,700 households in 6,344 rural municipalities. By 2013, the programme supported nearly six million households living in 109,852 marginalized rural, peri-urban and urban localities. Its objective is to break the intergenerational cycle of poverty by enhancing the development of human capabilities through education, health, and nutrition and providing income supplements to poor families in exchange for certain commitments, such as regular school attendance and periodic health clinic visits. While income supplements were initially paid in cash at distribution points in towns, this involved a range of costs for recipient households. From 2003 an electronic payment system was introduced to make the delivery of grants more efficient and to broaden the limited financial inclusion in the country. |
| **Evaluation methodology**  | The study uses a quasi-experimental evaluation design to investigate the four-year impact of an electronic transfer programme on savings decisions, transaction costs, and coping strategies against idiosyncratic risks. The study draws on a pooled panel survey containing 3003 households and exploits the exogenous establishment of electronic payment hubs to estimate impacts through a multivariate regression framework, combined with matching techniques. |
| **Overall findings** | The results indicate that households which received their transfer in a bank account decreased their participation in informal saving arrangements, increased the frequency of remittance reception, and were more likely to use their savings to cope with idiosyncratic shocks. The authors also find a degree of outcome heterogeneity, which seems to be contingent upon the environments that characterize rural vs. urban areas in Mexico. |
| **Reported outcome areas** | Savings, investment and production |
| **Indicators reported** | Participation in informal savings, home savings, remittances and use of own savings to cope with idiosyncratic shocks |

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| **Citation** | Merttens, F., Hurrell, A., Marzi, M., Attah, R., Farhat, M., Kardan, A. and MacAuslan, I., 2013. Kenya Hunger Safety Net Programme Monitoring and Evaluation Component Impact Evaluation Final Report: 2009 to 2012. OPM Impact Evaluation Report, Oxford |
| **Name of programme(s) and country/countries** | Hunger Safety Net Programme (HSNP) (Kenya) |
| **Programme details**  | Kenya’s HSNP is an unconditional cash transfer that aims to reduce poverty in northern Kenya. During the pilot phase, the HSNP delivered regular cash transfers to beneficiary households - approximately 300,000 beneficiaries (60,000 households) - targeted under three different targeting mechanisms: *Community-based targeting (CBT):* the community collectively selects households they consider most in need of cash transfers,up to a quota of 50% of all households; *Dependency ratio (DR):*households are selected if the proportion of members under 18 or over 55 years old, disabled or chronically ill exceeds a specified number; and *Social pension (SP):*Any individual aged 55 or over is eligible for cash transfers (so one household could receive multiple transfers). |
| **Evaluation methodology**  | The study analyses the impacts of the HSNP on households after 24 months from the point of targeting. It relies on information collected via both quantitative and qualitative approaches over three years between August 2008 and November 2012. The impact evaluation is underpinned by an experimental quantitative survey design, using a randomised control trial (RCT) approach using a panelled household survey. The measure of programme impact derives from a comparison of baseline and follow-up data (after two years of programme operation) using difference-in-difference impact analysis. The evaluation includes a qualitative component, focus group discussions (with female and male beneficiaries and non-beneficiaries), key informant interviews (with community elders, teachers, labourers, minority groups and traders), household case studies (a ‘qualitative panel’ of beneficiaries and non-beneficiaries), and participatory methods (social mapping, timelines and community wealth ranking). |
| **Overall findings** | The study finds that the HSNP stops or slows the slide into poverty, has a significant impact on food security, helps households retain livestock and enables households to spend more on health care. It does not appear to be creating dependency by negatively impacting labour supply. Given the low value of the transfer, and the fact that there are no graduation criteria – i.e. households are not removed from the programme once they reach a certain level of income or assets – this result is not unexpected. In treatment areas, the proportion ofhousehold members aged 18–54 whose main activity is unpaid work has fallen with statistical significance, indicating that more household members of working age are being required to engage in income-producing activities.  |
| **Reported outcome areas** | Poverty; Education; Health; Savings, investment and production; Employment; Empowerment |
| **Indicators reported** | food security, food consumption, dietary diversity, child nutrition, livestock retention, ownership of productive assets, health expenditure, health status, education expenditure, school attendance, performance; inflation, food prices; local economy, pastoralist livelihoods; saving, borrowing credit; coping with shocks; women's empowerment (control of household budget, income-generating activities); household mobility, household dependency; vulnerability to shocks; household composition; social tensions; informal SP; self-reported changes in household work patterns and business activities; proportion of adults engaged in productive work; change in type of work |

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| **Citation** | Merttens, F., Pellerano, L., O’Leary, S., Sindou, E., Attah, R., Jones, E. and Martin, S., 2015. Evaluation of the Uganda Social Assistance Grants for Empowerment (SAGE) Programme: Impact after one year of programme operations 2012-2013. Evaluation report. Oxford Policy Management and Economic Policy Research Centre and Department of Anthropology and Sociology, University of Makerere. |
| **Name of programme(s) and country/countries** | Social Assistance Grants for Empowerment (SAGE) consisting of Vulnerable Family Support Grant (VFSG) and Senior Citizens Grant (SCG) (Uganda) |
| **Programme details as reported in the study** | This study evaluates the impact of two UCTs – a family support grant and an old age grant – which began in Uganda in 2011. The aim of the programme is to help to tackle chronic poverty and address the impact of poverty on social cohesion and the ability of chronically poor people to access healthcare, education and other key services. The target group is vulnerable families and elderly individuals. In total the transfer had reached approximately 600,000 people in 95,000 households at the time of the study. There were eligibility requirements based on proxy means testing which are not described in the study. A census-style registration process was carried out by local government. Women are selected as the main recipient of the Vulnerable Family Support Grant (VFSG). The transfer is supposed to be UGX 25,000 per month but in practice on average it was UGX 10,900 per month (13% of total household consumption). Delivery of payment is officially bi-monthly but in practice it is delivered much less frequently. The payment is delivered by electronic transfer to a bank/credit account. |
| **Evaluation methodology**  | This study has a quantitative evaluation component and a qualitative component. The evaluation is quasi-experimental in design, using regression discontinuity analysis and difference-in-difference with propensity score matching. This component uses data from a special purpose panel survey to evaluate the programme, providing a sample size of 1944 respondents for the Senior Citizens Grant, 1865 for the Vulnerable Family Support Grant. The qualitative data are drawn by 128 focus group discussions and over 140 individual interviews, covering 1,164 respondents in total. |
| **Overall findings** | The transfers both increased food expenditure however no effect was observed (yet) on child malnutrition. The VFSG transfer improved savings while SCG improved access to credit. No impacts were observed on education or health outcomes according to quantitative analysis and no significant impact was observed on empowerment of women. |
| **Reported outcome areas** | Poverty; Education; Health; Savings, investment and production; Empowerment |
| **Indicators reported** | Monthly expenditure on food (and total), meals per day; child malnutrition (stunting, wasting); purchase of productive assets; savings, access to credit; school enrolment and attendance, child labour; illness or injury in last 30 days; migration; receipt of other transfers; civic participation |

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| **Citation** | Miller, C. M., Tsoka, M. and Reichert, K., 2011. The impact of the Social Cash Transfer Scheme on food security in Malawi. *Food Policy*, 36 (2), pp. 230-238 |
| **Name of programme(s) and country/countries** | Social Cash Transfer Scheme (Malawi) |
| **Programme details**  | The intervention is an UCT, established as a pilot in 2006 to try and improve food security by targeting bi-monthly transfers to the country’s most destitute households. Intended beneficiaries were ultra-poor households (i.e. in the lowest economic quintile, with no assets, consuming one meal a day) that were also labour constrained (having a dependency ratio higher than 3). As of 2010, the programme was operational in 7 districts (out of 28) and reached over 83,000 households. Beneficiaries were identified using a mixture of CBT with PMT for welfare ranking and final section. Re-targeting took place every four years. Transfer levels depended on household size. At the time of study, monthly values were MK600, MK1000, MK1400 and MK1800 for 1, 2, 3 and 4 or more household members respectively (equivalent at the time to US$4.30, $7.14, $10 and $12.85 respectively). An additional educational bonus was added for each school going child (MK200 for primary school and MK400 for secondary school). The average transfer size was MK2000 ($14) per month). Payments were made manually and there were no formal conditions attached to receiving the transfers. |
| **Evaluation methodology**  | The study reports on the findings of a RCT, which covered 752 households. Impacts are estimated using DID. |
| **Overall findings** | Each of the tested outcomes yields large effect sizes that are highly statistically significant, demonstrating a sizeable impact of cash transfers on food security and food diversity in rural Malawi. |
| **Reported outcome areas** | Poverty; Health |
| **Indicators reported** | Weekly total/per capita expenditure; weekly total/per capita food expenditure; proportion of expenditure spent on food; proportion stating food consumption is less than enough; whether household members go more than 8 days a month without adequate food; whether household members are still hungry after meals; consumption of at least 2 meals a day; proportion eating different food groups; food diversity score. |

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| **Citation** | Miller, C. and Tsoka M., 2012. Cash Transfers and Children's Education and Labour among Malawi's Poor. *Development Policy Review*, 30 (4), pp. 499-522 |
| **Name of programme(s) and country/countries** | Social Cash-Transfer Scheme (SCTS) – Mchinji Pilot (Malawi) |
| **Programme details as reported in the study** | UCT, launched in 2006, targeted at ultra-poor households that are also labour constrained. At time of writing, it targeted 24,300 households and 98,000 beneficiaries, adopting a community-based means-tested targeting strategy. The value of the transfer depends on the size of the household and the number of school-aged children. On average, beneficiary households receive approximately US$14 (MK 2,000) per month (accounting for 60% of pre-transfer expenditures on average). |
| **Evaluation methodology**  | RCT, estimating impacts with DID. Data sources include a special purpose panel survey and school visits. The final analysis includes 1,242 children and young people in 513 households. |
| **Overall findings** | Compared with non-beneficiaries, intervention children experienced a 5 percentage point difference in enrolment, higher educational expenditures, fewer absences, and a 10 percentage point decrease in labour outside the home. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrolment rates, days absent, educational expenditures, work inside and outside home |

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| **Citation** | Mo, D., Zhang, L., Yi, H., Luo, R. ; Rozelle, S., Brinton, C., 2013. School Dropouts and Conditional Cash Transfers: Evidence from a Randomised Controlled Trial in Rural China's Junior High Schools. *Journal of Development Studies,* 49 (2), pp. 190-207. |
| **Name of programme(s) and country/countries** | CCT in North/North-West China’s junior high schools, China |
| **Programme details as reported in the study** | CCT, launched in 2009 as part of an RCT. Targeted at the poorest students ranked in each school and amounting to 500 RMB, a significant proportion of the average annual income of a farmer. Paid per semester if the child was still in school at the end of each semester with attendance rates of over 80 per cent. |
| **Evaluation methodology**  | RCT, estimating impacts with DID. Data sources: special purpose panel survey and school visits. The final analysis includes 1,242 children and young people in 513 households. |
| **Overall findings** | Compared with non-beneficiaries, intervention children experienced a 5 percentage point difference in enrolment, higher educational expenditures, fewer absences, and a 10 percentage point decrease in labour outside the home. |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | Enrolment rates, days absent, educational expenditures, work inside and outside home |

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| **Citation** | Mochiah, E. E., Osei, R. D. and Akoto, I. O., 2014. The impact of conditional cash transfer programmes on household work decisions in Ghana. WIDER Working Paper, 2014/116.  |
| **Name of programme(s) and country/countries** | Livelihood Empowerment Against Poverty (LEAP) (Ghana) |
| **Programme details**  | The LEAP cash transfer programme provides cash and health insurance to extremely poor households across Ghana to alleviate short-term poverty and encourage long-term human capital development. It started as a trial in March 2008 with 1,654 beneficiary households in 21 districts, and then began expanding gradually. By March 2012, 68,000 households from 100 districts were benefiting from LEAP. After an increase in the transfer value by the government of Ghana, the new value of the transfer corresponded to 21 per cent of consumption (up from 11 per cent initially and then 7 percent).  |
| **Evaluation methodology**  | The study examines the impact of LEAP on household supply of labour for agriculture, paid employment and non-farm enterprise. It uses a difference-in-difference approach to estimate the effects of the programme on 3,008 households.  |
| **Overall findings** | The study finds that the cash transfer leads to a reduction in agricultural labour supply but increases that of paid employment.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | households’ supply of labour for agriculture, paid employment, and non-farm enterprise; households’ overall labour supply, labour supply for agriculture, labour supply for paid employment, and labour supply for non-farm enterprises |

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| **Citation** | Novella, R., Ripani, L., Cruces, G. and Alzúa, M. L., 2012. Conditional Cash Transfers, Female Bargaining Power and Parental Labour Supply. IADB Working Paper Series, N. IDB-WP-368 |
| **Name of programme(s) and country/countries** | PRAF, PROGRESA, RPS (Honduras, Mexico, Nicaragua) |
| **Programme details**  | The paper examines how the bargaining power structure of households affects the parental labour supply response to conditional cash transfers, looking at three CCTs: PRAF, PROGRESA and RPS. PRAF was implemented by the Government of Honduras in the early 1990s as a compensatory mechanism to mitigate the impact of macroeconomic adjustments on the poor and to alleviate structural poverty. In 2008 it reached a target population of 173,000 households containing children aged between 0 and 14 years. The objective of the programme is to encourage poor households to invest in human capital (primarily education and health) through the CCT. PROGRESA was first implemented in 1997and was originally geographically targeted by locality, based on a poverty index. The RPS was implemented in 2000, with the main objective of improving households’ human capital. PRAF is the least generous programme with a cash transfer equivalent to 4 percent of household consumption, followed by RPS with a transfer equivalent to 18-20 percent of household consumption, and finally PROGRESA with a cash transfer equivalent to 20-40 percent of household consumption.  |
| **Evaluation methodology**  | The experimental design in the three countries provides a strong identification strategy that allows the authors to attribute the differences in fathers’ and mothers’ labour supply between treatment and control groups to the impact of the corresponding CCT programme. Using a sub-sample of couple households who are observed as intact in the entire period of analysis, the authors calculate a measure of bargaining power as the ratio of the number of years of school completed by the mother to the number of years of school completed by the father to explore how it could potentially lead to different impacts of CCTs on two main indicators of labour supply: weekly hours worked and employment. |
| **Overall findings** | The paper tests whether, in addition to the regular channels through which CCTs might affect adults’ labour supply, the distribution of power in the household might play a role in explaining unintended behavioural responses capable of offsetting CCTs transfer effects. The paper finds that CCT programmes slightly change paternal and maternal labour supply and that this effect depends on the distribution of power in the household. In the sample of PROGRESA, the CCT seems to reduce maternal labour supply (probability of being employed) and increase paternal labour supply (worked hours). RPS seems to reduce paternal worked hours. In addition, the results show that the CCT impacts on labour supply of mothers and fathers varies with the distribution of power in the household. Particularly in PRAF, the CCT allows women with more bargaining power to decrease their labour supply and make their husbands increase their labour supply. In most cases, the impact of these CCTs on adult labour supply is small and insignificant, even when heterogeneity due to the distribution of power in the household, is considered. Despite the large differences in CCT sizes, the authors do not find that the changes in labour supply to be correlated with the size of the grant. This also strongly suggests that there are little adult labour supply changes due to the CCT. |
| **Reported outcome areas** | Employment; Empowerment |
| **Indicators reported** | parental worked hours, parental employment; potential heterogeneous effects related to the distribution of power in the household, of CCTs on worked hours and employment (takes maternal bargaining power into account) |

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| **Citation** | O'Brien, C., Marzi, M., Pellerano, L. and Visram, A., 2013. Kazakhstan: External evaluation of BOTA programmes. OPM , IFS and BISAM Final Report |
| **Name of programme(s) and country/countries** | BOTA (Kazakhstan) |
| **Programme details**  | The BOTA Foundation set up the conditional cash transfer programme to improve the lives of children in Kazakhstan by offering a regular monthly income to poor households to increase access to education and other social sector services. To be eligible, the household must live in an area supported by the CCT, and must contain a member that matches one of the four defined categories of beneficiary: (i) children aged 4+ until they must start school; (ii) women who are pregnant or have an infant under six months; (iii) children with disabilities; and (iv) school-leavers aged 16-19 who are starting work. Eligibility rules also require households to qualify as poor according to a short computer test that compares its characteristics with households from the national household survey. Transfer values in 2012 ranged between 24US$ and 35US$ per beneficiary per month.  |
| **Evaluation methodology**  | The report examines three sets of questions, concerning: programme impact, operational effectiveness and targeting effectiveness. For the programme impact evaluation, the report focuses on BOTA’s Early Childhood Development (ECD) component in the Almaty province. It estimates impact by comparing outcomes in two similar groups of communities: one that received BOTA’s CCT in 2011-12 and one that did not. Relying on a cluster randomised control trial (randomisation by group of villages), the report uses a d’ difference-in-difference approach to estimate BOTA’s impact on the households that it intended to reach. |
| **Overall findings** | The report finds that the BOTA did not have an effect on household composition, has reduced the need to resort to inadequate care and is associated with an increase in pre-school attendance. It has also had positive effects on some aspects of health care. It seems that the CCT has not encouraged previously economically inactive people to look for a job. This is in line with what was expected, as the CCT was not designed to affect the work choices of all household members including teenagers and pensioners. But the CCT seems to have led to a small but significant increase in the proportion of the child's main carers who are in paid employment outside the household (28% in treatment areas vs. 21% in control areas). Moreover, carers who work are likely to be engaged in economic activities for roughly three hours per week more as a result of the BOTA programme. There is a reduction in the small proportion of main carers who are engaged in self-employment, and a small but statistically insignificant drop in those who say they are economically inactive. Despite this, most carers (67%) remain economically active, as they are often still looking after other young children at home.  |
| **Reported outcome areas** | Education; Health; Employment; Savings, investment and production; Poverty |
| **Indicators reported** | household composition; child care and home environment; pre-school enrolment and attendance; conditions at pre-school; health and nutrition (e.g. dietary diversity, meals/day, pneumonia, diarrhoea); sources of income; economically active/inactive, paid employment outside the household, proportion of people in or out of work, economic activity status, employment of child's main carer; institutional and informal transfers; consumption and savings  |

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| **Citation** | Oosterbeek, H., Ponce, J., and Schady, N., 2008. The Impact of Cash Transfers on School Enrollment: Evidence from Ecuador. Policy Research Working Paper. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (BDH) (Ecuador) |
| **Programme details as reported in the study** | UCT (with strong social marketing campaign encouraging school attendance and visits to health centres), launched in 2003 to improve the formation of human capital among poor families in Ecuador. The programme’s education component aims at children from the ages of 6 to 15. The transfer equals US$ 15 per family per month and is independent of the number of children. Some surveys indicate that 1/3 of the beneficiaries state that they believe that the transfers are conditional. |
| **Evaluation methodology**  | RCT, using DID and RDD to estimate impacts. Data comes from the programme’s special purpose panel survey. In the paper, 1309 families around the first quintile of the poverty index were randomly assigned to treatment and control groups. For the regression discontinuity design data were collected from 1221 families around the second quintile of the poverty index. |
| **Overall findings** | Around the first quintile of the poverty index the impact is positive (10%) while it is equal to zero around the second quintile. This suggests that for the poorest families the programme lifts a credit constraint while this is not the case for families close to the eligibility threshold. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment rates |

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| **Citation** | Ospina, M., 2010. The Unintended Effects of Conditional Cash Transfer Programs: An Empirical Analysis of Familias En Accion. PhD Dissertation. Georgia State University. |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details as reported in the study** | Familias en Acción is a conditional cash transfer set up in 2002 to foster the accumulation of human capital. It has 1.5 million beneficiaries. Targeting is based on geographic targeting of communities that meet a specific list of criteria (including infrastructure and size) and poverty targeting of poor households (those in the poorest income quintile). There is a nutritional and education component. All beneficiary households with children aged less than seven can receive the nutrition transfer, which is conditional on health check-ups, vaccinations and attendance in health courses. There is an additional education component for children aged 7-18, conditional on regular school attendance. The transfer level for the education component depends on the age of the child and transfers are paid bi-monthly. Average transfer received per household is COP$61,500, which represents approximately 25% of average household income of beneficiary households. |
| **Evaluation methodology**  | This study has a quasi-experimental research design and employs DID and Tobit models. The data comes from a special purpose panel survey (with some attrition), covering 6,519 households. |
| **Overall findings** | The programme is effective in protecting food consumption, but not non-food consumption from shocks, and it reduces consumption fluctuations in response to idiosyncratic shocks but not to covariate shocks. The programme consistently reduces the number of hours of child labour and increases the number of study hours, but not school attendance, for households under shocks; programme provides strong incentives for children to combine work and school when households are exposed to shocks. Males increase paid work at the expense of domestic labour and females increase domestic labour at the expense of leisure time. There are positive impacts on hours spent in school (for those not previously in school) and a decrease in domestic labour, particularly for young children. There is a significant decrease in paid work for older boys (not significant for other groups).  |
| **Reported outcome areas** | Poverty; education; employment;  |
| **Indicators reported** | Interaction of treatment and different shocks on: total consumption ; food consumption ; non-food consumption; consumption as response to shock ; children’s time at school and at work ; children’s participation in school full time and work full time; hours of paid work; hours of domestic labour ; hours of school ; hours spent on leisure; hours spent on homework/ studying ; participation in paid work ; participation in domestic work, participation in leisure time activities  |

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| **Citation** | Parker, S. W. and Skoufias, E., 2000. The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report.  |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA is a conditional cash transfer, first introduced in 1997, and that has grown rapidly, now covering 2.6 million families in extreme poverty in rural areas, corresponding to about 40 percent of all rural families in Mexico. PROGRESA selects its beneficiary families through a three stage targeting mechanism. At the household level, households are judged to be poor not only on the basis of income levels but on the basis of a number of other characteristics as well, such as running water in the household, dependency ratios, ownership of durable goods, animals and land, and the presence of disabled individuals. After three years, families may renew their status as PROGRESA beneficiaries, subject to a re-evaluation of their socio-economic conditions. Cash benefits correspond on average to a 22% increase in the income levels of the beneficiary families and are given directly to the mother of the family. The majority of benefits are linked to children’s school attendance.  |
| **Evaluation methodology**  | The report analyses the impact of PROGRESA on work and time allocation of its beneficiaries. It estimates the impact of PROGRESA on work activities of men, women and children using before and after programme implementation data. It also uses a special time use module to look at the impact of PROGRESA on leisure time, as well as time allocated to different work activities and school in the case of children. To analyse participation in work for both adults and children, the authors use difference-in-difference Probit models. To estimate the impact on hours spent in each activity, they use Heckman selection correction equations.  |
| **Overall findings** | The paper’s results show clear negative impacts of PROGRESA on children’s labour market participation. Labour force participation for boys show reductions as large as 15 to 25% relative to the probability of participating prior to the program. For girls, in spite of their overall lower participation level prior to the programme, there are also significant reductions associated with PROGRESA. With respect to adults, the results in general show that there has been no particular reduction in labour market participation rates. These results may in part reflect the design of PROGRESA, where benefits are provided to families for three years, irrespective of family income, so that there is no disincentive effect on work, as opposed to transfer programmes in other countries which often reduce benefits with work income. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | work and time allocation: labour market participation; number of hours worked (for adults and children) |

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| **Citation** | Paxson, C. and Schady, N., 2010. Does Money Matter? The Effects of Cash Transfers on Child Development in Rural Ecuador. *Economic Development and Cultural Change*, 59 (1), pp. 187-229.  |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details**  | The intervention is an UCT that started in 2003. It replaced the earlier *Bono Solidario* with improved means-based testing to target regular transfers to the poorest households. Transfers were targeted to mothers of households that were in the poorest two quintiles of a government poverty ranking. 85 percent of families in rural areas and poorer urban areas of Ecuador were surveyed and assigned a poverty index (called the Selben index) which was used to assess eligibility for the programme. Transfers were equivalent to US$15 per month per family, which represented a 10 percent increase in family expenditure for the average eligible family. This was relatively small by comparison to other cash transfers in Latin America. Transfers were made through banks, though beneficiaries did not require an account to receive transfers and they were allowed to accumulate them for up to four months. Although the programme was not explicitly conditional, it was advertised as a social programme intended to benefit children. This could have produced a “flypaper” effect, so that families used these transfers differently from other sources of income. |
| **Evaluation methodology**  | The evaluation involved a RCT covering a full sample of 3244 households (though results were only presented for rural households). Seemingly unrelated regression was then used to estimate impacts of the programme. |
| **Overall findings** | They found no treatment effects for the sample as a whole, but did find positive but modest effects for the poorest children. Consistent with these results, they found that the haemoglobin levels of the poorest families in the treatment group improved, and that the poorest children in the treatment group were more likely to receive deworming treatments. |
| **Reported outcome areas** | Education; Health; Empowerment |
| **Indicators reported** | Cognitive and behavioural indicators (Spanish version of Peabody picture vocab test, Woodcock-Johnson-Munoz cognitive tests and Behaviour Problems Index); child physical development (haemoglobin level, height-for-age and fine motor control); mother's physical and mental health (haemoglobin level, depression scale, measure of maternal punitativeness and lack of warmth and subjective social status). |

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| **Citation** | Pellerano, L., Jakobsen, M., Moratti, M. and Barca, V., 2014. Lesotho Child Grant Impact Evaluation. Oxford Policy Management, Oxford. |
| **Name of programme(s) and country/countries** | Child Grant Programme (Lesotho) |
| **Programme details**  | The Child Grant is an UCT established in 2011 targeting poor and vulnerable households with children. As of March 2014 it covered 19,800 beneficiary households. The programme uses community-based targeting to identify eligible households. Transfers were M360 (US$36) for households with 1-2 children, M600 ($60) if 3-4 children and M750 ($75) if 5 or more children. This represented around 21% of household monthly consumption. Transfers were paid quarterly through manual payments. Respondents received a very effective messaging that that the cash transfer should be spent on children. Complementary activities included Emergency Support Grants, which were bi-monthly top-ups of M400 disbursed with the Child Grant Programme. |
| **Evaluation methodology**  | The programme evaluation was designed as a RCT, which covered a sample of 2701 households. The study employed DID to estimate the impacts of the study. |
| **Overall findings** | The programme contributed to increasing levels of expenditure on schooling, clothing and footwear for children. However, it was not associated with a significant reduction in poverty rates among beneficiary households two years after the introduction of the pilot, though welfare in other areas had increased (e.g. real consumption expenditure and food security). No effects were found on access to health facilities, though there was a significant reduction in the proportion of young children suffering an illness. There was also a significant effect on school enrolment, though no noticeable impact on other dimensions of school progression. Evidence was mixed on child time use. Among the households more generally, there was no clear impact on labour participation, though the grant was associated with increasing crop-based farming investments and activities but limited impact on livestock activities. No detectable impacts were found on savings or borrowing, though beneficiaries were significantly less likely to engage in disruptive coping strategies. |
| **Reported outcome areas** | Poverty: Education; Health; Savings, investment and production; Employment |
| **Indicators reported** | Average monthly amount spent on range of food and non-food items; real monthly total consumption expenditure per household/per capita/adult equivalent; dietary diversity index; proportion of households that consumed specific food group in past week; food availability (range of indicators); poverty headcount; poverty gap; severity of poverty; engagement in range of specific coping strategies; utilisation of health services; amount spent on child healthcare; child experience of illness (various indicators); ownership of child health card; number of growth monitoring checks; child weight; school/nursery enrolment; proportion of children missed school; average number of days missed; school progression and completion (various indicators); expenditure on education (various indicators); ownership of school related items (various indicators); number of hours spent on activities (various indicators); engagement in work (various indicators); child hours spent in any labour activity; birth registration; child needs deprivation (various indicators); any income from (range of sources); engagement in / hours spent on (range of labour activities); operation and success of non-farm enterprises; ownership and use of land (range of indicators); crop production (various crops); use of inputs (various); purchase of production assets; ownership of livestock (range of livestock); income from sales of livestock by-products; use of livestock inputs; housing quality; use of credit; made savings (range of options); receipt of other transfers including remittances / amount received; receipt of range of informal support. |

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| **Citation** | Perova, E., and Vakis, R., 2012. Five Years in Juntos: New Evidence on the Program's Short and Long-Term Impacts. *Economía*, 35 (69), pp. 53-82 |
| **Name of programme(s) and country/countries** | Juntos (Peru) |
| **Programme details as reported in the study** | Juntos is a CCT which began in 2005 with the aim of breaking the intergenerational transmission of poverty. The programme targets households below poverty line with children under 14 years. Eligible districts are first selected according to exposure to violence and poverty level then household eligibility is assessed using a proxy means-test using poverty indicators that are constructed using census data. The timing of the roll-out of treatment is essentially randomised across districts. Households receive a lump sum of 100 Nuevos Soles each month providing they comply with regular health conditions – health checks for children under 6, pre-natal and post-natal checks for women – and education conditions – school attendance of at least 85% for children 6-14 who did not complete primary school. |
| **Evaluation methodology**  | The study design is quasi-experimental, making use of instrumental variable analysis, matching, and intensity (dose) analysis. The data come from a special purpose longitudinal survey collected in order to evaluate this programme. |
| **Overall findings** | Almost all indicators are higher (better) among beneficiaries with longer treatment spells. The effects on the whole are very small. |
| **Reported outcome areas** | Poverty; Education; Employment; Health; Empowerment |
| **Indicators reported** | Consumption (expenditure); received health check; received vaccination; did not experience illness; maternity-related indicators; child school attendance and labour |

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| **Citation** | Ponce, J. and Bedi, A. S. 2010. The Impact of a Cash Transfer Program on Cognitive Achievement: The Bono de Desarrollo Humano of Ecuador. *Economics of Education Review.* 29, pp.116-125  |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | Starting in 2003 as a CCT, the main objective of BDH is to improve the formation of human capital among poor families through providing cash transfers relating to education and health. In return for the educational transfers, children aged 6-15 years old must enrol in school and attend 90 percent of school days a month. The health component required children under 6 years to attend health centres for bimonthly growth and development monitoring check-ups. Such children also receive nutritional supplements and immunisation. |
| **Evaluation methodology**  | The study uses a quasi-experimental design, employing a fuzzy RDD using an IV approach that exploits BDH’s targeting mechanism. The data used come from a single cross section gathered between November 2004 and February 2005, around one and a half years after the launch of the BDH. |
| **Overall findings** | The study finds that, regardless of the specification and sample used, there was no impact of the program on test scores, suggesting that attempts at building human capital, as measured by cognitive achievement, require additional and alternative interventions to those employed in BDH. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Mathematics and language test scores |

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| **Citation** | Ramirez-Silva, I., River, J. A., Leroy, J. L. and Neufeld, L.M., 2013. The Oportunidades Program’s Fortified Food Supplement, but Not Improvements in the Home Diet, Increased the Intake of Key Micronutrients in Rural Mexican Children Aged 12–59 Months. *The Journal of Nutrition*, 143 (5), pp. 656-663.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | The aim of Oportunidades is to break the intergenerational cycle of poverty by using cash transfers, targeted to the poorest families, as incentives for investing in children’s education, health, and nutrition. In addition to cash transfers, households with young children are provided with a fortified food supplement (Nutrisano) plus a basic primary health care package that includes nutrition education. Pregnant and breastfeeding mothers also receive a fortified food (Nutrivida). |
| **Evaluation methodology**  | The study notes that the specific programme components responsible for improvements in child nutrition had not been identified and sets out to investigate the underlying causes, exploiting the fact that not all children from beneficiary households consumed the nutritional supplement. The programme impact on dietary intake was estimated using multiple linear regression models. A total of 1601 children were included in the analysis. |
| **Overall findings** | Comparisons were made among children who received all the benefits of Oportunidades, including the fortified food supplement (SG), beneficiaries of the programme who did not consume the food supplement (NSG), and the control group (CG). Relative to the NSG and CG, respectively, the SG consumed greater amounts of energy, iron, 7.6 (6.3, 8.9) and 7.7 (6.5, 9.0) mg/d; zinc, 7.5 (6.4, 8.6) and 7.6 (6.5, 8.7) mg/d; and vitamin A, 0.109 (0.071, 0.147) and 0.120 (0.080, 0.159) mg retinol equivalents/d. No differences were found between the NSG and CG (P > 0.05). The Oportunidades programmes therefore is seen to have had a positive impact on the diet of children, though the effects of the programme on dietary intake resulted from the food supplement and not from improvements in the home diet. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Child daily intake of energy, iron, zinc and Vitamin A. |

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| **Citation** | Raymond, M. and Sadoulet, E, 2003. Educational grants closing the gap in schooling attainment between poor and non-poor. CUDARE Working Paper, no. 986. Department of Agricultural and Resource Economics, University of California, Berkeley. |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | CCT, born in 1997 and designed to encourage poor families in rural areas to invest further in their children’s education and human capital in general. Higher investments are promoted with educational grants, nutritional cash transfers and monthly visits to the health clinic. The educational component constitutes of a monthly stipend (capped at 790 pesos or about $90 per month per household in January 2000) given for every child attending 3rd grade of primary school through the 3rd year of secondary school. These benefits increase with each grade, with a large increase between primary and secondary school (slightly higher for girls than for boys in secondary school). The grants are paid to the mother of the family every two months, conditional on a minimum attendance of 85% of school days per month. The programme also provides an amount for school supplies at the beginning of every school year. In 2000 the programme was reaching 2.6 million. |
| **Evaluation methodology**  | Quasi-experimental design measuring impact using ITT. Data sources are the baseline survey (Encaseh) of November 1997 and the evaluation surveys (Encel) of October 1998 and November 1999 (11,000 households with school-aged children). |
| **Overall findings** | While drop-out rates increase by .3% going down each percentile in poverty, the grants more than compensate this effect by reducing the drop-out rate by .5% for every percentile of poverty. These gains cumulate to raise schooling attainment of poor children by .6 year. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Drop-out rates (enrolment rates) |

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| **Citation** | Ribas, R. P., 2014. Liquidity constraints, informal financing and entrepreneurship: Direct and indirect effects of a cash transfer programme. Working Paper 131. International Policy Centre for Inclusive Growth |
| **Name of programme(s) and country/countries** | Bolsa Familia (Brazil) |
| **Programme details**  | Bolsa Familia is a CCT established in 2003. By 2006, eligible households included extremely poor families with no children, those whose per capita monthly income was below US$ 38, and poor families with children up to 15 years old or pregnant women, whose per capita monthly income was below US$ 76. In 2006 the programme covered about 20 per cent of Brazilian households, 70 per cent of them living in urban settlements. Transfers were means-tested, based on income reported by beneficiaries on the single registry of social policies, which is cross-checked with other government databases. The monthlybenefit is composed of two parts: US$ 38 for extremely poor families regardless of the number of children, and US$ 11 per child, up to three children, for poor families. Families that receive the benefit can be dropped from the programme if they do not comply with a number of conditionalities and also if their per capita income becomes greater than the eligibility cut-off point. Benefits required household commitment in terms of children’s attendance at school and attending health services. However, if the family registered was extremely poor with no children, the transfer was considered unconditional. |
| **Evaluation methodology**  | The study employed a quasi-experimental approach, using Fixed Effects regression and IV with repeated cross-section surveys from Brazil's National Household Survey (PNAD). The full sample covers 129,298 individuals. |
| **Overall findings** | Results suggest that the programme, which assists 20 per cent of Brazilian households, has increased the number of small entrepreneurs by 10 per cent. However, this increase is almost entirely driven by the indirect effect (i.e. spill overs to others rather than beneficiaries themselves), related to an increase in private transfers among poor households. The direct response of participants actually reduces the overall effect by 40 per cent. This drawback seems to be induced by households’ risk of losing the benefit when their earned income increases. |
| **Reported outcome areas** | Savings, Investment and Production; Employment |
| **Indicators reported** | Decision of being a small entrepreneur |

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| **Citation** | Ribas, R. P., Teixeira, F. V. S. C., Silva, E. and Hirata, G., 2010. Beyond cash: assessing externality and behaviour effects of non-experimental cash transfers. Working Paper 65. International Policy Centre for Inclusive Growth, Brasilia, Brazil |
| **Name of programme(s) and country/countries** | Tekoporã (Paraguay) |
| **Programme details**  | The programme is a CCT established in 2005 and designed as part of the general effort to meet the Millennium Development Goals. The programme seeks to reduce extreme poverty by giving direct cash transfers to poor households with children, and to lessen potential future poverty by encouraging investments in human and social capital. Households were eligible for the programme if they met all of the following conditions: (1) had children under 15 years of age or pregnant women; (2) lived in the priority areas of the programme (the poorest districts in the country), and (3) have a non-monetary quality of life index of below 40 points. The pilot covered about 4,500 households in five districts of two departments. By 2009 it had reached 15 districts in five departments. Transfers were composed of a basic transfer of 60,000 guaranies (US$ 12) per month plus 30,000 guaranies (US$ 6) per child or pregnant woman up to a limit of four children per household. Transfers were paid monthly and were conditional on school attendance, regular visits to health centres and periodic immunisations. The programme also included a family support component that, among other objectives, aimed to increase the household’s productive capacity and social participation. |
| **Evaluation methodology**  | The study used a quasi-experimental approach, drawing on a census and evaluation survey follow-up, estimating impacts using a combination of PSM and Weighted Least Squares. The evaluation sample covers a total of 1089 households. The approach used also aims to disentangle income effects from substitution effects and unexplained effects. |
| **Overall findings** | The results indicate that the programme has a small impact on consumption and a considerable impact on savings. In the absence of externalities, however, the programme would have a higher effect on consumption, mostly associated with the cash transfer, and a lower effect on savings. The impact on the pattern of consumption is significantly related to a substitution effect and is not related to the increase in income. |
| **Reported outcome areas** | Poverty; Savings, investment and production |
| **Indicators reported** | Household consumption (per capita, per capita food consumption, savings rate, share of food and other categories of expenditures) |

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| **Citation** | Rubio-Codina M., 2009. Intra-household time allocation in rural Mexico: Evidence from a randomized experiment. *Research in Labour Economics*, 31, pp. 219-257 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details as reported in the study** | Launched in 1997, Oportunidades is an antipoverty programme aiming to increase basic education school enrolment and reduce child labour by linking part of the benefit to school attendance. More generally, the CCT provides financial incentives for positive behaviour in health, education and nutrition. 5 million beneficiary households in 2008. |
| **Evaluation methodology**  | RCT, using DID to estimate impacts. Data consists of the programme evaluation’s special purpose panel survey, a panel of the 24,077 eligible and ineligible households in the 506 eligible experimental communities. The final sample consists of the 35,148 individuals in 7,967 eligible households with weekday time use information in May 1999. |
| **Overall findings** | Findings show increases in schooling and reductions in children’s participation in market and nonmarket work. Although the pro-gram does not seem to substantially alter adults’ time allocation, evidence suggests that adult women substitute for children’s time in non-remunerated activities. |
| **Reported outcome areas** | Empowerment; Employment; Education |
| **Indicators reported** | Intra-household time allocation, market (paid) work, farm work, domestic work and the sum of the three (all work), schooling and leisure |

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| **Citation** | Ruiz-Arranz, M., Davis, B., Handa, S., Stampini, M. and Winters, P., 2006. Program Conditionality and Food Security: The Impact of PROGRESA and PROCAMPO Transfers in Rural Mexico. *Revista Economia*, 7 (2), pp. 249-278 |
| **Name of programme(s) and country/countries** | PROGRESA/ PROCAMPO (Mexico) |
| **Programme details as reported in the study** | This study evaluates and compares the impact of two interventions: Procampo and Progresa. Progresa: Targets poor households within poor communities with transfers which are given to the mother of the family, a strategy built on the assumption that women have expenditure preferences that are most conducive to improving the children’s education and nutrition. At the time of the study the transfer has reached around 2.6 million households. Eligibility is determined first at the community level (poor communities) and at the household level by a proxy means test (on what indicators it is not clear). On average, the bimonthly payments to households are equivalent to 29% of average per capita household income. Continued receipt of transfers is conditional on school attendance and health clinic visits. Procampo: Began in 1994 with the aim of alleviating poverty and food insecurity and promoting rural development, specifically to off-set the negative effects of the NAFTA on farmers. Eligibility is determined by the total number of hectares of nine key crops on a farmer’s land. Almost 3 million farmers receive the transfer at the time of the study and the transfer is very large, equivalent to around US$329 per recipient and US$68 per hectare (presumably per year although this is not stated). Payments are made twice a year on the condition that the land continue to be used to grow the specified crops. |
| **Evaluation methodology**  | The study uses a quasi-experimental method in which instrumental variable analysis is used to estimate the treatment effect. The data come from the official panel surveys of the programmes. |
| **Overall findings** | Both programmes increase total consumption but through different means: Progresa through increased food purchases, Procampo through increased yield from home production. |
| **Reported outcome areas** | Poverty; Health |
| **Indicators reported** | Food consumption per person per month (disaggregated into type of food); caloric availability; calorie share; dietary diversity; food purchased; calories from home production. |

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| **Citation** | Ruiz-Arranz, M., Davis, B., Stampini, M., Winters, P. and Handa, S., 2002. More Calories or More Diversity? An econometric evaluation of the impact of the PROGRESA and PROCAMPO transfer programmes on food security in rural Mexico.  |
| **Name of programme(s) and country/countries** | (1) PROGRESA, (2) PROCAMPO (Mexico) |
| **Programme details**  | PROGRESA: A CCT set up in 1997 as a mechanism for addressing extreme poverty in rural areas. A primary thrust of PROGRESA is to develop the human capital of poor households by improving education, health and nutrition outcomes. Average payments to beneficiary households in 1997 were substantial, representing 29 percent of average per capita income of beneficiaries. Transfers were aimed at women in poor households, and made bi-monthly. By the end of 1999, PROGRESA provided bimonthly transfers to approximately 2.6 million households or about 40 percent of all rural families and 11 percent of all Mexican families. The programme operated in almost 50,000 communities, and had a budget of around 20 percent of the total budget allocation for poverty alleviation. Targeting included identification of ‘marginal’ communities with high poverty indicators, followed by households, using a household census, combined with community validation. Payments are made contingent upon families visiting health clinics, attending public health lectures, and sending their children to schoolPROCAMPO: Established in 1994 to support a 15-year transition to free trade, transfers are aimed at producers, typically men. Eligibility was given to land parcels and those with usufruct over these land parcels. PROCAMPO covered 95 percent of the cultivated area in Mexico that had been planted in corn, beans, sorghum and wheat, covering on average 14 million hectares of land each year, reaching almost three million producers in 1998. An eligibility roster was fixed prior to the start of programme and no new properties were added. Producers are given a fixed payment per hectare, based around the total hectares of nine key crops (corn, beans, rice, wheat, sorghum, barley, soybeans, cotton and cardamom) that were planted in the three agricultural years prior to and including August 1993. In 1997, payments – made annually - averaged US$329 per recipient and US$68 per hectare. Transfers were made by cheque. PROCAMPO requires farmers to continue to produce on the land registered in the programme, though monitoring of actual planting is haphazard. |
| **Evaluation methodology**  | A combination of experimental and quasi-experimental approaches were used, drawing on the randomised experimental data from the PROGRESA evaluation. A range of regression approaches were used, including OLS, Probit, IV and a Heckman selection model. The full sample covers 9841 households. |
| **Overall findings** | The authors show that both programmes boost total food consumption and caloric intake in similar proportions. However, PROCAMPO has a larger impact on meat and vegetables consumption and PROGRESA on the other food category. Furthermore, increased food security is achieved through different channels: PROGRESA through purchases while PROCAMPO through investment in home production. They also find that cash transfers linked to information on nutrition and health increase food diversity. PROCAMPO households that also receive PROGRESA, and the information that goes with it, are more likely to be eating a more varied diet than households that get PROCAMPO only. |
| **Reported outcome areas** | Poverty; Health; Savings, investment and production |
| **Indicators reported** | Total expenditure on food and specific foods, share of total food consumption represented by different food groups, caloric availability from range of food groups, probability of eating range of food groups, number of foods eaten, a range of dietary diversity indices, calories from home production. |

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| **Citation** | Sadoulet, E., de Janvry, A. and Davis, B., 2001. Cash Transfer Programs with Income Multipliers: PROCAMPO in Mexico. *World Development*, 29 (6), pp. 1043-1056 |
| **Name of programme(s) and country/countries** | PROCAMPO (Mexico) |
| **Programme details**  | PROCAMPO is a crop-based cash transfer that began in 1994 and was introduced to compensate farmers for the expected negative effect of the North American Free Trade Agreement on the price of basic crops. Eligible households included those that had planted at least one of the nine eligible staple crops during the 1991-93 agricultural cycles. The programme had substantial coverage, covering 95% of the area that had been planted in corn, beans, sorghum and wheat. Transfers were made on a per hectare basis. In 1997, transfers represented on average US $329 per recipient and US$ 68 per hectare, which was 46% of gross maize income for a farmer obtaining an average yield of 1.06 tonnes per hectare at average prices. Transfer levels were supposed to remain constant in real terms for 10 years though this was not maintained. Transfers represented around 8% of total household income in 1997 for households in the targeted Ejido communities. Payments were made twice a year (based around the two agricultural cycles), and were collected from one of over 700 offices around the country. Transfers were conditional on land being used for crops, livestock or forestry, or being part of an approved environmental programme |
| **Evaluation methodology**  | The study uses quasi-experimental methods with a nationwide panel survey of Ejido communities, with 958 households in the sample used. It employs Robust Regression estimation to estimate the impacts of the programme. |
| **Overall findings** | The study estimates income multiplier effects from PROCAMPO in the range of 1.5-2.6. Impacts are enhanced for those households that have access to technical assistance. Overall, the income multiplier decreases from 0.33 to 0.23 when technical assistance is not received. |
| **Reported outcome areas** | Poverty |
| **Indicators reported** | Change in agricultural income |

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| **Citation** | Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres-Pereda, P., De la Cruz-Góngora, V., Ángeles-Tagliaferro, G. and Téllez-Rojo Solís, M. M., 2014. Impact evaluation of the non-contributory social pension programme 70 y mas in Mexico. Impact Evaluation Report. International Initiative for Impact Evaluation.  |
| **Name of programme(s) and country/countries** | 70 y más (Mexico) |
| **Programme details as reported in the study** | The intervention studied here is an old age pension that was introduced in 2007 to improve the living conditions of the elderly poor and to improve the social protection of the elderly in Mexico. The target group is individuals aged 70 or older and living in a locality with 2,500 or less inhabitants (this expanded to those residing in a locality with 30,000 or fewer inhabitants after 2011). Initially there were 1 million beneficiaries, which rose to 1.8 million by after 2 years. Eligibility depends on being 70 years or older and residing in a rural locality (with 2,500 or fewer inhabitants). Localities were incorporated gradually into the programme meaning that roll-out was staggered. The transfer is 500 Mexican pesos (approximately US$40) per month and payment is distributed every two months. |
| **Evaluation methodology**  | Since treatment allocation is not random, a quasi-experimental method is used, namely difference-in-difference with fixed effects. The data come from a special purpose panel survey to evaluate the programme consisting of 5270 individuals in both waves, reduced to 4023 for nutrition indicator sample. |
| **Overall findings** | Transfers raised protein and carbohydrate intake and increased the adequacy level of this intake. The impact on energy, macronutrient intake and the adequacy of intake were significantly higher among women. The transfer reduced mild and severe depression symptoms, particularly among women, non-indigenous and the poorest; transfer improved elderly participation in decision-making and spending decisions. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | BMI; within normal BMI range; total energy, carbohydrate, protein and fat intake; adequacy of energy and macronutrient intake; depression (mild/ severe); beneficiary participates in household decision-making; beneficiary participates in household spending decision-making. |

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| **Citation** | Schady, N., Araujo, M. C., 2006. Cash transfers, conditions, school enrollment, and child work: evidence from a randomized experiment in Ecuador. Policy Research Working Paper Series, 3930. The World Bank. |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | The Bono de Desarrollo Humano is an intervention designed as a CCT but with low publicising of conditions and no consistent enforcement of them in practice. It was introduced in 1999 with the intention to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. The programme targets the poorest 40% of households, who are identified using a mean-test of household wealth (an index constructed using census data). In the first phase, the transfer was equivalent to 15 US$ per month, increasing to 30 US$ in 2007 and then to 35 US$ in 2009. Payments are collected from the local bank. |
| **Evaluation methodology**  | The study uses a quasi-experimental method, relying on a difference-in-difference estimator and using data from a special purpose panel survey.The sample size ranges from 666 to 3001 depending on the model. |
| **Overall findings** | Transfer had a large, positive impact on school enrolment, about 10 percentage points, and a large, negative impact on child work, about 17 percentage points. A significant effect on school enrolment was observed ONLY when the recipient believed there was a condition attached (although the condition was not real and was never enforced). |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | School enrolment; child worked in the last week (regardless of whether paid or not). |

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| **Citation** | Schady, N. and Araujo, M. C., 2008. Cash Transfers, Conditions, and School Enrollment in Ecuador. Economia: Journal of the Latin American and Caribbean Economic Association, 8 (2), pp. 43-70 |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | BDH is a large cash transfer programme which, as of 2004, had a budget of around 0.7 percent of Ecuador’s GDP. Eligibility for transfers is determined by a proxy means test which, in theory, should see the 40 percent of households with the lowest proxy scores eligible for the $15 monthly transfers (which accounts for about 9 percent of pre-transfer household expenditure). However, initially the government did not have the budget to make transfers to all households in the first two quintiles of the composite welfare index, so expansion of the coverage of benefits took place gradually. While transfers were originally intended to be conditional on school enrolment and attendance among others, in practice the programme did not monitor the schooling condition because of administrative constraints. |
| **Evaluation methodology**  | The study draws on baseline and follow-up data designed for the official BDH evaluation, comprising a sample size of 1306 households and 2875 school-aged children. It exploits the random allocation of households into the treatment and control groups and estimates effects using OLS and IV estimators. The study also estimates the differences in outcomes between households that believed there to be a condition attached to the transfer versus those that did not using matching methods. |
| **Overall findings** | The reduced-form estimates imply that school-aged children in households that were BDH lottery winners were 3.2 to 4.0 percentage points more likely to be enrolled in school than children in households that were lottery losers. The results are robust to defining the dependent variable in levels or changes, and they are insensitive to the addition of a large number of controls. Their findings on the effect of perceived conditionalities suggest that the impact of the BDH programme on enrolment was only significant among households that believed there was a schooling requirement associated with the transfers. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment |

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| **Citation** | Schady, N. and Rosero, J., 2007. Are cash transfers made to women spent like other sources of income? Policy Research Working Paper 4282. The World Bank |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details as reported in the study** | The Bono de Desarrollo Humano is an intervention designed as a CCT but with low publicising of conditions and no consistent enforcement of them in practice. It was introduced in 1999 with the intention to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. The programme targets the poorest 40% of households, who are identified using a mean-test of household wealth (an index constructed using census data). In the first phase, the transfer was equivalent to 15 US$ per month, increasing to 30 US$ in 2007 and then to 35 US$ in 2009. Payments are collected from the local bank. |
| **Evaluation methodology**  | The intervention was designed as RCT but in practice allocation was not random. The estimation methodology is therefore quasi-experimental, relying on OLS regression with controls, difference-in-difference, and instrumental variable regression. The data come from the panel evaluation of the programme and the sample used here consists of 773 households. |
| **Overall findings** | Food expenditure as share of total expenditure increases in mixed-adult households but not in women-only households, indicating women's bargaining power is increased. Bargaining power increased more in households where the women had relatively less education than the men. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Share of expenditure on food items |

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| **Citation** | Schady, N., 2012. Cash Transfers and Anemia among Women of Reproductive Age. *Economics Letters*, 117. |
| **Name of programme(s) and country/countries** | Bono de Desarrollo Humano (Ecuador) |
| **Programme details**  | The programme was an UCT starting in 2003. At the time of study it covered approximately 40 percent of the population of Ecuador and was therefore among the largest cash transfer programmes in Latin America in terms of proportional coverage. The programme made transfers of US $15 to eligible households on a monthly basis, which were equivalent to around 10 percent of the total consumption of the average recipient household. Transfers were made to women, and came with no conditions attached. Households were eligible for the programme if they had a low score on a proxy means test. Parishes were randomly selected to enter either as immediate treatment or delayed treatment, in which case eligible households received transfers two years later. |
| **Evaluation methodology**  | The evaluation was a RCT, covering a sample of 1400 mothers. Impacts were estimated using multivariate regression and an IV approach. |
| **Overall findings** | The modest cash transfer substantially reduced anaemia among women of reproductive age. |
| **Reported outcome areas** | Health |
| **Indicators reported** | Elevation-adjusted haemoglobin level; proportion of households that was anaemic |

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| **Citation** | Schultz P., 2004. School Subsidies for the Poor: Evaluating the Mexican PROGRESA Poverty Program. *Journal of Development Economics*, 74, (1), pp. 199–250 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | CCT, means-targeted on the basis of data collected in 1997 in selected poor rural communities. The grant was available to the eligibly poor mothers of a child enrolled in school in grades 3 through 9 and confirmed by their teacher to be attending 85% of the school days. The magnitude of the educational grants started at 70 pesos per month and increase several fold at the higher grades.  |
| **Evaluation methodology**  | RCT, using DID to estimate impacts. The data analysed in this paper includes children age 5–16 in the initial householdCensus (Progresa’s special purpose panel survey), and age 6–16 in the subsequent three rounds of the household survey, and age 6–18 in the final survey conducted in November 1999. |
| **Overall findings** | The level of enrollment rates of comparably poor children in Progresa localities (treatment) are higher than in non-Progresa localities (control) in the three survey rounds collected after September 1998. It is statistically significantly different from zero within each distinguished group of children who had completed grades 1 through 6 in the previous year. These differences are often larger for girls than boys. The cumulative cohort effect on schooling attainment are extrapolated, and the difference in difference estimator implies that the programme has caused an increment of 0.66 years on the baseline level of 6.80 years of schooling. Also, no statistical evidence that poor women who had a Progresa–Eligible child were more likely to have a birth in the six months preceding the last survey in November 1999 than comparable women, nor was it evident that fertility of young women age 15–19 was affected by the school subsidy. |
| **Reported outcome areas** | Education; Employment; Empowerment |
| **Indicators reported** | Enrolment rates, paid work participation rates, hours work, fertility rates |

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| **Citation** | Seidenfeld, D. and Handa, S., 2011. Results of the Three Year Impact Evaluation of Zambia's Cash Transfer Program in Monze District. Final Report. Technical report. American Institutes for Research |
| **Name of programme(s) and country/countries** | Monze cash transfer (Zambia) |
| **Programme details as reported in the study** | The Monze unconditional cash transfer, which was initiated in 2007, targets labour constrained and destitute households with the aim of lifting them out of poverty. First community-based targeting is employed to nominate households which meet the eligibility criteria (not specified but based on poverty status) then data is collected on them to confirm the decision. These households are then ranked and the most destitute 10% become eligible. Treatment is allocated randomly and the control group has a delayed treatment after 3 years. The transfer amount is a lump sum of 40,000 kwacha per month if the household has no children; 50,000 per month if the household does have children. Payment is made bimonthly so two rounds of payment are given in one go. |
| **Evaluation methodology**  | The study is quasi-experimental in design and estimates the transfer impact using a difference-in-difference model with propensity score matching.The data come from a household panel survey with two waves consisting of 1024 households in total (516 in the treatment, 508 in the control). |
| **Overall findings** | The transfer is found to increase the likelihood of school enrolment, particularly for young children. Ownership of some productive assets increased. No statistically significant impact was found on food expenditures or health outcomes. Beneficiaries are found to be more positive about the future. |
| **Reported outcome areas** | Poverty; Education; Health; Savings, investment and production |
| **Indicators reported** | Food spending; demographic composition; productive activity (ownership of tools etc); child school enrollment; days of school missed; number of meals per day; illness; health clinic visits for babies; adult physical health. |

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| **Citation** | Siaplay, M., 2012. The Impact of Social Cash Transfers on Young Adults' Labor Force Participation, Schooling, and Sexual Behaviors in South Africa. Doctoral dissertation. Oklahoma State University |
| **Name of programme(s) and country/countries** | Old age pension (South Africa) |
| **Programme details as reported in the study** | The South African old-age pension is an UCT which was introduced to ensure a minimum income for the elderly. It was originally only accessible to whites but was extended to black and coloured elderly persons following the end of apartheid. The transfer is targeted at women over the age of 60 and men over the age of 65. Eligibility is determined by a means test of household wealth (the mechanism is not specified here). It is received by round 80 percent of African women and 77 of African men, 14 percent of White women and 7 percent of White men. The transfer amount is equivalent to approximately twice the median per capita monthly household income of a black household (around 1080 and 1140 rand per month in 2010). Payment is distributed monthly (the mechanism is not specified).  |
| **Evaluation methodology**  | This study takes advantage of the age criteria cut-off point to use regression discontinuity design – a quasi-experimental method for estimating the treatment effect. The data are taken from a panel survey for a different purpose which followed young adults and the sample size is roughly 3500 individuals. |
| **Overall findings** | The pension had no effect on the labour force participation and school enrolment of young adults (14-20). The male pension did have a positive effect on the labour force participation of adult males aged 21-26 and a negative one on their school enrolment; young adult females who live with female pension recipients become sexually active later 15.3% on average. Young males and females living with a female recipient are 9.1% and 24.1% less likely to get married. Young males and females living with a male recipient are 21.4% and 23.8% more likely to get married. Living with a pension recipient had no effect on multiple partners or condom use. |
| **Reported outcome areas** | Employment; Education; Empowerment; Health |
| **Indicators reported** | Labour force participation; School enrollment; Sexual intercouse (ever); Multiple partners; Condom use; Marriage |

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| **Citation** | Skoufias, E., Unar, M and Gonzalez de Cossio, T., 2013. The poverty impacts of cash and in-kind transfers: experimental evidence from rural Mexico. *Journal of Development Effectiveness*, 5 (4), pp. 401-429 |
| **Name of programme(s) and country/countries** | Programa de Apoyo Alimentario or Food Support Programme (PAL) (Mexico) |
| **Programme details**  | PAL is a conditional cash and food transfer programme in the poor rural areas of Southern Mexico designed to alleviate poverty through the improvement of the food and nutrition conditions of targeted households living in rural poor communities with a population of less than 2500 and with a high and very high marginality index. In order to be covered by the programme, localities have to meet requirements such as having a population of less than 2500, having a high or very high marginality and being accessible, and close enough to a DICONSA store, because the distribution system was implemented by DICONSA. The original programme transfer consists of a monthly food basket with a value of about US$15 at the time of programme implementation (2003) and it is accompanied by an educational component, the requirement to attend initial programme organisation sessions, followed by diet, nutrition and health related educational sessions. PAL offers nutrition and health education sessions (platicas), as well as participation in programme-related logistic activities. However, the attendance of the platicas is not a requirement for the receipt of the benefits.  |
| **Evaluation methodology**  | The paper exploits the unique experimental design (randomisation of the type of programme benefit received at the locality level) of the Food Support Programme (Programa de Apoyo Alimentario) to analyse and compare the programme’s in-kind and cash transfers in the poor rural areas of southern states of Mexico. It examines the impacts of such transfers not only on some key components of total consumption, that is food and non-food, but also on production as summarised by the allocation of family labour between agricultural and non-agricultural activities. The estimated impacts of PAL on the outcome variables of interest are based on the difference-in-difference estimator which compares differences between the treatment and control groups before and after the start of PAL and offers the advantage that any time-invariant pre-programme unobserved heterogeneity between the treatment and control groups is eliminated in the estimation of impacts. The difference-in-differences estimator is applied on repeated observations from households and their members in treatment and control villages surveyed for the purpose of evaluating the impact of the PAL programme.  |
| **Overall findings** | The intent-to-treat effect on poverty of cash transfers of real value 25 per cent less than the market value of in-kind transfers is identical to that of in-kind transfers. Potential explanations of this result are investigated by looking into the differences in impacts of in-kind and cash transfers on food consumption and non-food expenditures and on the allocation of family labour between agricultural and non-agricultural activities. Both in-kind and cash transfers have identically large positive impacts on food consumption. Non-food expenditures are also higher in the localities with cash transfers, whereas they remain unaffected in the localities with in-kind transfers. Both kinds of transfers have a significant impact on the time allocation of males (and not females) who switch from agricultural to non-agricultural activities. But, the availability of cash transfers has a significantly higher marginal effect than in-kind transfers on the shift towards non-agricultural activities. Overall, the findings suggest that cash transfers may be better able than in-kind transfers at mitigating the impact of market imperfections, thus increasing both equity and efficiency. |
| **Reported outcome areas** | Poverty; Employment |
| **Indicators reported** | headcount poverty ratio, gap poverty ratio, severity of poverty ratio; food and non-food consumption; adult working/not working (paid or unpaid over the previous week); participation in agricultural and non-agricultural activities.  |

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| **Citation** | Skoufias, E ; Di Maro, V, 2008. Conditional Cash Transfers, Adult Work Incentives, and Poverty. *Journal of Development Studies*, 44 (7), pp. 935-60 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details as reported in the study** | PROGRESA was set up in 1997 with the objective to combat the different causes of poverty, with a health, nutrition and education component. By 2004 it had almost 5 million beneficiaries. Transfers are bi-monthly and the average monthly payment, distributed to the mothers in beneficiary families, amounts to 20 per cent of the value of pre- programme monthly consumption. The educational component – paid bi-monthly- is conditional on regular school attendance and the transfer level depends on age and sex of the children. The health and nutrition component includes cash transfer and nutritional supplements and is conditional on health attendance. |
| **Evaluation methodology**  | This study utilises a RCT research design and uses DID to estimate effects. It draws on the ENCEL panel survey with a sample size of 183,646 individuals. |
| **Overall findings** | The programme does not have any signiﬁcant eﬀect on adult labour force participation and leisure time. However participation in PROGRESA leads to a substantial reduction in poverty. Poverty reduction eﬀects are stronger for the poverty gap and severity of poverty measures. |
| **Reported outcome areas** | Poverty; employment |
| **Indicators reported** | Participates in all work ; participates in salaried work ; participates in self-employment/ business ; daily hours of leisure ; poverty headcount ; poverty gap ; poverty severity  |

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| **Citation** | Skoufias, E; Unar, M; Gonzalez-Cossio, T, 2008. The Impacts of Cash and In-Kind Transfers on Consumption and Labor Supply: Experimental Evidence from Rural Mexico. Policy Research Working Paper. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Programa Apoyo Alimentario (PAL) (Mexico) |
| **Programme details as reported in the study** | This study considers the impact of the conditional cash transfer Programa Apoyo Alimentario, running in Mexico from 2005. Its objective is to improve the food and nutrition conditions of targeted households living in rural poor communities. Its target group are poor, rural households not covered by other interventions and it covers 150,000 households (but only 5% of these receive cash). It employs geographic targeting (population less than 2,500 and with a very high marginality index and not covered by other programmes, close to road and DICONSA store). The monthly transfer, delivered through DICONSA stores, is either 150 Mexican pesos ($13; mean share 11.5% of pre-programme consumption) or an equivalent food basket. Transfers are conditional on diet, nutrition, and health-related educational sessions, but attendance is not monitored. |
| **Evaluation methodology**  | The study employs a RCT research design and uses DID to assess impact. The study uses a panel survey of 5851 households. |
| **Overall findings** | The transfer has a large and positive impact on total and food consumption and a reduction of poverty. It has no impact on labour market participation, but it does induce beneﬁciary households to switch their labour allocation from agricultural to non-agricultural activities. |
| **Reported outcome areas** | Poverty; employment |
| **Indicators reported** | Total household consumption; household food consumption; participation in the labour market; participation in agricultural and non-agricultural activities; poverty head count, poverty gap, poverty severity. |

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| **Citation** | Skoufias, E. and Parker, S., 2001. Conditional cash transfers and their impact on child work and schooling: Evidence from the PROGRESA programme in Mexico. IFPRI FCND Discussion Paper, N. 123 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | Mexico’s PROGRESA is a conditional cash transfer aimed at alleviating poverty in rural areas. While providing cash transfers, it aims to increase families' investment in human capital as defined by education, health and nutrition. To achieve this objective, PROGRESA conditions cash transfers on children’s school enrolment and regular school attendance as well as clinic attendance. It includes in-kind health benefits and nutritional supplements for children up to age 5 and for pregnant and lactating women. PROGRESA covers 2.6 million families in extreme poverty in rural Mexico - about 40% of all rural families in Mexico. |
| **Evaluation methodology**  | The paper investigates whether PROGRESA can simultaneously combat the problems of low school attendance and child work. It relies on data from a quasi-experimental design to evaluate the impact of the programme involving a sample of communities that receive benefits and comparable communities that receive benefits at a later time. It estimates the effect of treatment on the treated using both difference-in-difference and cross-sectional difference estimators. |
| **Overall findings** | The paper finds significant increases in the school attendance of boys and girls that are accompanied by significant reductions in the participation of boys and girls in work activities. The programme has a lower impact on the incidence of work for girls relative to boys. Children, in particular boys and girls of secondary school age, are much more likely to attend school and to spend more time on school activities. In terms of work, boys of secondary school age also show strong reductions in participation in both market work and domestic work. Girls, on the other hand, show reductions in participation and/or hours spent in domestic work at all ages.  |
| **Reported outcome areas** | Education; Employment |
| **Indicators reported** | school attendance; working/not working as reported in previous week and covering participation in selling a product, helping in family business, making products to sell, washing, cooking and ironing, working in agricultural activities or caring for animals (domestic activities not included in definition); impact on 3 types of work, participation and hours spent in: market work, farm work and domestic work, also time spent in school.  |

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| **Citation** | Skovdal, M., Robertson, L., Mushati, P., Sherr, L., Nyamukapa, C. and Gregson, S., 2014. Acceptability of Conditions in a Community-Led Cash Transfer Programme for Orphaned and Vulnerable Children in Zimbabwe*. Health Policy and Planning*, 29 (7), pp. 809-17 |
| **Name of programme(s) and country/countries** | Community-led cash transfer programme (Zimbabwe) |
| **Programme details as reported in the study** | This study evaluates a community-led child grant programme which was designed to promote community engagement in order to better meet the wider goals of providing support for orphaned and vulnerable children. The programme began in 2009 and includes both a CCT and a UCT treatment arm which collectively had reached 2844 households at the time of survey. Eligibility was determined using a community-led selection process: household census data was collected and eligible households selected through a community consultation exercise. Eligible households were then randomly allocated to treatment or control groups. The transfer consists of US$18, given every two months, plus an extra US$4 per child living in the household (up to a maximum of three children). The CCT group have to comply with a school attendance condition (90% attendance) and attendance at parenting skills workshops. Cash is distributed from designated pay points. The duration of the programme is two years. |
| **Evaluation methodology**  | There was a quantitative component to the evaluation insofar as beneficiaries were interviewed at endline to give feedback on the programme (there was no counterfactual). The bulk of the analysis comes from qualitative analysis consisting of individual interviews, focus group discussions and key informant interviews. In total 62 qualitative interviews and 5167 quantitative surveys were collected at endline (but not used for impact evaluation in this study). |
| **Overall findings** | Conditionality widely accepted by recipients because conditions were deemed fair and for the benefit of the child. The fact that there was a clear purpose/ earmarking of the transfer improved bargaining power of women. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | This study is qualitative so there are no specific indicators. |

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| **Citation** | Stecklov, G., Winters, P., Todd, J. and Regalia, F., 2007. Unintended Effects of Poverty Programmes on Childbearing in Less Developed Countries: Experimental Evidence from Latin America. *Population Studies: A Journal of Demography*, 61, (2), pp. 125-140 |
| **Name of programme(s) and country/countries** | PROGRESA, Programa Asignacion Familiar (PRAF) and Red de Protección Social (RPS) (Mexico, Honduras, Nicaragua) |
| **Programme details as reported in the study** | This study evaluates three interventions, the first of which is Progresa which began in Mexico in 1997 with the aim of addressing the immediate needs of extreme poverty and break its intergenerational transmission. It had reached around 2.6 million families (at the time of study). It is targeted to poor households within poor communities. Poor areas pre-determined according to share of poor; low-income households identified initially using 1997 census data; random assignment of villages to early and later treatment; all eligible households offered the transfer. The cash transfer is given to the mother of the family, a strategy designed to target the funds within the household to improving the children’s education and nutrition. Transfers are typically equivalent to 20 to 30 percent of household income. Receipt is conditional on immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual check-ups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. Complementary programmes include immunisations, nutritional supplements, health checks, workshops on health, hygiene and nutrition.The Honduran PRAF was introduced to alleviate poverty among its target group which is children, pregnant and lactating mothers in poor households. Eligibility is means-tested on per capita consumption. The transfer is 1,946 Lempiras per capita or 18% of median consumption. For children, only one child needed to be enroled in school and satisfy the enrolment condition for all children to receive the transfer. The second and third transfers are conditional on a child 6-18 who had not completed 9th grade being enrolled in school. The health transfer is conditional on being registered in a health centre. The same conditions applied in Bono 10,000 except that only one child per household was subject to the education condition and the health condition only applied if there was no child eligible for an education transfer.The Nicaraguan RPS was introduced in 2001 to relieve poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control localities were then selected randomly. The transfer consists of a basic transfer plus education stipend and grant for school supplies if applicable. On average the total transfer is C$3,885 per year or 18 percent of annual household consumption. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under 5 to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that have not completed the fourth grade. Immunisations and healthcare services are offered free of charge. |
| **Evaluation methodology**  | These interventions all include an element of randomisation therefore this study treats them as RCT. Single-difference and difference-in-difference estimates are given. The data come from the panel surveys collected in order to evaluate the programmes: 2 waves for PRAF, three waves for RPS and 6 waves for PROGRESA. The samples are 6546 households for PRAF, 2409 for RPS and 8817 for Progresa. |
| **Overall findings** | The PRAF in Honduras raised fertility by 2-4 percentage points which may be a consequence of increased marriage rate. No impact was found in the other countries on fertility. No primary mechanism, was identified for how the transfer might be affecting fertility. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Woman has given birth in past 12 months; whether woman has given birth in last 12 months or is at least 3 months pregnant. |

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| **Citation** | Stecklov, G., Winters, P., Stampini, M. and Davis, B., 2005. Do conditional cash transfers influence migration? A study using experimental data from the Mexican PROGRESA programme*. Demography*, 42 (4), pp. 769-790 |
| **Name of programme(s) and country/countries** | PROGRESA (Mexico) |
| **Programme details**  | PROGRESA was originally launched in 1997 to address extreme poverty in rural Mexico and promote the development of human capital of poor households by improving education, health and nutrition outcomes. Two forms of cash transfers are provided to households to meet these objectives: a food grant and a school scholarship. Each component is linked to conditional requirements. Eligible households were selected in three stages, including the identification of recipient communities based on a marginality index, a census of all households in the potential target locations and the computation of scores for each household used to include those above a certain cut-off and the review of household lists by community assemblies. By the end of 1999, the year corresponding to the data used in the study, PROGRESA provided bimonthly transfers to approximately 2.3 million households or about 40% of all rural families and 11% of all Mexican families.  |
| **Evaluation methodology**  | The study uses experimental data from PROGRESA to evaluate the effects of conditional cash transfers on migration both domestically and to the United States. It uses a difference-in-difference approach and data from two main sources for the empirical analysis: the census (ENCASEH) conducted in November 1997 in all communities considered for participation in PROGRESA, including those later assigned to control and treatment groups; and, the ENCEL surveys. As part of an evaluation based on an experimental design, 506 PROGRESA communities in seven regions were selected and randomly allocated into treatment and control groups, only households in the treatment communities received PROGRESA for the duration of the evaluation. As part of this evaluation, follow-up surveys (ENCELs) were conducted every six months in these selected communities for approximately three years.  |
| **Overall findings** | The study examines how PROGRESA affects domestic and U.S. migration. The results indicate that while migration levels were increasing over this period, PROGRESA slowed this increase for households in treatment communities. PROGRESA did little to stem the flow of rural migration to domestic, primarily urban destinations, but it did have a more substantial and significant effect on the flow of migrants to the United States. The size of the coefficient on PROGRESA in the U.S. migration models indicates that PROGRESA, after only 20 months of operation, reduced the probability of U.S. migration by about 0.2 percentage points when the other variables are set at their means. The substantive impact of the programme is more obvious when the authors account for the fact that migration levels to the United States are quite low, particularly when spanning such a short period. In that sense, the odds of migration provide a better gauge. A simple calculation shows that the odds of U.S. migration are reduced by roughly 58% as a result of PROGRESA.  |
| **Reported outcome areas** | Employment |
| **Indicators reported** | domestic (rural-to-urban and rural-to-rural) and international (rural–to–United States) migration |

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| **Citation** | Stecklov, G., Winters, P., Todd, J. and Regalia, F., 2006. Demographic Externalities from Poverty Programs in Developing Countries: Experimental Evidence from Latin America. Working paper 2006-01, American University, Department of Economics |
| **Name of programme(s) and country/countries** | PROGRESA, Programa Asignacion Familiar (PRAF) and Red de Protección Social (RPS) (Mexico, Honduras, Nicaragua) |
| **Programme details as reported in the study** | This study evaluates three interventions, the first of which is Progresa which began in Mexico in 1997 with the aim of addressing the immediate needs of extreme poverty and break its intergenerational transmission. It had reached around 2.6 million families (at the time of study). It is targeted to poor households within poor communities. Poor areas pre-determined according to share of poor; low-income households identified initially using 1997 census data; random assignment of villages to early and later treatment; all eligible households offered the transfer. The cash transfer is given to the mother of the family, a strategy designed to target the funds within the household to improving the children’s education and nutrition. Transfers are typically equivalent to 20 to 30 percent of household income. Receipt is conditional on immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual check-ups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed. Complementary programmes include immunisations, nutritional supplements, health checks, workshops on health, hygiene and nutrition.The Honduran PRAF was introduced to alleviate poverty among its target group which is children, pregnant and lactating mothers in poor households. Eligibility is means-tested on per capita consumption. The transfer is 1,946 Lempiras per capita or 18% of median consumption. For children, only one child needed to be enroled in school and satisfy the enrolment condition for all children to receive the transfer. The second and third transfers are conditional on a child 6-18 who had not completed 9th grade being enrolled in school. The health transfer is conditional on being registered in a health centre. The same conditions applied in Bono 10,000 except that only one child per household was subject to the education condition and the health condition only applied if there was no child eligible for an education transfer.The Nicaraguan RPS was introduced in 2001 to relieve poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control localities were then selected randomly. The transfer consists of a basic transfer plus education stipend and grant for school supplies if applicable. On average the total transfer is C$3,885 per year or 18 percent of annual household consumption. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under 5 to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that have not completed the fourth grade. Immunisations and healthcare services are offered free of charge. |
| **Evaluation methodology**  | These interventions all include an element of randomisation therefore this study treats them as RCT. Single-difference and difference-in-difference estimates are given. The data come from the panel surveys collected in order to evaluate the programmes: 2 waves for PRAF, three waves for RPS and 6 waves for PROGRESA. The samples are 6546 households for PRAF, 2409 for RPS and 8817 for Progresa. |
| **Overall findings** | The PRAF in Honduras raised fertility by 2-4 percentage points which may be a consequence of increased marriage rate. In Mexico and Nicaragua, contraceptive use rose among beneficiaries possibly due to decreased migration and reduced periods of spousal separation. An unintended consequence of the programmes may be that women have higher exposure to fertility due to lower migration levels. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Woman has given birth in past 12 months; whether woman has given birth in last 12 months or is at least 3 months pregnant.  |

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| **Citation** | Strobbe, F. and Miller, C., 2011. Cash Transfers in an Epidemic Context: The Interaction of Formal and Informal Support in Rural Malawi. Policy Research Working Paper 5824. World Bank. Washington, D.C.  |
| **Name of programme(s) and country/countries** | Mchinji Social Cash Transfer Pilot (Malawi) |
| **Programme details as reported in the study** | The scheme started in 2007 covers more than 3,000 households living in rural villages in the Mchinjii area (central Malawi) with the objective to alleviate poverty, reduce malnutrition and improve school enrolment among the poorest 10% of households through regular and reliable cash transfers. It targets households that are both ultra-poor and labour constrained (those with no able bodied member between 19-64 who is fit for work, or when one able bodied adult must care for more than 3 dependents (i.e. children, elderly, chronically ill persons). |
| **Evaluation methodology**  | The study is based on data from a cluster randomised evaluation involving a longitudinal dataset covering 749 adult-headed households. Quantile regression was used to estimate impacts at the median and at the .25 and .75 quantiles. |
| **Overall findings** | The authors find the programme led to a statistically significant reduction in the level of consumption expenditures for those households receiving cash transfers. The study also confirms the presence of crowding out effects on private arrangements when looking at gifts and (to a lesser extent) remittances, while informal loans seem to be completely independent from the cash transfer’s reception. |
| **Reported outcome areas** | Poverty; Savings, investment and production |
| **Indicators reported** | Total consumption expenditures, food consumption expenditures, receipt of private transfers, remittances, gifts and loans |

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| **Citation** | Svarch. M, 2009. Do Conditional Cash Transfers Affect Credit Market Outcomes: Evidence from Households in Mexico? PhD Thesis. The Ohio State University |
| **Name of programme(s) and country/countries** | PROGRESA / Oportunidades (Mexico) |
| **Programme details**  | The programme is a CCT that started in 1997, designed to simultaneously intervene in the areas of health, education, and nutrition by targeting households in extreme poverty with regular cash transfers. Transfers are aimed at mothers and the value depends on level of school and gender of the child. Aside from the core transfer, additional transfers were available for elderly household members above 70 years old, a savings account transfer for students that finish high school, and educational scholarships. There were also maximum amounts allowable per household. The transfer received by these households represented, on average, around 22 percent of household income. Transfers were conditional upon whether their children are attending school or not, at any level between the third grade of primary school and the third grade of high school. To continue receiving the transfer, the children should not miss more than three days of school per month and must also attend community health centres and workshops. Complementary interventions include basic preventative health services workshops in health and nutrition and nutritional supplements for children under five. |
| **Evaluation methodology**  | The study focuses on urban households only, drawing on data from three rounds of the special purpose Urban Household Evaluation Surveys, with a full sample of 14,713 urban households. It employs Fixed Effects, IV and Tobit estimation to estimate impacts. |
| **Overall findings** | The econometric results suggest that participation in the programme increases the likelihood of participation in credit markets (either as a consequence of the risk-coping effect or the creditworthiness effect). The results reflect the behaviour of urban households, as there are not credit market data for the rural households and, because of the conflicting effects, they cannot be generalized. |
| **Reported outcome areas** | Savings, investment and production |
| **Indicators reported** | Probability that a household participated in the credit market, amount of credit applied for |

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| **Citation** | Teixeira, C. G., 2010. A heterogeneity analysis of the Bolsa Familia programme effect on men and women’s work supply. IPC-IG Working Paper, N. 61 |
| **Name of programme(s) and country/countries** | Bolsa Familia (Brazil) |
| **Programme details**  | The Bolsa Familia is Brazil’s national conditional cash transfer programme which targets families below the poverty line. In 2006, it covered 11.1 million Brazilian families. The Bolsa Familia targets two types of families: the first type is characterised by a monthly per capita income between US$23 and US$46 and receives variable transfers of US$7 per child or pregnant woman up to the limit of three eligible people/children; the second type is characterised by a monthly per capita income of less than US$23 and receives an additional US$23 on top of the variable transfer.  |
| **Evaluation methodology**  | The paper employs a quasi-experimental approach and data from Brazil’s nationally representative household survey, PNAD, to analyse the impact of the Bolsa Familia on the labour supply of beneficiaries as measured by probability of working and number of hours worked by both men and women. The analysis is undertaken using the values of the transfers as the treatment indicator and uses Propensity Score Weighting to estimate how average treatment effects on the treated vary according to the amount received.  |
| **Overall findings** | The study finds that the Bolsa Familia marginally diminishes the supply of weekly work hours of working adults. The heterogeneous impacts of the cash transfers on men and women depending upon how they are placed in formal and informal sectors, agricultural and non-agricultural sectors and wage rate ranges are also assessed. The results indicate a nil average effect on probability of working and a marginal reduction in the supply of labour hours for men and women. The impact is greater for informal workers and unpaid workers and is more significant for higher values of the transfers. |
| **Reported outcome areas** | Employment |
| **Indicators reported** | probability of working and number of weekly hours worked by men and women by sex, informality, self-employment, agricultural activities and intervals of wage rate |

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| **Citation** | The Kenya CT-OVC Evaluation Team, 2012. The impact of Kenya's Cash Transfer for Orphans and Vulnerable Children on human capital. *Journal of Development Effectiveness*, 4 (1), pp. 38-49 |
| **Name of programme(s) and country/countries** | Orphan and Vulnerable Children Cash Transfer (OVC-CT) (Kenya) |
| **Programme details as reported in the study** | The OVC-CT is a national child-protection programme that provides a flat monthly transfer to ultra-poor families with orphans and vulnerable children aged 17 years and younger. OVCs are those with at least one deceased parent or a parent who is chronically ill or whose main caregiver is chronically ill. It currently reaches 130,000 households and over 260,000 orphans and vulnerable children (OVC) across the country. The objective of the transfers are to encourage fostering and retention of children and to promote their human capital development. The monthly transfers were Ksh 1500 (US$20) and raised further in the 2011*/*12 Kenyan budget. Beneficiary households are informed that the care and protection of the resident OVC is their responsibility for receiving the cash payment. Currently there are no punitive sanctions for non-compliance with this responsibility, although several districts planned to test punitive conditions an expansion of the programme scheduled for 2012. |
| **Evaluation methodology**  | The study uses data from a cluster randomised social experiment that was conducted in 2007–2009 to evaluate the impact of the programme on children’s human capital development. It estimates programme impacts on children aged 6 to 17 using DID children. The final sample includes 4082 and 2108 children in intervention and control households respectively. |
| **Overall findings** | While no meaningful impact is found at the primary level, large impacts are found at the secondary level for overall school enrolment and grade-for-age. Further probing of the data unveils that the programme has managed to encourage school returners. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Enrolment, progression, grades behind, drop-out, returning to school,  |

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| **Citation** | Todd, J. E., Winters, P. and Stecklov, G., 2011. Evaluating the impact of conditional cash transfer programs on fertility: The case of the Red de Protección Social in Nicaragua. *Journal of Population Economics*, 25 (1), pp. 267-290 |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details as reported in the study** | The Red de Protección Social is a CCT which began in 2001 with the aim of alleviating poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control areas were selected randomly. The transfer consists of a lump-sum health and nutrition transfer of $224 per year plus lump-sum education grant of $112 per year if household has children between 7 and 13 who had not completed the fourth grade. On average the total transfer was C$3,885 per year or 18 percent of annual household consumption (21% with the child grant). The transfer is distributed every two months. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under 5 to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that had not completed the fourth grade. |
| **Evaluation methodology**  | The programme was designed as an RCT and the treatment effect is estimated here using a stratified Cox model and difference-in-difference estimation. The data are taken from a special purpose panel survey to evaluate the programme with a baseline and three follow-ups. The sample size is approximately 1670 households. |
| **Overall findings** | The transfer decreased the probability of a birth among beneficiaries, indicating that it increased birth spacing. |
| **Reported outcome areas** | Health; Empowerment |
| **Indicators reported** | Woman has given birth in the past 30 months. |

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| **Citation** | Todd, J. E., Winters, P. and Hertz, T., 2010. Conditional Cash Transfers and Agricultural Production: Lessons from the Oportunidades Experience in Mexico. *Journal of Development Studies*, 46 (1), pp. 39-67.  |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | The programme is a CCT starting in 1997, targeting extremely poor households. The programme delivers cash transfers for nutrition and health to all eligible households, while education transfers are granted to children between ages eight and 18. The total amount a household can receive is capped; in 1998, the maximum was 585 pesos, which is about 20 per cent of the value of total household consumption. Transfers require complication with a set of activities related to health and/or education of children in beneficiary households. |
| **Evaluation methodology**  | The study uses data from the experimental design of the Progresa, employing OLS SD and OLS SD with inverse weighting by propensity score, as well as a range of non-linear estimators (e.g. Probit, Poisson, Tobit). The full sample includes 9936 households. |
| **Overall findings** | The programme is found to increase the value and variety of food consumed from own production and to increase land use, livestock ownership and crop spending. Impact estimates are found to differ across land use categories and PROCAMPO participation. Results support the hypothesis that transfers influence agricultural production and impacts are greater for households invested in agriculture. |
| **Reported outcome areas** | Savings, investment and production; Health |
| **Indicators reported** | Whether household consumes from own production, per capita value of own production, number of foods/food groups from own production, consumption of a range of foods from own production, land use, livestock ownership, agricultural spending. |

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| **Citation** | Tommasi D., 2015. How cash transfers improve child development. Universite Libre de Bruxelles, ECARES working paper 2015-19. Brussels, Belgium.  |
| **Name of programme(s) and country/countries** | Atencion a Crisis (AAC) (Nicaragua) |
| **Programme details as reported in the study** | Launched in 2005 and lasting one year, the programme experimented with a CCT and graduation packages. Group 1 was offered a CCT conditional on children receiving regular health checks and attending primary school. Group 2 was offered the CCT plus the possibility for one household member to attend a vocational training course and labour market and business-skill training workshops. Group 3 was offered the CCT plus a large lump-sum payment to start a small non-agricultural activity. The basic component of the transfer for all households in the treatment groups was large, corresponding to 15% of their yearly per capita expenditures, approximately US$ 145. Households with children between 7-15 enrolled in primary school received in addition US$ 90 per household and an additional US$ 25 per child. In practice, the transfer was unconditional because the conditionality was not monitored, and households were not penalized for non-compliance. |
| **Evaluation methodology**  | The method draws on the randomised assignment to the CCT, using data drawn from the programme evaluation’s special purpose panel survey, with a sample consisting of 1172 households (29.3% of the original sample) and 2060 children. Impacts are estimated using SUR and using a Quadratic Almost Ideal Demand System for impacts on expenditure. |
| **Overall findings** | The cash transfers improved child development via a strong income effect and a change in knowledge toward child rearing practices. However, both mechanisms were effective only in those households where the mother was likely to be already powerful at the baseline. |
| **Reported outcome areas** | Empowerment; Health; Poverty |
| **Indicators reported** | Bargaining power of mothers, indices of family wellbeing, child-rearing practices, resource shares allocated to different food and other expenditure items |

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| **Citation** | Urquieta J., Angeles, G., Mroz, T., Lamadrid‐Figueroa, H. and Hernández, B., 2009. Impact of Oportunidades on skilled attendance at delivery in rural areas. *Economic Development and Cultural Change*, 57 (3), pp. 539-558 |
| **Name of programme(s) and country/countries** | Oportunidades (Mexico) |
| **Programme details**  | *Oportunidades* is a CCT programme that started in rural areas in 1997 and focused on families living in extreme poverty. It aimed to improve the education, health, nutrition, and living conditions of population groups in extreme poverty and to break the intergenerational cycle of poverty. By 2005, the programme had enrolled 5 million families in urban and rural areas, containing more than 25 million people across the country. There are three major components to the programme. First, cash transfers to families of children attending school (payments varied according to the number of children in the family and their age and gender, being larger for girls in higher education grades. Payments were made to the female head of the household, and are conditioned on compliance with the attendance of children at school and other responsibilities. Second, the programme offered an essential health care package that included pregnancy and delivery care for women enrolled in the programme. A series of health promotion talks were also included that were presented monthly covering information on family planning, prenatal care, alarm signs during pregnancy, and newborn care. In the case of delivery attendance, health institutions are responsible for providing delivery attendance in their facilities. Attendance at the health promotion talks and medical check-ups are requirements for continuing enrolment in the programme and receiving cash payments. Third, the programme also distributed nutritional supplements with minerals and vitamins for all children under 2 years of age, pregnant or lactating women, and undernourished children 2–4 years old. |
| **Evaluation methodology**  | The study uses a RCT design, employing DID and RDD methods to estimate impacts. The full sample covers 2790 individuals. |
| **Overall findings** | The main results of the study indicate that Oportunidades had, at best, only a small effect on skilled attendance at delivery in treatment communities. The programme appears to have had a larger effect on the relatively high-fertility women who had one birth just prior to the experimental treatment and another subsequent to the experimental treatment |
| **Reported outcome areas** | Health |
| **Indicators reported** | Skilled attendance at birth delivery |

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| **Citation** | Villa, J. M., 2014. The length of exposure to antipoverty transfer programmes: what is the relevance for children's human capital formation? Working paper 206, Brooks World Poverty Institute |
| **Name of programme(s) and country/countries** | Familias en Acción (Colombia) |
| **Programme details as reported in the study** | Familias en Acción is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a proxy means-test on household wealth to determine eligibility. The transfer is equivalent to approximately US$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under 17 years of age. |
| **Evaluation methodology**  | The study uses a quasi-experimental method in which the treatment effect is estimated using intensity (dose) analysis. The dataset includes a national household survey containing a total sample of 1,641,551 households and also data from administrative sources. |
| **Overall findings** | Longer exposure to antipoverty programmes leads to a higher accumulation of years of education and school registration rates. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Years of education, school registration (if enrolled at age 7). |

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| **Citation** | Winters, P., Stecklov, G. and Todd, J., 2009. Household structure and Short-Run economic change in Nicaragua. *Journal of Marriage and Family*, 71, pp. 708-726 |
| **Name of programme(s) and country/countries** | Red de Protección Social (Nicaragua) |
| **Programme details as reported in the study** | The Red de Protección Social is a CCT which began in 2001 with the aim of alleviating poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control areas were selected randomly. The transfer consists of a lump-sum health and nutrition transfer of $224 per year plus lump-sum education grant of $112 per year if household has children between 7 and 13 who had not completed the fourth grade. On average the total transfer was C$3,885 per year or 18 percent of annual household consumption (21% with the child grant). The transfer is distributed every two months. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under 5 to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that had not completed the fourth grade. |
| **Evaluation methodology**  | The programme was designed as an RCT and the treatment effect is estimated here using single-difference estimation. The data come from a community census and a panel with baseline and one wave. The sample is 1397 households in all panel waves |
| **Overall findings** | The transfer prevented family re-agglomeration following a financial crisis (household size grew more in control households, mostly through young men and women with kinship ties to HH head returning to household). The transfer beneficiary households continued to send off young adult members suggesting the transfer lifted constraints to economic migration. |
| **Reported outcome areas** | Empowerment |
| **Indicators reported** | Household size; Number of different household members (e.g. children of different ages, adults, gender etc); Nuclear household/ vertical household (including an extra generation above)/ complex household (including different kin combinations); Reason that members left the household (eg migration) and type of individual that left (male, female etc). |

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| **Citation** | World Bank, 2011. Program Keluarga Harapan: Main findings from the impact evaluation of Indonesia's pilot household conditional cash transfer program. World Bank, Washington, D.C. |
| **Name of programme(s) and country/countries** | Programme Keluarga Harapan (Indonesia) |
| **Programme details**  | Programme Keluarga Harapan is a CCT, established in 2007. It is intended to address poor human development outcomes. Four specific programme objectives include: (i) improving the socio-economic conditions of the poorest households, (ii) improving the educational level of children; (iii) improving the health and nutritional status of pregnant women, post-partum mothers, and children under 6 years in the poorest households; and (iv) improving the access to and quality of education and health services, especially for the poorest households. The programme targets households that are classified as extremely poor according to government statistics based on economic and asset-based poverty measurements. Households also must have either have a pregnant or lactating woman, children aged 0-15 years, or children 16-18 which have not yet completed nine years of basic education. The programme initially provided benefits to 432,000 “extremely poor” households in seven provinces. The amount of the cash transfer was designed to be approximately equal to 15-20 percent of the estimated consumption of poor households. Annual household disbursements vary between Rp 600,000 and Rp 2.2 million per year. The amount is based on the number of the children in the household and their ages. It includes a fixed transfer of 200,000 Rupiah per household, with the following additions: 800,000 for a child aged less than 6 years; 800,000 for a pregnant or lactating mother; 400,000 for a child of primary school age; and 800,000 for a child of secondary school age. The minimum transfer per household was 600,000 and the maximum 2,200,000. Payments were made quarterly, transferred directly to mothers through the nearest post office. Beneficiary households are intended to stay in the programme for a period of approximately two to four years. A large number of conditions were attached to receiving the transfers covering use of specific health care services, children being enrolled in school and having at least 85 percent attendance. Official are expected to input the compliance verification data online before initiation of payments and if the conditions are not being met, beneficiary households will at first receive a warning letter that will be delivered by a facilitator. The second breach will result in a 10 percent discount of the benefit and a third breach will lead to the expulsion of non-compliant households. |
| **Evaluation methodology**  | The study uses a quasi-experimental approach, drawing on a special-purpose longitudinal survey of 13,976 households. The survey sampling frame draws mostly from households in Java, which is similar to actual programme allocation. IV regression is used to estimate programme impacts. |
| **Overall findings** | The programme improved the welfare of beneficiary households. Their average monthly expenditures increased by Rp 19,000 per person, equal to a 10 percent increase in comparison to pre-programme levels. Households used this additional income to increase their spending on food (especially high-protein foods) and health costs. There is no evidence that beneficiaries misspent the additional funds on non-productive goods such as tobacco or alcohol. The programme also demonstrated a positive impact on helping households to increase their use of primary healthcare services. Beneficiary households, however, did not demonstrate increased usage of recommended vitamins (iron tablets for pregnant women or vitamin A for children), which was partly due to insufficient stocks. There is no evidence yet of changes in long-term health outcomes and the pilot programme had little impact on changing education behaviours. |
| **Reported outcome areas** | Education; Employment; Poverty; Health |
| **Indicators reported** | Very wide range of indicators spanning: education; child labour; household consumption; health behaviours; and health outcomes |

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| **Citation** | Yanez-Pagans M., 2008. Culture and Human Capital Investments: Evidence of an Unconditional Cash Transfer Program in Bolivia. Discussion Paper No. 3678. The Institute for the Study of Labour (IZA). Bonn, Germany.  |
| **Name of programme(s) and country/countries** | Bolivida (Bolivia) |
| **Programme details as reported in the study** | Old age UCT pension, launched in 2001, targeted at citizens aged 65+ and distributing annuities of USD120. Transfers accounted for 50and 85 percent of the annual income of the poor and extremely poor households. |
| **Evaluation methodology**  | Quasi-experimental design, estimating impacts with RDD based on data from two nationally representative cross sectional Living Standards Measurement Study Surveys (LSMS) collected in 2000 and 2001 by the Bolivian National Institute of Statistics (INE). The sample comprises all school-age children that live in households with at least one person in the age-range of 55 to 74, a total 1,380 school-age children and 520 eligible elders distributed among 886 households. |
| **Overall findings** | The core finding is that Bolivida transfers to women lead to substantialimprovements in children's human capital investments. As far as ethnicity, eligibility leads to lower increases on schooling investments among indigenous households compared to their non-indigenous counterparts. |
| **Reported outcome areas** | Education |
| **Indicators reported** | Schooling expenditures (*linked to women's ethnicity, culture etc*) |