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**Research Report**

## Social assistance programmes in South Asia: An analysis of socio-economic impacts

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# Social assistance programmes in South Asia: an analysis of socio-economic impacts

Yannick Markhof, Isabela Francison, Nicolò Bird and Pedro Arruda



Research Report No. 62

**Social assistance programmes in South Asia: an analysis of socio-economic impacts**

By Yannick Markhof, Isabela Franciscón, Nicolò Bird and Pedro Arruda

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**SOCIAL ASSISTANCE PROGRAMMES  
IN SOUTH ASIA: AN ANALYSIS OF  
SOCIO-ECONOMIC IMPACTS**

## ACKNOWLEDGMENTS

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## ACRONYMS AND ABBREVIATIONS

<b>ANC</b>	Antenatal Care
<b>AP</b>	Aama Programme
<b>ASHA</b>	Accredited Social Health Activist
<b>BISP</b>	Benazir Income Support Programme
<b>BMI</b>	Body Mass Index
<b>BPL</b>	Below the Poverty Line
<b>CCAP</b>	Citizens' Charter Afghanistan Project
<b>CCT</b>	Conditional Cash Transfer
<b>CDC</b>	Community Development Council
<b>CG</b>	Child Grant
<b>EGPP</b>	Employment Generation Programme for the Poorest
<b>FLFP</b>	Female Labour Force Participation
<b>FSSSP</b>	Female Secondary School Stipend Programme
<b>HH</b>	Household
<b>ITT</b>	Intention to Treat
<b>JSY</b>	Janani Suraksha Yojana
<b>LATE</b>	Local Average Treatment Effect
<b>LFP</b>	Labour Force Participation
<b>MAPLM</b>	Maternity Allowance for Poor Lactating Mothers
<b>MDM</b>	Mid-Day Meal
<b>MGNREGA</b>	Mahatma Gandhi National Rural Employment Act
<b>NSAP</b>	National Social Assistance Programme

## ACRONYMS AND ABBREVIATIONS

<b>NSP</b>	National Solidarity Programme
<b>OAA</b>	Old Age Allowance
<b>OAP</b>	Old Age Pension
<b>PESP</b>	Primary Education Stipend Programme
<b>PNC</b>	Postnatal Care
<b>PWP</b>	Public Works Programme
<b>SC/ST</b>	Scheduled Castes/Scheduled Tribes
<b>SESP</b>	Secondary Education Stipend Programme
<b>SFP</b>	School Feeding Programme
<b>TPDS</b>	Target Public Distribution System
<b>UCT</b>	Unconditional Cash Transfer
<b>UNICEF</b>	United Nations Children's Fund
<b>WASH</b>	Water, Sanitation and Hygiene
<b>WeT</b>	Waseela-e-Taleem

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# EXECUTIVE SUMMARY

## Background and introduction

Over the last two decades, the number of social assistance (non-contributory social protection) programmes has increased across South Asia, as changes in government policies and unprecedented economic growth have led to greater domestic attention to poverty alleviation and social exclusion. Governments across South Asia have reinforced their commitments to deliver effective social protection policies, contributing in the process to Sustainable Development Goal (SDG) Target 1.3, calling for governments to implement “nationally appropriate social protection systems and measures for all”, and Target 10.4, to “adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality.” These targets conform to life-cycle and rights-based approaches to social protection, which have been promoted by the United Nations Children’s Fund (UNICEF).

Following the introduction of new social assistance initiatives and the greater availability of quality individual and household survey data, social scientists have in the past decade increasingly focused on empirical analysis of programme impacts, using experimental or quasi-experimental techniques to estimate the true impact of public interventions. However, despite this growing empirical literature on social assistance now available across the region, there are very few meta-studies that analyse and summarise these findings beyond specific programmes or types of intervention. To fill this knowledge gap, this report provides a critical review of the literature to summarise the impacts of different types of social assistance on socio-economic outcomes across South Asian countries.

## Methodology of the evaluation

To summarise findings across studies, this report conducts a meta-review of rigorous impact evaluations of social assistance programmes on socio-economic outcomes. Experimental and quasi-experimental methods differ from descriptive studies by aiming to infer causal effects—i.e. establishing whether a programme does indeed have a causal effect on a given measure of human development and/or economic welfare.

The programmes considered for this report are based on those mapped in the 2020 report *Overview of non-contributory social protection programmes in South Asia from a child and equity perspective* (Arruda et al. 2020). They are considered ‘flagship’ programmes, in that they tend to be larger initiatives, with a national or quasi-national focus, and are (mainly) government-led. Of the 51 social assistance programmes in South Asia identified in Arruda et al., the meta-analysis includes evaluations for 17 programmes (33 per cent), grouping results from 63 differed studies. Table A shows the programmes covered in the study. They are defined as **social assistance** (non-contributory social protection), based on a slightly expanded definition which includes cash-for-work or public works programmes (PWPs). Given the considerable differences across South Asian countries, larger countries with better data availability are disproportionally represented in the evaluation.

To summarise the impacts across studies, a disaggregated table of results was first compiled, containing 126 different outcomes (**proxies**) mapped across the 63 studies assessed. At the first stage of aggregation, we grouped the 126 proxies into 31 corresponding **indicators** measuring similar outcomes. These 31 indicators were subsequently grouped under 5 different **categories**, which correspond to the chapter headings for the results. The five categories (and sub-categories for poverty and finances, and health and nutrition) are presented in Figure A, along with corresponding indicators.

In practice, there are many channels through which social assistance can impact socio-economic outcomes. Figure B presents a theory of change framework illustrating potential channels leading to changes in outcomes. **Growth-mediating processes** of social assistance (e.g. reduced credit and liquidity constraints) present the main drivers of change. **Impact mediators** (e.g. attitudes to risk) examine how psychological and behavioural decisions

might affect outcomes. **External moderators** (e.g. price changes; quality and quantity of services and infrastructure; social norms) are important—generally local—factors that influence programme impacts. The figure also distinguishes between outcomes that apply more generally (at household level) and outcomes that are specific to individuals and their position along the life cycle.

**Table A. Social assistance programmes covered in the study**

Afghanistan	1 programme
<ul style="list-style-type: none"> <li>• Citizens' Charter Afghanistan Project/National Solidarity Programme (NSP, predecessor)</li> </ul>	
Bangladesh	4 programmes
<ul style="list-style-type: none"> <li>• Employment Generation Programme for the Poorest (EGPP)</li> <li>• Primary Education Stipend Programme (PESP)</li> <li>• Maternity Allowance for Poor Lactating Mothers (MAPLM)</li> <li>• Secondary Education Stipend Programme (SESP)</li> </ul>	
Bhutan	No programmes
India	5 programmes
<ul style="list-style-type: none"> <li>• Janani Suraksha Yojana (JSY)</li> <li>• Mid-Day Meal (MDM) Scheme</li> <li>• Target Public Distribution System (TPDS)</li> <li>• Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)</li> <li>• National Social Assistance Programme, Old Age Allowance component (NSAP's OAP)</li> </ul>	
Maldives	No programmes
Nepal	4 programmes
<ul style="list-style-type: none"> <li>• Aama Programme/Safe Motherhood Programme</li> <li>• Old Age Allowance or Senior Citizen's Allowance</li> <li>• Child Grant (CG)</li> <li>• Scholarships</li> </ul>	
Pakistan	1 programme
<ul style="list-style-type: none"> <li>• Benazir Income Support Programme (BISP) or National Cash Transfer Programme</li> </ul>	
Sri Lanka	2 programmes
<ul style="list-style-type: none"> <li>• Divineguma Programme or Samurdhi</li> <li>• National Supplementary Food Programme or Thripasha</li> </ul>	

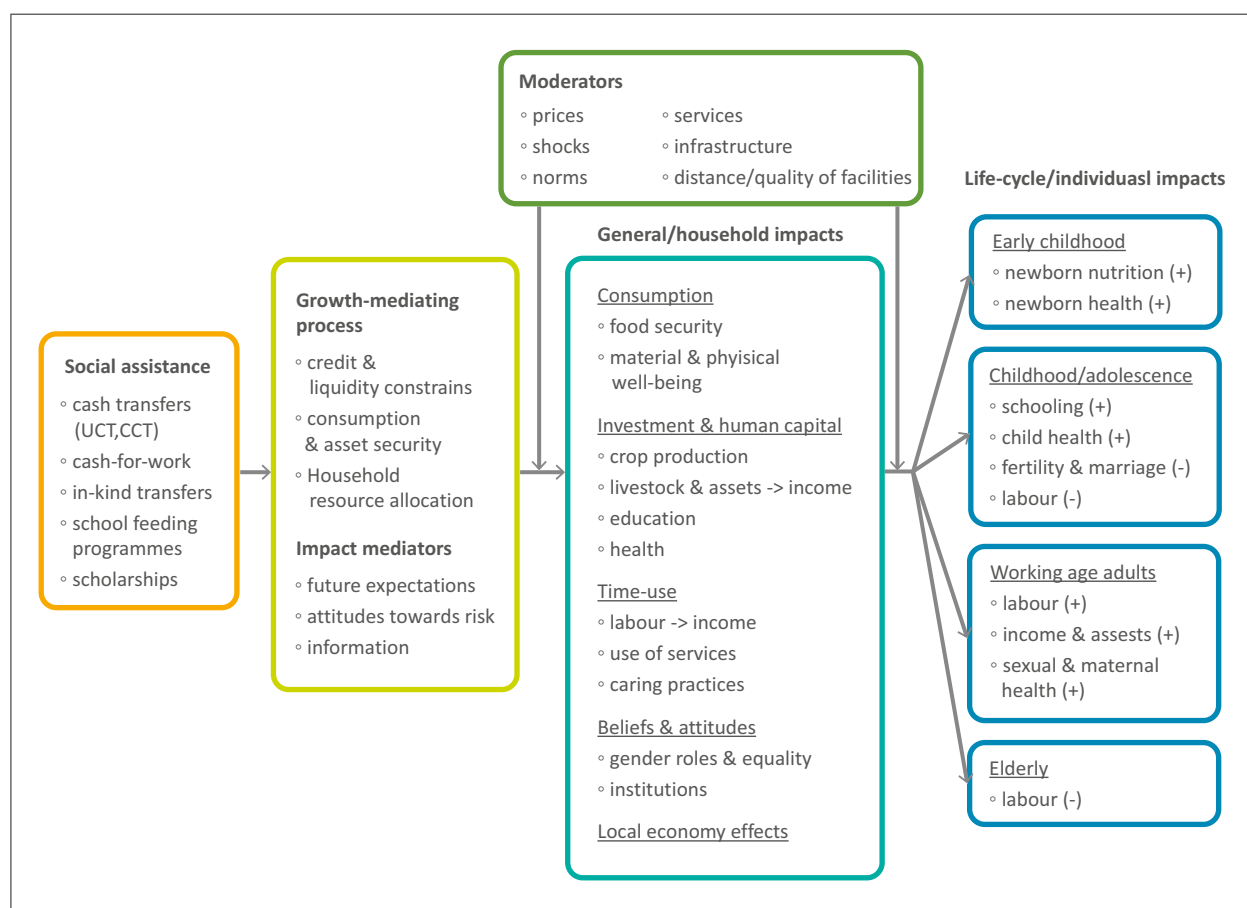
**Figure A. Categories and indicators**

Poverty and finances	<ul style="list-style-type: none"> <li>• Poverty: Poverty; Income; Non-Financial Assets; Consumption and Expenditure</li> <li>• Finances: Borrowing; Savings</li> </ul>
Labour market	<ul style="list-style-type: none"> <li>• Labour Force Participation; Child Labour; Sectoral Switch</li> </ul>
Education	<ul style="list-style-type: none"> <li>• School Enrolment; Educational Attainment; School Attendance; Expenditure on Education; Educational Performance</li> </ul>
Health and nutrition	<ul style="list-style-type: none"> <li>• Anthropometric Indicators: Weight Adequacy; Height Adequacy</li> <li>• Food: Food Adequacy; Food Expenditure</li> <li>• Sexual, Maternal and Child Health: Ante and Postnatal Care; Foetus and Newborn Health; Qualified Birth Assistance; Child Health; Sexual and Reproductive Health</li> <li>• Additional Health Indicators: WASH; Consulting Doctor; HH Health Expenditure</li> </ul>
Education	<ul style="list-style-type: none"> <li>• Social Perceptions and Norms; Female Empowerment; Female Labour Force Participation; Female Mobility; Political Participation</li> </ul>

After selecting the indicators, a process was developed to classify estimates of programme impacts. These are grouped under five different categories:

- **Desirable:** the effect is statistically significant and reflects a desirable outcome (e.g. increase educational attainment or decrease in child labour);
- **Desirable for subgroup:** desirable outcome only for a subgroup of beneficiaries or during certain time periods (e.g. during the rainy season);
- **Insignificant:** no detectable, statistically significant effect different from zero;
- **Undesirable:** the effect is statistically significant and indicates an undesirable outcome; and
- **Undesirable effects for subgroup:** undesirable outcome for a subgroup of beneficiaries.

**Figure B. Theory of change framework for socio-economic impacts of social assistance**



Source: Authors' elaboration based on Barrientos (2012,12) and Davis and Handa (2016, 57).

With the criteria for outcomes and effects defined and categorised, estimators for programme impacts were consistently classified across studies. A modal approach was adopted, with—as a general rule of thumb—the majority finding determining aggregate results (e.g. if two estimators find statistically significant desirable outcomes, and another finds a statistically insignificant one, then the indicator is marked as desirable). Impacts were first assessed

at the study level for both proxies (lowest level of aggregation) and indicators (intermediary level). Indicators at the study level were then grouped across studies evaluating identical social assistance programmes to determine programme-level impacts. The methodology section elaborates in further detail the modal approach and its nuances.

The report presents indicator results at the programme level, with results grouped by category and sub-category. At the end of the report, Annex E presents aggregated results at the programme level, Annex F presents aggregated results at the study level, and Annex G provides an overview of the disaggregated results (study level).

## Summary of findings

### Poverty and finances

The **poverty sub-category** examines programme-level impacts for indicators of (relative) poverty status; income; non-financial assets; and consumption and expenditure. Impacts are generally positive, with **7 desirable impacts**, **3 desirable impacts for subgroups**, and **10 insignificant impacts** (see Figure 6). India's Mahatma Gandhi National Rural Employment Act (MGNREGA) shows a clear impact on income, although lasting impacts on non-financial assets are more limited. Meanwhile, Pakistan's Benazir Income Support Programme (BISP) is one of the few programmes to find clear positive impacts on poverty and non-financial assets. In general, the scope and timing of the analysis is strongly related to the result on impacts (e.g. studies assessing ongoing programmes are much more likely to find significant impacts than post-programme evaluations assessing lasting effects). The value of the transfer and regularity in delivery are also key determinants to finding desirable results. Lastly, the results show a certain 'order of urgency', whereby households tend to allocate new income based on their needs, from urgent disparities, to lasting deficiencies, to more productive investments.

The **finances sub-category** includes two indicators: borrowing and saving. Only four programmes recorded results for these indicators (see Figure 7). Out of seven programme-level indicators, **three show desirable impacts**, and **four show insignificant results**. In the case of Bangladesh's Employment Generation Programme for the Poorest (EGPP) and India's MGNREGA (both PWPs), results show a decrease in recipients' borrowing, suggesting that the more reliable income reduced the need to borrow money. Limited impacts on savings might reflect the 'order of urgency' of beneficiaries (savings might be beyond the scope of immediate and lasting needs). A lack of focus on complementary banking services and education might mitigate stronger impacts on finances.

### Labour market

This category includes three indicators: labour force participation (LFP); employment type; and child labour. Out of the 12 different programme-level indicators assessed, **3 were desirable**, **5 were desirable for subgroups**, **3 were insignificant**, and one was undesirable for a subgroup (some studies on MGNREGA finding an increase in labour among teenagers). Regarding the type of employment, the results suggest that certain programme types—such as unconditional cash transfers (UCTs) (e.g. the BISP), conditional cash transfers (CCTs) (e.g. the Female Secondary School Stipend Programme—FSSSP—in Bangladesh) and PWPs—may positively affect the type of employment chosen by beneficiaries. Targeting strategies (e.g. female household heads), conditionalities and human capital components (linking CCTs to educational outcomes) can prove determinant in changing labour market outcomes. Results from India's Old Age Pension show that UCTs for elderly people can significantly reduce their labour force participation (a positive outcome). Lastly, programmes that increase general employment can lead to negative spillover effects on child labour, either through the incentive of leaving school early to pursue employment (generally boys and young males) or by taking on household chores while adults work outside the household (generally girls and young women). Impacts are nonetheless heterogeneous across regions, suggesting that both implementation quality and provision of complementary services are key to limiting negative outcomes.



## Education

Indicators under the education category include school enrolment; educational attainment; school attainment; educational performance; and expenditure on education. Programme-level indicators vary to a certain extent: **five desirable; four desirable for subgroups; eight insignificant; two undesirable for subgroups; and one undesirable**. There is a strong correlation between programme objectives and educational outcomes, with some programmes including strong educational components (e.g. FSSSP in Bangladesh; Mid-Day Meal (MDM) in India; and *Waseela-e-Taleem (WeT)* in Pakistan), and other programmes with no strong focus on education. Undesirable impacts of PWPs (including the MGNREGA and the Primary Education Stipend Programme (PESP) in Bangladesh) provide a warning that new low-skilled employment opportunities might entice children and teenagers to leave education prematurely, hence the need to provide strong safeguards to pursue education. Positive results from Afghanistan's National Solidarity Programme (NSP) show that community-led initiatives can provide information and help educate parents about human capital choices for their children, ultimately leading to better outcomes (in this case, mostly for girls).

## Health and nutrition

Because this category contains the broadest set of outcomes, the report divides health and nutrition into four different sub-categories (each with its own set of indicators): **food; anthropometric indicators; sexual, maternal and child health; and additional health measures**.

The **food** sub-category includes two indicators: food adequacy, which includes measures of food quality (diversity), quantity and security; and expenditure on food. Outcomes for this sub-category are positive but not unanimous: with **five desirable; three desirable for subgroups; eight insignificant; and one undesirable for a subgroup** for programme-level indicators. A study of the MDM in India found mixed impacts on food adequacy, with positive impacts on children but negative results for other household members. While more research is needed to corroborate this finding, programmes that require additional expenditures from households—in this case, the cost of sending children to school—should ensure that the well-being of children does not come at the expense of other household members. In Pakistan, evidence from the **BISP** points to the regularity of the transfer playing a crucial role in determining whether cash transfers allow households to increase food expenditure.

The Anthropometric sub-category includes two indicators: weight adequacy; and height adequacy. Results are largely encouraging, as programme-level indicators find **two desirable; nine desirable for subgroups; and five insignificant impacts**. Positive results for child subgroups are not always consistent: results vary by age and gender. Furthermore, the child development literature suggests that counteracting stunting and wasting might be most effective at an early age, as opposed to after years of accumulated malnourishment.

**Sexual, maternal and child health** is a large sub-component with five indicators: ante- and postnatal care (ANC and PNC); qualified birth assistance; foetus and newborn mortality; child health; and sexual and reproductive health. Programme-level indicator results are varied, with **10 desirable; one desirable for a subgroup; 12 insignificant; and 3 undesirable for subgroups (all for the MGNREGA)** outcomes. Mixed outcomes reflect to some extent the different schemes assessed, which include programmes with strong health and child-care dimensions (e.g. *Tripasha* in Sri Lanka; Maternity Allowance for Poor Lactating Mothers (MAPLM) in Bangladesh; the *Aama* Programme (AP) in Nepal; and *Janani Suraksha Yojana* (JSY) in India), and programmes with no clear focus on health (e.g. Nepal's Old Age Allowance (OAA) and India's MGNREGA). Nevertheless, mixed findings for ANC and PNC, qualified birth assistance and sexual and reproductive health for programmes that focus especially on these areas shows the importance of addressing supply-side obstacles, (better) outreach to potential patients, and assessing conditionalities and incentives for treatment. Undesirable impacts of the MGNREGA highlight the necessity to relax working conditions for pregnant women and new mothers, and instead link transfers to sexual and child health goals.

**Additional health measures** include three indicators: water, sanitation and hygiene (WASH); consulting a doctor when sick; and expenditure on health. There are fewer studies assessing these outcomes, although they are generally positive, with **five desirable; one desirable for a subgroup; five insignificant; and one undesirable** outcomes. While WASH and expenditure outcomes generally show positive results, Afghanistan's NSP programme is the sole initiative finding a positive impact on doctor consultations, perhaps influenced by supply-side interventions accompanying the programme. Health expenditure results for the MGNREGA are inconclusive, with one study finding small positive impacts on households with children, and another study finding a negative impact.

## Gender

This category focuses on outcomes concerned with gender equality and the role of women in society. Indicators include: female labour force participation (FLFP); freedom of movement; political participation; social perceptions and norms (i.e. changes in attitudes to women); and female empowerment (views on the agency of women). Results across indicators are overall very positive, with programme-level effects showing **seven desirable; four desirable for subgroups; and five insignificant impacts**. Results for female empowerment, political participation, and social perceptions and norms were particularly encouraging; however, improvements in these categories did not always lead to positive impacts on FLFP (as found for the BISP and the FSSSP). Mixed results for FLFP might be explained by the need to actively engage women at different stages of implementation—for example, through local governance, as done in Afghanistan's NSP, or through more work opportunities, as exemplified by the MGNREGA. The reason why no significant effects are observed for the BISP and the FSSSP is most likely because these effects measure secondary (indirect) impacts of the original interventions, which are not primarily focused on FLFP. However, the BISP was successful in raising female participation in voting, and in encouraging women to move freely in public spaces.

## Implications for policy

While the review process was very careful to select only rigorous impact evaluations of social assistance programmes in South Asia, a second aim was to gather evidence from as many programmes (and countries) as possible. Therefore, the meta-review includes studies that vary in terms of scope; sample size; methodology; outcomes measured; quality of data; and degree (and quality) of programme implementation. Thus, inevitably, certain limitations and caveats arise when grouping and summarising results across studies. These and other issues are further elaborated in the methodology section and throughout the report. The main takeaways from the study and general policy recommendations are summarised below:

### Impact evaluations and monitoring and evaluation

- Except for very few programmes that have been extensively researched (e.g. MGNREGA) and studies with multiple follow-up rounds (BISP and NSP), **the impact evaluation literature on social assistance in South Asia is fragmented**, with many programmes potentially benefiting from new and updated evaluations. Evaluations with detailed follow-ups would be a valuable resource, although these studies can be expensive and time-consuming. Beyond impact evaluation studies, **better monitoring and evaluation of social assistance programmes**, including both quantitative and qualitative information, can make data collection **significantly easier to undertake**, and can provide **valuable insight into issues of effectiveness**.

### Cash transfer programmes

- A consistent finding from the literature, including studies assessing the BISP in Pakistan and the Child Grant in Nepal, is that both regular delivery of transfers and consistent cash amounts are strongly correlated with

successful programme impacts—especially with regard to food and other recurring expenditures.

**Ensuring that transfers are regular and predictable and, thus, that beneficiaries have clear expectations about transfer receipts allows better time and resource allocation for households, which allows for better time**

- Large-scale **social assistance interventions can greatly alter the demand for complementary social services**, especially when interventions include either hard or soft conditionalities. To ensure that new, programme-induced demands are met, **a corresponding investment in supply-side interventions (e.g. physical materials and buildings, and quality public health and education services) is often needed**. Incentives for public servants to deliver support are often overlooked, yet crucial for programmes to prove effective, especially for education and health outcomes.
- **Conditional and unconditional cash transfer** programmes **vary significantly by objective and target groups**. Impacts on individual household members can be determined by **who receives the transfer** and **household composition**, leading to changes in intra-household allocations and employment. For instance, old-age pensions can increase LFP for working-age adults in the household, as elderly household members take care of domestic chores instead.

### School feeding programmes (SFPs)

- **When successfully implemented, SFPs show strong positive impacts on food adequacy for child recipients**. They also have the potential to improve educational performance, particularly for children exposed to the programme for a longer period, suggesting a cumulative effect.
- However, these programmes might come at a higher cost for poorer and more vulnerable households having to pay to send children to school (i.e. for materials, transportation, tuition etc.), as in the case of the MDM. Furthermore, SFPs are unlikely to provide enough of a financial incentive to keep adolescents and older children from poorer backgrounds in school. Social assistance initiatives could aim to promote education outcomes for older children from more disadvantaged backgrounds, such as through **free public education and/or targeted transfers to poor households with children (e.g. child grants)**.

### Scholarships

- **Scholarships and their values should be designed to disincentivise child labour**. Schemes that target children more likely to drop out can help avoid losses to human capital, while communication strategies and information on human capital formation can also contribute.
- **Scholarship values should outweigh the income available from child labour**. Schemes that target children more likely to drop out can help avoid losses to human capital, while **communication strategies** and **information on human capital formation** can also contribute.
- Scholarships should be accompanied by **compatible labour market policies** to ensure that there will be enough positions for higher-qualified graduates, accompanied by higher salaries.
- Beyond immediate effects, **scholarships can increase human capital for women**, leading to **greater empowerment and better living conditions for children**. This result is found most clearly for the FSSSP in Bangladesh.

## Public works programmes (PWP)

- PWPs that provide equal pay and complementary services for women and mothers can **significantly reduce gender pay gaps**, as found in the case of the MGNREGA. Evidence from India suggests these schemes are **largely pro-poor**.
- Large-scale PWPs can have **significant impacts on labour market dynamics at the local (meso) level**. Results from the MGNREGA indicate that private agricultural wages increased in programme districts, **providing support not only to the direct beneficiaries but also to the wider community**.
- PWPs can act as **safety nets smoothing out seasonal and shock-related income fluctuations**. This **insurance effect** is an important characteristic of PWPs, especially in rural areas. By smoothing consumption over time and improving risk management, PWPs may also provide **options** for certain beneficiaries to **pursue riskier, but higher-yielding livelihood strategies**.
- PWPs potentially contribute to **negative spillover effects on child-related outcomes**, especially among older children and adolescents. Evidence from India suggests that these effects are likely determined by the quality of programme implementation. **Policymakers should carefully assess these potential impacts when designing PWPs**.

## Gender and children

- Social assistance programmes should **consider gender- and child-sensitive programme designs to increase participation and limit negative external impacts on children**, bearing in mind that women tend to be primary caregivers. Relevant programmes from South Asia include the AP, JSY, MAPLM and *Thripasha*. Policymakers should consider focusing **on relaxing conditionalities**, and **offering Cash Plus interventions and/or complementary social services, such as childcare**.
- For more gender equality, programme designs should balance the immediate needs of children and short-term efficiency with the long-term need to advance gender equality, **and not reinforce gender disparities** (e.g. gendered division of labour). In addition to programmes that promote human capital and empowerment for women, more gender-inclusive **communication and outreach strategies** to promote more male involvement in child-sensitive social assistance and schemes should be considered.
- Social assistance programmes that are not specifically focused on women or children can, nevertheless, **significantly promote inclusion and increase efficiencies by carefully considering child- and gender-sensitivity**. Results from the MGNREGA, for instance, show that **promotive social protection**—when well designed—can have a concrete impact on reducing the gender wage gap, with complementary care services limiting negative externalities to children. Meanwhile, **design features** such as delivering transfers to female household heads (BISP) or providing a framework for the political participation of women (NSP) can help balance household resource allocations and gradually shape social norms.

## Expenditure over time

- **Cash**—as opposed to in-kind—transfers provide **greater flexibility** for households to **allocate money to pressing or specific needs**.

- Patterns concerning the use of money and the poverty status of beneficiaries can be framed within an **order of urgency framework**, moving from (basic) food needs toward investments in assets.
- Given consumption priorities among beneficiaries with credit constraints, **asset ownership is more likely to be observed as time passes**. Investments in productive assets are more likely to lead to **continued income effects** after the programme ends.

### Variations in governance and implementation

- Studies that examine large-scale programmes across regions and different implementation bodies show that there can be significant disparities in how programmes are managed and executed. In the present study, this applies most clearly to evidence from India (e.g. MGNREGA and JSY), where states are responsible for implementing national schemes, with occasionally important variations in effectiveness. **Safeguarding harmonisation of programme delivery across geographic areas and implementing authorities** can help provide best practices and lessons learned from top performers, and **adapt design and implementation features at the local level**.

# 1. INTRODUCTION

## 1.1 Background

Over the last two decades, the scope of social assistance (or non-contributory social protection) programmes has expanded across South Asia, as changes in government policies and unprecedented economic growth have led to increased domestic attention to poverty alleviation and social exclusion across many countries in the region. Thus, South Asian governments have largely reinforced their commitments to deliver effective social protection policies, and this has led to the emergence of new (or transformed) welfare institutions in the region (Barrientos 2019; Bloch 2020).

During the same period, international organisations have emphasised the importance of social protection as both a right and an important means to eradicate poverty and reduce inequalities. These are embodied, respectively, through Sustainable Development Goal (SDG) Targets 1.3, which calls for governments to implement “nationally appropriate social protection systems and measures for all”, and SDG Target 10.4 asserting the need to “adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality.” A rights-based approach, as set out in the Universal Declaration of Human Rights and the Convention on the Rights of the Child, remains the conceptual foundation of UNICEF’s approach to social protection (UNICEF 2019). Moreover, the right to social protection supports the realisation of multiple rights by reducing poverty and increasing access to basic services such as health, education and nutrition.

Clear progress has been made through international advocacy and, especially, domestic initiatives to improve economic well-being and human capacities, with a substantial decrease in extreme poverty in recent decades. However, many households are vulnerable and live near poverty lines for lower-middle-income (USD3.30 purchasing power parity (PPP) per day) and upper-middle-income (USD5.50 PPP per day) countries, as economic growth in the region over the past 20 years has been less inclusive than in the 1980s and 1990s, leading to an increase in inequality, especially in the most populous South Asian countries (Barrientos 2019). Furthermore, the socio-economic crisis caused by COVID-19 has further demonstrated how many households remain vulnerable to external shocks,<sup>1</sup> as many groups remain uncovered by social protection (IPC-IG and UNICEF ROSA 2020; ILO 2021; UN ESCAP & ILO 2020).<sup>2</sup>

Given this context, it is necessary to review the role and impact of social assistance policies to strengthen our understanding and disseminate information about their effectiveness. This involves exploring how these programmes have responded to long-standing challenges, such as poverty and appropriate access to education, health and labour opportunities, and, equally, how they can be adapted to address newer challenges, such as rising inequality and environmental changes.

## 1.2 Study objectives and contributions

As studies and reports that estimate the impacts of social assistance are published, it is crucial to review this literature and summarise the results in a rigorous and accessible manner. The contribution of the end-product is to provide policymakers, stakeholders and researchers with the resources necessary to understand which social protection programmes have evidence showing positive (desirable), neutral or negative (undesirable) outcomes. The meta-analysis should allow readers to quickly see which programmes in South Asia have demonstrated positive impacts across socio-economic categories.

The in-text analysis further explores and discusses fine points from the findings, which explain and highlight best practices of both design and implementation features associated with successful outcomes. The methodology

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1. Preliminary estimates pointed out an increase of 1.8 to 2.3 percentage points in extreme poverty, pushing around 42 million people below the World Bank’s USD1.90/day poverty line (IPC-IG and UNICEF ROSA 2020).

2. While 47 per cent of the population are covered by at least one social protection benefit (ILO 2021), the average falls to 24 per cent in South Asia (UN News 2020).

section discusses potential limits and the assumptions adopted in the meta-analysis, which often relate to issues of aggregating results from different studies that use different data and methodologies in their findings.

**Table 1. Programmes assessed in the report**

<b>Afghanistan</b>
National Solidarity Programme (NSP, predecessor of the Citizens' Charter Afghanistan Project—CCAP)
<b>Bangladesh</b>
Employment Generation Programme for the Poorest (EGPP)
Maternity Allowance for the Poor Lactating Mothers (MAPLM)
Primary Education Stipend Programme (PESP)
Female Secondary School Stipend Programme (FSSSP, predecessor of the Secondary Education Stipend Programme—SESP)
<b>Bhutan</b>
None
<b>India</b>
Janani Suraksha Yojana (JSY)
Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)
Mid-Day Meal (MDM)
National Social Assistance Programme (NSAP), Old Age Pension (OAP) component
Targeted Public Distribution System (TPDS)
<b>Maldives</b>
None
<b>Nepal</b>
Aama Programme (AP)/Safe Motherhood Programme
Child Grant (CG)
Old Age Allowance (OAA) or Senior Citizen's Allowance
Scholarships
<b>Pakistan</b>
Benazir Income Support Programme (BISP) or National Cash Transfer Programme, including the Waseela-e-Taleem (WeT) component
<b>Sri Lanka</b>
Divineguma Programme or Samurdhi
National Supplementary Food Programme or Thriposha

Given the background and motivations for the study, the main objectives are to:

- Regroup studies that explore the impacts of flagship non-contributory social protection programmes in South Asia (taken from the International Policy Centre for Inclusive Growth (IPC-IG) overview study by Arruda et al. (2020)) to conduct a meta-analysis of programme effectiveness;
- highlight recent research and findings concerning impacts of non-contributory social protection programmes in South Asia related to human development and economic welfare;
- identify regional findings concerning the evidence of the impact of social assistance on social and economic outcomes;
- develop policy recommendations for design and implementation features that support better outcomes, with a focus on findings that are relevant to policymakers; and
- highlight knowledge gaps from the literature and/or topics for further research.

This study was conducted through a literature review of published, rigorous impact evaluations that employed exclusively experimental and quasi-experimental methodologies. The aim of these studies is to infer causal effects—i.e. establish whether a programme does indeed have a causal effect on human development and/or economic welfare. The meta-analysis comprises 63 studies that explore the causal impacts of 17 different social assistance programmes in South Asia, out of 51 different programmes identified in Arruda et al. (2020). Programmes included in this study are defined as **social assistance** (non-contributory social protection), based on a **slightly expanded definition of social assistance which also includes cash-for-work or public works programmes (PWP)**s. For most programmes, either no evaluation study was found or else the studies encountered did not meet minimum quality criteria for our analysis and were excluded. Table 1 lists the different programmes covered in this study, and Annex A provides more information on their characteristics. A detailed description of the methodology is discussed in Section 2.

### 1.3 Report outline

The study comprises eight sections. Section 2 further details the methodology adopted for the review. Sections 3, 4, 5, 6 and 7 present the findings concerning programme impacts across five human development and economic welfare categories: poverty and finances, labour market, education, health and nutrition, and gender. Each of these chapters discusses the overall findings and trends of programme impacts for each category, starting with a descriptive analysis aggregated at the regional level, followed by subsections discussing results at both country and programme levels. Whenever pertinent, more nuanced discussions concerning the interpretation or eventual limitations of different studies are included in the main text. Qualitative analysis complementing the findings of the impact evaluation studies is also discussed if relevant. Section 8 presents policy recommendations, and Section 9 presents concluding remarks.

## 2. METHODOLOGY

In the first phase, a thorough search and literature review was conducted to identify and gather impact evaluation studies of social assistance programmes in South Asia. This focused on the 51 programmes included in Arruda et al. (2020), including predecessor programmes. The studies found underwent a thorough review process to guarantee minimum standards in terms of data quality, identification strategies and estimation techniques. Only rigorous, quantitative impact evaluations using mainly quasi-experimental methods to infer causal effects were included. Estimates from the impact evaluations consist mostly of intention-to-treat (ITT) and average treatment effect (ATE) estimates. Descriptive approaches—for instance, simple differences—and qualitative studies were excluded.<sup>3</sup> The final sample selected comprises 63 impact evaluations covering 17 different programmes in 6 of the 8 countries in the region.<sup>4</sup> The table in Annex B details all the programmes for which we searched for information, indicating which were ultimately included.

The studies compiled differ significantly in terms of methodology and identification strategy adopted, with some studies using panel data comparing outcomes for recipients and non-recipients over time (e.g. Cheema et al. for the BISP in Pakistan); Beath et al. for the Citizens' Charter Afghanistan Project (CCAP)/National Solidarity Programme (NSP) in Afghanistan; and Renzaho et al. in Nepal), and most studies using household or administrative data with information on policy design to estimate the impact of programmes on recipient individuals or households. Having assembled the sample of approved evaluations, the results from each study are then summarised in three steps comprising two layers of aggregation. These steps are detailed below.

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3. For instance, a new impact evaluation of the CG in Nepal conducted by the EPRI on behalf of UNICEF provides a baseline assessment, and thus was not included in the study sample.

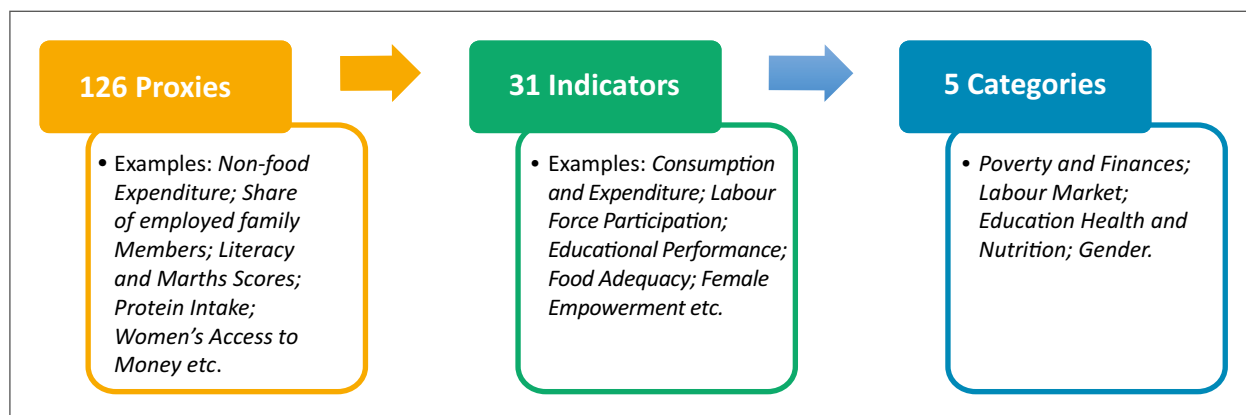
4. Two of the programmes evaluated are predecessor programmes of those included in Arruda et al. [2020]: the NSP, which preceded the CCAP in Afghanistan, and the FSSSP, which preceded the SESP in Bangladesh.



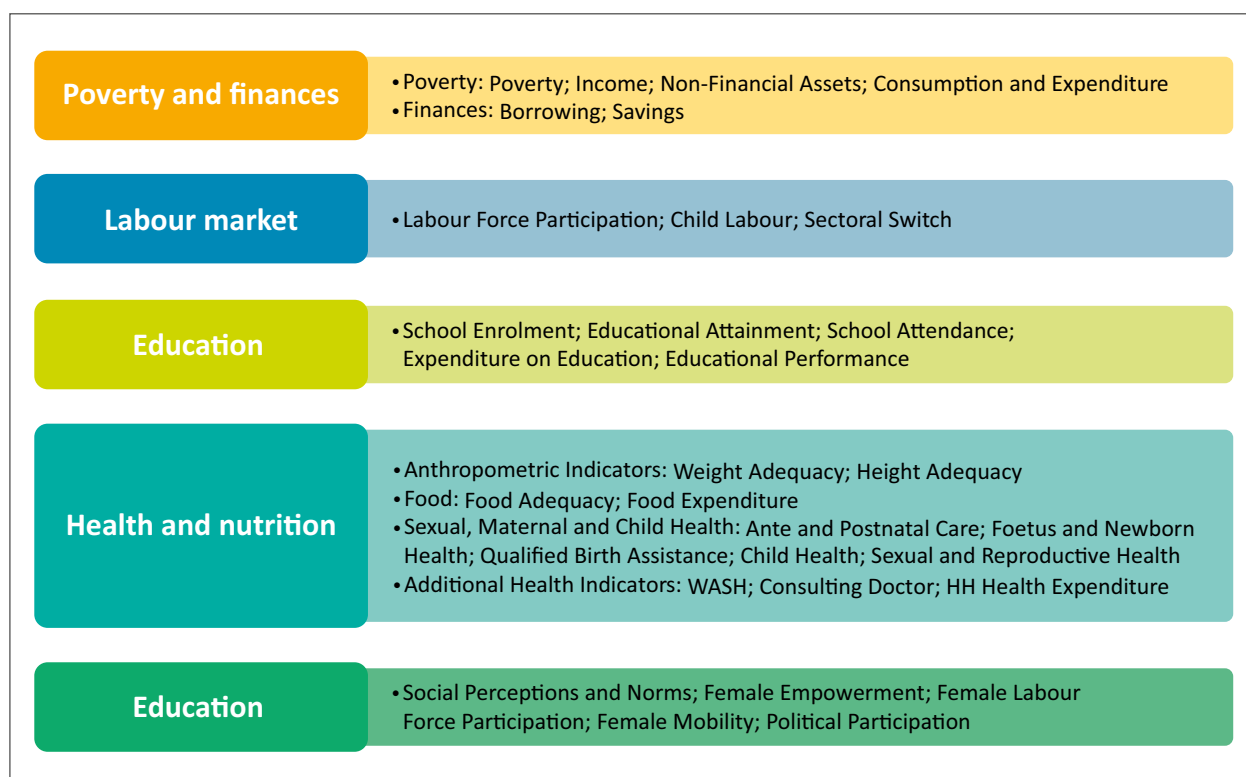
## Step 1: Compilation of disaggregated results, organised by indicator and category

In the first step, a disaggregated table was created, summarising the impacts on different outcomes from each study (Annex G, on request). This first step grouped 126 different outcomes measured across the 63 studies assessing impacts of the 17 programmes covered in the study. The large number of outcomes is due to different studies using slightly different proxies to measure similar indicators. This is especially the case for more intangible concepts, such as female empowerment, which can be measured in multiple ways.<sup>5</sup>

**Figure 1. Classification of outcomes used for this study**



**Figure 2. Categories and indicators, as classified in the study**

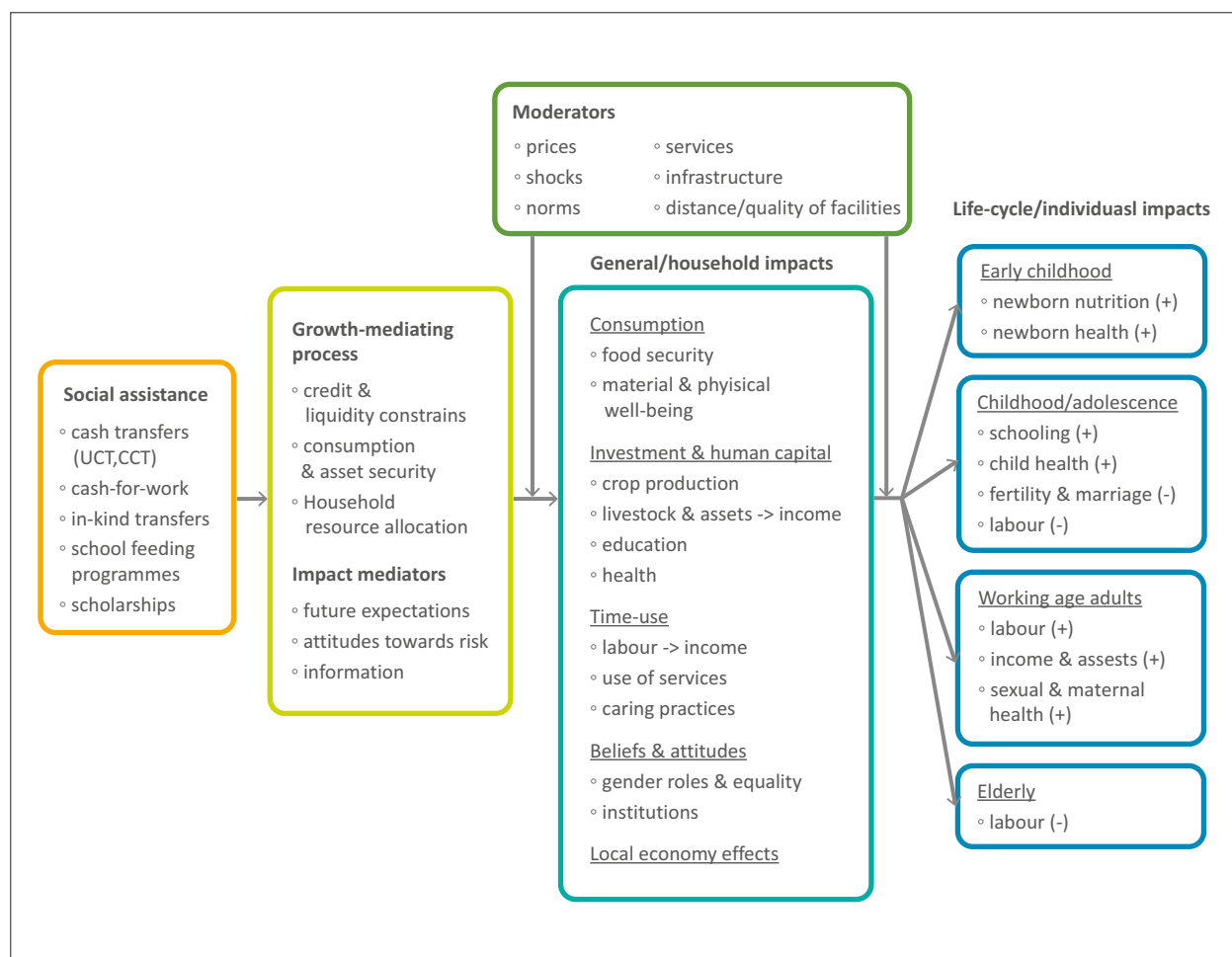


5. There were a small number of proxies that did not align with the aggregate indicators and were excluded. Nevertheless, these proxies sometimes provide interesting complementary information, and thus were kept in the disaggregated table for reference.

These disaggregated proxies were organised under 31 different indicators belonging to 5 categories: poverty and finance, labour market, education, health and nutrition, and gender. To further group different indicators, categories were occasionally grouped into sub-categories. For instance, poverty and finance are considered separately in different sub-categories; and health and nutrition is divided into four sub-categories (food; anthropometric indicators; sexual, maternal, and child health; and additional health measures). Figure 2 lists the five categories and respective indicators covered in this study, with sub-categories underlined and italicised. A table detailing each category with respective indicators and proxies is presented in Annex C.

These categories and indicators cover a broad range of development-relevant outcomes commonly assessed by impact evaluations. There are many channels through which social assistance can impact socio-economic outcomes. Figure 3 presents a theory of change framework illustrating potential channels leading to changes in outcomes. **Growth-mediating processes** of social assistance (e.g. reduced credit and liquidity constraints; changes in consumption and asset security; and household resource allocations) are the main drivers of change. **Impact mediators** (e.g. future expectations; attitudes to risk) examine how psychological and behavioural decisions might affect outcomes. **External moderators** (e.g. price changes; quality and quantity of services and infrastructure; social norms) are important and predominantly local factors that influence programme impacts. The figure also distinguishes between outcomes that apply more generally (at the household level) and outcomes that are specific to individuals and their position along the life cycle (i.e. early childhood; childhood and adolescence; working age; and old age).

**Figure 3. Theory of change framework for socio-economic impacts of social assistance**



Source: Authors' elaboration based on Barrientos (2012, 12) and Davis and Handa (2016, 57).

### Box 1. Considerations for the interpretation of desirable and undesirable effects

Some nuance is required regarding this classification of outcome effects as described in the main text. First, a 'desirable effect' is not necessarily a better outcome than a 'desirable effect for a subgroup'. This, for one reason, is because **not all studies perform subgroup analyses**.<sup>6</sup> Likewise, in the absence of a subgroup analysis, an insignificant impact might conceal desirable or undesirable impacts among a subgroup.

Second, although what can be considered 'desirable' is straightforward in most cases, **there are situations where a deeper understanding of context and channels of change is needed to determine whether the outcome is desirable or not**. For instance, in the case of borrowing or outstanding loans, an increase might reflect excessive risk-taking, poor credit repayment history and accumulating debt, all of which are arguably undesirable outcomes. However, it might also reflect improved access to credit and, although expensive, a case where highly profitable long-term investments are being conducted. Another important example applies to labour force participation, where what can be considered desirable depends largely on the life cycle: while increased participation is viewed as positive among working-age adults, the opposite holds for children and elderly people.

Third, when assessing the significance of programme effects, it is important to **acknowledge which are the main goals and outcomes of focus of different programmes** (Annex A provides a brief presentation of the sample programmes' objectives, typology and target groups). As such, in a case where no significant impact is observed, the theory of change needs to be considered, and whether the outcome in question is within the core focus of the programme (greater weight) or of secondary concern. As a consequence, when comparing programme results in detail, it is **crucial not only to look at the statistical significance, but also to examine the magnitude of the effect**. For example, a PWP might find a 9 per cent increase in female wages, but a 2 per cent increase in child time spent doing household chores. In this case, policymakers need to scrutinise the magnitude of the impacts to assess changes in overall welfare.

The classification of the impacts for each outcome follows the colour scheme described below:

- **Desirable effects (dark green)**: The effect found is statistically significant, and its sign reflects the desirable direction of the effect.<sup>7</sup>
- **Desirable effects for a subgroup (light green)**: The study performs an analysis of heterogeneous impacts and finds the statistically significant effect only to hold for a certain subgroup of beneficiaries (e.g. women) or during certain time periods (e.g. the rainy season).
- **Insignificant effects (cream)**: There is no detectable, statistically significant effect different from zero.
- **Undesirable effects (brown)**: The effect found is statistically significant, but its sign indicates the undesirable direction.
- **Undesirable effects for a subgroup (coral)**: An analysis of heterogeneous impacts found a statistically significant undesirable effect that is, however, constrained to a subgroup of the entire population of beneficiaries.

6. For example: India's MDM finds desirable impacts on primary school enrolment for the entire population of children studied. However, an analysis of heterogeneous treatment effects reveals that this effect was entirely driven by first graders, whereas no desirable impact was found for children in grades 2–4. Therefore, without this subgroup analysis, the MDM would have been wrongly categorised as having a desirable impact overall (dark green).

7. This could, for example, be a positive sign for an indicator assessing income changes (i.e. an increase in income) or a negative sign for an indicator assessing the quantity of child labour (i.e. a decrease in child labour).

## Step 2: Determining aggregate impacts for individual studies

After categorising the different outcomes and determining the indicator effects both within and across studies, the next step involves developing a methodology for classifying indicator effects—desirable; desirable for a subgroup; insignificant; undesirable; undesirable for a subgroup—into an aggregate analysis. This is important for two reasons: first, at the study level, different proxies that are categorised under the same indicator (e.g. consumer durables, land ownership and livestock ownership under the non-financial assets indicator) might find different effects; second, **across** studies, research can find different and, at times, contradictory results, which might cancel each other out.

To develop these aggregate results, a modal approach was adopted whereby, in the case of different results being obtained across proxies or studies, the majority finding was given precedence. In the case of a tie (e.g. two proxies—or studies—showing positive effects, and two others showing no impacts), an assessment of secondary (minor) proxies and a subjective analysis were undertaken as a tiebreaker. Annex D provides a detailed overview of the modal approach, and how it was used as a tiebreaker for both proxies (study level) and indicators (across studies).

Once the modal approach establishes aggregate impacts from proxies to indicators (study level), Annex F summarises the findings across the 30 indicators for the 63 different studies. Figure 4 provides an extract from Annex F, showing the impacts of social assistance programmes in Afghanistan and Bangladesh on education indicators from different studies.

**Figure 4. Extract from Annex F**

Country	Afghanistan				Bangladesh			
Programme	CCAP/ NSP*				PESP	SESP/FSSSP*		
Study	Beath; Christia; Enikolopov and Kabuli (baseline 2007)				Baulch (2011)	Begum et al. (2017)	Shamsuddin (2015)	Hahn et al. (2018)
Indicators								
Poverty and finances								
Poverty								
Income								
Non-financial assets					+			
Consumption and expenditure								
Finances								
Borrowing								
Saving								
Labour market								
Labour force participation								
Employment type								
Education								
School enrolment								
Educational attainment								
School attendance		G						
Educational performance								
Education expenditure								

## Step 3: Determining aggregate impact by programme

The analysis shifts from a study to a programme perspective. By taking programmes as a unit, results from different studies—with different data, identification strategies, time horizons etc.—are aggregated. Using a similar modal approach as in step 2, the studies were organised to determine programme effects (see Annex D for a detailed account of the methodology, and Annex E for an overview of the findings aggregated by programme). An extract of Annex E is presented in Figure 5.

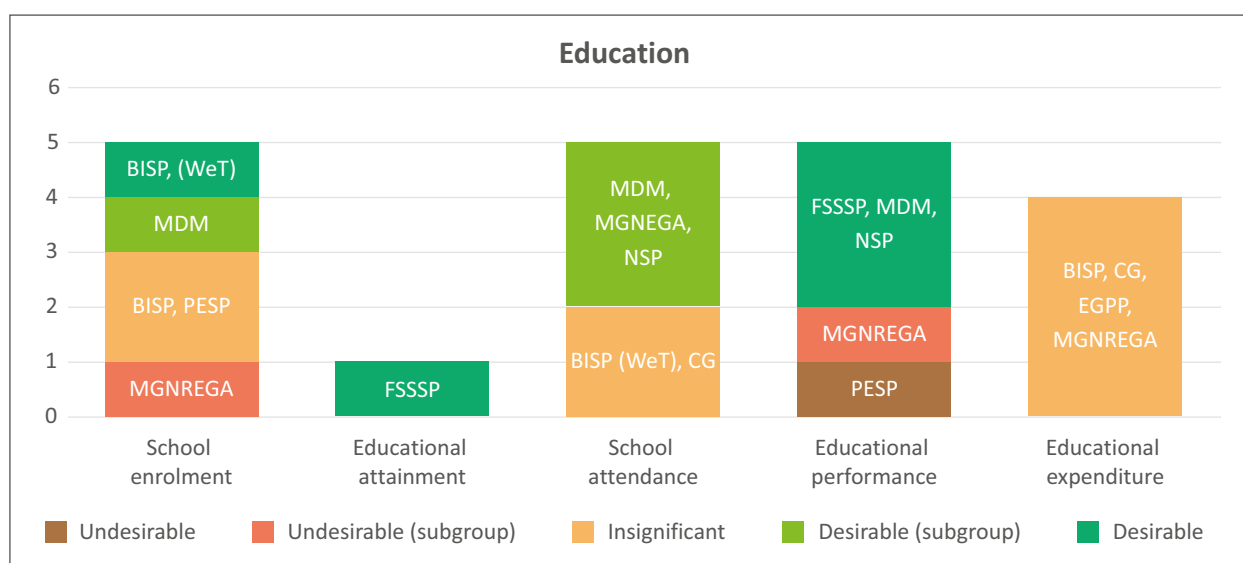
**Figure 5. Extract from Annex E**

Country	AFG	BAN				IND				
Programme	CCAP/ NSP*	PESP	SESP/ FSSSP*	MAPLM	EGPP	JSY	MDM	MGNREGA	NSAP (OAP)	TPDS
Indicators										
Education										
School enrolment							=	+ S		
Educational attainment										
School attendance	G, T, =							- S		
Educational performance	T, =							T, -, +		
Education expenditure										
Health and nutrition										
Food										
Food adequacy							+	+ S, - S		
Food expenditure								+ S	T, +	

### Presentation of the results

To present the findings of the meta-evaluation, Sections 3–7 cover each of the five categories separately. The chapter structure reflects the different levels of aggregation from the methodology, including relevant sub-categories for both poverty and finances and health and nutrition.<sup>8</sup> Each chapter begins with a regional overview presenting results aggregated at the programme level. This serves to introduce the aggregate outcome indicators included, explain relevant theories of change, describe general findings and offer a broader (regional) picture of the results. Figure 6 illustrates programme results for the five indicators for education (covered in detail in Section 5). Each section starts with an analogous summary table to highlight the impacts of different social assistance programmes in the region.

**Figure 6. Example of regional overview (programme level)**

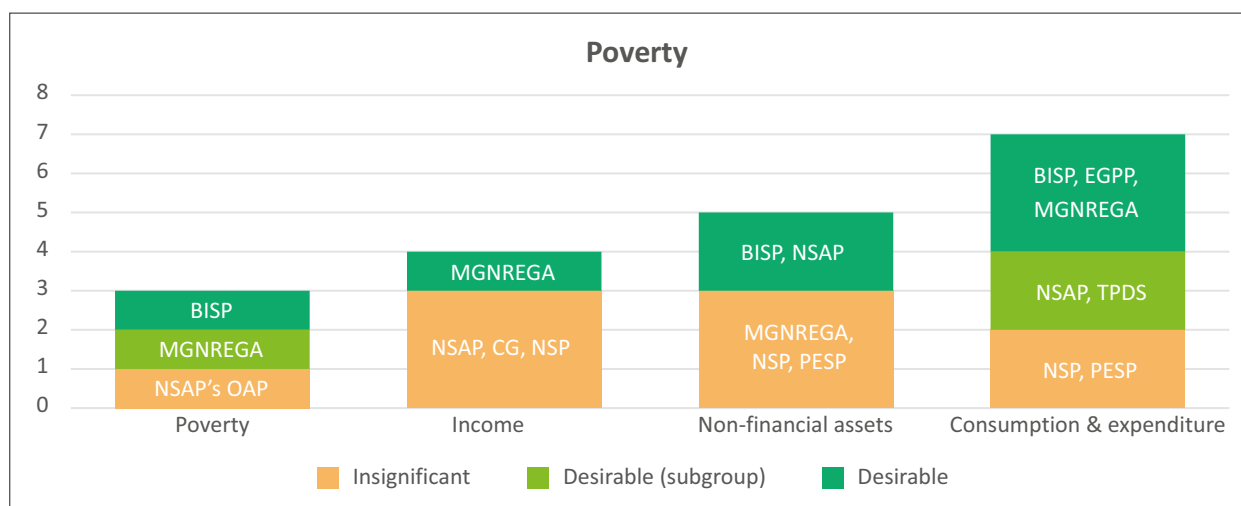


8. Results by the following sub-categories are discussed: poverty and finances (poverty and finances category); labour market (labour market); education (education); food, anthropometric indicators, sexual, maternal and child health, and additional health measures (health and nutrition), and gender (gender).

## 3. IMPACTS ON POVERTY AND FINANCES

### 3.1 Regional findings for poverty

**Figure 7. Poverty indicators: effects at the programme level**



The indicators assembled under the **poverty** sub-category give an indication of programme impacts on beneficiaries' economic status. When looking at poverty, we discern between measures of relative poverty (such as whether a household falls below the poverty line or the poverty gap) assembled under the poverty indicator, and measures of poverty as captured by the indicators income, non-financial assets, and consumption and expenditure. Notably, no programme is evaluated on its effect on multidimensional poverty—a limitation given that reductions in monetary poverty do not necessarily translate into advancements in human development.

The main way in which social assistance can affect poverty is through a direct income effect, as, all things being equal, the benefit value will lead to an equal increase in income. For households living below the poverty line, transfers will lead to a reduction in poverty gaps, and potentially move those who are marginally poor out of poverty in the short term. Other ways include reducing liquidity constraints and improving consumption and asset security, both of which can lead to lasting, positive results even after beneficiaries are no longer eligible for the transfer. Both short- and long-term impacts will depend on the benefit value (adequacy). For lasting effects, complementary schemes and services that address structural determinants of poverty might be necessary.

Only three programmes evaluate effects on relative poverty. Desirable effects were found for the **BISP** in Pakistan and the **MGNREGA** in India. Conversely, the only component of India's National Social Assistance Programme (NSAP) subjected to impact evaluation (**its Old Age Pension (OAP) component**) was not associated with improvements in poverty status.

In terms of absolute poverty (income), the **MGNREGA** is the only programme that registers a desirable impact on aggregate income and is the only cash-for-work programme. Cash transfers (conditional or unconditional) through the **OAP** component of the NSAP and the **Child Grant (CG)** in Nepal were not found to lead to sustainable increases in income, although in the case of the **OAP** the study only looked at effects on other forms of income. As further discussed in the study-specific subsections, the results might be explained by the irregular delivery and low value of transfers in the case of the **CG**, and elderly beneficiaries reducing their labour supply and investing in assets in the case of the **OAP (NSAP)**. Lastly, the **NSP** in Afghanistan registers short-term improvements in income, whereas the end-line results suggest no significant improvements.

In line with the generally desirable results we find for programmes, one would expect a programme targeting poverty to, at the very least, lead to an increase in consumption and expenditure, as the poorest households live at or very close to subsistence level and have immediate financing needs (e.g. for food or urgent medical expenses). The insignificant impact observed for two programmes (the **Primary Education Stipend Programme (PESP)** and the **NSP**) might occur for several reasons relating to the transfer amount, substitution effects or saving/investing the money in non-liquid assets.

In the case of the **NSP**, the programme does not involve any cash or in-kind transfers to beneficiaries directly, but rather block grants that depend on the productive use of funds in the community to create positive consumption externalities at the household level. To capture investments made from the transfer amount for those programmes that involve a transfer to the household or individual beneficiary, it is also interesting to look at the impact on non-financial assets.<sup>9</sup>

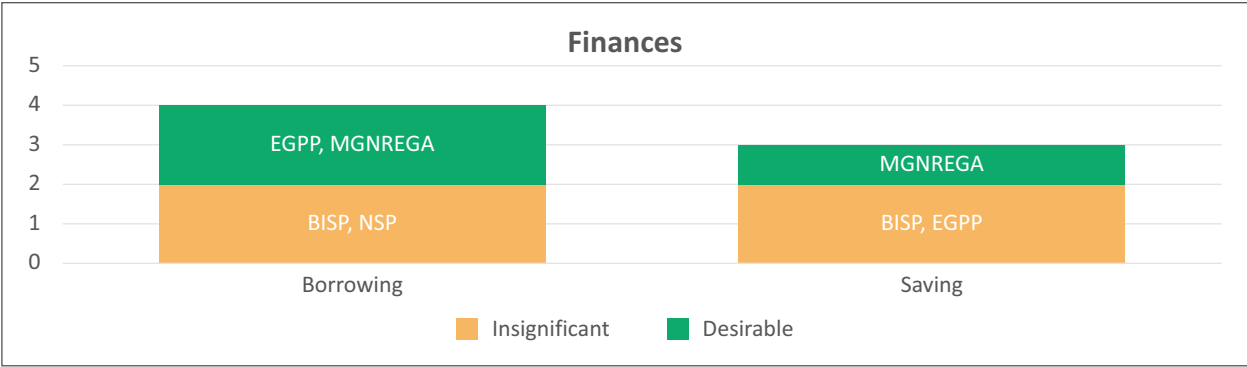
Here, the **BISP** and the **NSAP's OAP**—two cash transfers yielding a recurring transfer and thus an additional income stream throughout the year—increase consumption **and** asset ownership. However, this is not the case for the **MGNREGA** (a PWP with enrolment limited to 100 days per year and utilisation of the scheme mostly seasonal) or the **PESP** in Bangladesh. This result makes intuitive sense if transfers occur either irregularly in times of greatest need (which makes the use of the transfer for consumption more likely than an investment in (illiquid) assets), as in the case of the **MGNREGA**, or are clearly earmarked for a use other than asset investment, as is the case for the **PESP**.

In summary, the **BISP** is the only programme which consistently shows desirable impacts on economic status, a monetary measure of absolute poverty (consumption) and non-financial asset ownership. While this result might be due to limitations in evaluation and different methodologies to measure poverty, it is somewhat disappointing to not see more widespread positive affects across all dimensions of poverty assessed here, which could potentially be explained by issues relating to the size and/or regularity of the transfer.

### 3.2 Regional findings for finances

The **finances** sub-category is made up of the indicators borrowing and saving, which together provide an indication of lasting uses of transfers: an increase in savings can point to a smoothing of the income effect over time—i.e. not consumed immediately but also saved for future needs—while an increase in borrowing might reflect a greater reliance on risky loans and insolvency. However, this interpretation might be incomplete, as, for instance, an increase in borrowing might reflect increased investment and/or improved access to credit. Therefore, the interpretation of the indicators is context-dependent, and depends on programme objectives as well as information presented in the respective study.

**Figure 8. Financial indicators: effects aggregated at the programme level**



9. As some eligibility criteria consider asset ownership in particular, programme effects on asset ownership are even more relevant and informative, since they give an indication of progress towards programme graduation. For example, this is the case for the **BISP** and the **EGPP**. However, we only document impact evaluations assessing effects on asset ownership for the former.

An interesting observation on borrowing is that both PWP in our sample, the **MGNREGA** in India and the EGPP in Bangladesh, seem to have worked to provide a steadier income stream over the (agricultural) year. In both cases, beneficiaries recorded **lower** levels of borrowing, which we interpret as a positive effect: households can now compensate for seasonal fluctuations in income through participation in public works, rather than through borrowing. Conversely, only the **MGNREGA** also seems to stimulate savings. Conversely, no impacts on savings or borrowing were found in evaluations of the **BISP**, which provides a regular unconditional cash transfer (UCT) instead of cash for work. Regarding savings, it would generally be informative to have more studies evaluating programme impacts, especially as financial inclusion is a component of an increasing number of programmes.

### 3.3 Afghanistan

The **NSP** in Afghanistan aims to establish village-based, democratic governance structures through gender-balanced community development councils (CDCs) and facilitate the implementation of infrastructure or utility projects through block grants to villages.<sup>10</sup> Although the main objective of the **NSP** was to strengthen governance, one of its components included a public works initiative, which provided short-term economic opportunities for community members, generating an estimated “47.8 million days of work for skilled and unskilled workers, injecting much needed short-term wage transfers into poor rural communities throughout Afghanistan” (World Bank 2016, 12). Beath et al. (2010; 2013b) conducted a series of impact evaluations of the **NSP** that allow programme effects to be tracked over time, both two years after the start of **NSP** implementation and after four years, with 99 per cent of NSP-funded projects completed.

Overall, effects on poverty alleviation are limited to immediate impacts in the short term. This most likely reflects programme objectives (village-level interventions providing local services and promoting societal changes) being different from most social protection objectives and arrangements (i.e. individual- or household-level interventions targeting poverty—for example, through a cash transfer). Two years after the baseline, Beath et al. (2010) found significant improvements in household income. However, these impacts faded over time, with no lasting impacts on income found once the programme was completed. Furthermore, for consumption, expenditure, borrowing and non-financial assets, there was no detectable change at any point. This pattern might be explained by the limited success of the infrastructure projects implemented (irrigation or transport), which fail to foster lasting local economic development.<sup>11</sup> The authors hypothesise that short-term improvements in income might reflect the economic stimulus effect of the block grants that subsequently fail to create lasting growth.

As a result, the World Bank (2016, 136) emphasised that “more is needed to ensure equity and inclusion” for the **NSP**. Thus, the Citizens’ Charter, which replaced the **NSP** in 2017, includes a component focused more on the most vulnerable groups<sup>12</sup>—the Maintenance and Construction Cash Grant & Social Inclusion Grant—which broadened the scope for social protection.

### 3.4 Bangladesh

Two out of four programmes from Bangladesh have evidence from impact evaluations assessing impacts on poverty and financial behaviour. The **PESP** is a nationwide CCT that aims to improve educational outcomes for children in primary school. Since poverty reduction is not the primary focus of the programme, it is unsurprising to find little

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10. The NSP is the predecessor programme to the CCAP included in Arruda et al. (2020).

11. As our study does not include a dedicated section on infrastructure and access to utilities and services, it should be mentioned at this point that utility projects implemented under the NSP were generally deemed successful.

12. Poor people, women, refugees, returnees and internally displaced persons are explicitly mentioned as focus groups.



improvement in asset ownership, consumption or expenditure.<sup>13</sup> However, Baulch (2011) finds improvements in the value of consumer durables, though this finding is unclear.<sup>14</sup>

The **EGPP** is a cash-for-work programme offering short-term employment in rural infrastructure projects for seasonally unemployed workers. Unlike the **PESP**, the objective is to support livelihoods and provide insurance for households affected by seasonal unemployment. Cho and Ruthbah (2018) find improvements in total and per capita expenditure that are roughly equivalent to the transfer amount.<sup>15</sup> As discussed in other sections, this effect is driven by improvements in food- and health-related expenditures as opposed to non-food expenditure. This might reflect the urgency of both nutrition and good health, which might otherwise be jeopardised by seasonal income shocks. In line with this finding, Cho and Ruthbah (2018) do not find any changes in saving behaviour, which suggests that income from the **EGPP** caters for immediate needs only. Additionally, they also find a reduction in outstanding loans, showing that, on average, households experience a reduction in the size of outstanding loans of 40 per cent, implying that a significant share of the money received substitutes for borrowing. As most loan-taking in their sample is shock-responsive, income from the **EGPP** might prevent beneficiaries from otherwise taking out loans to satisfy urgent (food- or health-related) financing needs in times of interrupted income streams.<sup>16</sup>

### 3.5 India

Another cash-for-work initiative, the **MGNREGA** is the largest initiative of its type in the world. In their evaluation of the programme, Deininger and Liu (2018) find significant improvements in income from casual labour, with the effect size being 18 per cent larger for women. The magnitude of the effect most likely reflects the otherwise limited opportunities for women to work in paid employment. This finding is corroborated by Dey and Imai (2015), who find increases in consumption as well as income net of MGNREGA earnings. Moreover, they find evidence of reduced income volatility due to the scheme. The same conclusion is reached by Bose (2017), who notes increased consumption across the agricultural season, which is interpreted as evidence for consumption smoothing. Furthermore, evidence from Deininger and Liu (2018), Bose (2017), and Klonner and Oldiges (2014) suggests that the most vulnerable households benefit most from the **MGNREGA** in terms of greater consumption and poverty reduction, particularly households belonging to vulnerable castes and tribes (i.e. Scheduled Casts—SC—and Scheduled Tribes—ST). This finding is consistent with the hypothesis that the poorest households experience the largest increase in consumption, given greater proximity to subsistence levels and more imminent consumption needs.

Evidence from the **MGNREGA** indicates that geographical context matters when assessing outcomes. Most of the studies previously discussed concentrate on districts in Andhra Pradesh or West Bengal, two states regarded as having some of the highest implementation quality for the **MGNREGA**. Therefore, the external validity of these positive results is not obvious, and we should be wary of variation in programme success across states. Other evaluations,

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13. Baulch (2011, 255) also found an undesirable impact on 'change in cultivable land'. We disregard this impact though, since it is likely due to "the practice of partible land inheritance in Bangladesh", rather than a consequence of the programme.

14. No significant changes in expenditure for either food or non-food items were found even after the end of the study's six-year evaluation horizon, though the study found improvements in boys' weight adequacy and girls' height adequacy. More evidence is needed to assess the PESP, given the small sample size used in Baulch (2011).

15. This suggests that EGPP work does not seem to have substituted for income from other work, which is discussed in more detail in Section 4 ('Labour markets').

16. When interpreting effects found by Cho and Ruthbah (2018), it is important to note two peculiarities about their sample. First, it only comprises EGPP beneficiaries already covered by other major social programmes in Bangladesh. While they try to address sample selection bias, caution when generalising their results to all EGPP participants is advised. Specifically, those not covered by any other social protection programme might have different (immediate) financing needs from those already receiving assistance from other programmes. Second, at the time of evaluation, EGPP provided 40 days of labour for a maximum of two cycles per year. Therefore, Cho and Ruthbah (2018) measured the effect of EGPP participation on the extensive margin, but did not account for differences in the intensity of participation in the scheme, particularly whether a beneficiary participated in one or two cycles in any given year.

consequentially, particularly those by Zimmermann (2020) (national sample), Maity (2020), and Ravi and Engler (2015) (both focusing samples from Andhra Pradesh), find no changes in overall consumption levels, though often specific food and non-food items demonstrate increased expenditure.<sup>17</sup>

Looking at asset accumulation and the **MGNREGA**, Deininger and Liu (2018) do not find any impacts in the short term. They do, however, find a build-up in assets leading to significant improvements over time. This might be consistent with asset investment only being undertaken after urgent needs (such as food or health expenditures) are met first. Meanwhile, although Liu (2018) finds positive spillover effects from the **MGNREGA** to non-beneficiary households in terms of consumption, likely due to higher private wages at the local level in MGNREGA districts (see Imbert and Papp 2015),<sup>18</sup> this finding does not hold for non-financial assets.

The **NSAP** is a comprehensive Indian social protection scheme with different arms supporting several particularly vulnerable groups. Impact evaluations analysing the effects of the **OAP** component of the **NSAP**—a monthly transfer to poor people above retirement age—were identified for this study. Unnikrishnan and Imai (2020) conducted a long-term evaluation based on a nationally representative sample, surveying households at baseline and again seven years later. While non-pension income **excluding** the **OAP** amount remained unchanged, households with an **OAP** beneficiary significantly increased their asset holdings, an effect that was more pronounced if the recipient was female. Further highlighting heterogeneous effects between male and female recipients, households only increased their expenditure in the case of a female **OAP** recipient. Additionally, there was indicative evidence of increases in non-food expenditure, largely driven by outpatient medical payments.

The eligibility criteria for the **OAP** changed in 2007 to include Below Poverty Line (BPL) cardholders, a more lenient criterion than the initial policy of only including the destitute. Unnikrishnan and Imai (2020) used this information to estimate a model accounting for the effect of the **OAP** after 2007. They found effects to be weaker, which they trace back to inclusion errors due to the new BPL eligibility criterion.<sup>19</sup> Specifically, they posit that the new criterion allowed a significant number of non-poor households to access **OAP** resources, allowing them to stop working and invest the money in assets instead of using it for consumption. Consequently, the authors do not find any impact of the **OAP** on poverty.

Lastly, Kaushal and Muchomba (2015) study the effects of the Targeted Public Distribution System (TPDS), a food subsidy scheme for up to 35 kg of wheat/rice per month in India, for six states with well-functioning programme implementation. While their focus is on nutrition, they also note that in districts that consume more rice and wheat than is subsidised through the TPDS, there is an increase in overall household consumption. In these districts, the TPDS only has an income effect, reducing the price households pay for the first 35 kg of subsidised grain they consume, and thus freeing up resources for consumption on other goods.

### 3.6 Nepal

Nepal's **CG** is a UCT for children under the age of 5 years, implemented since 2009. It initially targeted disadvantaged people from the Karnali district and Dalit children. Intended to reach national coverage from its inception, the programme has since undergone progressive geographic targeting, prioritising children in the poorest districts. In 2019, the government planned to complete the expansion by 2021 (Garcia and Dhakal 2019).

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17. While Zimmermann draws from a national sample, she argues that her sample selection [not covering the poorest beneficiaries] and time horizon of merely one year might explain the lack of significant improvements in consumption that she found.

18. While Deininger and Liu (2018) and Liu (2018) share a sample, their identification strategies differ slightly.

19. Despite its name, the category of Below the Poverty Line (BPL) in India does not refer to any monetary poverty metric or status. Rather, it refers to a metric of multidimensional poverty and categorical criteria whose core is standardised for the entire country but which also incorporates characteristics considered relevant by each state/province.

Adhikari et al. (2014) studied the impacts of the **CG** on several outcomes, including per capita household income. However, they did not find any significant impact on per capita income (even including the transfer amount), which, according to the authors, was due to flaws in programme design: the transfer value was too low, and was often not even paid in full.<sup>20</sup> Additionally, the irregularity of the transfer was identified as one of the main problems, as the four-monthly payment cycle was frequently not adhered to.<sup>21</sup> These issues limited the ability of the CG to affect high-frequency expenses such as food, and provide shock-responsive relief. Consequently, households struggled to turn their benefits into stable increases in consumption.

### 3.7 Pakistan

The core component of the **BISP** in Pakistan is a UCT paid to female household members in low-income families. Cheema, Hunt et al. (2016) and Cheema et al. (2014; 2015) conducted a thorough evaluation of **BISP** impacts over a five-year period. They found a significant reduction in poverty on both the extensive margin (share of households below the poverty line) and the intensive margin (poverty gaps).<sup>22</sup> The effects they found are large and especially pronounced within the first two to three years: the share of households below the poverty line among **BISP** beneficiaries was roughly 22 percentage points, 19 percentage points and 6.7 percentage points lower after two, three and five years, respectively.<sup>23</sup> Meanwhile, the poverty gap was 7 percentage points smaller after two years and still 3 percentage points smaller after three years. After five years, however, the poverty gap was only significantly smaller compared to non-BISP beneficiaries in one province, potentially owing to general improvements in the poverty status of non-beneficiaries. However, changes in the defined poverty line before the end-line evaluation and different methodologies adopted across studies might both have impacted these results.<sup>24</sup> In summary, findings from the BISP show an impact closing the poverty gap (intensive margin) for those living in poverty; however, the impact on the number of people living in poverty will remain limited if the benefit values are not adjusted to the new poverty line.

The effect on asset ownership is less clear: after two years, there was no improvement in agricultural land or livestock ownership and value. However, after three years, there was an increase in ownership of certain less expensive assets and livestock among **BISP** beneficiaries.<sup>25</sup> After five years, there was an increase in ownership of some more expensive assets and livestock. This pattern makes intuitive sense if households only invest money in assets when their immediate consumption needs (such as food or medical expenses) are satisfied. Consistent with this finding, Cheema et al. (2014) found an increase in consumption of PKR318 (about 20 per cent of the monthly transfer amount)

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20. The transfer amount has since increased from NPR200 for up to two children reported in Adhikari et al. (2014) to NPR400 per child per month for a maximum of two children.

21. According to their survey, less than a quarter of beneficiaries receive the transfer more frequently than twice a year, with over half of beneficiaries only receiving their benefits annually.

22. To interpret the results, it is important to understand the difference between improvements in either of these two concepts of poverty. A desirable effect on the extensive margin is only noted if a household that formerly landed below the poverty line ended up above the poverty line due to the BISP. Conversely, the poverty gap gives an indication of by how much those below the poverty line fall short of being lifted out of poverty. Both concepts have advantages and limitations.

23. However, the size of these effects should be slightly qualified for methodological reasons, as Cheema et al. (2014; 2015; 2016) measured local average treatment effects (LATEs) for beneficiaries above and below the eligibility cut-off. Therefore, impacts on absolute poverty are likely to be overestimated, since the studies focus on those who are marginally poor.

24. For the first point, Pakistan changed its definition of the poverty line before the end-line evaluation from a food energy intake (FEI) definition to one that also accounts for other essential needs such as clothing, education and shelter—a cost of basic needs (CBN) approach. As a result, the poverty line increased by about 35 per cent from PKR2,400 to PKR3,244, leading to a substantial increase in the incidence and intensity of poverty measured by the CBN poverty line (Cheema, Hunt et al. 2016). Under the new poverty line, there was no detectable decrease in the prevalence of poverty due to the BISP, which is because the transfer size is not enough to close the average poverty gap to push a significant share of beneficiaries above the new, higher poverty threshold. The second observation is that LATE estimators might be overestimating impacts [see previous note].

25. This effect is driven by large improvements in the Punjab region. However, Cheema et al. (2015) hypothesize that the absence of effects in other regions is an artefact of statistical power only being sufficient for the Punjab region to detect region-level effects.

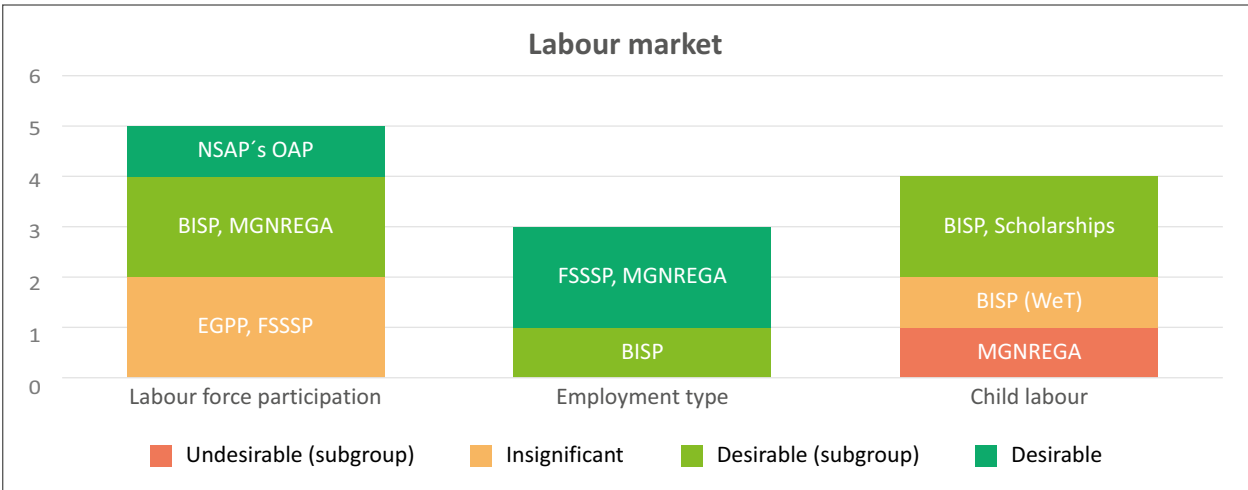
already after two years, which subsequently falls to a still significant PKR188 increase after five years.<sup>26,27</sup> A substantial portion of this increased consumption accrues to non-food expenditure (PKR209 after two years and PKR112 after five years),<sup>28</sup> as opposed to food expenditure, which the authors thought might partially be because BISP transfers are paid in quarterly instalments.

For finances, Cheema et al. (2014; 2015) found no change in the proportion of households with outstanding loans. Consistent with the notion that most of the transfer amount was used for consumption, they did not find any significant increase in the value or incidence of savings after two or three years either. Yet, Cheema, Hunt et al. (2016) found a significant—albeit small—increase in savings after the full five-year survey period (18 per cent for beneficiaries vs. 16 per cent for non-beneficiaries), perhaps stemming from the increase in benefit amount from initially PKR1,000 per month to PKR1,566 at end-line, allowing beneficiaries to invest or save the money in excess of what they needed for immediate consumption.

## 4. IMPACTS ON THE LABOUR MARKET

### 4.1 Regional findings for labour market outcomes

**Figure 9.** Labour market indicators: effects aggregated at the programme level



Theories of change concerning social assistance and labour market outcomes depend significantly on the type of programme and the beneficiaries' position along the life cycle. For most cash transfer programmes, impacts on labour market outcomes for working-age adults are, in theory, ambiguous, although evidence from Banerjee et al. (2017) shows that cash transfer programmes in developing countries tend not to decrease time spent working or employment status. Meanwhile, cash transfers targeted at children (especially scholarships and CCTs) are expected to have a negative effect on child labour, and old-age pension schemes are similarly expected to reduce labour among elderly people. Effects for PWP's are sometimes more complex: while direct employment effects for adult beneficiaries are clearer, effects on the

26. After three years, Cheema et al. [2015] did not find a significant impact, which they suspect is due to insufficient power to detect small shifts in consumption.

27. Transfer amounts increased by more than 50 per cent over the five years, which renders it questionable whether Cheema, Hunt et al. [2016] would have still found significant increases in consumption if the transfer amount had not substantially increased.

28. Housing expenditure of PKR73 after two years, PKR56 after three years and PKR124 after five years. The effect sizes make it likely that this reflects minor repairs and improvements, such as a leaking roof, for example.

local economy might increase private-sector wages, which might increase labour market opportunities—including for older children—outside the household. Moreover, more time spent in PWPs by adult caregivers might adversely lead to an increase in household chores and work for other household members, including children.

The indicators in this category include labour force participation (LFP), employment type and child labour. Many impact evaluation studies record gender-specific labour force responses. The impacts on FLFP are presented separately in Section 7 (Gender dynamics). The categories of social assistance programmes included in this section vary substantially, including UCTs (BISP and OAP), an unconditional scholarship (FSSSP) and a PWP (MGNREGA). Regarding the type of employment, the results suggest that different programme types, such as UCTs (BISP), CCTs (FSSSP) and PWPs, may positively affect the type of employment beneficiaries take up. Furthermore, these programmes have significantly different effects on labour market outcomes, with some schemes specifically targeting school attendance (FSSSP), and others with no direct objectives for child labour (e.g. BISP and MGNREGA).

A particularly interesting case is the **BISP** in Pakistan. While the BISP alone does not have an impact on school enrolment (only if the household additionally receives the **WeT** sub-component), a decrease in child labour was found for boys in cases where the UCT ('core' BISP) component was provided. A possible explanation is that the BISP transfer amount alone is enough for households not to need to rely on child labour anymore, while the incentive to also send children to school is only sufficient when the WeT component is incorporated. Meanwhile, the programme had no impact on reducing time spent on household chores for girls, which is likely explained by social norms and/or the limited impact on changing allocation of domestic work.

## 4.2 Bangladesh

The FSSSP in Bangladesh was the predecessor of the **Secondary Education Stipend Programme (SESP)**. Introduced in 1994, the programme granted free secondary education (grades 6–10) for rural girls and provided an additional stipend. Hahn et al. (2018) and Shamsuddin (2015) studied the long-term impacts of the availability of the **FSSSP** on girls' labour market outcomes. In 2009, the programme was supplanted by the **SESP**, which extended secondary school stipends to both male and urban students. These studies used ITT estimators to determine programme impacts.<sup>29</sup>

While Hahn et al. (2018) found no change in the likelihood of working for eligible girls, Shamsuddin (2015) found evidence of an increase in LFP. Due to the gradual roll-out of the programme, effects were estimated for girls who were eligible for both five years and for less than five years. Shamsuddin (2015) found that girls who were eligible throughout their secondary education had on average a year more of completed education, which led to a 6.6 percentage point increase in LFP. Meanwhile, girls who were only partially eligible experienced a 2.2 percentage point increase in LFP. Additionally, both Hahn et al. (2018) and Shamsuddin (2015) found desirable changes in the type of occupation girls pursue: Hahn et al. (2018) found a switch from agriculture and informal labour to the formal sector, while Shamsuddin (2015) noted a decrease in manual labour in favour of services. Both effects could be driven by an increase in education brought about by the **FSSSP**. However, Shamsuddin (2015) also found an increase in self-employment, which is probably undesirable in the Bangladeshi setting.<sup>30</sup>

Despite the desirable impact that Shamsuddin (2015) found on LFP, the study also serves as a good example of the need to account for any general equilibrium changes. Specifically, the increase in LFP was accompanied by an adverse impact on female wage rates, as wages decreased by about 17 per cent for those exposed to the FSSSP

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29. In this case, using ITT effects measures the effect of being eligible for the FSSSP. This means they do not observe average treatment effects for beneficiaries. Thus, the results presented likely underestimate the real effects of the programme.

30. The types of businesses run by these women most commonly include running a poultry farm or a tailoring shop or cultivating their own land, which are low-skilled, low-yielding and/or shock-prone occupations.

for five years, and by almost 6 per cent for those with less than five years of eligibility. Although local labour market conditions need to be examined to explain these dynamics in detail, it is possible that increased labour supply was not met by an equivalent increase in labour demand. Therefore, this highlights the importance of adequate labour market policies to accompany such interventions.

Cho and Ruthbah (2018) assessed the impact of the **EGPP**—a PWP—on the share and total number of employed family members, and found no significant change. The authors concluded that it is unlikely that EGPP employment substituted for other labour opportunities, with the EGPP most likely allowing already employed household members to take on additional work.

### 4.3 India

The **MGNREGA** is the primary employment generation programme in the country and has received widespread attention in the impact evaluation literature. It is also by far the most studied programme in this review, with a rich literature.<sup>31</sup> Most studies in our sample study the effects of living in MGNREGA districts, as opposed to direct programme participation (ITT estimates). Given the potential general equilibrium impacts of the MGNREGA beyond beneficiaries (e.g. local wages, and attitudes and choices more broadly), ITT approaches have the advantage of capturing spillover effects to non-participating households, although they might understate effects of the scheme on direct beneficiaries.<sup>32</sup>

The effects of the MGNREGA on labour market outcomes seem to depend on the agricultural season and the gender of the participant. They lead to both desirable and undesirable spillovers on wages, type of employment and child-related outcomes. Azam (2012) studied the impact of the MGNREGA on multiple labour market outcomes over a three-year time horizon using ITT estimates. Results show an overall downward trend in LFP in India after the baseline survey in 2004-2005; however, this trend was mitigated by significantly greater LFP for women in MGNREGA districts. Maity (2020) confirmed this finding for a sample from Andhra Pradesh state and found significant improvements in the number of days worked for women.

Besides gendered effects, there seems to be considerably **seasonal variation** in the effect of the MGNREGA on LFP. This may be because most MGNREGA employment is provided during the agricultural off-season, when there is more seasonal un- or under-employment. Conversely, during the main agricultural season, the MGNREGA might more likely substitute other forms of employment, such as casual labour in agriculture or work on the family farm. Indeed, multiple studies have found effects to be concentrated in the agricultural off-season, with no or little impact during the rest of the year (Imbert and Papp 2015; Sheahan et al. 2018). Sheahan et al. (2018) disaggregated labour market effects from the MGNREGA for each of the three main agricultural seasons in Andhra Pradesh (*kharif*, *rabi* and the summer slack season).<sup>33</sup> They found an increase of 12 days worked during the summer slack season attributed to the MGNREGA, the vast majority of which driven by increased work by women. The authors explain this effect by the attractive wages the MGNREGA pays: especially during the summer season, female wages slump compared to both the rest of the year, as well as in relation to male wages. Therefore, the MGNREGA becomes a particularly attractive option in the summer, and provides opportunities to beneficiaries who would otherwise not have access to work. However, the MGNREGA is offered throughout the year, which means it also competes with other work opportunities, especially outside the summer slack season. Consequently, a day of MGNREGA work crowds out 1.4 days of work in the *kharif*

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31. There are studies that use similar data sources (most commonly the National Sample Survey) and often comparable identification strategies. There are also studies that deliberately choose different data sources or identification strategies from existing studies to improve on supposed shortcomings or to provide additional robustness checks. This practice is laudable and underlies the strong evidence basis for the impact of the MGNREGA.

32. Furthermore, heterogeneities in implementation quality across states mean that evaluations conducted in well-performing states such as Andhra Pradesh might give an upper boundary of programme impacts

33. This result was also obtained in Andhra Pradesh, one of the better states in terms of implementation of the MGNREGA.



season, but only 0.4 days in the *rabi* season and 0.6 days during the summer slack season (the *kharif* and *rabi* seasons being the two main seasons for agricultural labour).

Furthermore, there are several studies that find the MGNREGA to have raised **wages**. Azam (2012) found that wages for casual workers in MGNREGA districts were 5 per cent higher overall, with the main improvements coming from female wages. While male wages increased by 3.8 per cent, female wages saw a considerable increase of 8.3 per cent in MGNREGA districts. This larger increase for female wages can be explained by both the direct impact of the MGNREGA and general equilibrium effects leading to better prospects in the (casual) private sector (see Box 2).

## Box 2. Direct and indirect impacts of the MGNREGA on female wages

In MGNREGA districts, women are usually paid significantly less than the market rate for casual labour, and generally have worse employment prospects than men. However, the MGNREGA pays men and women equally and has further provisions to facilitate female participation in the scheme such as free on-site childcare for children under six years old. Therefore, the working conditions under the MGNREGA represent a much larger improvement on regular working conditions for women than for men (Azam 2012). As women participating in the MGNREGA can receive a much higher wage than what they are usually paid, this puts pressure on the wage rate paid to women in the programme districts beyond MGNREGA employment. Furthermore, the MGNREGA creates demand for casual labour, which further drives up wages. This then leads to an increase in casual labour wages paid to women in MGNREGA districts in general. As this represents a change in the equilibrium wage paid, there is a concern that the MGNREGA distorts agricultural labour markets in particular, where employers now have difficulty finding agricultural workers for what was a reasonable wage for them to pay.

Azam (2012) argues that increases in wages mostly affect women and hence only work to close the gender pay gap. Thus, the effect would be a matter of reducing discrimination against female workers, as opposed to causing a distortion in equilibrium wages.<sup>34</sup> This result is further corroborated by studies that find positive general equilibrium impacts especially on unskilled wages: Islam and Sivasankaran (2015) found that female casual wages increased by 5.3 per cent, and male wages (which were at a higher level to start with) increased by 3.5 per cent. Imbert and Papp (2015) found that the decrease in labour supply in the private sector that the MGNREGA induces during the agricultural off-season raised unskilled wages.

Since the welfare implications of such an increase in wages is theoretically ambiguous (higher wages paid to suppliers of labour, but higher costs for those hiring unskilled labour), the authors also studied the distributional effect of the wage increase. They found that wage increases induced by the MGNREGA have a **progressive distributional effect, shifting income from richer households who tend to hire labour to poorer households who supply labour**.

Berg et al. (2018) analysed monthly wage data over a multi-year time horizon and found that the MGNREGA boosted the growth rate of wages even three years after the programme had been rolled out nationwide. Consistent with the results from other studies in our sample, they found effects to be strongest for states that Imbert and Papp (2015) dub “star performers”—i.e. those identified in the literature as providing the highest implementation quality. Additionally, effects are concentrated during the rainy season, when agricultural labour is scarce, and mainly for unskilled as opposed to skilled wages.

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34. Azam (2012) also found impacts on the LFP and wages of SCs/STs. However, these results are not robust to a test of the parallel trends assumption between treatment and control. Furthermore, the author found indicative evidence of a stronger short-term impact [i.e. when comparing districts in their first year of MGNREGA implementation to those in their second year]. However, the difference between effects in the first-year districts and second-year districts is not significant.

Another consequence of the MGNREGA is studied by Ajefu and Abiona (2019), who analysed impacts of the programme during rainfall shocks. They found that the MGNREGA acts as a **safety net** for adverse income shocks, independent of the seasonal pattern discussed above. During dry spells, an average individual in an MGNREGA district experiences only a markedly attenuated or even no negative impact on the number of days worked per week. However, during positive (wet) shocks, this result only holds for women. The concept of the MGNREGA as a safety net against shocks is shared by Zimmermann (2020), who employed a different econometric approach from that of many other studies of the MGNREGA, most notably Imbert and Papp (2015).<sup>35</sup> Unlike the other studies, Zimmermann found no evidence of a change in total employment or public employment overall, nor any spillover effects on wages, reflecting low uptake of the programme, according to the author. Instead, Zimmermann argues that the MGNREGA has an “ex-ante safety net effect”, serving as insurance in case of adverse shocks that allows households to turn to riskier (i.e. more shock-prone) but higher-yielding family employment compared to casual private-sector work.<sup>36</sup>

There is also robust evidence that the MGNREGA, through increases in employment and wages, encourages changes in the **type and sector of employment**. Sheahan et al. (2018) found that the MGNREGA substitutes for private casual labour (agricultural and non-agricultural) and crowds in female time spent on on-farm and off-farm self-employment during the *kharif* and *rabi* seasons. According to the authors, the fact that MGNREGA participation enables an increase in this type of employment besides the MGNREGA work might be explained by the flexible work arrangements offered under the programme, which might allow women to spend the afternoon working elsewhere. This finding is consistent with Zimmermann (2020), who attributed the switch from other (casual) private labour towards riskier but higher-yielding family labour (i.e. self-employment) to a safety-net effect the MGNREGA provides in case of adverse shocks to regular livelihoods.

Imbert and Papp (2015) found that the MGNREGA increased low-wage, low-skilled public employment and roughly equivalently decreased private-sector work (waged, self-employed or domestic work) during the agricultural off-season.<sup>37</sup> Islam and Sivasankaran (2015) also found increases in public employment due to reductions in work in household enterprises for men, and non-public outside work for women. Additionally, they found indicative evidence that women spent less time doing domestic work. Similarly, Maity (2020) found that women were less likely to declare domestic work as their main activity and engaged more in non-agricultural work. Meanwhile, Shah and Steinberg (2015) studied the working patterns of parents in the household. They found that mothers engaged less in domestic work at the expense of more work at home or outside the household. Fathers, on the other hand, switched from working at home to working for wages on the market.

Lastly, a common concern with employment generation programmes is that the absence of adults at home leads to an increase in **child labour** (mainly household chores). Li and Sekhri (2015) studied the principal occupation of able-bodied children from 5 to 15 years old. They recorded a significant increase in the number of children reporting their principal activity as working in a household enterprise (paid or unpaid), as a wage employee or in other types of work, while they found no change in household chores. Shah and Steinberg (2015) studied the effect of the MGNREGA

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35. Zimmermann [2020] exploited a district vulnerability ranking based on criteria used to determine which states would receive the MGNREGA first for a fuzzy regression discontinuity design. As such, she measured a LATE, comparing the least vulnerable district(s) that still received the MGNREGA early to the most vulnerable district(s) that marginally missed out on early inclusion.

36. This insurance effect is also reflected in Gehrke [2019], who found that MGNREGA beneficiaries plant riskier but higher-yielding crops, since they have MGNREGA employment to rely on in case of adverse agricultural shocks.

37. This impact is classified as ‘desirable’, since the increases that Imbert and Papp [2015] found in public-sector employment are highest during the dry season [the agricultural off-season]. This might be distinct from the finding of Zimmermann [2020] that the slack season does not constitute a ‘shock’; however, it hints in a similar direction: MGNREGA employment is mostly pursued to offset seasonal fluctuations in employment opportunities. One caveat to this result is that states supposedly limit supply of the programme during the agricultural season to avoid crowding out labour supply to the agricultural sector and because construction is hard during the monsoon season. Yet, if we look at the formal provisions of the programme (i.e. guaranteeing 100 days of work throughout the year), the MGNREGA can arguably contribute to desirable ‘sectoral switching’. This is somewhat distinct from the interpretation we gave to the sectoral switch indicator in other studies (where it indicated at least somewhat permanent changes in employment sector) but still consistent with a temporary ‘desirable change’.



on children by age group, finding that the reduction in domestic work among parents led to a 3 percentage point decrease in the likelihood of children aged 13–17 years reporting school as their main activity, and an equivalent increase in the likelihood of having productive work as their main occupation.

These effects are driven by adolescent boys being more likely to engage in market labour and filling in the private-sector jobs that adults have left to engage in the MGNREGA, whereas girls are more likely to substitute for their mothers through domestic work. The latter finding goes against that of Maity (2020), which might be due to the small sample and/or from the focus on Andhra Pradesh, where implementation quality is reported to be much higher than the average for India.<sup>38</sup> Maity (2020) confirmed though that there was a small increase in the number of days boys aged 10–18 spent performing agricultural tasks. Islam and Sivasankaran (2015) also found the result being driven by older children increasing their engagement in child labour, with children aged 15–17 years spending more time working outside the household at the expense of time spent on education. However, younger children aged 5–9 years spent more time on education and less on ‘other activities’ (e.g. leisure). Lastly, Sheahan et al. (2018) and Ajefu and Abiona (2019) did not find any significant impacts of the MGNREGA on child labour in Andhra Pradesh. This might confirm the hypothesis that the MGNREGA is associated with adverse effects on children only in states with lower-quality implementation.

Unnikrishnan and Imai (2020) studied the labour market effects of the **NSAP’s OAP**. They found a significant decrease of 12.7 per cent in the likelihood of elderly people working. The **OAP** provides an example of how social assistance for elderly people can lead to reduced LFP and contribute towards better retirement.

## 4.4 Nepal

Nepal’s **scholarships** initiative comprises different education stipends, most notably for girls (32 per cent of the evaluation sample), Dalits (31 per cent) and the ‘poor and talented’ (28 per cent). These scholarships are unconditional, and thus do not impose any attendance conditions on beneficiaries to continue to receive the benefit. However, the targeting process usually involves the head teacher selecting beneficiaries among enrolled children, hence involving an “implicit enrolment condition” (Datt and Uhe 2019).

Datt and Uhe (2019) analysed the effect of the scholarships in general on child labour.<sup>39</sup> As scholarship values vary significantly, the authors studied the effect of scholarships of greater value, defined as 5 per cent of the respective local poverty line or higher, and low-value scholarships. They found that the larger scholarships reduced working hours among girls aged 8–16 by a third (a reduction of 7.5 hours relative to a weekly average of 23 hours in the control group). Around 80 per cent of the effect was driven by a reduction in unpaid or paid economic activity, as opposed to household chores, likely reflecting that the latter is deeply rooted in socially constructed gender roles and hence less affected by an education stipend. Significantly, they did not find any impact of scholarships on boys, or on girls with low-value scholarships.<sup>40</sup> Furthermore, only older children over 14 (the legal age for economic activity in Nepal) were largely affected by high-value scholarships.<sup>41</sup>

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38. This includes gender-sensitive elements of the MGNREGA such as flexible working hours, proximity of the work site to the home, and child-care facilities that are reported to generally not be functional and/or are only set up to impress survey teams (Bagavathinathan and Chaurey 2020).

39. Multiple observations are relevant here. First, Datt and Uhe (2019) rely on self-reported scholarship values which are subject to measurement error. However, they argue that, if at all, incentives would be to underreport scholarship values received. If this underreporting is greater for higher-value scholarships, the estimates received are biased downwards and hence reflect a lower boundary of effect sizes. Second, as selection is usually based on schools’ enrolment lists at the start of the school year, the programme is frequently criticised for failing to target the most disadvantaged children, who are not even on the school roster or enrol later in the year (Datt and Uhe 2019). This might also have implications for generalising their results to the general population of children in Nepal. Lastly, their estimates discern between different values of scholarships, but not between the various scholarships offered to different target groups under the Scholarships programme.

40. Based on their data, scholarships start having a statistically significant impact when they are valued at about 3 per cent of the Nepalese poverty line.

41. Due to a constrained sample size, Datt and Uhe (2019) could not conduct this analysis further disaggregated by gender.

To explain the mechanisms behind these findings, Datt and Uhe (2019) argue that the missing effect for boys is mainly driven by two factors. First estimates are lower for boys, as they work less in general, and, if they work, they work shorter hours. Moreover, only 28 per cent of scholarship holders in the sample were boys, which might reflect an imbalance in statistical power to detect the same effects they found for girls.<sup>42</sup> In addition, the authors assigned the effects they found to income effects—i.e. the additional household income received by virtue of the scholarship. This stands in contrast to changes in the opportunity costs of education or simply a shift of labour to non-scholarship-receiving siblings, which they ruled out due to the unconditional nature of the scholarships. Therefore, it would be possible to simply enrol children and take advantage of the **scholarship** benefits while still making the children work as before.

## 4.5 Pakistan

Cheema et al. (2014; 2015) and Cheema, Hunt et al. (2016) evaluated the impact the **BISP** on LFP, sector of employment and child labour.<sup>43</sup> At the first midline evaluation, they found a significant reduction in LFP of 22.9 percentage points for men. This effect persisted one year later, with LFP significantly lower among the treated, an effect entirely driven by a reduction in male labour of 18.6 percentage points. However, Cheema et al. (2014) provided evidence that the reduction in LFP was driven by elderly men being able to retire, and those who were sick being able to afford to stay off work. This finding is, therefore, marked as desirable. To verify that the **BISP** does not provide any negative incentives to work for those of prime working age (18–49 years), the authors repeated their estimation, focusing on this subsample of beneficiaries. Neither Cheema et al. (2015) nor Cheema, Hunt et al. (2016) found any significant impact in the end-line survey on men of prime working age. Furthermore, Cheema et al. (2014; 2015) noted a sectoral switch away from casual labour to self-employment for men, while at end-line, Cheema, Hunt et al. (2016) found a reduction in casual labour in favour of own agricultural work/livestock rearing and sharecropping. They also found a reduction in work as an unpaid family member for women.

Both Cheema et al. (2014) for the **BISP** and Cheema, Asia et al. (2016) for the **WeT sub-component** studied child labour effects. Two years after the baseline study, Cheema et al. (2014) found that the **BISP** significantly reduced child labour for boys aged 5–14 years by 4.5 percentage points. Insignificant impacts for girls are likely due to the **BISP** having little impact on household chores: Cheema et al. (2014) found that domestic chores represented 57 per cent of labour for girls, compared to only 16 per cent for boys, while economic activity outside the home represented only 19 per cent of girls' labour. These results are likely due to chores for girls being in part rooted in social norms which are difficult to affect in the short term. Furthermore, it might be harder to use the **BISP** money to substitute for household chores formerly carried out by girls than for simple income-generating economic activity more commonly carried out by boys.

In contrast to this desirable impact found for the **BISP**, Cheema, Asia et al. (2016) did not find that the **WeT** added any significant impact on top of the **BISP**. This might be for several reasons. First, they evaluated impacts less than one academic year after the programme started, which might be too soon to see any effects. Furthermore, over half of the children engaged in child labour in the sample were already enrolled in school anyway. In terms of education, significant improvements in child labour could be expected, driven by increased attendance, although no significant changes were found. We might thus conclude that **WeT** does not add much of an incentive on top of the **BISP** for households with children who continue to work despite receiving the **BISP** (9 per cent of children in the sample). Such households might not be incentivised by money to keep their children out of work, because they rely on their workforce somewhat—for example, for household chores. Moreover, there are no details in the study on time use, beyond the 70 per cent school attendance condition. Since **WeT** focuses on children of primary school age, Cheema, Asia et al. (2016) analysed child labour for a sample restricted to those aged 5–12 years and found no significant changes, which might be due to social assistance having a stronger effect on reducing child labour for older children.

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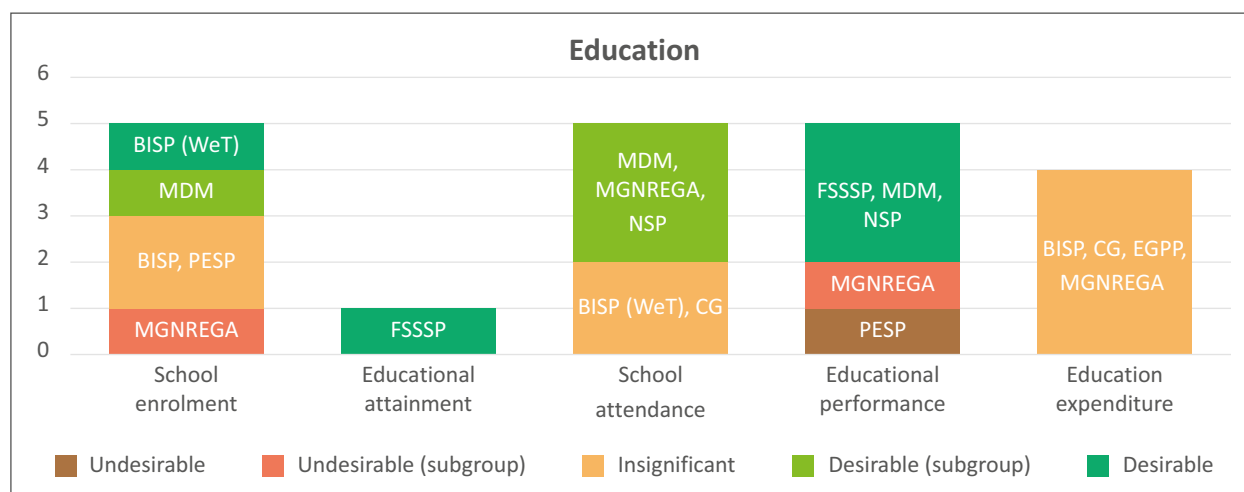
42. The authors, therefore, advise caution when concluding that scholarships generally do not affect boys' labour.

43. Their results represent LATEs applying only to those with poverty scores around the eligibility cut-off. Therefore, generalising effect sizes to the overall treated population should be done with caution.

## 5. IMPACTS ON EDUCATION

### 5.1 Regional findings for education

**Figure 10.** Education indicators: effects aggregated at the programme level



Effects on **education** are an integral outcome of interest for many programme types in our sample, including CCTs, UCTs and school feeding programmes (SFPs). Income effects of social assistance can remove financial barriers to education, potentially increasing attendance and educational attainment. Moreover, by including conditionalities and provisions linked to educational outcomes, social transfers have the potential to promote positive impacts on education. Additional benefits are linked to incentivising human capital formation of children, including effects on fertility and female empowerment; changes in social perceptions and norms; role model effects (including sibling spillovers); changes in the perceived return on investment in education; and labour market effects. To capture effects on education comprehensively, it is important to measure outcomes on education along multiple dimensions: the extensive margin (school enrolment), the intensive margin (school attendance in the short term and educational attainment in the long term), an indicator related to performance at school, and household expenditure on education. The latter can hint at the importance households assign to education when allocating their resources.<sup>44</sup>

As mentioned in the labour market section above, the impact evaluations in our sample did not find a significant aggregate impact of the UCT component of the **BISP** on school enrolment. However, it is encouraging that BISP beneficiaries receiving the **WeT**, a CCT made conditional on at least 70 per cent school attendance that poor BISP households with eligible children can access, demonstrated an increase in enrolment. Another relevant finding is that SFPs, represented by India's MDM scheme, appear to improve enrolment, attendance and performance of children at school. However, effects seem to depend on the age/grade of the child, and improvements in test scores might take longer to materialise.

An adverse result is the absence of an aggregate effect for the **PESP** (Bangladesh), as it explicitly aims to increase school enrolment. Additionally, PESP beneficiaries see worse grade progression on average, which is captured by the undesirable effect for the indicator. However, Baulch (2011)—the sole study on which we base our PESP results—used data from 2000, 2003 and 2009, and in 2009 the CCT extended its eligibility criterion from girls in rural areas (**FSSSP**) to, more broadly, all students in secondary education (**SESP**). Therefore, there is a strong possibility that the negative impacts on progress to secondary education for boys have reduced or ceased since 2009.

44. A more accurate proxy for this would be the share of total household financial resources allocated to education.

Another surprising result is the absence of an effect of Pakistan's **WeT** on attendance despite conditions for attendance. For the **MGNREGA**, negative impacts on education outcomes are in line with increases in child labour following the introduction of the scheme. Results for expenditure on education do not display any significant impacts across the programmes surveyed, although none of the programmes evaluated on this indicator explicitly target education. Moreover, the value of the **CG** in Nepal is small and unlikely to lead to any significant changes in education expenditure.

In general, it would be informative for impact evaluations of social assistance programmes to assess educational outcomes more consistently, including more long-term evaluations.

## 5.2 Afghanistan

The **NSP** evaluation series, sponsored by the World Bank, assessed programme impacts on access to education, school attendance and performance in literacy and mathematics. The final round of the impact evaluation revealed desirable impacts in all areas, although impacts on access and attendance were limited to girls. The authors explain that the programme may have improved the basic skills of villagers through NSP-funded vocational training, literacy courses and overall stimulus to participate in community bodies. Positive impacts on education for girls are believed to be due to greater gender inclusivity in education. The authors hypothesise that a main driver might be the capacity of the NSP to increase female mobility and parental exposure to messages that stress the value of education, particularly for girls. Mediating factors for this improved female mobility might also include potentially safer local environments due to improved local capacity, as well as income effects easing school transportation costs that, due to economic and cultural factors, might be harder to incur for females than males.

## 5.3 Bangladesh

Impact evaluations assessing educational outcomes were found for three programmes: the **EGPP**, the **PESP** and the **FSSSP** (predecessor of the **SESP**). The only impact evaluation found for the **PESP** is based on data from 2009, at a time when the **SESP** predecessor (the **FSSSP**), was limited to girls in rural areas. As such, the programme potentially presented disincentives for boys in primary education to perform well and progress to secondary education. Regrettably, since the **FSSSP** changed into the **SESP**, it has not yet undergone an impact evaluation that comprehensively examines impacts for both boys and girls. Studies based on data since 2009, such as those by Shamsuddin (2015), Hahn et al. (2018) and Dale (2020), have primarily assessed impacts on girls (and kept referring to the programme as **FSSSP** rather than **SESP**).

Baulch (2011) examines **PESP** effects on school enrolment (at the household level) and grade progression (at the individual level) in eight rural *upazilas* (sub-districts), from 2000 to 2006. The impact on enrolment was statistically insignificant, a result which the author attributes to poor targeting of the **PESP**, with both inclusion and exclusion errors. Meanwhile, results for grade progression were negative, especially for poorer boys, whose decline in grade progression was twice that of girls. In this sense, Baulch (2011) points out two hypotheses: first, at that time boys were not eligible to receive stipends for secondary education, which seems to have negatively impacted later schooling decisions; and, second, in rural Bangladesh, there are plenty of employment opportunities for teenage boys, but not for girls.

Two different studies found positive significant impacts on educational attainment from the **FSSSP**, a stipend to increase attendance for rural girls in secondary education. Shamsuddin (2015) found that being eligible for the **FSSSP** for five years—the entire length of secondary education—increased the average years of schooling for girls by 0.83 years, while being eligible for less than five years led to an increase of 0.69 years, suggesting a desirable impact on education.<sup>45</sup>

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45. Shamsuddin (2015) measured ITT effects—i.e. the effect of being eligible for **FSSSP**, rather than actual receipt of the stipend.

Results from Hahn et al. (2018) are in line with those from Shamsuddin (2015). They found that girls who were eligible<sup>46</sup> for the **FSSSP** for five years studied for an average of 1.2 years more, representing a 25 per cent increase in years of schooling. For girls who were not eligible to be enrolled for all their secondary education, the increase was smaller: 0.66 years, or 13.6 per cent. The authors also analysed the effects on secondary school completion, which were positive and significant: girls eligible for the full five years were 5 per cent more likely to finish secondary education, while girls with fewer than five years were 2.5 per cent more likely.

Begum, Islam and Smyth (2017) investigated indirect spillover effects of the **FSSSP** on the educational attainment of beneficiaries' younger siblings. The findings were positive and significant: an additional year of schooling of a female older sibling led to an increase of 0.13 years of schooling for her younger siblings, corresponding to a 10 per cent increase.

Additionally, Hahn et al. (2018) found a positive and significant increase in age at first marriage, on average between 0.11 and 0.17 years for each year of exposure. Although age at first marriage is not an educational indicator, as explained by Shamsuddin (2015), early marriage is commonly associated with school drop-out. In Bangladesh, around half of the girls get married before they reach 15 years—the usual age of students enrolled in the final grade of secondary education. After marrying, girls tend to drop out of school to perform household chores. Not marrying before finishing studies is a soft<sup>47</sup> conditionality of the FSSSP: girls were asked to make this commitment, though their participation is not terminated if they do not comply with it (Arruda et al. 2020). Hahn et al. (2018) also found that eligible girls tended to marry more highly educated men working in the formal sector and of similar age.

Finally, Cho and Ruthbah (2018) assessed the effects of the **EGPP** on household per child expenditure on education in 103 unions (Bengali subnational organisational units). Although overall household consumption increased substantially due to the programme, the largest Bangladeshi social protection scheme, the impact on per child education expenditure was statistically insignificant.

## 5.4 India

The **MDM**, the **MGNREGA** and the **NSAP's OAP** are the programmes identified with studies assessing impacts on education. All studies examining the **MDM**, an SFP, faced methodological challenges that either prevented working with a pure control group or else limited the time-frame of the analysis.<sup>48</sup>

Jayaraman and Simroth (2015) investigated the **MDM's** impact on primary school enrolment (grades 1–5) in public schools in 13 Indian states between 2002 and 2005. They found a significant increase in enrolment of 24 per cent, but only for first grade. To account for grades 2 and 5, the authors explain that all new students enrolled, no matter their age, were placed in first grade.<sup>49</sup> Hence, approximately 20 per cent of new enrolments were children aged 6 years old, while 55 per cent were under 6, and the remaining 25 per cent were between 7 and 11. However, in most of the 13 states observed in this study, the MDM was in place for only one or two years, thus the time-frame was insufficient to accurately measure its effects on the later grades, indicating the need for further research (ibid.).

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46. Shamsuddin (2015) and Hahn et al. (2018) both measured ITT effects—i.e. the effect of being eligible for FSSSP, rather than actual receipt of the stipend.

47. Non-compliance with strict or hard conditionalities leads to punitive action, such as suspension or withdrawal from the programme. Non-compliance with soft conditionalities, on the other hand, has non-punitive consequences, such as referral or coaching (Carter et al. 2019).

48. This is due to a Supreme Court decision to roll out the MDM programme nationally, and states and districts adhered at different speeds until 2005. Hence, analysis that observed effects after 2005 saw their control groups starting to receive treatment at some point, and from then on all they could measure was the different outcomes between control and treatment groups due to the different length of exposure. In addition, most such studies measured ITT effects, meaning that the outcomes measured are for all eligible persons, rather than only for those who actually receive the programme.

49. The detailed description of this phenomenon laid out by the authors is the following: “whereas grade 1 picks up all new enrollments, the upper grades only pick up drop-outs: a child can only enrol in grades 2, 3, 4, 5 if they were enrolled in grade 1. Because year-on-year drop-out rates in grades 2–5 are lower than in grade 1, there is limited scope for midday meals to increase enrollment in the first few years of the program exposure studied here” (Jayaraman and Simroth 2015, 1178).

Afridi (2011) investigated the effects of the MDM on enrolment and attendance rates of children of primary school age in Chindwara district in Madhya Pradesh, one of the most underdeveloped Indian states in terms of poverty and educational attainment. The author found insignificant impacts on enrolment, whereas results on attendance were desirable and significant, but only for girls in the first grade, increasing it by 12.4 percentage points. The author noticed that girls in India are more likely to be provided with fewer nutrients at home than boys, indicating why the results were significant for girls but not for boys. Moreover, the opportunity cost of sending children to school is lower for younger children, since older children are more likely to engage in labour, plausibly indicating why the results were significant only for girls in the first grade (ibid.).

In another study assessing the impacts of the MDM, Chakraborty and Jayaraman (2019) assessed its impacts on primary school learning outcomes—reading and mathematics test scores—across India's roughly 580 rural districts, thereby providing nationally representative findings. In the fourth and final year of exposure, scores for reading and mathematics were 18 per cent and 9 per cent higher, respectively, than those for students from states where the MDM was not yet being implemented. Moreover, a substantial (positive) impact on the grades occurred from the third year of exposure, suggesting a cumulative effect over time (ibid.) and, thus, the need for prolonged exposure for a strong impact.

The authors also explored complementarities between the effects and schooling inputs, including teacher attendance, usable blackboard, availability of learning material, number of classrooms, separated classrooms, and drinking water taps in school. They found that teacher attendance, usable blackboard and available learning material were associated with better learning outcomes when combined with the MDM, suggesting the need for holistic educational policies. In contrast to the findings of Afridi (2011), impacts were not gendered. Moreover, there was no evidence that poorer children benefited more than relatively advantaged children.

Most of the studies assessing the impacts of the **MGNREGA** on educational outcomes are nationally representative, with the exceptions of Maity (2020) and Bose (2017). As discussed previously in this report, PWP's may indirectly affect children in many ways, including by increasing household income, but also by applying greater pressure to help with household chores or work in family businesses, and potentially by increasing the availability of jobs outside the household for older children, due to local economic effects (Ajefu and Abiona 2019; Islam and Sivasankaran 2015; Shah and Steinberg 2015).

Findings on enrolment and attendance are positive overall for younger children (where the income effect seems to prevail), whereas reallocations of household time and market factors seem to cause undesired effects on adolescents working inside or outside the household. The MGNREGA was associated with an average of 0.18 **more** days spent at school in the previous seven days among children aged 6–9 years, but with 0.19 **fewer** days for children aged 15–17 (Islam and Sivasankaran 2015). Estimates from Shah and Steinberg (2015) looked at impacts on enrolment, finding a negative effect ranging between 1 per cent and 3.5 per cent, with a gender bias expressed by girls being less likely to enrol in school, which is likely due to engagement in domestic or unpaid work (ibid.). Interestingly, the authors also found that children whose household was exposed to the programme between pregnancy and 4 years old tended to have a slightly higher, yet statistically significant, likelihood of attending school later on in their life.

Ajefu and Abiona (2019) measure impacts on school attendance by considering the combination of the MGNREGA with positive (rainy season generating additional demand for labour) and negative shocks (less labour demand in the wet season). For both MGNREGA and non-MGNREGA districts they found a reduction in school attendance during the rainy season, driven mostly by children aged 10–18 years, with a slightly larger reduction among MGNREGA villages (-20 percentage points) than non-MGNREGA villages (-18 percentage points). Li and Sekhri (2015) also found negative (undesirable) impacts on secondary school completion.

The two studies assessing impacts on education expenditure found no significant impacts (Ravi and Engler 2015; Bose 2017), though the study by Bose (2017) took place only one year after the implementation of the programme, which might have been too soon to capture impacts.



Two studies measured impacts of the MGNREGA on educational performance. In the short term, Mani et al. (2020) found desirable impacts on grade progression, as well as reading, maths and vocabulary test scores for children aged 7–8. These desirable results were all sustained and generally increased throughout the assessment rounds, suggesting that early and continued exposure to the programme boosts its benefits. Accordingly, children residing in districts where the MGNREGA was implemented earlier performed better than children in districts where it was implemented later. Similarly, Shah and Steinberg (2015) found desirable impacts on literacy, maths, enrolment and grade progression among children in households that were exposed to the MGNREGA at a young age (2–4 years), while older children (aged 13–16) from districts exposed to the MGNREGA experienced a decrease in educational outcomes.

Lastly, the only educational outcome measured by the **NSAP's OAP** was that of education expenditure, which was found to be positive (desirable) among female beneficiaries (Unnikrishnan 2020), which is believed to be due in part to increased bargaining and decision-making power of female beneficiaries over household budget allocations. However, the study did not assess the impact of the OAP on household expenditure when the recipient was male.

## 5.5 Nepal

The **CG** is the only social assistance programme identified which includes an educational impact evaluation. Adhikari et al. (2014) investigated the effects of the CG on school attendance and education expenditure per capita in the Karnali region, where any household with children up to 5 years of age at the time was eligible to receive the grant. The authors found CG impacts on both indicators to be statistically insignificant, although the children directly targeted by the programme (under 5 years) were not of school age. Hence, a potential impact on those indicators presumably refers to indirect effects on older siblings, but the benefit amount for each eligible child is probably too small to generate noticeable income effects.

Concerning school attendance, Adhikari et al. (2014) explain that, although public schools are free, families still have to pay for books, clothes and school maintenance fees. Through interviews, participants reported that those extra costs may prevent them from sending children to school. Physical access is also a challenge, as schools are often located far away from the students' homes. Furthermore, opening and closing times are often irregular. Impacts on private school attendance were also insignificant.

## 5.6 Pakistan

The **BISP** evaluation series conducted by Oxford Policy Management assessed the impacts of the programme's core component, the UCT for poor households, on school enrolment for children aged 5–12 years and on household education expenditure. For both indicators the results were insignificant in all three rounds. According to the authors, this result is explained by two factors: financial barriers for households and supply-side weaknesses, given the relatively low public expenditure on education (e.g. a shortage of schools and qualified teachers and a lack of adequate water, sanitation and hygiene (WASH) facilities). In all three rounds, the high cost of education was the reason most commonly given by caregivers for not enrolling their children in school. This clearly suggests that the value of the UCT is not sufficient to alleviate the demand-side financial constraint (Cheema et al. 2014; 2015; Cheema, Hunt et al. 2016).

The **BISP** sub-component for education, the **WeT**, is key, as it consists of an extra transfer for each child aged 5–12 years, conditional on at least 70 per cent school attendance (ibid.). In a parallel study, specifically on WeT impacts, Cheema, Asia et al. (2016) found that the sub-component significantly increased school enrolment, by 9 percentage points for all children, but by only 7 percentage points for girls. Moreover, they found that the magnitude of the impacts depends on three factors: father having (not) completed primary education, household poverty level and number of siblings.

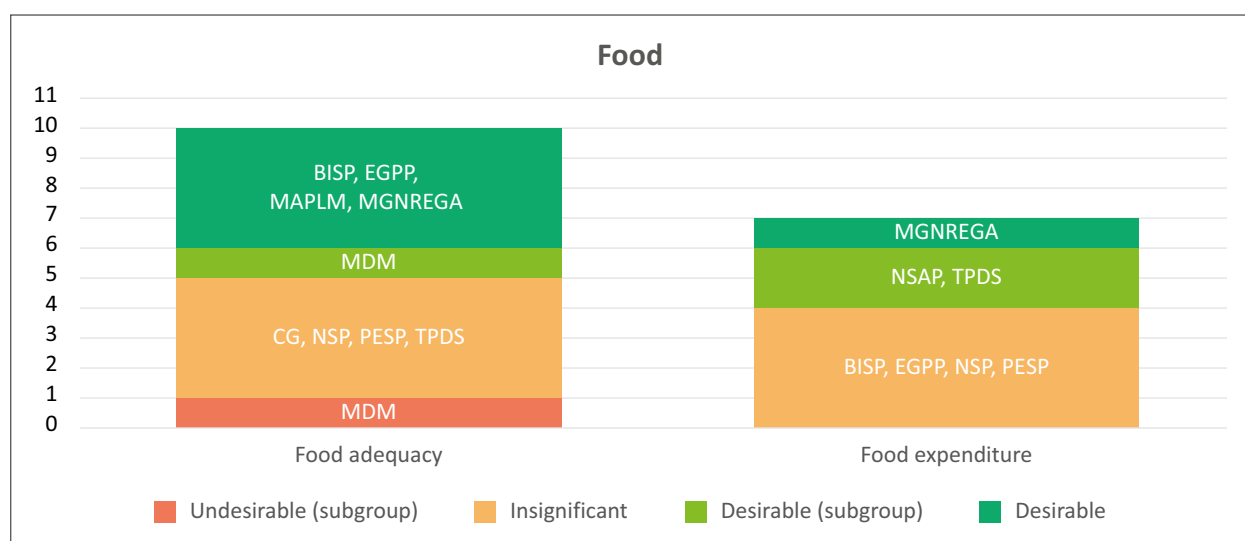
Children whose fathers finished primary education were more likely to be enrolled in school. The authors explain that better-educated men tend to earn more, so it is more likely that they can afford to pay for their children's education. Also, they are more likely to understand the long-term benefits of education. On the other hand, mothers' completion of primary education did not affect children's enrolment, suggesting less bargaining power for women in households (ibid.). The impact on enrolment for children in the poorest households is higher (18 percentage points) than for children in relatively better-off households (8 percentage points). This can be explained by reductions in financial barriers.

Results for child labour were not statistically significant, a result associated with the relatively small size of the subsample of working children. Impacts on drop-out rates were also insignificant. However, **WeT** was implemented less than one academic year prior to the evaluation; therefore, the time-frame was likely insufficient to accurately assess the indicator. Given the increase in enrolment, it is expected that drop-out rates will eventually decrease. Finally, effects on school attendance were barely significant. The authors found weak evidence that WeT increased attendance for girls by 7 per cent, which is somewhat surprising given WeT's attendance conditionality (ibid.).

## 6. IMPACTS ON HEALTH AND NUTRITION

### 6.1 Regional findings for food

**Figure 11.** Food indicators: effects aggregated at the programme level



Access to **food** is a widely targeted and assessed sub-category. As one of the most basic human needs, outcomes for food also have consequences across many other categories, including work, education and health. By providing a cash stimulus or in-kind support to households, social assistance programmes increase the budgets of households to spend more on food, which can lead to other positive impacts on health. Because a minimum daily caloric intake is necessary to fulfil human physical and cognitive needs, these indicators are expected to respond to income changes for the poorest households if they are deprived of adequate nutrition. The two indicators for this sub-category are food adequacy—which includes measures of food quality (diversity), quantity and security<sup>50</sup>—and food expenditure, which groups different measures of household expenditures for food.

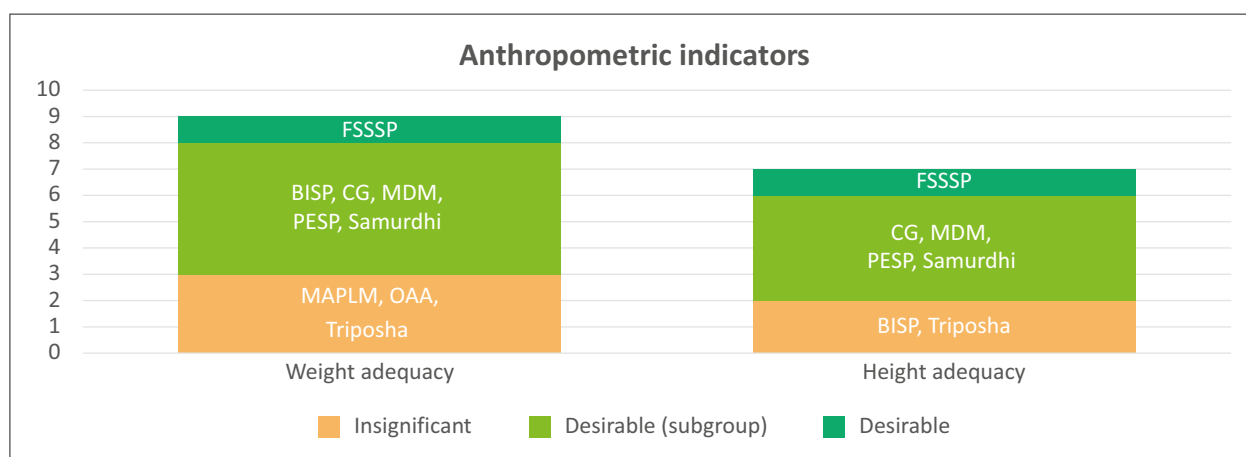
50. This definition is admittedly broad and contains proxies measuring a slightly different problem area. However, to make some comparative analysis possible, we think that inherently they capture a similar concept.



Results for food adequacy are mixed between desirable and insignificant effects. A striking finding here is the ambivalent effect of the **MDM** scheme in India, with studies finding positive impacts for direct beneficiaries (children), but a negative impact on other household members (this is discussed more in the India subsection). Food expenditure, on the other hand, shows generally little impact. This could be because food might not be the most pressing constraint for most beneficiary households, with staple foods already being catered for. Additionally, evidence from the **BISP** (Cheema et al. 2014; 2015; 2016) points to the regularity of the transfer playing a crucial role in determining whether cash transfers enable beneficiaries to increase their food expenditure. It is thus interesting to note that the only programme recording desirable effects on both food adequacy and food expenditure is the **MGNREGA** in India. By offering a steady income over the year that is not interrupted by seasonal unemployment, the MGNREGA might enable households to improve nutritional outcomes through insurance effects in periods of reduced income.

## 6.2 Regional findings for anthropometric indicators

**Figure 12. Anthropometric indicators: effects aggregated at the programme level**



**Weight adequacy** aggregates proxies for child weight, including body mass index (BMI), underweight prevalence, weight-for-age or weight-for-height z-scores, and birth size for newborns.<sup>51</sup> **Height adequacy** includes measures of height-for-age and stunting. Because of the relative ease with which they can be assessed and their broad relevance, they are commonly included in the impact evaluation literature.

Generally, we found encouraging results for the programmes in our sample, although they often only apply to a subgroup of children, potentially reflecting unequal treatment based on children's age or gender.<sup>52</sup> Furthermore, the child development literature suggests that counteracting wasting<sup>53</sup> and stunting might be most effective at an early age, rather than after years of accumulated malnourishment.<sup>54</sup> Height adequacy generally shows a similar pattern, and studies assessing both anthropometric indicators usually find consistent results between them.

51. We acknowledge that these capture slightly different deprivations and concepts (such as short-term, acute malnutrition or sustained, long-term effects); however, a lack of consistency in the proxies studied in the impact evaluations in our sample requires that we somewhat generously aggregate under the joint term 'weight adequacy'.

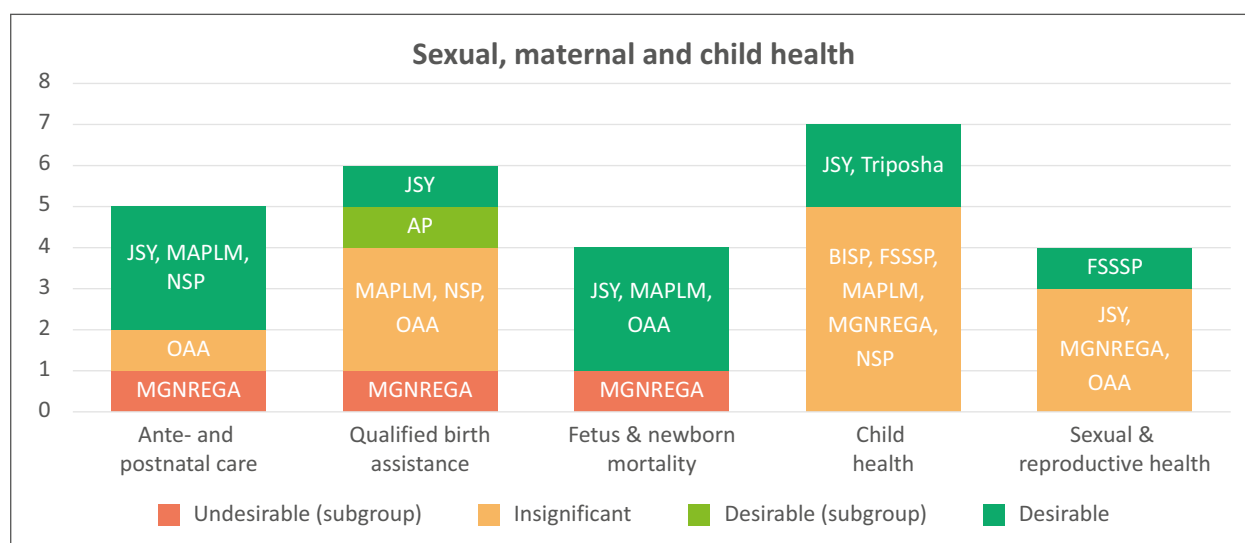
52. While the FSSSP is marked as having a desirable effect not just for a subgroup (i.e. in dark green), this only applies to the population of (exclusively female) beneficiaries. This is a peculiarity of our methodology: A programme is marked as only having a desirable effect on a subgroup (in light green) when the impact evaluation performs a subgroup analysis. However, in the case of the FSSSP, the entire population of beneficiaries are girls. As the impact evaluations on aggregate find a desirable impact for this entire population of beneficiaries, we do not mark it in light green as only having an impact on girls.

53. Wasting is a measure of current undernutrition, caused by inadequate current food intake or feeding practices, infections and diseases (Cheema et al. 2016).

54. Stunting is a measure of past or present chronic nutrition, caused by long-term factors, such as chronic insufficient protein, energy and micronutrient intake, frequent infection or disease, and continued inadequate feeding practices (Cheema et al. 2016).

### 6.3 Regional findings for sexual, maternal and child health

**Figure 13.** Sexual, maternal and child health indicators: effects aggregated at the programme level



**Sexual, maternal and child health** includes health outcomes related to children, women in general, and mothers specifically. Various programmes in our sample explicitly aim to improve outcomes in this domain by focusing on safe deliveries and better care for mothers and their babies (examples include the Maternity Allowance for the Poor Lactating Mothers (MAPLM) in Bangladesh, *Janani Suraksha Yojana* (JSY) in India, and the *Aama Programme* (AP) in Nepal). Others target health outcomes for children and adolescents slightly later in their life—for example, through SFPs or by promoting school enrolment. The sub-component includes five different indicators:

- ante- and postnatal care (ANC and PNC), which look at the provision of care services to pregnant women and new mothers;
- qualified birth assistance, which specifically collects information on the conditions of childbirth (e.g. if the delivery was supervised by qualified medical personal);
- foetus and newborn mortality, which examines mortality risks of unborn children and newborns;
- child health, which addresses child sickness and health outcomes later in childhood; and
- sexual and reproductive health, which broadly summarises indicators of female reproductive decisions and maternal health.<sup>55</sup>

Overall, results are mixed, with no programme achieving desirable results across all indicators. Positive results are found for **JSY** on ANC and PNC, although there is a large literature with a deep discussion on the determinants and conclusions of findings. Limited desirable effects found for qualified birth assistance are somewhat disappointing, although two of the programmes with objectives directly targeting this indicator, the **AP** and **JSY**, find desirable effects. Effects on the mortality risk of foetuses and newborns are generally encouraging.

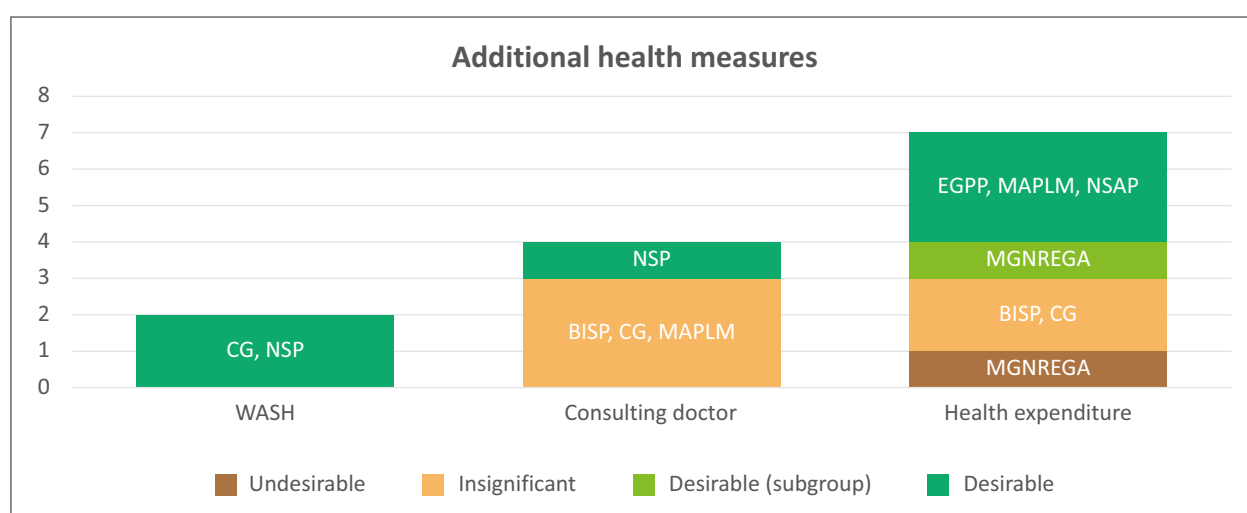
55. Proxies such as fertility, age at first birth and the use of contraception capture a somewhat different issue than maternal mortality does. Therefore, we will point out the exact proxy evaluated in this case and provide a much more nuanced discussion in the country- and study-specific part that follows.

Besides social assistance programmes that directly target pregnancy-related outcomes, different studies assess the impacts of the **MGNREGA** on maternal health outcomes. Evidence suggests that when women work most under the MGNREGA during the agricultural off-season, use of ANC services is lower, and women are less likely to travel to a hospital to deliver, effectively increasing child mortality during or immediately after birth. These findings question whether working conditions for pregnant and new mothers are too hard and should, therefore, be relaxed for better ante- and postnatal health outcomes.

Results for child health vary between desirable and insignificant impacts. Notably, few studies were found that assessed child immunisation as a proxy of child health, which provides important insights into the use of preventive health measures and access to health services. A finding worth noting though is that *Thripasha* in Sri Lanka, the only nutrition-based intervention in our sample assessed under this sub-category, successfully improves both micronutrient status and quality of blood samples for children. Lastly, findings for sexual and reproductive health include no significant impacts on maternal mortality rates for girls who benefited from the **FSSSP** in Bangladesh, while the **OAA** in Nepal unsurprisingly finds no impact on maternal mortality.

## 6.4 Regional findings for additional health measures

**Figure 14. Additional health indicators: effects aggregated at the programme level**



**Additional health measures** comprise three more common indicators that capture behaviours and overall access to health and sanitary practices and services: WASH, consulting a doctor when sick, and household health expenditure. Health expenditures can respond to income changes from social assistance, especially if budget constraints limit health care provision, and out-of-pocket expenditure is common. Meanwhile, external moderators, such as quality of infrastructure or services, and complementary interventions of social assistance programmes are likely to largely bring about positive (desirable) outcomes.

While the two programmes assessing **WASH** outcomes found desirable effects, findings are more mixed in terms of seeking qualified treatment during illness and health expenditure. For doctor consultations, there appears to be consensus that supply-side constraints limiting access to health services are a key determinant, as the **NSP** (Afghanistan) is the only programme that also intervenes on the supply side, building infrastructure and capacity instead of merely building financial capacity on the demand side. Findings for the **EGPP** found that an increase in overall expenditure was accompanied by an increase in expenditure on health. Meanwhile, the **MGNREGA** was found to have a mixed impact on health expenditure: Bose (2017) found that households with children increased their health expenditure slightly, while Ravi and Engler (2015) found reductions in health spending.

## 6.5 Afghanistan

The series of impact evaluations of the **NSP** sponsored by the World Bank presented health assessments pertaining to our aggregated indicators of food, sexual, maternal and child health, and additional health measures. Under the food indicator, Beath et al. (2010) and Beath, Christia and Enikolopov (2013b) examined whether the NSP impacted food security and the ratio of food expenditure to total expenditure.<sup>56</sup> Results were insignificant for both follow-up and final evaluations. In this sense, the authors suggested that the NSP-funded development projects—managed by the CDCs—could not deliver sustained improvements in livelihoods.<sup>57</sup>

The findings for ANC and qualified birth assistance were mixed. Effects on ANC were statistically insignificant in the follow-up round, but desirable and significant in the final round. Impacts for recent births delivered at a medical facility were insignificant in both rounds. However, in the follow-up round, there was a 3.1 per cent decrease in the likelihood of most recent birth being attended by a medical professional, although the effect was statistically insignificant in the final round. Results for child health—diarrhoea in the past 2 weeks and survival of newborns after 12 months—was statistically insignificant in the final round. (Beath et al. 2010; Beath, Christia and Enikolopov 2013b).

Impacts on additional health measures are the most encouraging, given a desirable impact on access to drinking water and in most recent illness or injury treated by a medical professional in the follow-up and final rounds. However, this result was only significant in the follow-up round. Impacts on the likelihood of children being visited by a doctor were insignificant in the follow-up, but desirable and significant in the final round. When considering the aggregate indicator access to health services—as defined by the **NSP** evaluation series—the impact was positive and significant in the final round, but only for women. The authors hypothesise that the mandate of the **NSP** to strengthen female political participation may contribute to improve female mobility, which, in turn, may facilitate access to health services. Though there was no overall significant impact on female mobility, they found a significant increase in extra-village mobility for women (Ibid.).<sup>58</sup>

## 6.6 Bangladesh

Health evaluation studies for four programmes were identified for Bangladesh: **MAPLM**, **SESP**, **PESP** and **EGPP**. Jetha (2014) conducted a comprehensive investigation of the **MAPLM**—a monthly cash transfer for poor pregnant women in rural areas, paid for two years, aiming to avoid adverse pregnancy outcomes—in the Lakshmipur district. The evaluation assessed sexual and reproductive health, child health, health expenditure and food security.

The likelihood of MAPALM beneficiaries attending ANC and PNC services both increased, perhaps due to an increase in autonomy. Indeed, prior to the programme, women reported that they could not seek medical care without authorisation from their husbands, a situation which used to hinder their access to both ANC and PNC. However, the impact of the MAPLM on institutional deliveries was insignificant, which, according to the author, could be due to predominant cultural practices for childbirth in rural Bangladesh, as home deliveries are common culturally, and/or poor service quality preventing women delivering at a health facility. No impact was found on breastfeeding, although Jetha (2014) explains that prior to the implementation of the MAPLM, exclusive breastfeeding rates were already about 90 per cent.

The programme led to positive significant effects on the quantity and quality of food intake. According to the author, these are the most encouraging quantitative results. Participants in focus group discussions reported that prior to the

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56. Food security is defined in this NSAP OAP evaluation series as an index of three indicators: daily caloric intake per household member during the past week, months in past year household faced a food shortage, and household experienced hunger on at least one day in the past week (Beath, Christia and Enikolopov 2013b).

57. The NSP's effects on livelihoods are discussed in the 'Poverty' and 'Finance' subsections.

58. The NSP's effects on female mobility are discussed in more depth in the 'Gender' section.

MAPLM they could not afford enough rice for three meals a day. Moreover, they were able to increase the regularity of consumption of fruits, meat, eggs and milk. However, impacts on weight-for-age and both diarrhoea and fever incidence among children were insignificant. This suggests that despite some positive effects on food intake, the benefit had an insufficient effect on health outcomes for children, and that there are other determinants of child health not addressed by the programme (ibid.).

Finally, despite a significant increase in health care expenditure—around 30 per cent of the transfer being allocated to health care—there was no significant effect on child visits to the doctor in the past month. The author suggests that beneficiaries may either go to more expensive private doctors or spend more at pharmacies. Participants reported that it is common in public hospitals for doctors to be absent, and that the quality of pharmaceuticals is limited (ibid.).

Baulch (2011) investigated the long-term impacts<sup>59</sup> of the **PESP**, a primary education stipend, on individual and household welfare between 2000 and 2006 in eight rural *upazilas*. Effects on per capita food expenditure and per capita calorie consumption—related to food security—were statistically insignificant. The author explains that this might be due to the decline in the real value of the transfer. Results for BMI z-score and height-for-age varied according to gender: for BMI, desirable significant impacts were observed for boys, while height-for-age results found desirable and significant impacts for girls.

Hahn et al. (2018) assessed long-term impacts of the stipend from the **FSSSP** on female secondary students in rural areas, finding a significant reduction in the number of children desired and girls' fertility choices. Moreover, the reduction in fertility rate attributed to the programme was 12 per cent for girls who received the full stipend, and 8 per cent for girls who received it partially. Also, the results found a significant increase in the age at which beneficiaries got married and the age of first birth. Effects on contraceptive use and maternal mortality were insignificant.

The authors suggest that results concerning marriage and fertility are not due to an 'incarceration effect' (dedication to education reducing time to engage in other activities), but instead due to changes in women's perception through increased human capital (ibid.). Moreover, impacts on the children of beneficiaries—i.e. the eldest child born up to five years before the survey—showed significant and positive effects on height-for-age and related measures. Conversely, impacts on haemoglobin and anaemia were insignificant. Dale (2020) supports the hypothesis of potential benefits among the children of **FSSSP** recipients, observing a small reduction in mortality for infants (children under 1 year). The author also found a reduction in mortality for children under 5 for women by age 26, and a slightly larger reduction for women eligible for the stipend for five years.

Finally, Cho and Ruthbah (2018) assessed **EGPP** impacts on health in 103 unions (the smallest local administrative unit in rural Bangladesh). The EGPP is an employment generation initiative for poor people, and the largest safety net programme in Bangladesh. The authors found that it led to a significant increase in overall household consumption, but not in food expenditure. However, a shift in the composition of consumption was observed, from lower- to higher-quality food items, with a greater weight of protein intake. After programme implementation, both per capita and household consumption of meat, fish and dairy increased. Also, there was a large and significant increase in household health care expenditure, for men and women, and more pronounced for adults. A possible explanation is that childless households made up 23 per cent of the sample.

## 6.7 India

Health impact assessments are present for all five social assistance programmes for India. Only one study, Kaushal and Muchomba (2015), assessed the impact of the **TPDS**—a wheat and rice subsidy targeting poor households—on nutrition and on food expenditure per capita. The study sample comprised only states with a well-functioning TPDS

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59. Impacts on poverty and finance and education are discussed in the respective sections.

(meaning states with relatively high uptake); therefore, the results are not nationally representative. Results on food expenditure per capita showed heterogeneities across districts. In districts where wheat and rice were already staple foods, the TPDS led to a reduction in food expenditure per capita—a desirable outcome, since households were able to buy the same quantity of wheat for a lower price. As a result, non-food expenditure increased, as discussed in the section on the impacts on poverty and finances. Meanwhile, in districts where coarse grains were staple foods, the programme led to a change in consumption patterns towards wheat, consequently reducing consumption of coarse grains, which are cheaper and inferior sources of nutrition. Nevertheless, the effects on nutrition (measured as energy, protein and fat intake) were insignificant, suggesting perhaps the need for complementary actions to tackle undernourishment.

Regarding the **OAP**—a component of the **NSAP**—Unnikrishnan and Iman (2020) and Unnikrishnan (2020) found an increase in monthly food expenditure per capita, although Unnikrishnan and Imai (2020) observed an increase only for female recipients, and Unnikrishnan (2020) assessed impacts only on female recipients. In the latter case, an increase in health expenditure was also found. For both studies, results are explained by the income effect and the increased bargaining and decision-making power of women over the household's budget allocation.

Concerning the **MDM** programme, which serves cooked meals to children in primary schools, both impact evaluation studies found positive impacts on indicators related to nutrition. The first study, by Afridi (2010), assessed the MDM in comparison to a previous programme that distributed take-home raw grains to primary school children in Chindwara district in Madhya Pradesh. The author considers that take-home grains may be redistributed among household members, diverting resources from the intended beneficiaries: primary school children. Following the change in programme, the daily nutrient intake of targeted children increased, whereas their daily protein, calorie and iron deficiencies were reduced.

The second study, by Singh, Park and Dercon (2013), assessed programme effects among children affected by drought in the state of Andhra Pradesh, finding improvements in weight-for-age scores and in stunting indicators, and providing evidence that the MDM was effective in mitigating the harmful effects of droughts. Their results support the view that the MDM addresses child undernourishment in India, and emphasises the importance of SFPs in strengthening food security.

Seven of the eight studies identified assessed the impacts of the **MGNREGA** on food indicators and found desirable impacts overall (Dey and Imai 2015; Ravi and Engler 2015; Bose 2017; Deininger and Liu 2018; Liu 2018; Maity 2020). In a few cases, results varied according to the social groups participating (discussed below), but no undesirable impacts were observed. However, none of these studies are nationally representative, focusing instead on Andhra Pradesh and West Bengal (in the case of Dey and Imai (2015) only), which are recognised for their quality of implementation and known as top performers.

A cross-cutting finding for MGNREGA participants was an increase in household food expenditure, indicating the programme's potential to strengthen food security (Dey and Imai 2015; Ravi and Engler 2015; Bose 2017; Maity 2020). However, participation in MGNREGA must be repeated and reliable to ensure sustained results, rather than for a short period only (Dey and Imai 2015; Ravi and Engler 2015). Ravi and Engler (2015) found that every member of a household regularly participating in the MGNREGA was eating 3.2 more meals per week than members of households which were denied participation (once or twice, due to insufficient work). Dey and Imai (2015) found that an increase in participation by one day leads to an increase in monthly expenditure on food by 0.5 per cent during the main agricultural season.

As for the MGNREGA's impact on food composition, the increase in food expenditure was due to consumption of more expensive and nutritious foods, such as dairy, fruits and vegetables, fish, meat and eggs, reflecting the potential to improve nutritional status (Bose 2017; Maity 2020). Moreover, an increase in energy and protein intake for the poorest households and those belonging to SC/STs was also found, a result which suggests effective targeting (Deininger

and Liu 2018; Liu 2018). Furthermore, the study by Liu (2018) found an increase in energy and protein intake for both participating and non-participating households, suggesting desirable spillover effects from the MGNREGA.

A nationally representative study by Bagavathinathan and Chaurey (2020) is an exception to the positive results found for the aggregated indicator for food. They found a decrease in the number of meals consumed at home by children under 15 during the dry season, when the demand for the MGNREGA is higher. It is presumed that this decrease is largely due to participating women having less time to dedicate to childcare, although impacts on their energy, protein and fat intake were insignificant. Conversely, Maity (2020) found an increase in food expenditure for female participants only. Both studies potentially highlight the need to maintain and/or improve gender-sensitive features for the well-being of children in a country where women are still the key caregivers.

Also investigating the relationship between female participation in the MGNREGA and health outcomes, Chari et al. (2019) found undesirable impacts for ANC, institutional delivery, foetal health, and neonatal mortality within 24 hours after birth. They explain that the MGNREGA contributed to a crowding-out of child health inputs, due to the time-consuming nature of ANC and travelling to health facilities. They highlight, therefore, the importance of more flexible work arrangements for pregnant women, another gender-sensitive feature to be improved.

Finally, eight studies evaluated health impacts of **JSY**,<sup>60</sup> which aims to reduce maternal and neonatal mortality among poor women through institutional deliveries (GoI 2017). Beyond the institutional delivery itself, financial incentives are conditional on at least three ANC visits and at least one PNC visit for the mother and the newborn (Rahman and Pallikadavath 2018). Findings regarding ANC are mixed: although three out of four studies found desirable impacts (Lim et al. 2010; Joshi and Sivaram 2014; Rahman and Pallikadavath 2018), one found insignificant impacts (Powell-Jackson, Mazumdar and Mills 2015). Moreover, results are not generalisable across the whole country or across all social groups.

Highlighting geographic differences, Joshi and Sivaram (2014) found more desirable impacts for ANC in high-focus (HF)<sup>61</sup> compared to low-focus (LF) states, where the coverage tends to be lower, since not all women are eligible for JSY. Meanwhile, the increase was observed only for rural women and women without formal education—a result potentially related to inadequate financial incentives for accredited social health activists (ASHAs),<sup>62</sup> who receive a higher cash transfer in rural than urban areas. On a related note, Powell-Jackson, Mazumdar and Mills (2015) attribute the insignificant impacts on ANC to ineffective incentives for ASHAs to refer pregnant women to it.<sup>63</sup> It worth noting that improvements in ANC from ITT estimates were not found among women belonging to the poorest quintile, which is likely explained by difficulties proving eligibility: in LF states they are required to present a BPL card, but the correlation between owning a BPL card and current wealth/poverty is deemed weak<sup>64</sup> (Joshi and Sivaram 2014).

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60. Although the programme was launched in 2005, it took several months or even years to be implemented across all of India, and low-performing states were given priority [Carvalho et al. 2014; Powell-Jackson, Mazumdar and Mills 2015]. All eight studies used the India District Level Household Survey (DLHS), varying the exact rounds employed—DHLS 2, 3 and/or 4. DLHS 2 was conducted in 2002–2004, DLHS 3 in 2007–2008, when JSY was in its initial stages, and, finally, DHLS 4 was conducted in 2013–2014, when longer-term results could be observed. However, while DHLS 2 and 3 are nationally representative, DHLS 4 collected data in the low-focus (LF) states [Rahman and Pallikadavath 2018]. The study by Rahman and Pallikadavath [2018] is the only one which used round 4 of the DHLS. Hence, there is a lack of nationally representative long-term evaluation, and the results discussed here should be understood as preliminary. Further, differences in exact definitions of the indicators as well as different sampling and estimation techniques used in each study also explain variations in results.

61. Since November 2006, in LF states, also known as socio-economic high-performing states, with higher rates of institutional delivery and health facilities, eligible pregnant women must be aged between 19 and 45 years old to benefit from JSY. Women who belong to SCs/STs are eligible irrespective of their poverty status, while others must belong to BPL households. Further, the benefit is limited to two live births. In HF or socio-economic poor-performing states, all women, regardless of age, poverty status or number of births, are eligible for the programme [Joshi and Sivaram 2014].

62. The general mandate of ASHAs is to promote health awareness among women. Within the scope of JSY, they receive performance-based incentives for referring and accompanying pregnant women to health facilities [De and Timilsina 2020].

63. Rural ASHAs are paid INR250 for transporting women for a health facility to deliver, plus INR150 immediately after delivery, plus INR200 after the newborn receives the appropriate vaccinations. On the other hand, urban ASHAs receive the INR200 instalment only. Moreover, within the current scheme, ASHAs receive the same amount of money regardless of whether they schedule the required three ANC visits, fewer than that or none [Joshi and Sivaram 2014].

64. DLHS 3 showed that only 35 per cent of households in the lowest quintile of the wealth index owned a BPL card, whereas 27 per cent of the households in the richest quintile owned a card and, hence, were technically eligible for JSY [Joshi and Sivaram 2014].



Similarly to ANC, impacts on qualified birth assistance were positive overall (Lim et al. 2010; Joshi and Sivaram 2014; Powell-Jackson, Mazumdar and Mills 2015; Rahman and Pallikadavath 2018; Andrew and Vera-Hernandéz 2020). Though here too results differed depending on JSY coverage by location (Powell-Jackson, Mazumdar and Mills 2015) or on the women's social group (Joshi and Sivaram 2014). As for ANC results, Joshi and Sivaram (2014) found that the improvements apply to rural women and women without formal education, for the reasons discussed above. Once again, districts with higher JSY coverage tended to show better results, according to Powell-Jackson, Mazumdar and Mills (2015), with improvements in most recent birth delivered at health facility just for districts with coverage higher than 50 per cent.

Results for PNC are mixed: two studies found desirable impacts (Sengupta and Sinha 2017; Rahman and Pallikadavath 2018) at the national level, driven by rural areas in HF states (Sengupta and Sinha 2017), whereas Joshi and Sivaram (2014) found no impact on PNC. The lack of adequate incentives for ASHAs might also be an explanation for this undesirable result, since they receive considerably higher financial compensation for referring women to institutional delivery than to PNC.<sup>65</sup>

Results for perinatal and neonatal mortality are mixed, with two studies finding improvements (Lim et al. 2010; Sengupta and Sinha 2017), Powell-Jackson, Mazumdar and Mills (2015) observing only weak improvements for one-day mortality only, and Andrew and Vera-Hernandéz (2020) finding an increase in perinatal deaths in rural districts located in HF states. These results suggest potential supply-side constraints and external moderators, such as health facilities not being able to cope with the consequences of higher demands for institutional deliveries. Thus, it is paramount to consider the existing capacity of health systems when deciding whether to stimulate demand for social services, since greater pressure on the system can potentially lead to a decrease in quality of care (Andrew and Vera-Hernandéz 2020; De and Timilsina 2020).

Regarding spillover effects on health, several authors found desirable impacts on child vaccination and breastfeeding (Carvalho et al. 2014; Powell-Jackson, Mazumdar and Mills 2015; Sengupta and Sinha 2017; Rahman and Pallikadavath 2018; De and Timilsina 2020). Increased interaction with ASHAs and the overall health care system through JSY is often mentioned as the reason for positive spillovers. Supporting this theory, Carvalho et al. (2014) found a stronger magnitude in HF compared to LF states, while Powell-Jackson, Mazumdar and Mills (2015) found the same in districts where coverage was higher than 50 per cent. Furthermore, in terms of other indicators, Sengupta and Sinha (2018) found an increase in vaccination rates for rural areas only. Meanwhile, results from Vera-Hernandez and Andrew (2020) were an exception to this desirable trend, finding a decrease in vaccination rates. This study is not nationally representative, focusing only on nine HF states. The suggested explanation is that the increased demand for health care due to JSY incentives diverted resources from other routine services.

## 6.8 Nepal

Studies evaluating health and nutrition outcomes for three Nepalese programmes were included: the **AP**, the **OAA** and the **CG**. The **AP**, or the Safe Delivery Incentive Programme, provides cash to women who give birth in a health facility, a condition of receiving the benefit. Powell-Jackson and Hanson (2012) investigated whether the programme increased institutional delivery and health worker attendance at delivery (related to the aggregate indicator 'birth assistance'). The impact of the **AP** on institutional deliveries was positive and significant only for women who had heard of someone who had received the benefit. Thus, it was key for women to expect to receive the transfer. Meanwhile, the impact of the **AP** on health worker attendance was positive and significant when considering any health worker or when considering doctors, nurses and midwives only.

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65. Moreover, while the post-delivery transfer is received immediately at the health facility, to receive the PNC transfer, an ASHA must track down the beneficiary, schedule her visit and then go to the hospital to receive the money. This means that the value of the PNC transfer may not cover the effort required to receive it. Also, in India there is a general lack of understanding of the importance of PNC (Joshi and Sivaram 2014).



Li and Mora (2016) investigated potential impacts of the **OAA** on sexual, maternal and child health. An improvement in child survival 12 months after birth was the only desirable and significant effect found. The increase was around 7–8 percentage points, regardless of the gender or age of the recipient. The authors also explored the OAA's impact on size at birth, ANC, health worker in attendance at delivery, and fertility, finding no change in the indicators. However, birth size was assessed in the study through a subjective ordinal measure reported by the child's mother; therefore, conclusions for this indicator may not be accurate. Likewise, the data used in this study were collected in 1996 and 2001; thus, results are likely to be outdated.

Three different studies assessing the impacts of the **CG** were identified. Adhikari et al. (2014) considered the Karnali region only, where all households with children up to five years old are eligible to receive the grant. They found that the programme enabled beneficiaries to buy more nutritious food. However, as the value of the transfer is low compared to living costs, the overall impact on food security was not significant (measured as number of meals, number of meals that included meat, and subjective assessments of food security). Payment irregularity was identified as another constraining factor. This same situation holds true for the likelihood of using hospitals; the grant relaxed financial barriers to health services, but the impact was not statistically significant. Effects on overall household health expenditure were also insignificant.

Renzaho et al. (2017; 2018) investigated the CG's impacts on under-5 nutrition and use of WASH facilities, respectively.<sup>66</sup> Improvements in both weight and height adequacy indicators occurred for children aged 2–5, while effects for children under 2 were insignificant. Results for girls showed improvements in weight-for-age and being underweight—both related to weight adequacy—whereas there was no improvement on height adequacy. Meanwhile, boys showed improvements for both weight and height adequacy, including wasting and stunting (Renzaho et al. 2017). Renzaho et al. (2018) found positive impacts of the CG on access to drinking water and sanitation facilities, while improvements in water treatment methods were insignificant.

## 6.9 Pakistan

A series of evaluations sponsored by Oxford Policy Management investigated health and nutrition impacts of the **BISP**—Pakistan's flagship UCT—on food intake, anthropometric indicators, child health and additional health measures.

The effect of the BISP on food expenditure per capita was statistically insignificant in all three rounds. The authors attribute this result to the irregularity of the transfer, as beneficiaries could not count on cash for day-to-day consumption of food (results in Section 3 indicate that the benefit was directed to investments instead). However, a positive impact on food diversity and regular consumption of specific food items was found, including more eggs, fish and wheat consumed in the first round, and meats, fish and fruit in the second and third rounds. It is suggested that the BISP transfer allowed beneficiaries to buy items they could not afford before, especially immediately after receiving the money. Interviews conducted for this study supported this hypothesis (Cheema et al. 2014; 2015; Cheema, Hunt et al. 2016).

Concerning anthropometric indicators, improvements were observed only for girls aged between 0 and 59 months old. There were desirable impacts on wasting in the first and final rounds, and for stunting among girls in the second round. Impacts were insignificant in the other rounds. Further research is required to find out why the results were gendered. Lastly, for the indicator BMI z-score (related to weight adequacy), effects were insignificant in the second and third rounds, while it was not assessed in the first (ibid.).

Regarding child health, the authors found insignificant impacts on the proportion of fully immunised children and children who had diarrhoea in the month prior to the survey (both indicators were assessed in the final round

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66. Both studies compared outcomes in a treated district [Kalikot] in the Karnali zone with outcomes in a control district [Bajhang] in the Seti zone.

only). Likewise, the effect on the proportion of beneficiaries who sought a medical consultation when sick was also insignificant (assessed in the first round only). Finally, there was an increase in household health expenditure of PKR54 per adult, observed in the first round only. Qualitative research indicated that the cash offered by the BISP could alleviate financial constraints to access health-related products and services. The impact in the second and third rounds was insignificant (ibid.).

## 6.10 Sri Lanka

For Sri Lanka, impact evaluations related to health were identified for two programmes: **Samurdhi** and **Thripasha** (the National Food Supplementary Programme), which evaluated impacts on child health. *Samurdhi* is a poverty alleviation scheme whose core component is a cash transfer, while *Thripasha* is an in-kind transfer conceived to improve the nutrition status of children and pregnant and lactating women (Alderman, Gentilini and Yemtsov 2018).

Himaz (2008) investigated whether the extra income provided by *Samurdhi* impacts the anthropometric indicators of children aged between 6 and 60 months old. She found that the programme led to desirable effects on height-for-age for children aged 6–36 months, reflecting accumulated investments in health. She also found desirable effects for weight-for-height, but only for children aged 36–60 months. This indicator reflects short-term nutritional fluctuations. However, the study used household data for 1999 and 2000; therefore, the results need to be updated, as the programme has since undergone several transformations.

In the case of *Thripasha*, Hettiarachchi and Liyanage (2011) found no effect on weight-for-age, height-for-age and BMI z-score for children between 3 and 5 years old. However, in another study, Hettiarachchi and Liyanage (2010) found desirable effects on children's micronutrient status. There were major desirable effects on haemoglobin, serum ferritin and serum retinol, while the desirable effects on serum zinc, serum ceruloplasmin and serum vitamin D were marginal.

# 7. IMPACTS ON GENDER DYNAMICS

## 7.1 Regional findings for gender dynamics

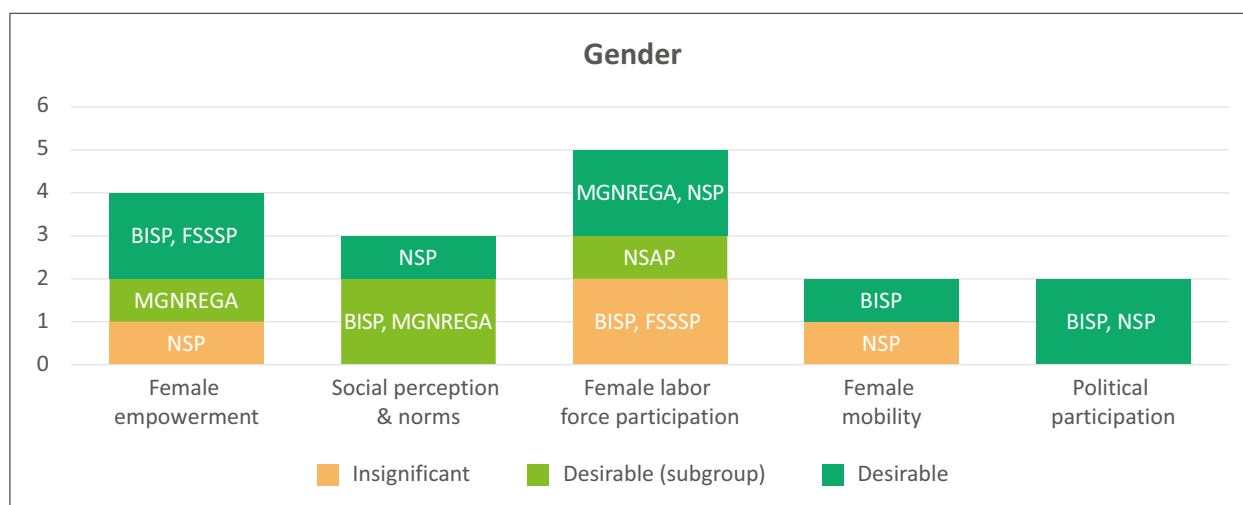
This category examines indicators of gender equality and the role of women in society, using both quantitative and qualitative information. Instead of focusing on outcomes that only affect women (e.g. maternal health), the indicators for this category assess the role of women in society and are thus more related to equality between men and women.<sup>67</sup> Indicators range from changes in behaviours, opportunities and rights for women, such as FLFP, female mobility (freedom of movement) and political participation, to somewhat more flexible concepts assessing the role of women in society, such as social perceptions and norms (proxies reporting changes in attitudes towards women), and female empowerment (changes in views of female agency for the household and/or wider society).<sup>68</sup>

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67. An exception to this is the 'Education' section, where we found it appropriate to discuss girls and boys together. As there are multiple indicators assessing outcomes in this domain, we opted also not to create separate indicators for each of them in the 'Gender' section, as we did for LFP.

68. For the latter, it is noted that female empowerment is often measured as an index comprising some of the other indicators and proxies such as mobility, political participation or bank account ownership.

**Figure 15. Gender indicators: effects aggregated at the programme level**



Social assistance can help promote gender equality through different channels. For instance, cash transfers disbursed to women can affect household resource allocations in contexts where women are less likely to earn labour income. Another example concerns PWP that provide equal pay for women and men, which can have significant effects in reducing gender pay gaps and promoting employment for women. More broadly, social assistance schemes that provide complementary services and interventions (including child-care services) that promote female empowerment through financial, political or social mechanisms can lead to improvements in gender equality.

Results across gender indicators are very positive overall, with 11 programme-aggregated effects showing desirable effects for either all women or subgroups, while 5 programme-level effects showed statistically insignificant results. Across South Asia, results for female empowerment, political participation, and social perceptions and norms were particularly encouraging; however, improvements in these categories did not always lead to positive impacts on FLFP (e.g. the **BISP** in Pakistan).<sup>69</sup> Mixed results for FLFP might be explained by the need to actively engage women at different stages of implementation—for example, through local governance, as done by Afghanistan's **NSP**, or through more work opportunities, as exemplified by India's **MGNREGA**. Moreover, limited effects on FLFP for the BISP and the **FSSSP** (Bangladesh) are partially due to the original programme objectives not focusing on FLFP, with the studies measuring secondary impacts.<sup>70</sup> However, the BISP was successful in raising female participation in voting (or aspirations to do so), as captured by the indicator political participation, and in encouraging women to move freely in public spaces, as highlighted by the desirable outcome for female mobility. Similarly, the scholarships for girls in secondary school from the FSSSP led to improvements in employability and owning a bank account.

Findings generally show a clear trend that programmes taking clear, tangible step to promote gender equality in specific areas were more successful in improving gender outcomes. Meanwhile, other indicators which depend on social and cultural norms are more mixed and might take longer to see lasting changes, although studies that take a medium- or long-term perspective are more likely to find positive results, as observed in the case of the FSSSP (female empowerment) or the end-line results on female mobility for the BISP. Lastly, in the case of the FSSSP, strong impacts on education and empowerment for girls seem to have mitigated impacts on FLFP, although this was not an explicit objective of the programme.

69. Though increasing FLFP is not a primary objective of the BISP, this is a potential spillover effect. Please see Annex A for more details on programmes' intended objectives.

70. The programme-aggregated effect we assigned to the FSSSP followed the more recent study by Hahn et al. [2018]. Contrary to the findings in Shamsuddin [2015], they did not find any significant impact on FLFP.

## 7.2 Afghanistan

One of the aims of the **NSP** was to help foster democratic governance in rural villages through the creation of gender-balanced CDCs, which are the bodies responsible for selecting, designing and managing development projects. Given this background, the series of NSP impact evaluations sponsored by the World Bank investigated whether the programme had any effect on women's welfare and villagers' overall perceptions of the role of women (Beath, Christia and Enikolopov 2013b).<sup>71</sup>

The mid-line report indicated improvements in female mobility and FLFP. There was a 5 per cent increase in the number of women who had generated income during the year before the survey. However, except for a significant increase in mobility beyond the village, the final survey showed no overall impacts on the two indicators; thus, the authors interpreted the corresponding mid-line results as short-lived. Furthermore, apart from access to informal female counselling services—as CDCs provided a setting where women could meet freely—results for female empowerment were insignificant.<sup>72</sup> Moreover, the increase in income generated by women did not translate into an increase in reported decision-making power over this income (Beath et al. 2010; Beath, Christia and Enikolopov 2013a; 2013b).

Outcomes were more encouraging for social perceptions and norms.<sup>73</sup> Mid-line results showed desirable effects on the perceptions of women in local governance (measured by respondents preferring women to be involved in selecting village heads and/or as members of village councils). The final survey found not only that this improvement was maintained, but also that there were beneficial effects for all sub-indicators, except for perceptions and norms regarding girls' education. Finally, results for political participation were also relatively encouraging, as there were desirable effects in both mid-line and end-line results, as women helped to mediate disputes and were considered in aid allocation decisions (Beath et al. 2010; Beath, Christia and Enikolopov 2013b).

## 7.3 Bangladesh

Impacts on gender indicators were assessed in just one programme in our sample, the **FSSSP**. In a context where poorer households tend to prioritise the education of boys over girls, the main goal of the FSSSP was to promote female education by providing school stipends, free books and exam allowances for girls attending secondary education (Shamsuddin 2015). Shamsuddin (2015) and Hahn et al. (2018) investigated other potential effects of the FSSSP beyond the programme cycle, including female empowerment and FLFP, which are discussed in this subsection.<sup>74</sup>

Shamsuddin (2015) found that, on average, receiving the FSSSP stipend for the full five years of secondary education increased FLFP by 6.6 per cent, while receiving the stipend for less than five years increased it by only 2.2 per cent. In contrast, Hahn et al. (2018) found statistically insignificant impacts on FLFP. Yet Hahn et al. also claim that there is suggestive evidence that the FSSSP led to changes in employment characteristics (discussed in the section 'Impacts on the labour market'). Moreover, Hahn et al. (2019) observed that being enrolled in the FSSSP was associated with a higher probability of women having a bank account, which suggests participation in the labour market and greater independence.

Results also demonstrated that the FSSSP had a desirable impact on female empowerment—in this case, an index of indicators related to women's autonomy, assessed through decision-making in terms of: (i) the respondent's health

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71. NSP effects on girls' and women's health and education are presented in the respective sections.

72. The female empowerment aggregated indicator for Afghanistan comprises: exerts full or partial control over decisions pertaining to the sale or use of income generated by assets; outcomes on female socialisation; access to female counselling; and owns at least one type of asset.

73. The gendered social norms and attitudes aggregated indicators for Afghanistan are: social norms/attitudes towards political activity; social norms/attitudes towards work and society; social norms/attitudes towards girls' education; and social norms/attitudes towards local governance.

74. SESP effects on girls and women concerning wages, sectoral switch, educational attainment and health are presented in the respective sections.

care; (ii) large purchases by the household; and (iii) visits to family or relatives. However, the increase was significant only for the girls who received the stipend for all five years of secondary education (Hahn et al. 2018).

Results for the FSSSP also demonstrated desirable impacts on age at first marriage and use of contraception—further indicators of increased female empowerment. Eligible girls were more likely to get married later than ineligible girls. Also, the age gap between young women and their spouses tended to be smaller. As explained by the authors, this result is relevant, since gender inequality is often reinforced by females marrying very young. Concerning contraception, the increase in the use of any contraceptive method was not significant, but it is noteworthy that there was a small yet significant increase in use of condoms, male sterilisation, abstinence and withdrawal, in place of contraceptive pills and injections, for instance. This suggests that the FSSSP contributed to strengthen female bargaining power with respect to their husbands (Hahn et al. 2018).

## 7.4 India

Six studies were found that assessed gendered impacts of the **MGNREGA** (four) and the **NSAP's OAP** (two). Results across studies in terms of gender equality were positive overall, with four of the six studies finding desirable impacts at least among a subgroup of the population.

Focusing on the NSAP's OAP, Unnikrishnan and Sen (2020) explored the impact of having a household member of retirement age eligible for the programme on the likelihood of FLFP. They found a probability increase of 5.2 percentage points for women aged 20–50 years old, but only when the eligible beneficiary was female. The authors explain that the pension income enabled poor elderly women to retire or reduce LFP and, instead, provide further child-care support, thus allowing younger women normally responsible for childcare to engage in paid economic activities outside the household (mostly flexible and casual employment). This effect was stronger for urban women, and was particularly evident among the poorest income quintile, whereas there was no effect found for the richest 20 per cent of households. The authors also found a clear and strong negative impact of the NSAP's OAP on elderly beneficiaries' time spent working (a desirable outcome). However, findings for working-age adults were inconclusive, as no impact was recorded.

In the case of the **MGNREGA**, three of the four studies examined the impact of the programme on FLFP (Azam 2012; Sheahan et al. 2018; Zimmermann 2020), and the fourth examined the impact on female empowerment and social capital (Liu 2018). The studies range in scope: Azam (2012) and Zimmermann (2020) used nationally representative data, while Sheahan et al. (2018) and Liu (2018) based their research on data from the state of Andhra Pradesh.<sup>75</sup>

Both Azam (2012) and Sheehan et al. (2018) found a strong (desirable) gender dimension to MGNREGA impacts, with the increase in LFP being mainly driven by females. Azam (2012) found that the real wages of female casual workers increased by 8 per cent more in districts where the MGNREGA was implemented, compared to similar districts where the programme was not, while the increase for males was only 1 per cent. As a result, the author draws attention to the importance of the MGNREGA in reducing the gender pay gap in casual work in rural India. Meanwhile, Sheahan et al. (2018) did not find any evidence that the increase in FLFP led to an increase in household chores performed by children or youth of any gender in Andhra Pradesh (a potential and unintended negative consequence).

In the third study on the MGNREGA and FLFP, Zimmermann (2020) found no clear effects of the programme on female employment, although the author noted that this might be due to her analysis measuring only short-term welfare impacts. The outcomes are largely due to the MGNREGA's explicit objective of promoting women's participation, which was guaranteed in different ways. First, the wages paid by the programme are equal regardless

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<sup>75</sup> Sheahan et al. (2018) explain that in Andhra Pradesh the demand for the MGNREGA is high, and implementation is successful; as such, their findings may be relevant to identify good practices.

of the participant's gender, in a context where women are paid less than men. Also, the MGNREGA mandates that the workplace shall be within 5 km of the participant's residence, which may facilitate balancing participation with household tasks. Finally, MNREGA work sites must provide proper childcare (Azam 2012).

Liu (2018) examined the impacts of the programme on social capital—measured through women's self-reported level of trust in different social groups<sup>76</sup>—and female empowerment.<sup>77</sup> The author found that the MGNREGA led to greater female social capital one year after implementation, and to an increase in female empowerment two years after implementation in Andhra Pradesh. This result was largely expected, since social capital was based solely on female perception, while empowerment depends on interactions with relatives—for example, women making decisions in their lives, and whether they suffer from domestic violence (Liu 2018). The effects of the MGNREGA differed across female subgroups, as results for more marginalised groups tended to take longer to materialise. For instance, in the short term, improvements in social capital and empowerment were only statistically significant for non-poor women. The increased empowerment was equally insignificant for women from SC/STs in the short term (ibid.).

## 7.5 Pakistan

The **BISP** is the only programme evaluated for Pakistan in this category. Because the cash is paid to the family's female head—a married woman in possession of a Computerised National Identity Card (CNIC)—gendered impacts of the programme are particularly relevant. The series of evaluations carried out by Cheema et al. (2014; 2015) and Cheema, Hunt et al. (2016) presented findings related to four gender indicators:<sup>78</sup> female empowerment, FLFP, mobility and political participation.

Political participation in this context is assessed through voting. In all evaluation rounds, there was a desirable and significant effect. In the first follow-up, women were asked if they would vote, given the chance; in the second, if they had ever voted; and in the final evaluation, if they would vote in every local or national election. In all three rounds the increase in the proportion of women who answered 'yes' was associated with the BISP. In this case, the authors linked these results with the CNIC requirement to be enrolled in the programme, as it is necessary to have this document to vote (ibid.).

Female empowerment in the BISP evaluations is defined by the proxy 'access to money'. Although the cash transfer is paid to women, this does not necessarily mean that they have control over how it is spent. The effect was statistically insignificant in the first round, but desirable and significant in the second and final rounds, suggesting that women were gradually becoming able to manage the household's financial resources.<sup>79</sup> In the first and final rounds, women were asked if they could access certain amounts of money 'in an emergency'. At first, there was no evidence of impacts, not even for small amounts (e.g. PKR50). However, in the final evaluation, the authors found an increase in the proportion of women who could access PKR100, PKR200, PKR400 or PKR600. In the second round, women were asked if they could easily access certain amounts of money, and a positive impact of the BISP was found (ibid.).

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76. In Liu (2018), social capital is defined by women's self-reported level of trust in different social groups (same or different caste or religion from within or outside the village), in government officials and in the police, on a scale of 1–5. It is a main proxy of our aggregated indicator for gendered social perceptions and norms.

77. Liu (2018) defines female empowerment using self-reported indicators by women on: (i) whether money can be set aside for their own use; (ii) freedom to go to the market, clinic or community centre; (iii) freedom to visit friends or work in fields outside the village without asking permission from husbands or other males in the family; (iv) being treated with respect by other family members; and (v) being beaten or mistreated by husbands.

78. The BISP's potential effects on girls' and women's health and education are discussed in the respective subsections.

79. However, comparability among the results of the three rounds is somewhat limited, given that the question asked in the first and final rounds was different from the one asked in the second round.

To evaluate female mobility, in the first and final rounds, women were asked if they could freely visit different places alone. In the first round, there was no impact across places, except for a friend's house. However, in the final evaluation, the study found a strong and positive impact of the BISP when it came to visiting the market, health centres and religious centres (only 'friend's house' was not statistically significant). In the second round, the authors qualitatively assessed social norms regarding female mobility. In most treated communities researched, men seemed to be more accepting about women going out, which could potentially be due to women needing to go and collect the benefit. This series of evaluations did not find any evidence of BISP impacts on FLFP, although it was not a primary objective of the programme (ibid.).

Finally, Ambler and de Brauw (2017) evaluated gendered perceptions and norms, mobility and political participation using the same—first round—database employed by Cheema et al. (2014). Their results for mobility and political participation (voting) are in line with the results found by Cheema and co-authors. Additionally, they analysed male and female answers regarding whether they agree or not that: (i) only males should make important decisions; (ii) males should help with household chores; (iii) females should work; (iv) wives should express their opinions; (v) wives should tolerate being beaten; and (vi) it is better to send sons to school rather than daughters. Effects were insignificant for most categories, except for desirable findings for 'tolerance to express opinions' and 'tolerance for beating', but just for male respondents (ibid.).

## 8. FINDINGS AND POLICY RECOMMENDATIONS

### 8.1 Cross-cutting findings and policy recommendations

This section looks at cross-cutting findings based on the different categories of social assistance (cash transfer programmes, PWP, scholarships and SFPs), as well as results and findings that overlap the different types of interventions.

Before turning to these conclusions, we acknowledge both the contributions and limitations of the methodology adopted. The aim of the report is to provide a detailed yet accessible overview of socio-economic impacts of social assistance programmes, but some of the choices made (e.g. using 'desirable', 'undesirable' and 'insignificant' as possible categories) might limit certain nuances in interpretation, notably the magnitude of effects. Second, because all outcomes were assessed across programmes, the methodology gives significant weight to potential indirect or unintentional impacts, which might at times come at the expense of a more straightforward assessment of the original goals and effectiveness.<sup>80</sup> Original goals and impact magnitudes should thus be assessed carefully before focusing too much on (smaller) spillover effects. Lastly, apart from the MGNREGA and studies that assessed programme impacts over time (i.e. the BISP and the NSP), there is a general lack of continuity in programme evaluations, with few studies providing follow-up assessment. For policy analysis, evaluations with more detailed follow-ups would provide a valuable resource, although these studies can be very expensive and time-consuming. Beyond impact evaluation studies, better monitoring and evaluation of social protection programmes, including both quantitative and qualitative information, could make data collection significantly easier, and provide valuable insights into issues of programme effectiveness.

#### Cash transfer programmes

This review highlights the many different objectives of cash transfers—both conditional and unconditional—across South Asia. UCTs include child grants (**CG** in Nepal), transfers for poor households (**BISP** in Pakistan, **Samudhi** in Sri Lanka) and old-age pensions (**OAP** in India, **OAA** in Nepal).

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80. For example, the primary focus of the CG in Nepal, which targets children under the age of 5 years, is not to improve educational outcomes, an outcome that was assessed, with insignificant impacts found.



Given the different programme recipients and goals, the effects and impact channels vary accordingly. **Child grants** are better placed to address nutritional, educational and health outcomes for children, especially if complementary services or provisions are incorporated. Unfortunately, evidence of impacts of child grants is limited in South Asia, with limited findings available for Nepal's **CG**.

**UCTs** targeting poor households that are primarily aimed at reducing poverty can have many potential impacts on welfare, including positive changes in human capital, household allocations, attitudes to risk, and other mediating behaviours. Results for the **BISP** highlight the different ways in which cash transfers can impact household welfare and allocations.

**Old-age pensions** have a primary aim of reducing LFP among elderly people, which—beyond the income effect—can release working-age adults from child-care duties in multigenerational households, as found in the case of the **OAP** (especially among poorer households). Interestingly, similar effects in reducing LFP among elderly people were observed for recipient households of the **BISP**, showing that benefits can have indirect effects within households beyond their original objectives.

Conversely, **CCTs** have more explicit aims of improving educational or health outcomes. Findings in this report indicate that moderators such as quality infrastructure and dependable services are crucial in obtaining desirable outcomes and actual improvements in indicators (beyond usage). This was in part the case of the **MAPLM** in Bangladesh and **JSY** in India. Thus, it is crucial for policymakers to provide an appropriate supply of services to meet new programme-induced demands.

Furthermore, evidence from the **BISP** in Pakistan and the **CG** in Nepal suggests that **the regularity and size of cash transfers** are crucial to achieve desirable impacts. Hence, the value (adequacy) of cash transfers needs to be periodically re-assessed to maintain adequate real values. Irregular transfers might equally hinder the capacity of households to consistently plan expenditures on food, health services/items and education, as well as to save money or acquire assets.

- CCT and UCT programmes vary significantly by objective and target group. Impacts on individual household members can be determined by who receives the transfer, and by household composition, which can lead to changes to intra-household allocations and employment. For instance, old-age pensions can increase LFP for working-age adults in the household, as elderly household members take care of domestic chores instead.
- Large-scale social assistance interventions can greatly alter the demand for complementary social services, especially when interventions include either hard or soft conditionalities. To ensure that new, programme-induced demands are met, a corresponding investment in supply-side interventions (e.g. physical materials and buildings, and quality public health and education services) is often needed. Incentives for public servants to deliver support are often overlooked, yet crucial for programmes to prove effective, especially for educational and health outcomes.
- A consistent finding from the literature, including studies assessing the BISP and the CG, is that both regular delivery of transfers and consistent cash amounts are strongly correlated with successful programme impacts—especially with respect to food and other recurring expenditures. Ensuring that transfers are regular and predictable and, thus, that beneficiaries have clear expectations about transfer receipts enables households to allocate their time and resources better, which contributes to better impacts overall.



## School feeding programmes (SFPs)

When successfully implemented, SFPs show strong positive impacts on food adequacy for child recipients, leading to fewer cases of malnutrition, and potentially improving anthropometric indicators. Moreover, SFPs can potentially improve educational performance, particularly for children exposed to the programme for a longer period, suggesting a cumulative effect.

However, these programmes might come at a greater relative cost for poor households having to pay to send children to school, as in the case of the **MDM** (including materials, transportation, tuition etc.). To ensure that the well-being of children does not come at the expense of other household members, it is important to support poorer households to cover additional expenses. For instance, free public education and/or targeted transfers to poor households with children (e.g. child grants) can help attenuate this problem.

Furthermore, SFPs are unlikely to provide enough of a financial incentive to keep adolescents and older children from poorer backgrounds in school, as the opportunity cost for child labour is greater among older children. Hence, other initiatives should complement SFPs, such as educational fee waivers or cash transfers—as well as quality education—to keep children in school.

- When successfully implemented, SFPs show strong positive impacts on food adequacy for child recipients. SFPs also have the potential to improve educational performance, particularly for children exposed to the programme for a longer period, suggesting a cumulative effect.
- However, these programmes might come at a cost for poorer and more vulnerable households having to pay to send children to school (i.e. materials, transportation, tuition etc.), as in the case of the MDM. Furthermore, SFPs are unlikely to provide enough of a financial incentive to keep adolescents and older children from poorer backgrounds in school. Social assistance initiatives could aim to promote educational outcomes for older children from more disadvantaged backgrounds, such as free public education and/or targeted transfers to poor households with children (e.g. child grants).

## Scholarships<sup>81</sup>

The evaluations studied highlight the importance of transfer values and prolonged exposure in achieving positive impacts. As with SFPs, scholarships that are conditional on sending children to school—especially older children and adolescents—may come at the expense of lower income for families due to the potential for child labour. In Nepal, higher-value scholarships were associated with a reduction in working hours (but not household chores) for girls—an impact especially important for high-value scholarships aiming to keep Nepalese children above 14 (the legal working age) in school. Evidence for the **WeT** in Pakistan also found a reduction in child labour among boys.

The case of Bangladesh illustrates the importance of long-term access to education, as there was an undesirable impact on boys' grade progression (especially among poorer boys) when they were not eligible for secondary education scholarships.

Moreover, desirable impacts of the **FSSSP** on years of education, LFP and type of occupation were consistently better for girls who were eligible for the stipend for longer. An increase in female autonomy was also observed among those who were eligible for the FSSSP for the full five years of secondary education. However, the increase in female labour

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81. The scholarships within out sample are classified as CCTs and educational fee waivers. Besides school enrolment, conditionalities may also encompass minimum attendance and grades.

supply was not accompanied by an equivalent increase in labour demand, which may have caused a decrease in women's wages. Ensuring that decent work opportunities for women accompany investments in human capital can help mitigate negative impacts on labour market outcomes.

- Scholarships (or free education) should be promoted throughout the education cycle, especially for children from poorer and more vulnerable backgrounds, who may face greater barriers to perform well and progress.
- Scholarships and their values should be designed to disincentivise child labour. Targeting schemes at children more likely to drop out can help avoid losses to human capital, while communication strategies and information on human capital formation can also contribute.
- Scholarships should be accompanied by compatible labour market policies to ensure that there will be enough positions for higher-qualified graduates, accompanied by higher salaries.
- Beyond immediate effects, scholarships can increase human capital for women, leading to greater empowerment and better living conditions for their children. This result is found most clearly for the FSSSP in Bangladesh.

### Public works programmes (PWPs)

PWPs can have significant impacts on FLFP and local labour market dynamics. Positive impacts on wages and employment for women are mainly achieved through programmes that provide equal pay to men and women while offering care services for small children (as in the case of **MGNREGA** districts). Moreover, local increases in wages (including in the private sector) can be explained by higher reservation wages for casual labour in rural areas, as observed in some districts after the introduction of the MGNREGA.

Results from the **EGPP** in Bangladesh and the MGNREGA in India suggest that participation in PWPs is highly seasonal or related to shocks. By offering a steady income option over the year and in the face of shocks through demand-based opportunities, PWPs can provide an 'insurance effect' for vulnerable households. In times of adverse shocks, PWPs can thus provide a safety net and substitute for borrowing to overcome income volatility. Beyond smoothing consumption over the year, these programmes can also incentivise a transition to higher-yielding livelihood strategies that would be too risky to pursue without the programme to fall back on.

Seasonality and substitution effects of PWPs are also important considerations in programme design, to ensure that short-term and seasonal security from PWPs does not come at the expense of a lasting exit from economic activity in the private sector, although there is no evidence suggesting this occurs in the case of the MGNREGA.

Despite positive impacts on local outcomes, PWPs potentially contribute to negative spillover effects on child-related outcomes, including child labour and educational outcomes, especially among older children and adolescents. This result—with some evidence found in the case of the MGNREGA—is explained by older children taking up casual private-sector work (especially boys) and household chores (girls) at the expense of greater time spent in education. Nevertheless, evidence from Andhra Pradesh—a state with better programme implementation—finds no such effect.

- PWPs that provide equal pay and complementary services for women and mothers can significantly reduce gender pay gaps. Evidence from India suggests that these schemes are largely pro-poor.
- Large-scale PWPs can have significant impacts on labour market dynamics at the local (meso) level. Results from the MGNREGA indicate that private agricultural wages increased in programme districts, providing support not only to the direct beneficiaries but also to the wider community.

- PWPs can act as safety nets, smoothing out seasonal and shock-related income fluctuations.
- By smoothing consumption over time and improving risk management, PWPs may also provide options for certain beneficiaries to pursue riskier, but higher-yielding livelihood strategies.
- PWPs potentially contribute to negative spillover effects on child-related outcomes, especially among older children and adolescents. Evidence from India suggests that these effects are likely determined by the quality of programme implementation.

## Impacts on gender and children

The evidence consistently finds an empowering effect of social assistance programmes on women across initiatives targeting their productive inclusion, education or agency in the household. These effects often, but not always, have positive implications for the well-being of children, especially when the programmes do not create excessive burdens for female household members. In this sense, programmes targeting pregnant and lactating women (**AP**, **JSY**, **MAPLM** and **Thripasha**) are relevant, since they provide health and nutrition support not only to those women but also to their children. For a detailed analysis of gender dimensions in the design of social protection programmes in South Asia, see Tebaldi and Bilo (2019).

However, in the future, programmes targeting women (particularly mothers) and children should seek to balance short-term objectives (e.g. childcare and health) with long-term gender equality objectives. Programmes based on the assumption that women are primary caregivers for children can reinforce gender inequality and, therefore, should be complemented by other initiatives to make this balance (e.g. including communication strategies involving fathers to participate in nutrition workshops). Bangladesh's **FSSSP** provides a positive example, as the programme contributed to an increase in the human capital of female participants, which translated into better outcomes for child health.

Findings from the literature suggest that programmes, even those not focused on females or children, can often increase their efficiency by carefully deliberating child- and gender-sensitive impacts. Complementary services or Cash Plus initiatives that target gender dimensions (e.g. childcare, maternal health, and the vulnerabilities faced by widowhood and single parents) can help attenuate undesired consequences of social protection policies. In some cases, such as the **MGNREGA** or the **NSAP's OAP**, impact evaluations found larger effects for female beneficiaries, often because the programme addressed some of the contextual constraints and inequalities (**MGNREGA**) or allowed families to reallocate intra-household time use (**NSAP's OAP**).

Moreover, gender-sensitive design can also contribute to desirable impacts on women's agency. Design features such as transferring the cash transfer to the female household head (**BISP**) or demanding female participation in the CDCs (**NSP**) can, gradually, shape social norms, which will ultimately translate into structural societal changes and outcomes.

Lastly, heterogeneous findings for girls and boys often reflect different realities and expectations based on gender; consequently, social assistance policy should take into consideration the different needs and potential programme impacts. This relates, for instance, to trade-offs between further educational attainment and household work (generally for girls and female adolescents) or pursuing work opportunities outside the household (especially for boys and male adolescents), as illustrated in the cases of the **Nepalese scholarships** and **WeT**.

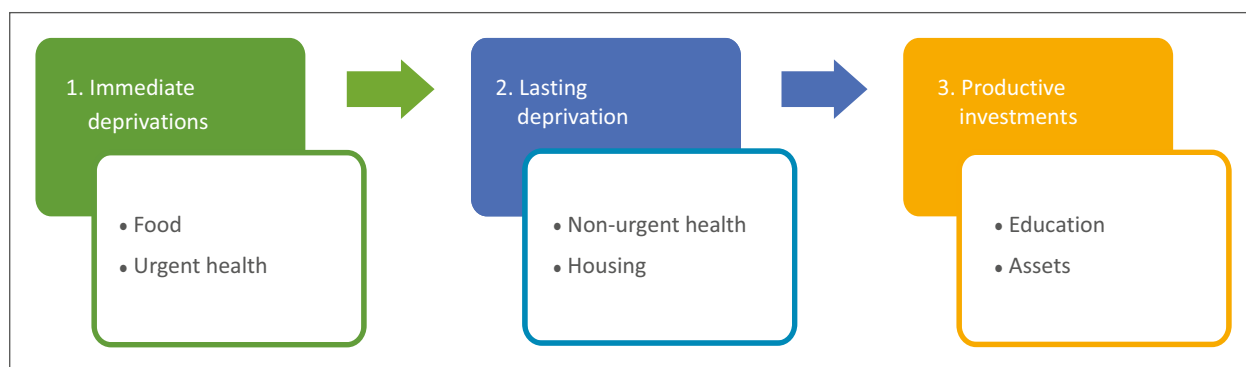
- Programmes targeting mothers and children should seek to balance immediate objectives with gender equality concerns. This could be done by seeking greater male and community involvement in social assistance programmes.
- Ensuring gender is well conceptualised in the design of the programmes has a greater potential to impact gender outcomes. Cash transfers targeting female household heads and/or elderly women can improve their agency over household budgets and use of time and resources.

- Social protection programmes should consider gender- and child-sensitive design features to increase participation and limit negative external impacts on children. Promotive social protection, if well designed, can have a concrete impact on reducing the gender wage gap.

## Expenditures over time

For programmes with cash components, results from impact evaluations hint at a certain pattern concerning the use of money and the poverty status of the beneficiary. Based on evidence from the **EGPP** in Bangladesh and the **BISP** in Pakistan, there are signs of an order of urgency in the use of funds, with **food being the most essential human need for survival**. After this, beneficiaries invest in **health-related expenses and housing, which are important for lasting and continued survival**. Once these basic needs are covered, benefits tend to be allocated to other categories of expenditure, including **education**, and, finally, **invested in assets**.

**Figure 16.** Order of urgency of social assistance expenditure



Therefore, asset ownership is likely an indicator that gradually exhibits better outcomes as time passes, as evidenced by the **MGNREGA** in India and the **BISP** in Pakistan. This pattern highlights a crucial linkage between consumption-based spending in the short term that can eventually transition towards investment in productive capital to spur long-term economic impacts. This assumption holds in the case of the **MGNREGA** (built over time and only after more urgent needs are satisfied) but is less clear in the case of the **BISP** (whose transfers were not received regularly). Observations for the **EGPP** note that it might take some time until productive investments translate into improvements in living standards (e.g. consumption levels). Conversely, consumption or income effects are more likely to disappear over time if they are not accompanied by productive investments, highlighting a need for evaluations that cover both the short and the long term.

- Cash—as opposed to in-kind—transfers provide greater flexibility for households to allocate money to pressing or specific needs.
- Patterns concerning the use of money and the poverty status of beneficiaries can be framed within an order of urgency framework, moving from (basic) food needs towards investments in assets.
- Given consumption priorities among beneficiaries with credit constraints, asset ownership is more likely to be observed as time passes. Investments in productive assets are more likely to lead to continued income effects after the programme ends.

## Variations in governance and implementation

Studies that examine large-scale programmes across regions and different implementation bodies show that there can be significant disparities in how programmes are managed and executed. In the present study, this applies most clearly to programmes from India, such as the MGNREGA and JSY, where states are responsible for implementing national schemes, with occasionally considerable variations in terms of effectiveness.

Ensuring harmonisation of programme delivery across geographic areas and implementing authorities can help by providing best practices and lessons learned from top performers, and adapting design and implementation features at local levels.

- Top performers can offer best practices on how to foster nationwide delivery quality, and on how to successfully adapt general implementation guidelines at the local level.

## 8.2 Programme-specific policy recommendations

### 8.2.1 Afghanistan

#### National Solidarity Programme (NSP)/Citizens' Charter (CCAP)<sup>82</sup>

- Infrastructure projects can be adapted to, and take into greater consideration, local necessities and development processes to create lasting impacts on poverty alleviation.
- Further the provision of vocational training alongside projects and the training of CDC members.
- CDC membership has the potential to be an educational tool and serve to empower disadvantaged groups. It could also create positive spillovers through improvements in literacy and increased mobility of CDC members (especially for women).
- Greater engagement of women in CDCs has a 'role model' effect, influencing the way women are perceived in society. However, for changes in perceptions to lead to sustainable changes in actual outcomes, more time, effort and continued promotion of autonomy and rights for women—involving women, men and communities—are required within the household and in the community.
- Evidence from the NSP shows a limited impact on food security or increased food expenditure. In line with our proposed order of urgency, it remains important to promote the CCAP's food-sensitive component (grain bank) for the poorest households.

### 8.2.2 Bangladesh

#### Employment Generation Programme for the Poorest (EGPP)

- Income from the EGPP allows beneficiaries to avoid taking out loans in case of shocks. This finding suggests that the programme offers an insurance mechanism for households to cope with shocks.

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82. We realise that some of our policy recommendations, commendably, have already been picked up with the implementation of the CCAP. It will, therefore, be interesting to see a similarly rigorous impact evaluation of the CCAP in the future as was done for the NSP.

- EGPP participation can be made more complementary with other work opportunities through flexible work (time) arrangements, while safeguarding the gender-sensitivity of programme participation—for instance, through complementary childcare during working hours. In both cases, MGNREGA frameworks in Andhra Pradesh (India) might serve as an example.

### Female Secondary School Stipend Programme (FSSSP)/Secondary Education Stipend Programme (SESP)

- Stipends provided to beneficiaries throughout secondary education (five years) showed greater impacts overall. Improvements in female empowerment seem more likely to require long-term interventions, given the stronger outcomes for the five-year intervention compared to the two-year intervention.
- Improving education is also an effective way to address sexual and reproductive choices by leading to reduced child marriage (which, in turn, leads to school drop-out and early pregnancies). This chain of results can improve female empowerment and agency within the household. Evidence shows that this effect was driven through actual improvements in human capital.
- Improved educational outcomes are also associated with positive spillovers to the education of younger siblings, as well as anthropometric measures among the children of beneficiaries. These findings indicate virtuous cycles in terms of education and health.
- Increased educational attainment does not necessarily translate into the desired labour market outcomes (e.g. highly skilled jobs and higher salaries). Therefore, greater emphasis should be placed on supply-side and active labour market policies that can lead to good employment opportunities.

### Maternity Allowance for Poor and Lactating Mothers (MAPLM)

- Results show a positive impact on ANC and PNC, but no impact on institutional delivery rates—most likely explained by predominant cultural practices for deliveries in rural Bangladesh. Poor service quality may also prevent women from delivering at health facilities. Improvements in delivery sanitation and safety are crucial, as delivery arguably represents the most dangerous part of pregnancy and very early childhood. Changes in cultural norms and improvements in the quality of services are important moderating factors, which could be improved through behavioural incentives, including improved communication strategies and supply-side improvements (quality and reliability of services).
- While the programme finds positive impacts among food indicators, they do not translate into health and anthropometric improvements. This suggests that there are moderating factors that need to be addressed first, including better WASH facilities, access to health facilities, and both greater quality and reliability of the public health system in comparison to private clinics. In this regard, deeper analysis is necessary concerning the constraints hindering the transition from food provision to better health and anthropometric outcomes.

### 8.2.3 India

#### Janani Suraksha Yojana (JSY)

- Aggregated results showed desirable impacts on ANC, PNC, qualified birth assistance, foetus and newborn mortality and child health, whereas disaggregated results showed heterogeneities in impacts. Programme efficiencies can be achieved by standardising design features, improving the supply of health care and improving financial incentives to ASHAs.
- Limited impact on PNC seems to be explained in part by insufficient financial incentives to ASHAs (who refer pregnant women to health and delivery care) to follow up deliveries. Moreover, since rural ASHAs receive more money than urban ASHAs, this may lead to improvements being limited to rural beneficiaries. Hence, the literature suggests that the incentive structure for ASHAs should be reconsidered to guarantee better overall health services.
- Improvements in ANC and qualified birth assistance were not always accompanied by proportional reductions in perinatal and neonatal mortality rates, suggesting that health facilities may be unable to cope with increased demand for health care. Furthermore, adverse spillovers on vaccination rates suggest that JSY led to a diversion of resources from other areas of care. This indicates the necessity to strengthen health infrastructure capabilities—especially in HF (i.e. underperforming) states—and consider complementary support to address the health care system's limited capacity when devising programmes that stimulate demand for public services.
- Requiring poor women to present a BPL card as proof of eligibility may prevent them from accessing the programme, since the correlation between owning a BPL card and current wealth/poverty is not very strong. This result suggests that complementary initiatives to support women to acquire a BPL card (e.g. joint campaigns that enable registering for the programme and for the card simultaneously) could be considered.

#### Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)

- The MGNREGA boasts the most comprehensive evidence basis in our sample, reflecting its broad prevalence in the academic impact evaluation literature.
- As the programme provides equal pay for men and women, this has led to substantial improvement in FLFP and wages. MGNREGA districts show increases in female wages, which contribute to a reduction in the gender pay gap, especially in agriculture. These changes are, moreover, found to have a progressive distributional impact (i.e. stronger impact among lower-income households). This result suggests that the MGNREGA functions as a gender inequality correction, rather than a marked distortion.
- Impacts are strongest on the most disadvantaged groups (women and SCs/STs). However, effects on marginalised groups might take longer to manifest, especially regarding female empowerment among poor women and women belonging to SCs/STs.
- In Andhra Pradesh, positive impacts were obtained for food security, but only when the participant was female, supporting the relevance of promoting women's participation.
- The uptake and impact of the scheme vary by season. Evidence points to the scheme being most effective during the agricultural off-season, when it works to smoothen out fluctuations in employment opportunities. However, participation must be reliable and repeated to ensure sustainable desirable impacts on food

consumption and diversity. Furthermore, the scheme can work as a safety net in the face of adverse shocks, incentivising households to pursue higher-yielding livelihood strategies.

- The MGNREGA can increase its effects on sustainable improvements in economic growth by safeguarding the implementation of needs-based, quality infrastructure projects constructed by programme participants.
- Implementation quality varies substantially between ‘star performers’ (states that record strong desirable impacts of MGNREGA) and others with reports of poorer implementation quality and likely worse outcomes. Studies analysing only star performers tend to find better results than nationally representative studies.
- Flexible work arrangements ease access for female participants and avoid a net reduction in labour market participation in the long term by not crowding out other work opportunities. Furthermore, flexible arrangements can also help avoid adverse impacts on pregnancy-related and child health outcomes, as participation in the programme crowds out health inputs due to the time-consuming nature of health appointments and travelling to health facilities.
- Following on from the previous point, there is evidence of negative spillovers of the scheme on child-related outcomes, such as child labour, school attendance and educational performance, mainly among older children and adolescents. As adults are busier working under the programme, adolescents might be more likely to take on private-sector jobs and household chores at the expense of greater time spent in education. In Andhra Pradesh, however, where gender-sensitive features are functional (e.g. flexible work arrangements, proximity of home and child-care facilities), those results were not verified, highlighting the need to improve overall implementation.

### Mid-Day Meal (MDM) scheme

- In Madhya Pradesh, the MDM led to better nutritional impacts for the targeted children than a predecessor take-home grains programme, (possibly due to household redistribution for the take-home programme). The finding suggests that SFPs are more likely to be effective at reaching children than other types of food transfers.
- Results show desirable and significant impacts on school attendance, but only among girls in the first grade, which could be due to girls being provided with fewer nutrients within households than boys. Therefore, SFPs may be a way to address gender inequalities.
- Substantial desirable impacts on grades occurred from the third year of exposure, suggesting the need for extended exposure for a significant and lasting impact on learning.

### Targeted Public Distribution System (TPDS)

- Impact evaluations confirm the programme's potential to improve not only food security but also monetary poverty. In districts where wheat and rice (the two grains subsidised by the programme) are staple foods, non-food expenditure increased. Conversely, where coarse grains (which are cheaper and an inferior source of nutrition) are staple foods, consumption moved towards the subsidised grains, which are nutritionally superior. This result may suggest the need to adapt programme design features according to district characteristics.
- One study analysing impacts on nutrition found no significant impact of the programme from data between 1993 and 2005. More studies are needed to reach more definitive conclusions, considering the limited evidence on the impact of the TPDS on nutrition.



## National Social Assistance Programme (Old Age Pension component) (NSAP's OAP)

- Desirable consumption and financial impacts were more pronounced (asset holdings) or just significant (expenditure on food, education and health) when the beneficiary was female. This suggests that the programme can help strengthen women's decision-making and purchasing power.
- Income from the OAP allows pensioners to retire and spend more time on childcare in multigenerational households. This might encourage LFP of other female household members of prime working age, showing another indirect effect contributing to gender equality. However, the impact was significant only when the recipient was a female pensioner, suggesting gender disparities that need to be addressed—i.e. the role of elderly women as caregivers.
- The change in eligibility criteria to only include BPL cardholders and to reduce the eligibility age might have increased the inclusion of non-poor households, decreasing programme effectiveness to address poverty.

## 8.2.4 Nepal

### Child Grant (CG)

- At the time of evaluation, the transfer amount was inadequate (too low), delivered too irregularly, and often not paid in full. This seriously limited the capacity of the programme to foster sustainable change, especially with respect to recurring costs, such as food expenses or larger investments (e.g. asset purchases or lump sum education costs).
- The CG focuses on children of pre-school age but does not seem to create positive spillovers to the education of older siblings. Despite free public education, additional costs associated with sending children to school (such as clothes, books or other supplies) might be prohibitive for the families of certain children. To improve school enrolment, the full cost of sending children to school should be considered.
- School enrolment might also be hindered by supply-side constraints, most notably requiring an adequate density of schools to avoid excessively long distances to the next school.
- In an effort to fill a gap in empirical evidence across a larger number of districts, UNICEF Nepal is commissioning a comprehensive mixed-methods quasi-experimental impact evaluation for 2021 and 2022. Preliminary findings suggest the following:
  - Nutritional impacts could be boosted if pregnant women were also covered, thus addressing stunting originating in utero.
  - The programme can also be used as a tool for female empowerment, as cash benefits may increase the agency of female beneficiaries, paving the way for more child-sensitive household expenditure.<sup>83</sup> Thus, it would be beneficial to complement the programme with further initiatives to empower women (e.g. strengthen access to basic services), augmenting their bargaining power within the household.

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83. Global evidence shows, in general, that women tend to prioritise child-sensitive expenditure when compared to men (UNICEF Nepal and Economic Policy Research Institute 2020).

- It is important to invest in infrastructure, making health care more accessible and increasing demand for health services, especially by investing in roads and transportation and by building more health facilities (UNICEF Nepal and Economic Policy Research Institute 2020).

## Scholarships

- Evidence indicates that girls benefit from reductions in child labour, with the effect on boys less certain. Furthermore, impacts tend to be largest among children above the minimum age of legal employment.
- Scholarships only marginally reduce the time girls spend on household chores, reflecting both the difficulty in changing social norms pertaining to gendered work in the short term, and, perhaps more generally, the limited impact of cash grants (in this case scholarships) on total work in the household (chores). In response, behavioural interventions aimed at influencing social norms and perceptions to accompany the programme might prove beneficial.
- The prevalent method of beneficiary selection based on enrolment lists and/or by the head teacher acts as an implicit conditionality for an otherwise unconditional programme. This potentially discriminates against the poorest or most vulnerable children, who might enrol late or not at all.
- Improvements in the time spent on child labour seem to reflect an income effect. This suggests that financial constraints, as opposed to opportunity costs of obtaining education, necessitate a reliance on child labour. Furthermore, it would be interesting to explore the possibility of a behavioural response driving the results—for example, due to the transfer being implicitly labelled.<sup>84</sup>
- The amount of the scholarship is crucial to provide a sufficiently high income effect to influence child labour rates. Scholarship transfers below 3 per cent of the poverty line have a very limited impact on child poverty.

## Aama Programme (AP)

- Guaranteed receipt of the benefit might not suffice to induce behavioural changes. It is also important to build trust among potential beneficiaries, especially regarding the reliability of the transfer. Putting potential beneficiaries in contact with former beneficiaries can be promising—for example, through advertisements and an extra effort to provide comprehensive coverage—to reap the benefits of mouth-to-mouth communication.

## Old Age Allowance (OAA)

- The money given to elderly household members was found to have significant positive spillovers on child survival rates. However, it did not influence children's health beyond this indicator. Notably, effects did not vary based on the gender of the recipient.

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84. Such UCTs that nudge beneficiaries towards behaviour change (as opposed to imposing explicit conditions) have been found to be effective in the case of the Tayssir UCT in Morocco, which seeks to improve education outcomes (Benhassine et al. 2015).

### 8.2.5 Pakistan

#### Benazir Income Support Programme (BISP)

- Evidence suggests that the BISP only affects retirement among people outside prime working age or in ill-health. This finding shows that the programme has a limited impact on labour market decisions—time spent working and early retirement—for those still of working age and in good health.
- The BISP successfully reduces poverty on the extensive and intensive margins; however, effects disappear after three years. Meanwhile, asset accumulation over time reflects the satisfaction of more essential needs first and, subsequently, investments in assets that might have long-term impacts.
- The absence of changes in food expenditure should be analysed in more detail. It might stem from the irregularity with which the transfer is effectively delivered in some cases, but could also reflect a limitation of the identification strategy used in the evaluation series.
- Favourable gender impacts might support the design feature of paying the transfer to female household heads. Furthermore, evidence indicates effects on male perceptions of women. However, the registration requirement might prevent the BISP from reaching the most disempowered or poorest women.
- The BISP was found to reduce child labour for boys only, highlighting the limited impact in meaningfully affecting time spent on household chores by girls. As with the Nepalese scholarships initiative, policies that promote changes in social norms and related behavioural interventions can make a difference.
- The BISP was found to have a positive impact on anthropometric indicators for girls only, which deserves further analysis. Perhaps this suggests that the BISP works against systematic preferential treatment given to boys in the face of resource scarcity. More research would be needed to both confirm this finding and determine causality.
- Supply-side shortages might have prevented an impact of the BISP on school enrolment and education expenditure. Most notably, evaluations suggest that a lack of schools, qualified teachers and adequate WASH facilities are obstacles that require increased public spending. Furthermore, cost of enrolment was identified as the most common factor preventing school enrolment.

#### Waseela-e-Taleem (WeT) (BISP component)

- The importance of fathers' education on children's enrolment suggests that there are intergenerational dynamics at work in determining who enrolls in education, a factor that goes beyond lowering financial constraints. Thus, special emphasis should be placed on reaching children from families with lower educational attainment and vulnerable backgrounds. This could be done through stronger communication strategies aiming to change norms that prevail among certain subgroups.

### 8.2.6 Sri Lanka

#### Samurdhi

- Anthropometric indicators show heterogeneous results for different age groups, with positive effects on height for younger children, and on weight for older children. Addressing the needs of specific age groups might improve programme efficiency, although both more and more recent evidence is needed.

## Thriposha

- While some results show desirable effects on the micronutrient status of children, anthropometric impacts of the programme are generally weak despite programme goals. The findings suggest that evaluations aimed at both programme administrators and users are needed to understand how *Thriposha* can have a lasting impact on children's health.

## General

- With only a couple of rigorous studies found assessing the impacts of *Samurdhi* and *Thriposha*, there is a significant knowledge gap on the effectiveness of these programmes. This highlights the need for more rigorous evidence on the impacts of social assistance programmes in Sri Lanka.

# 9. CONCLUDING REMARKS

This report is the last in the series of comparative papers on social protection in South Asia from the partnership between the International Policy Centre for Inclusive Growth (IPC-IG) and the UNICEF Regional Office for South Asia. The aim has been to summarise evidence on social assistance in the region, with a special emphasis on socio-economic impacts. To do so, a sample of 63 rigorous impact evaluation studies—using quasi-experimental estimation strategies—was assembled for 17 different flagship social assistance programmes identified in the overview study. The types of interventions vary considerably and include: cash-for-work programmes (or PWPs); CCTs and UCTs; scholarships for students; in-kind transfers (mainly food); and SFPs. Countries covered are Afghanistan, Bangladesh, India, Nepal, Pakistan and Sri Lanka.

The study also encompasses a wide set of socio-economic outcomes, measured at the beneficiary and/or household level: 126 disaggregated outcome variables (or proxies) identified in the literature were divided into 31 indicators that were then grouped into 5 categories: poverty and finances, labour market, education, health and gender. By focusing on a wide range of outcomes, the review assesses more than just main programme objectives, but also records potential indirect (spillover) impacts either within households or at the meso level, which can be either desirable or undesirable. Results are presented at different levels of aggregation: study-specific findings, evidence aggregated at the programme level, and country and regional results.

This meta-review brings together a wide range of studies that vary in terms of identification strategies, sample sizes, programme scope, outcomes measured, quality of data, and degree (and quality) of programme implementation. Moreover, except for very few programmes extensively covered (e.g. the MGNREGA) or studies that include multiple survey rounds (BISP and NSP), the evidence from the impact evaluation literature in South Asia is highly fragmented. Therefore, new and updated evaluations of programme effects are needed, including studies with follow-up survey rounds to evaluate impacts over time (even though such studies can prove to be complex, expensive and time-consuming). Beyond impact evaluation studies, better and systematised monitoring and evaluation of social assistance programmes—both quantitative and qualitative information—can make data collection easier, provide valuable insight into issues of effectiveness, and account for differences across space and time for specific programmes.

In the meantime, this report offers a comprehensive overview of the evidence on the impact evaluation literature for flagship social protection programmes in the region that can be used by policymakers, practitioners and researchers alike. Summary tables in the annexes present study- and programme-aggregated findings, which assess results found across outcomes and countries, and provide an overview of evidence gaps. Another contribution of the study is its capacity to inform policymakers about policies and evidence of practices for programmes in comparable contexts—in accordance with life-cycle and rights-based approaches to social protection—to help generate even more effective, efficient and inclusive policies for the future.

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# ANNEXES

## A. Summary of social assistance programmes in the study

Country	Programme	Intended objective	Category	Target groups
Afghanistan	National Solidarity Programme (NSP) [predecessor of the Citizens' Charter Afghanistan Project—CCAP]	Extend the administrative reach of the State, build representative institutions for local governance, and deliver critical services to the rural population [Beath et al. 2013]	PWP and CfW	PHHs
Bangladesh	Employment Generation Programme for the Poorest (EGPP)	Provide short-term employment to people who are seasonally unemployed, while also developing community assets and rural infrastructure	PWP and CfW	PHHs, WAG, W
	Maternity Allowance for Poor Lactating Mothers (MAPLM)	Improve maternal and newborn health and nutrition	UCT, SCS, PT	PHHs and P&LM
	Primary Education Stipend Programme (PESP)	Increase enrolment and attendance, and reduce drop-out rates of primary school students	CCT	C
	Female Secondary School Stipend Programme (FSSSP) [predecessor of the Secondary Education Stipend Programme—SESP]	Increase female enrolment and retention rates in secondary school, enhance female employment opportunities, and delay the age at which girls marry [Hahn et al. 2018]	CCT and EFW	PHHs, C, W
India	Janani Suraksha Yojana (JSY)	Reduce maternal and neonatal mortality by promoting institutional deliveries among poor pregnant women	CCT	PHHs, P&LM, SCs/STs
	Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)	Reduce rural poverty and create durable public assets	PWP or CfW	WAG (priority to SCs/STs, W/SW, PwD and people living with HIV/AIDS)
	Mid-Day Meal (MDM)	Enhance school enrolment and attendance, and simultaneously improve nutrition among children	SFP	C
	National Social Assistance Programme (NSAP) (Old Age Pension (OAP) component)	Ensure a minimum national standard for social assistance and promote the rights to work, to education and to public assistance	UCT and UIKT	E, SCs/STs, PwD, W/SW, PHHs
	Target Public Distribution System (TPDS)	Provide food security to poor and vulnerable people	FS and IPBSF	PHHs and SCs/STs
Nepal	Aama Programme (AP)/Safe Motherhood Programme	Increase the proportion of institutional deliveries, thereby improving maternal and child health	CCT and HFW	P&LM
	Child Grant (CG)	Assist groups considered socially and/or economically vulnerable, and particularly improve nutritional outcomes for children	UCT	C and SCs/STs
	Old Age Allowance (OAA) or Senior Citizen's Allowance	Assist groups considered socially and/or economically vulnerable	UCT	E (priority to SCs/STs)
	Scholarships	Promote access to education	CCT and EFW	C, SCs/STs, PwD, W
Pakistan	Benazir Income Support Programme (BISP), including the Waseela-e-Taleem (WeT) component	Protect poor people from the adverse impacts of the food, fuel and financial crises (short-term goal) and provide a minimum income support package to chronically poor people and those who are more likely to be affected negatively by future economic shocks (long-term goal)	UCT and CCT (WeT)	PHHs and C (WeT)
Sri Lanka	Samurdhi	Alleviate poverty	UCT	PHHs and P&LM
	Thripasha	Improve the nutrition status of children and pregnant and lactating women	UIKT	Undernourished C and P&LM

*Note:* This summary table is based on Arruda et al. (2020) and the [SocialProtection.org](https://socialprotection.org) database, except for the NSP and FSSSP. For detailed programme profiles and definitions of programme categories, please consult these sources.

*Abbreviations:* PPW: public work programme; CfW: cash for work; UCT: unconditional cash transfer; SCS: social care service; PT: professional training; CCT: conditional cash transfer; EFW: educational fee waiver; SFP: school feeding programme; UIKT: unconditional in-kind transfer; FS: food subsidy; IPBSF: institutional purchase that can benefit smallholder farms; HFW: health fee waiver; PHHs: poor households; WAG: working-age group; P&LM: pregnant and lactating mothers; E: elderly people; C: children; W: women; SCs/STs: scheduled castes and tribes; PwD: people with disabilities; W/SW: women and single women.

## B. Programme selection

Overview	
Total number of programmes (original sample): 51 Selected: 17	Number of programmes selected for: Afghanistan: 1 Bangladesh: 4 Bhutan: 0 India: 4 Maldives: 0 Nepal: 4 Pakistan: 1 Sri Lanka: 2
Programme	Was it selected? If not, why?
<b>Afghanistan</b>	
National Solidarity Programme (NSP) (predecessor of the Citizens' Charter Afghanistan Project (CCAP)	Yes.
Eshteghal Zaiee – Karmondana (EZ-Kar)	No. Nothing specific found.
Martyrs and Disabled Pension Programme (MDPP)	No. Nothing specific found.
National Rural Access Programme (NRAP)	No. Nothing specific found.
<b>Bangladesh</b>	
Allowance for Financially Insolvent Persons with Disabilities (AFIPWD)	No. Nothing specific found.
Employment Generation Programme for the Poorest (EGPP)	Yes.
Husband-Deserted, Widowed and Destitute Women Allowance (HWDWA)	No. Nothing specific found.
Maternity Allowance for Poor Lactating Mothers (MAPLM)	Yes.
Old-Age Allowance Programme	No. Bibliography found is unsuitable.
Public Food Distribution System (PFDS)	No. Bibliography found is unsuitable.
School Feeding Programme in the Poverty-Prone Areas (SFP-PA)	No. Bibliography found is unsuitable.
Primary Education Stipend Programme (PESP)	Yes.
Female Secondary School Stipend Programme (FSSSP) (predecessor of the Secondary Education Stipend Programme—SESP)	Yes.
Higher Secondary Stipend Programme (HSSP)	No. Bibliography found is unsuitable.
Secondary Education Sector Investment Programme (SESIP)	No. Nothing specific found.
<b>Bhutan</b>	
Rural Economy Advancement Programme (REAP)	No. Nothing specific found.
School Feeding Programme (SFP)	No. Bibliography found is unsuitable.
<b>India</b>	
Targeted Public Distribution System (TPDS)	Yes.
Janani Suraksha Yojana (JSY)	Yes.
Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA)	Yes.
Mid-Day Meal (MDM)	Yes.
National Health Protection Scheme (NHPS)	No. Bibliography found is unsuitable.
National Social Assistance Programme (NSAP)	Yes.
Pradhan Mantri Matritva Vandana Yojana (PMMVY)	No. Nothing specific found.
<b>Maldives</b>	
Disability Allowance Programme (DAP)	No. Nothing specific found.
Food Subsidy Programme (FSP)	No. Nothing specific found.
Foster Parent Allowances (FPA)	No. Nothing specific found.
Husnuvaa Aasandha (HA)	No. Nothing specific found.
Medical Welfare (MW)	No. Nothing specific found.
Old Age Basic Pension (OABP)	No. Nothing specific found.
Single Parents Allowance (SPA)	No. Nothing specific found.
<b>Nepal</b>	



Aama Programme/Safe Motherhood Programme (AP)	Yes.
Child Grant (CG)	Yes.
Disability Grant (DG)	No. Nothing specific found.
Endangered Indigenous Peoples Allowance or Endangered Ethnicity Grant	No. Nothing specific found.
Karnali Employment Programme (KEP)	No. Bibliography found is unsuitable.
National School Meals Programme (NSMP) and Food for Education	No. Bibliography found is unsuitable.
Old Age Allowance (OAA) or Senior Citizens' Allowance	Yes.
Rural Community Infrastructure Work (RCIW)	No. Bibliography found is unsuitable.
Scholarships	Yes.
Single Women's Allowance	No. Nothing specific found.
<b>Pakistan</b>	
Benazir Income Support Programme (BISP) or National Cash Transfer Programme (NCTP)	Yes.
Pakistan Bait-ul-Mal	No. Nothing specific found.
Pakistan FATA Temporarily Displaced Persons Emergency Recovery Project	No. Nothing specific found.
Prime Minister's National Health Programme (PMNHP)	No. Nothing specific found.
<b>Sri Lanka</b>	
Divineguma Programme/Samurdhi	Yes.
Financial Support to Elderly or Elderly Assistance Programme (EAP)	No. Nothing specific found.
National Secretariat for Persons with Disabilities Programmes	No. Nothing specific found.
National Supplementary Food Programme (Thripasha)	Yes.
Public Welfare Assistance Allowance (PAMA)	No. Bibliography found is unsuitable.
School Feeding Programmes	No. Nothing specific found.



## C. Indicator aggregation scheme

Category: Poverty and finances			
Sub-Category: Poverty			
Aggregate indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
Poverty	% of population below poverty line, poverty gap, poverty headcount	Multidimensional Poverty Index deprivations	
Income	Income	Casual labour income	% receiving remittances
Non-financial assets	Non-financial assets, consumer durables, household assets, land ownership, livestock ownership		
Consumption and expenditure	Consumption, expenditure (total, per capita)	Non-food expenditure, housing expenditure	
Sub-Category: Finances			
Aggregate indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
Borrowing	Borrowing, outstanding loans		
Savings	Savings		
Category: Labour market			
Indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
General			
Labour force participation	Labour force participation	Share of employed family members	Wages
Child labour	Child labour		
Sectoral switch			
Category: Education indicators			
Indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
General			
School enrolment	School enrolment	Drop-out rate	
Educational attainment	Educational attainment		Age at first marriage
School attendance	School attendance		
Education expenditure	Education expenditure		
Educational performance	Literacy and mathematics, grade progression, secondary school completion		
Category: Health and nutrition indicators			
Indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
Anthropometric indicators			
Weight adequacy	Weight-for-height, wasting, weight-for-age	BMI z-score, birth size	
Height adequacy	Height-for-age, stunting, underweight		
Food and nutrition			
Food adequacy	Food security, food diversity, energy intake	Protein intake	
Food expenditure	Food expenditure (per capita, total)		

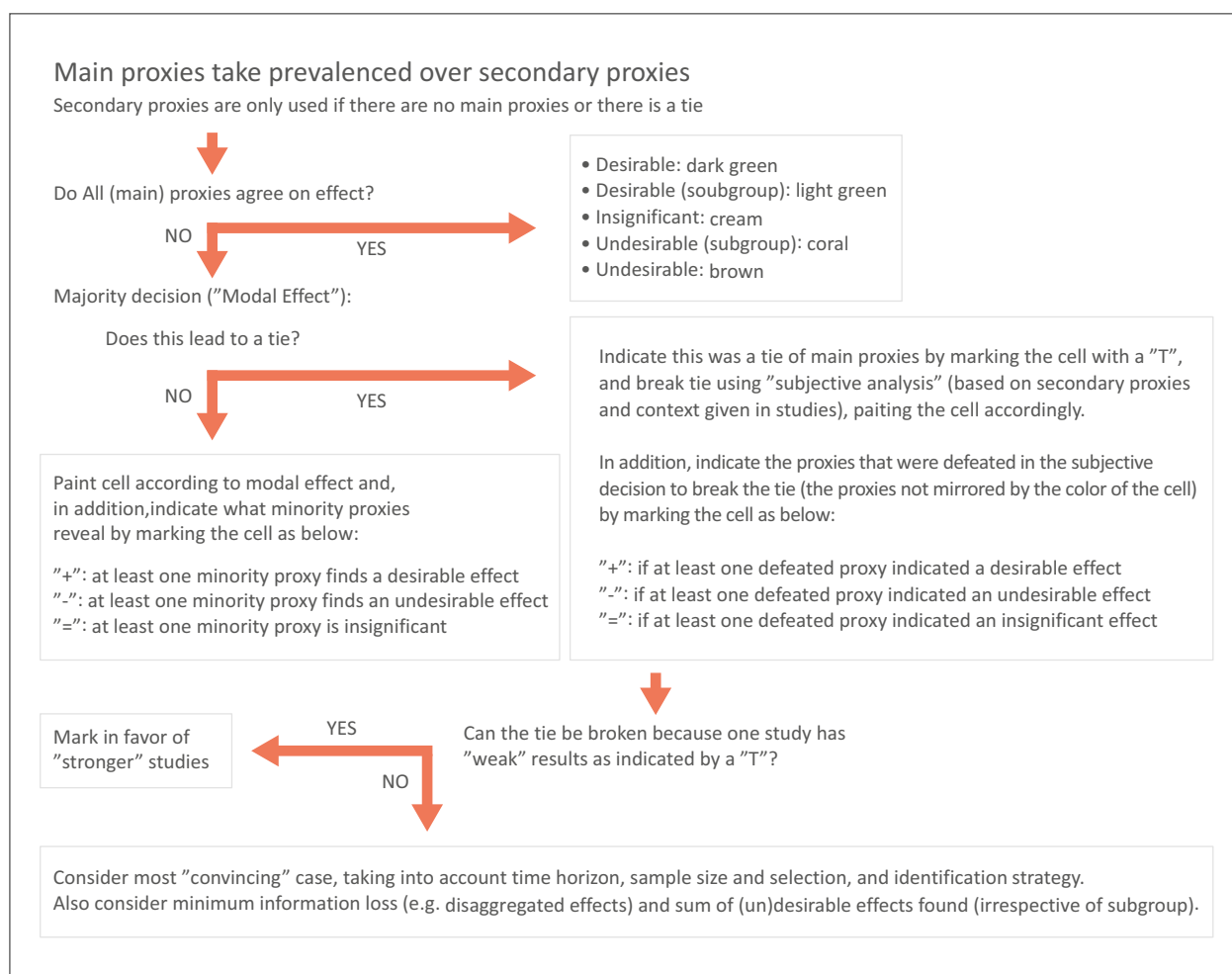


Sexual, maternal and child health			
Ante- and postnatal care	Antenatal care, episodes of prenatal care in most recent pregnancy, postnatal care		
Foetus and newborn health	Neonatal mortality, perinatal deaths		Breastfeeding within 24 hours after childbirth
Qualified birth assistance	Institutional delivery, public facilities birth, health worker in attendance at delivery, most recent birth attended by medical professional, most recent birth delivered at medical facility		
Child health	Proportion of fully immunised children, child sick in last month, child suffered diarrhoea in past two weeks, most recent born was alive after 12 months	Child haemoglobin, serum ferritin, serum zinc, serum ceruloplasmin, serum retinol, serum vitamin D, child anaemia	
Sexual and reproductive health	Fertility, age at first birth, use of contraception, maternal mortality		
Additional health measures			
WASH	Access to drinking water, water treatment method, sanitation facilities		
Consulting doctor	Consulting doctor when sick, child visited doctor in past year/month, most recent illness or injury treated by medical professional, proportion who used medical consultation from hospital (merged with consulting doctor when sick)	Most recent illness or injury treated at medical facility	Access to health services
Household health expenditure	Health (care) expenditure		
Gender indicators			
Indicator	Main proxies	Additional proxies	Related indicators (no direct proxies)
General			
Social perceptions and norms	Social capital, social norms/ attitudes regarding political activity, work and society, girls' education, local governance, sum gender index norms	Proportion agree that females should work, agree that wife should express her opinion, disagree with wife tolerating being beaten, disagree that it is better to send son than daughter to school	
Female empowerment	Female empowerment, outcomes on female socialisation, access to female counselling, access to money, exerts control over income earned, exerts full or partial control over decisions pertaining to the sale or use of income generated by assets	Owns at least one type of asset, female bank account ownership	
Female labour force participation	(Female) respondent engaged in income-generating activity during past 12 months, labour force participation (female)	Generated income for household in past year	
Female mobility	Outcomes on female mobility		
Political participation	Voting, outcomes on women's participation in local governance		

## D. Methodology and modal approach

Annexes E–G present the main tables on which results and related discussions are based. They reflect the **modal** approach used, and specifically how tiebreakers and equivocal cases were classified. The elaboration process leading to the study-disaggregated table, and the instructions for how to read it, are illustrated on the left-hand side of Figure D.1. The right-hand side describes the process used to determine programme-aggregated effects.

**Figure D.1** Classification process for study-aggregated (left) and programme-aggregated (right) tables



To illustrate the modal approach for the study-aggregated table, this annex examines the findings of the second impact evaluation of Pakistan's BISP by Cheema et al. (2015) in the category **poverty and finances**. This category is divided into the following four sub-categories: poverty, income, non-financial assets, and consumption and expenditure.

Figure D.2 provides an annotated extract from Annex G. The cell for the aggregate indicator 'poverty' is coloured dark green without further annotations, signifying that all main proxies considered for this indicators found desirable and significant impacts.<sup>85</sup> The cell indicating the impact that Cheema et al. (2015) found for 'consumption and expenditure', however, is coloured cream, which indicates that all the main proxies considered agreed that the programme had no statistically significant impacts. Finally, turning to 'non-financial assets', the cell is marked dark green (indicating

85. To see the proxies considered for each aggregate indicator's sub-category, please refer to Annex C.

a desirable and significant impact), but the cell is marked with a 'T' and '≡'. The 'T' denotes that the main proxies considered for this sub-category did not agree on the effect found, while the '≡' symbol denotes that there was an equal number of proxies indicating no significant impacts.

In some instances, the study-aggregated table contains multiple impact evaluation studies referring to the same programme. To provide an overview on a programme level and not just compare different studies, we performed one more step of aggregation to mark one aggregate effect per programme. Consistent with the previous exercise that led to the study-aggregated table, if only one study assesses a particular aggregate indicator for a programme, we mark the indicator for the **entire** programme accordingly. In the case of multiple studies evaluating the same indicators, our aggregation methodology is similar to that depicted in Figure D.2 (right-hand side). The result of this second aggregation exercise is the table we call programme-aggregated and forms the basis for the descriptive statistics and overview we provide at the beginning of Section 3. This programme-aggregated table of impacts is presented in Annex E.

**Figure D.2** Annotated extract from the Study-Aggregated Table (Annex F)

Country	Pakistan			
Programme	WeT (BISP)	BISP		
Study	Cheema et al. (baseline 2011)			Ambler and Brauw (2017)
Indicators				
Poverty and finances				
Poverty				
Poverty				
Income				
Non-financial assets				
Consumption and expenditure				
Finances				
Borrowing				
Saving				
Labour market				
Labour force participation		M	MNPWA	
Employment type		M	M	
Child labour		B		

The color of the cell indicates all (main) proxies for the aggregate indicator 'Poverty' found a desirable and significant impact. The fact that nothing is written in the cell indicates this was a consensual impact found by all considered proxies.

The color of the cell indicates we consider the study to have found desirable and significant impacts on the sub-category 'Non-Financial Assets'. The codes written in the cell, however, indicate this was not a consensual result among all the proxies considered. The (T) in conjunction with the '≡' symbol indicates there was a tie among proxies indicating a desirable impact and those suggesting no significant impact. Therefore the color of the cell resulted from contextual decision breaking the tie.

This cell indicates all proxies for sub-category consumption and expenditure found statistically insignificant impacts.

The light green colour indicates that the study found a desirable effect on the aggregate indicator "Labour Force Participation". The effect was limited to men in non-primary work age (MNPWA) though.

## E. Programme-aggregated impacts

Country	AFG	BAN				IND					NEP				PAK		SLK	
Programme	CCAP/ NSP*	PESP	SESP/ FSSSP*	MAPLM	EGPP	JSY	MDM	MGNREGA	NSAP (OAP)	TPDS	CG	AP	OAA	Scholar- ships	WeT (BISP)	BISP	Samurdhi	Triplosa
Indicators																		
Poverty and finances																		
Poverty																		
Poverty																		
Income	T, +																	
Non-financial assets		+																
Consumption and expenditure																		
Finances																		
Borrowing																		
Saving																		
Labour market																		
Labour force participation			T, +															
Employment type																		
Child labour																		
Education																		
School enrolment																		
Educational attainment																		
School attendance	G, T, =																	
Educational performance	T, =																	
Education expenditure																		
Health and nutrition																		
Food																		
Food adequacy																		
Food expenditure																		
Anthropometric Indicators																		
Weight adequacy		B																
Height adequacy		G																
Sexual, maternal and child health																		
Ante- and postnatal care	T, =																	
Qualified birth assistance	-																	



Country	AFG	BAN				IND					NEP				PAK		SLK	
Programme	CCAP/ NSP*	PESP	SESP/ FSSSP*	MAPLM	EGPP	JSY	MDM	MGNREGA	NSAP (OAP)	TPDS	CG	AP	OAA	Scholar- ships	WeT (BISP)	BISP	Samurdhi	Tripasha
Indicators																		
Foetus and newborn mortality						+S <sub>u</sub> , -G												
Child health						+S <sub>u</sub> , -												
Sexual and reproductive health																		
Additional health measures																		
WASH																		
Consulting doctor																		
Household health expenditure																		
Gender																		
Female empowerment																		
Social perceptions and norms																		
Female labour force participation																		
Female mobility																		
Political participation																		

Note: \* Indicates predecessor programmes. *Abbreviations:* B: boys; G: girls; T: tie.

## F. Study-aggregated impacts

Annex F-PART I											
Country	Afghanistan				Bangladesh						
Programme	CCAP/ NSP*				PESP	SESP/FSSSP*				MAPLM	EGPP
Study	Beath; Christia; Enikolopov and Kabuli (baseline 2007)				Baulch (2011)	Begum et al. (2017)	Shamsuddin (2015)	Hahn et al. (2018)	Dale (2020)	Jetha (2014)	Cho and Ruthbah (2018)
Indicators											
Poverty and finances											
Poverty											
Income											
Non-financial assets					+						
Consumption and expenditure											
Finances											
Borrowing											
Saving											
Labour market											
Labour force participation											
Employment type											
Education											
School enrolment											
Educational attainment											
School attendance		G									
Educational performance											
Education Expenditure											
Health and nutrition											
Food											
Food adequacy											
Food expenditure											
Anthropometric indicators											
Weight adequacy					B						
Height adequacy					G						
Sexual, maternal and child health											
Ante- and postnatal care											
Qualified birth assistance	T, =										
Foetus and newborn mortality											
Child health											
Sexual and reproductive health								T, =			





Annex F-PART I

Country	Afghanistan				Bangladesh						
Programme	CCAP/ NSP*				PESP	SESP/FSSSP*				MAPLM	EGPP
Study	Beath; Christia; Enikolopov and Kabuli (baseline 2007)				Baulch (2011)	Begum et al. (2017)	Shamsuddin (2015)	Hahn et al. (2018)	Dale (2020)	Jetha (2014)	Cho and Ruthbah (2018)
Indicators											
Additional health measures											
WASH											
Consulting doctor	T <sub>1</sub> =										
Household health expenditure											
Gender											
Female empowerment	+	+									
Social perceptions and norms	+	=									
Female labour force participation											
Female mobility											
Political participation											

Annex F-PART II

Country	India							
Programme	JSY							
Study	Lim et al. (2010)	Joshi and Sivaram (2014)	Powell-Jackson; Mazumdar and Mills (2015)	Carvalho et al. (2014)	De and Timilsina (2020)	Sengupta and Sinha (2017)	Rahman and Pallikadavath (2018)	Andrew and Vera- Hernández (2020)
Indicators								
Health and nutrition								
Sexual, maternal and child health								
Ante- and postnatal care		ANC: RW and WWFE	PNC					
Qualified birth assistance		RW and WWFE		D > 25% Co.				
Foetus and newborn mortality				1DM				LCD
Child health						RA		
Sexual and reproductive health								

## Annex F-PART III

Country	India									
Programme	MDM						NSAP's OAP			TPDS
Study	Singh; Park and Dercon (2013)	Jayaraman and Simroth (2015)	Law and Fraser (2020)	Afridi (2010)	Afridi (2011)	Chakraborty and Jayaraman (2019)	Unnikrishnan and Imai (2020)	Unnikrishnan and Sen (2020)	Unnikrishnan (2020)	Kaushal and Muchomba (2015)
Indicators										
Poverty and finances										
Poverty										
Poverty										
Income										
Non-financial assets										
Consumption and expenditure							FB			DHWRC
Labour market										
Labour force participation										
Education										
School enrolment		1G								
School attendance					G: 1G					
Educational performance										
Education expenditure										
Health and nutrition										
Food										
Food adequacy			UR	RP						
Food expenditure							FB			DHWRC
Anthropometric indicators										
Weight adequacy	DAC									
Height adequacy	DAC									
Additional health measures										
Household health expenditure										
Gender										
Female labour force participation								FB		

## Annex F- PART IV

Country	India									
Programme	MGNREGA									
Study	Azam (2012)	Deininger and Liu (2018)	Liu (2018)	Sheahan et al. (2018)	Bell and Mukhopadhyay (2020)	Zimmermann (2020)	Imbert and Papp (2015)	Berg et al. (2018)	Klonner and Oldiges (2014)	Dey and Imei (2015)
Indicators										
Poverty and finances										
Poverty										
Poverty									SC/ST DOS	
Income										
Non-financial assets										
Consumption and expenditure		SC/ST; P							SC/ST DOS	
Finances										
Borrowing										
Saving										
Labour market										
Labour force participation	W			AOS			RS			
Employment type										
Child labour										
Health and nutrition										
Food										
Food adequacy		SC/ST; PCL	PH							
Food expenditure										
Gender										
Female empowerment			S-T; N-SC/ST and NP	M-T						
Social perceptions and norms										
Female labour force participation										

Annex F-PART V											
Country	India										
Programme	MGNREGA										
Study	Bagavathinathan and Chaurey (2020)	Chari et al. (2019)	Li and Sekhri (2015)	Islam and Sivasankaran (2015)	Maity (2020)	Ravi and Engler (2015)	Bose (2017)	Shah and Steinberg (2015)	Ajefu and Abiona (2018)	Mani et al. (2020)	
Indicators											
Poverty and finances											
Consumption and expenditure											
Finances											
Saving											
Labour market											
Labour force participation				T, PW (+), NPQW (w, -), HE (M, -)		W				DS	Win WS
Employment type						W					
Child labour				15-17 years		B 10-18 years			13-17 years		
Education											
School enrolment			LQPPS						2-4 and 5-8 years	13-16 years	
School attendance				6-9 years	15-17 years	G < 10 years			13-17 years		15-18 years in WS
Educational performance									2-4 and 5-8 years	9-12 and 13-16 years	
Education expenditure											
Health and nutrition											
Food											
Food adequacy	<15 years T <sub>i</sub> =										
Food expenditure						FR					
Sexual, maternal and child health											
Ante- and postnatal care		PBD									
Qualified birth assistance		SBS									
Foetus and newborn mortality		24HM									
Child health											
Sexual and reproductive health											
Additional health measures											
Household health expenditure							HWC				

Annex F-PART VI												
Country	Nepal					Pakistan				Sri Lanka		
Programme	CG		AP	OAA	Scholarships	WeT (BISP)	BISP			Samurdhi	Triposha	
Study	Adhikari et al. (2014)	Renzaho et al. (2018)	Powell-Jackson and Hanson (2012)	Li and Mora (2016)	Datt and Uhe (2019)	Cheema et al. (baseline 2011)			Ambler and Brauw (2017)	Himaz (2008)	Hettiarachchi and Liyanage (2010)	Hettiarachchi and Liyanage (2011)
Indicators												
Poverty and finances												
Poverty												
Poverty									I, =			
Income												
Non-financial assets									I, =			
Consumption and expenditure												
Finances												
Borrowing												
Saving												
Labour market												
Labour force participation									M	MNPWA		
Employment type									M	M		
Child labour						GLS			B			
Education												
School enrolment												
School attendance												
Educational performance												
Education expenditure												
Health and nutrition												
Food												
Food adequacy												
Food expenditure												



Annex F-PART VI												
Country	Nepal					Pakistan				Sri Lanka		
Programme	CG		AP	OAA	Scholarships	WeT (BISP)	BISP			Samurdhi	Triposha	
Study	Adhikari et al. (2014)	Renzaho et al. (2018)	Powell-Jackson and Hanson (2012)	Li and Mora (2016)	Datt and Uhe (2019)	Cheema et al. (baseline 2011)			Ambler and Brauw (2017)	Himaz (2008)	Hettiarachchi and Liyanage (2010)	Hettiarachchi and Liyanage (2011)
Indicators												
Anthropometric indicators												
Weight adequacy		≥ 2 years					G		G		6 months – 5 years	
Height adequacy		B ≥ 2 years						G			0-36 months	
Sexual, maternal and child health												
Ante- and postnatal care												
Qualified birth assistance			T									
Foetus and newborn mortality												
Child health												
Sexual and reproductive health												
Additional health measures												
WASH												
Consulting doctor												
Household health expenditure												
Gender												
Female empowerment												
Social perceptions and norms									MR			
Female labour force participation												
Female mobility												
Political participation												

Note: \* Denotes predecessor programmes. *Abbreviations:* 1DM: 1-day mortality; 1G: 1st grade; 24HM: 24-hour mortality; AOS: agricultural off-season; B: boys; C: children; Co.: coverage; D: districts; DAC: drought-affected areas; DHWRC: districts with high wheat/rice consumption; DOS: during off-season; DS: dry shocks; FB: female beneficiaries; FR: female recipients; G: girls; HWC: household without children; GLS: girls and larger scholarships; HE: household enterprise; LCD: low-capacity districts; LQPPS: low-quality private primary schools; M: men; MNPWA: men of non-primary work age; MR: male respondents; M-T: medium-term; N: non; NP: non-poor; NPOW: non-public outside work; P: poorest; PBS: peak birth season; PCL: primary casual labourers; PH: poor households; PW: public works; RA: rural areas; RP: rural poor; RS: rainy season; RW: rural women; SBS: slack birth season; S-T: short-term; T: tie; UR: urban rich; W: women; WS: wet shocks; WWFE: women without formal education.

## G. Disaggregated impacts

A disaggregated table compiling all results at the proxy level (126 outcomes) across the 63 evaluation studies was created. Due to the considerable size of the table, only the first lines with information on study details (authors, focus, data sources and sample sizes with coverage information) are included in this printed annex. Please contact the authors by email ([ipc@ipc-undp.org](mailto:ipc@ipc-undp.org)) to access the full table.

### Annex G table (1/5)

Country	Afghanistan				Bangladesh						
Programme	CCAP/NSP*				PESP	MAPLM	EGPP	SESP/FSSSP*			
Study	Beath et al. (2010)	Beath et al. (2011)	Beath et al. (2013)	Beath et al. (2013)	Baulch (2011)	Jetha (2014)	Cho and Ruthbah (2018)	Shamsuddin (2015)	Begum et al. (2017)	Hahn et al. (2018)	Dale (2020)
Focus	Civic participation and gender	Governance, savings and security	Gender	Multiple areas	Children's education	Maternal health	Expenditure and consumption	Female education and labour market	Gender and children's education	Female education	Female education and child mortality
Data	NSP-IE (2007–2010)	NSP-IE (2007, 2010 and 2011)	NSP-IE (2007, 2010, 2011 and 2013a)	NSP-IE (2007, 2010, 2011, 2013a and 2013b)	Panel survey (2000, 2003 and 2006)	Primary data collection (2013)	MoDMR (2015–2016)	HIES (1995–2010)	MICS (2009)	BDHS (2004, 2007 and 2011)	BDHS (2007, 2011 and 2014)
Baseline sample size and coverage	N = 13,899 villagers and village leaders; 500 villages				N = 511 HHs; 8 rural sub-districts	N = 700 mothers; 1 district (Lakshmipur)	N = 6,812 HHs; 103 unions	N = 67,146 girls; nationally representative	N = 28,176 siblings; 64 districts, 481 sub-districts	N = ca. 24,000; nationally representative	N = 25,645 ever-married women with children; nationally representative



## Annex G table continued (2/5)

Country	India													
Programme	JSY										MDM			
Study	Lim et al. (2010)	Joshi and Sivaram (2014)	Carvalho et al. (2014)	Powell-Jackson et al. (2015)	Sengupta and Sinha (2017)	Rahman and Pallikadavath (2018)	De and Timilsina (2020)	Andrew and Vera-Hernández (2020)	Afridi (2010)	Afridi (2011)	Singh; Park and Dercon (2013)	Jayaraman and Simroth (2015)	Chakraborty and Jayaraman (2019)	Law and Fraser (2020)
Focus	Maternal health	Maternal care, institutional delivery	Infant immunisation, maternal health, child health	Antenatal care, institutional delivery, maternal mortality	Child mortality, child health care practices	Health care utilisation	Maternal health, infant immunisation	Maternal care, institutional delivery	Nutrition	School enrolment and attendance	School feeding, school meals, children's nutrition	School enrolment	Learning outcomes	Nutrition
Data	DLHS2 (2002-2004) and DLHS3 (2007-2008)	DLHS2 (2002-2004) and DLHS3 (2007-2008)	DLHS3 (2007-2008)	DLHS2 (2002-2004) and DLHS3 (2007-2008)	DLHS3 (2008-2009)	DLHS4 (2013-2014)	IHDS1 (2003-2004), IHDS2 (2011-2012), DLHS3 (2007-2008), DLHS4 (2011-2012), AHS (2010-2013) and NFHS4 (2016)	DLHS2 (2002-2004) and DLHS3 (2004-2008)	Primary data collection (2004)	Primary data collection (2003-2004)	YLS (2002 and 2007)	DISE (2002-2005)	ASER (2005-2012)	NSS (1987, 1988, 1993, 1994, 2004, 2005, 2011 and 2012)
Baseline sample size and coverage	620,107 HHs; 593 districts	425,708 observations; nationally representative; ever-married women whose last birth occurred >1999 and >2004	720,320 HHs; 601 districts (nationally representative); married women aged 15–44 years and children aged 12–23 months	507,622 individuals; 593 districts (nationally representative); currently married women	227,039 women; nationally representative; ever-married women aged 15–49	76,847 women; 18 states and 3 union territories; women aged 15–49 with last birth after 2008	41,554 HHs; 384 districts (quasi-nationally representative); women aged 15–49	104,057 women; 256 districts (9 states)	1,096 children; 41 villages (Chindwara district); children aged 5–12	112 public primary schools; 41 villages (Chindwara district)	2,011 and 1,008 children; Andhra Pradesh; children born in 2001–2002 and 1994–1995	1,282,335 students; 13 states	1.24 million children; 24 states and union territories; primary school children aged 6–10 in rural India	104,974 urban HHs and 178,135 rural HHs; nationally representative

## Annex G table continued (3/5)

Country	India												
Programme	MGNREGA												
Study	Azam [2012]	Klonner and Oldiges [2014]	Dey and Imai [2015]	Imbert and Papp [2015]	Islam and Sivasankaran [2015]	Li and Sekhri [2015]	Ravi and Engler [2015]	Shah and Steinberg [2015]	Bose [2017]	Ajefu and Abiona [2018]	Berg et al. [2018]	Deininger and Liu [2018]	Liu et al. [2018]
Focus	LFP and FLFP	Expenditure	Savings and consumption	Labour market	Child labour and time allocation	Child labour and education	Expenditure	Education	Expenditure	Labour and time allocation during rainfall shocks	Rural Public Employment	Multiple areas	Multiple areas
Data	NSS (2004-2008)	NSS (2006-2008)	Primary data collection (2009, 2010 and 2012)	NSS (2001, 2004, 2005, 2007 and 2008)	NSS (2004-2011)	DISE (2005-2008)	Primary data collection (2007-2009)	ASER (2005-2009) and NSS (2003-2009)	NSS (2001-2008)	NSS (2004-2005 and 2007-2010) and Center for Climatic Research	AWI (2000-2011)	HH panel survey (2004, 2006 and 2008) and NREGS (2006)	HH panel survey and NREGS (2004-2008)
Baseline sample size and coverage	572,254 individuals and 125,578 HHs; nationally representative	14,860 observations; 255 districts (17 major states)	500 HHs and 2,249 individuals; 53 villages (13 rural municipalities in Birbhum district)	356,636 observations; 497 districts (nationally representative)	294,484 children; 912 villages (nationally representative); children aged 6–17, 6–9, 10–14 and 15–17	1.13M schools (grades 1–8); 193, 123 and 254 districts	3,485 individuals and 1,064 ultra-poor HHs; 198 villages (Medak district)	2.5M individuals; all rural districts; rural children aged 5–16	Rural HHs from 19 major states	946,862 individuals and 316,222 children; 568 rural districts	15,272 observations; 295 districts (20 states)	4,000 HHs; 480 villages (5 districts)	4,000 HHs; 480 villages (5 districts)

## Annex G table continued (4/5)

Country	India											Nepal
Programme	MGNREGA							NSAP			TPDS	AP
Study	Sheahan et al. (2018)	Chari et al. (2019)	Bagavathinathan and Chaurey (2020)	Bell and Mukhopadhyay (2020)	Maity (2020)	Mani et al. (2020)	Zimmermann (2020)	Unnikrishnan and Imai (2020)	Unnikrishnan and Sen (2020)	Unnikrishnan (2020)	Kaushal and Muchomba (2015)	Powell-Jackson and Hanson (2012)
Focus	Employment	Infant health	Child nutrition	Income and consumption	Expenditure and time use	Human capital of children	Employment	OAP and HH expenditure	OAP and female LFP	OAP and expenditure	Nutrition	Financial incentives and maternal health
Data	WB APRPRP (2004, 2006, 2008)	DLHS (2007-2009)	NSS (1999-2007)	Primary data collection (2013)	YLS (2009-2010)	YLS (2002, 2007, 2009, 2010)	NSS (2004, 2005, 2007, 2008)	IHDS (2004-2012)	IHDS (2004-2012)	IHDS (2004-2012)	NSS (1993, 1994, 1999, 2000, 2004, 2005)	Primary data collection
Baseline sample size and coverage	4,759 HHs (2004) and 4,693 HHs (2006); 5 districts, 448 villages (Andhra Pradesh)	1,000–1,500 HHs by district; 601 districts (nationally representative); ever-married women aged 15–49	ca. 350k children; 200 districts (1st phase), 130 districts (2nd phase)	277 HHs; 30 villages (Odisha state)	Rural HHs, 7 districts (Andhra Pradesh)	703 children; 6 districts (Andhra Pradesh state); rural children aged 12–13	ca. 120,000 HHs; nationally representative	40,018 HHs; nationally representative	62,881 women; nationally representative; women aged 20–50	40,018 HHs; nationally representative	120,000–125,000 HHs per round (3 rounds); 66 rural districts (>35kg) and 15 rural (<20kg)	5,903 deliveries; 6 districts

## Annex G table continued (5/5)

Country	Nepal						Pakistan					Sri Lanka		
Programme	AP	CG			OAA	Scholarships	BISP				WeT/ BISP	Samurdhi	Thripasha	
Study	Powell-Jackson and Hanson (2012)	Adhikari et al. (2014)	Renzaho et al. (2017)	Renzaho et al. (2018)	Li and Mora (2016)	Datt and Uhe (2019)	Cheema et al. (2014)	Cheema et al. (2015)	Cheema et al. (2016)	Ambler and Brauw (2017)	Cheema et al. (2016)	Himaz (2008)	Hettiarachchi and Liyanage (2010)	Hettiarachchi and Liyanage (2011)
Focus	Financial incentives and maternal health	Multiple areas	Child nutrition status	WASH	Infant mortality	Child labour	Multiple areas	Multiple areas	Multiple areas	Women's empowerment	Education and child labour	Child health	Child nutrition	Child nutrition
Data	Primary data collection	Primary data collection (2012, 2013)	Primary data collection (2009, 2014, 2015)	Primary data collection (2009, 2014, 2015)	NDHS (1996, 2001)	NLSS (2010)	OPM-IE (2011, 2013, 2014)	OPM-IE (2011, 2014, 2015)	OPM-IE (2011, 2014, 2015, 2016)	OPM-IE (2011, 2013)	OPM-IE (2013, 2016)	SLIS (1999, 2000)	Primary data collection	Primary data collection
Baseline sample size and coverage	5,903 deliveries; 6 districts	2,040 HHs; Karnali zone; children only	3,000 HHs; Karnali and Seti zones; children only	3,000 HHs; Karnali and Seti zones; children only	178 infants pre-treatment, 831 post	9,282 children; nationally representative	8,221 HHs; 4 provinces	7,759 HHs; 4 provinces	9,139 HHs; 4 provinces	8,675 HHs; 4 provinces	2,348 HHs and 4,978 individuals; 4 districts; children aged 5–12	821 HHs and 853 children	104 children (treatment) and 99 children (control); Galle City; children aged 3–5	137 children (treatment) and 130 children (control); Galle City; children aged 3–5



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