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## Cash transfers: what does the evidence say?

An annotated bibliography

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### Introduction

This document forms part of the rigorous review on the impacts of cash transfers carried out by the Overseas Development Institute (Bastagli et al., 2016) with Oxford Policy Management (OPM). The review aims to synthesise the current body (2000-2015) of rigorous evidence on the impacts of cash transfers on a range of outcomes, including evidence on the links between specific policy programme design and implementation features and such outcomes.

More specifically, the cash transfers rigorous literature review addresses three overarching research questions:

- 1. What is the evidence of the impact of cash transfers on a wide range of household or individual-level outcomes, including unintended outcomes?
- 2. What is the evidence of the links between specific design and implementation choices on cash transfer programme outcomes?
- 3. How do the above vary by gender what is the evidence of the impacts of cash transfers, and of variations in their design and implementation components, on women and girls?

The review covers non-contributory cash transfers that aim to reach individuals or households, including unconditional cash transfers, conditional cash transfers, social pensions and enterprise grants and the population of focus are recipients (individuals or households) of cash transfers. The review covers studies in English completed or published after the year 2000 until June 2015, both peer-reviewed and grey literature. It is restricted to low- and middleincome countries (as defined by the World Bank and restricted to their status in 2015).

The searches were structured around six broad areas of priority outcomes and six key cash transfer design and implementation parameters. The six outcome areas are: Monetary Poverty; Education; Health; Savings, investment and production; Employment; Empowerment. The six cash transfer design and implementation features are: Core cash transfer design parameters (such as transfer levels); Conditionality; Targeting; Payment systems; Grievance mechanisms and programme governance; Complementary and supply-side services.

The review involved a systematic search of the literature, including retrieval from academic databases using predefined search strings, searches of websites, past reviews and use of expert recommendations. Following the searches, studies had to meet a set of predefined first-stage screening criteria in terms of the intervention, population, language, date of publication, study design and outcome.

Second-stage screening involved assessing studies for risk of bias (for quantitative impact studies) or quality (for qualitative papers, considered under the searches for studies on the effects of design and implementation features) against a predefined set of criteria. This is to ensure that the review of evidence is based upon studies that meet certain minimum methodological standards in order to be able to draw sufficiently reliable inferences from their results.

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

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

For more information on the searches, retrieval and assessment stages of the rigorous review, see the detailed account in chapter four of the main report (Bastagli et al., 2016).

The total number of studies that passed these stages (and hence are included in the annotated bibliography) is 201. In the annotated bibliography below, a full reference is given for each study, along with information on the intervention(s) and country/countries covered, core programme details as reported in the study itself, the evaluation methodology used and overall findings. The US dollar (US\$) equivalent amounts provided throughout relate to the exchange rate at the time of publication of the individual studies.

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

The purpose of the present document is to provide the complete references and additional information (such as the interventions covered, methodology and main findings) of the full list of studies that reached and passed the searches, retrieval and assessment stages of this rigorous review. The annotated bibliography can be used in a number of ways. It can be used to find relevant studies for further examination from 15 years of cash transfer research that has been classified to have a low risk of bias focusing i) on a wide range of outcomes, ii) low and middle income countries and iii) a wide range of interventions. Readers are encouraged to make use of the 'search' function to find relevant studies. Summaries provided for each study can be used by readers short of time. Furthermore, the summary of each study provides a brief overview of the interventions studied, though specific to the time of publication. Readers should keep in mind that details of the intervention may have changed since or programmes may have been discontinued; for more information on the programmes we refer readers to the full report (Bastagli et al., 2016).

#### Reference

Bastagli, F., Hagen-Zanker, J., Harman, L., Barca, V., Sturge, G., Schmidt, T. (2016) Cash transfers: what does the evidence say? A rigorous review of programme impact and the role of design and implementation features. London: Overseas Development Institute.

#### **Acronyms**

CCT	Conditional cash transfer	PMT	Proxy means test
CGP	Child Grant Programme	PSM	Propensity score matching
DID	Difference-in-difference	RCT	Randomised control trial
NAFTA	North American Free Trade Agreement	RDD	Regression discontinuity design
<b>OLS</b>	Ordinary least squares	SD	Single difference
OVC	Orphan and vulnerable child	UCT	Unconditional cash transfer

# Rigorous literature review: annotated bibliography

Citation	Adato, M., de la Brière, B., Mindek, D. and Quisumbing, A. (2000) <i>The impact of PROGRESA on women's status and intrahousehold relations</i> . Final Report. Washington, DC: International Food Policy Research Institute (IFPRI).
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA is a conditional cash transfer (CCT) which began in 1997 with the aim of addressing the immediate needs of extreme poverty and breaking its intergenerational transmission. By 1999 it had reached 2.6 million families. Eligibility is determined by a proxy means test (PMT) for household poverty. The transfer has two components: health and education. Transfer receipt is conditional on the immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual check-ups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues and best practice are discussed.
Evaluation methodology	This study uses a quasi-experimental design. The treatment effect is estimated using a multinomial logit model (with pooled data across panel waves and also by year) where the outcome is the person responsible for making decisions on various topics. The data come from a special-purpose panel survey to evaluate the programme. The sample used in this evaluation contains 25,000 households.
Overall findings	Transfers decrease husband's sole decision-making for five out of eight types of decision. The transfer slightly increased women's control over spending their own money. The transfer improved school attainment of children.
Reported outcome areas	Education; Empowerment
Indicators reported	Bargaining power: who tells the child to go to school?; who takes the child to the doctor if sick?; who decides on expenditures?; who decides on house repair?; who decides on durables purchase?; who decides how to spend woman's extra income?; does the wife need permission from the husband to visit someone? Education: deviation of each child's years of schooling from the cohort mean.
Citation	Esteva, A.A. (2012) 'The medium-term impact of a conditional cash transfer program on child physical and cognitive development: evidence from <i>Progresa</i> ', in A.A. Esteva, <i>Essays in development and labor economics</i> . PhD. Harvard University.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	This CCT, which started in 1997, is aimed at supporting poor households to foster the capacities of their members and expand their alternatives to reach higher levels of well-being by improving their options to access education, health and nutrition. By 2012, it reached a coverage of 5.8 million households who were targeted adopting a PMT methodology. Programme has three main components: education (conditional on enrolment and attendance), nutrition (conditional on attendance to informational sessions) and health (conditional on regular health check-ups).
Evaluation methodology	Randomised control trial (RCT) using difference-in-difference (DID) and regression discontinuity design (RDD). The main outcomes used in the study come from the 2003 PROGRESA follow-up survey (2,049 households) and administrative data.
Overall findings	Overall, the results give weak evidence of medium-term effects on preschool children's anthropometric, cognitive and motor skill development for exposure to PROGRESA during early stages of life.
Reported outcome areas	Education; Health
Indicators reported	Cognitive development (long-term memory, short-term memory, visual-spatial, language); anthropometrics (height, stunting, weight, body mass index (BMI), overweight); health and behaviour (haemoglobin, days sick, depression, aggression); motor skills.

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

Citation	American Institutes for Research (2014) Zambia's Child Grant Program: 36-month impact report. Washington, DC: American Institutes for Research.
Name of programme(s) and country/countries	Child Grant Cash Transfer Programme (Zambia)
Programme details as reported in the study	This study reports on the Child Grant Cash Transfer Programme, an unconditional cash transfer programme, with the objective to reduce extreme poverty. The programme has been running since 2010 and employs categorical targeting: it targets household with children under the age of five. Programme participation is set at a maximum of five years. Transfers are bimonthly and paid in cash. Transfers amount to 60 Zambian kwacha (\$12) per month, equivalent to one meal a day per household member for one month.
Evaluation methodology	The study is based on an RCT, utilising the panel data that was collected alongside the RCT. To analyse impact, a DID approach is used. The final analysis is based on a sample of 2,469 households (2% attrition).
Overall findings	The study finds a number of positive and significant impacts, as well as some non-significant impacts. Participation in the Child Grant programme is shown to have a positive and significant impact on expenditure, poverty reduction (i.e. a decrease in total headcount), food security, infant and young child feeding, school enrolment of younger children (but not older ones), asset ownership, housing conditions and owning a non-farm enterprise. They also found a significant decrease in loans. No significant impacts were found for the following indicators: anthropometric scores; school enrolment for older children; profits made by the enterprise.
Reported outcome areas	Poverty; Health; Education; Savings, investment and production; Employment
Indicators reported	Expenditure; poverty head count; food security; anthropometric scores; infant and young child feeding; school enrolment; taking a loan; asset ownership; housing conditions; owning non-farm enterprise; profits made by enterprise.

Citation	Aker, J.C., Boumnijel, R., McClelland, A. and Tierney, N. (2014) 'Payment mechanisms and anti-poverty programs: evidence from a mobile money cash transfer experiment in Niger'. Tufts University (mimeo).
Name of programme(s) and country/countries	Mobile money experimental cash transfer (Niger)
Programme details as reported in the study	This study evaluates the impact of different payment mechanisms which were part of a UCT intervention in Niger in 2010. The intervention was intended to provide relief to households affected by a drought. The transfer had reached 10,000 households by the time of the study, with women the primary beneficiaries. Villages were pre-selected and then randomly allocated to each treatment arm (described subsequently). Households were selected using a PMT based on vulnerability indicators (assets, household size, etc.). The transfer consists of 22,000 CFA francs per month for five months. The experimental feature of the intervention is that there are three different treatment arms: 1. Cash distributed in envelopes from central distribution point; 2. Electronic transfer via mobile phone (recipients given m-transfer enabled phone); 3. Cash distributed in envelopes but recipients also given an m-transfer enabled phone (known as the 'placebo' group).
Evaluation methodology	This study is an RCT. The impact of the transfer is estimated using ordinary least squares (OLS) linear and logistic regression with baseline levels characteristics as controls. The data come from a special-purpose panel survey designed to evaluate the programme, combined with a village-level survey, a price information dataset, and endline anthropometric data for a subsample of households. The main survey has 1,081 respondents in both panel waves.
Overall findings	Mobile transfer treatment arm had higher dietary diversity and children's food consumption. The mobile transfer had time-saving benefits and also increased women's decision-making power in the household.
Reported outcome areas	Poverty; Education; Health; Savings and investment; Empowerment
Indicators reported	Use of transfer to buy food and non-food items; use of transfer to pay school fees or pay health expenses (productive investment); household food security and dietary diversity; child weight-for-height and wasting; asset ownership; decision-making regarding spending.

Citation	Aker, J. C., Boumnijel, R., McClelland, A., Tierney, N. (2011) <i>Zap it to me: the short-term impacts of a mobile cash transfer program. CGD Working Paper 268.</i> Washington, DC: Center for Global Development.
Name of programme(s) and country/countries	Mobile money experimental cash transfer (Niger)
Programme details as reported in the study	This study evaluates the impact of different payment mechanisms which were part of a UCT intervention in Niger in 2010. The intervention was intended to provide relief to households affected by a drought. The transfer had reached 10,000 households by the time of the study, with women being the primary beneficiaries. Villages were pre-selected and then randomly allocated to each treatment arm (described subsequently). Households were selected using a PMT based on vulnerability indicator (assets, household size, etc.) The transfer consists of 22,000 CFA francs per month for five months. The experimental feature of the intervention is that there are three different treatment arms: 1. Cash distributed in envelopes from central distribution point; 2. Electronic transfer via mobile phone (recipients given m-transfer enabled phone); 3. Cash distributed in envelopes but recipients also given an m-transfer enabled phone (known as the 'placebo' group).
Evaluation methodology	This study is an RCT. The impact of the transfer is estimated using OLS linear and logistic regression with baseline level characteristics as controls. The data are from a special-purpose panel survey designed to evaluate the programme, combined with a village-level survey, a price information dataset and endline anthropometric data for a subsample of households. The main survey has 1,081 respondents in both panel waves.
Overall findings	Mobile transfer led to more dietary diversity. There was no difference between treatments in expenditure on non-food items. The mobile transfer made no difference to coping strategies used or purchase of durable assets, but it did increase ownership of non-durable assets. The mobile transfer increased female decision-making power in some cases, but this depended on ethnic group.
Reported outcome areas	Poverty; Education; Health; Savings and investment; Empowerment
Indicators reported	Expenditure on various items; coping strategies in times of food shortage; investment and production (planting of cash crops); recipient awareness of total amount or duration of transfer; receipt of private transfers; person responsible for spending the transfer.

Citation	Akresh, R., de Walque, D. and Kazianga, H. (2012) Alternative cash transfer delivery mechanisms: impacts on routine preventative health clinic visits in Burkina Faso. Working Paper 17785. Cambridge, MA: National Bureau of Economic Research.
Name of programme(s) and country/countries	Nahouri Cash Transfers Pilot Project (Burkina Faso)
Programme details as reported in the study	The intervention studied here was introduced in 2008. It targets families with children aged from 0–59 months with either a conditional or unconditional transfer, with the aim of improving health and education outcomes for children in poor families. Random allocation of the treatment happens at the village level and household eligibility within the village is determined using a PMT on poverty status of household. The mother or the father is randomly selected to receive the transfer (the idea being to test whether different expenditure preferences exist according to gender). The transfer amount is composed of a base level of 1,000 CFA francs per quarter plus 2,000 CFA francs for each child aged 7–10 and 4,000 CFA francs per quarter for each child aged 11–15, with no cap on the total amount. The payment is distributed quarterly for a maximum of two years. For those in the CCT group, transfer receipt is conditional on quarterly visits to the health clinic for children under 6 and school enrolment and at least 90% attendance rate for children 7–15.
Evaluation methodology	This study is an RCT and uses OLS linear regression with individual-level fixed effects to estimate the treatment effect. The data come from a household panel survey with three waves used for the official evaluation of this programme. The sample size is 1,155 households (540 treatment, 615 control).
Overall findings	CCTs have a larger effect on the number of routine health clinic visits for children in a given year. The impact only applies for older children (2 years and up). There was very little or no difference in outcome in terms of the gender of the transfer recipient or the gender of the child.
Reported outcome areas	Health
Indicators reported	Number of routine preventative health clinic visits for child.
Citation	Akresh, R., de Walque, D., Kazianga, H., 2013. <i>Cash transfers and child schooling: evidence from a randomized evaluation of the role of conditionality. Policy Research Working Paper Series 6340.</i> Washington, DC: World Bank.
Name of programme(s) and country/countries	Nahouri Cash Transfers Pilot Project (NCTPP) (Burkina Faso)
Programme details as reported in the study	The intervention was introduced in 2008 and targets families with children aged 0–59 months via a CCT and UCT, aiming to improve health and education outcomes for children in poor families. Random allocation of the treatment is at village level, and household eligibility is determined using a PMT on poverty status. The mother or father is randomly selected to receive the transfer (to test whether different expenditure preferences exist according to gender). The transfer amount
	is composed of a base level of 1,000 CFA francs per quarter plus 2,000 CFA francs for each child aged 7–10 and 4,000 CFA francs for each child aged 11–15, with no cap on the total amount. The payment is distributed quarterly for a maximum of two years. For those in the CCT group, transfer receipt is conditional on quarterly visits to the health clinic for children under six and school enrolment and at least 90% attendance rate for children 7–15.
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Overall findings	is composed of a base level of 1,000 CFA francs per quarter plus 2,000 CFA francs for each child aged 7–10 and 4,000 CFA francs for each child aged 11–15, with no cap on the total amount. The payment is distributed quarterly for a maximum of two years. For those in the CCT group, transfer receipt is conditional on quarterly visits to the health clinic for children under six and school enrolment and at least 90% attendance rate for children 7–15.  This study is an RCT and uses DID analysis to estimate the treatment effect. The data come from a household panel survey with three waves used for the official evaluation of this programme.  UCTs and CCTs improve school enrolment in a similar way for children of core school-going age, boys and more able children. CCTs are more effective for improving enrolment of marginal children (girls, lower ability, etc.). No significant effect of the treatment is observed on most learning outcomes.

Citation	Alam, A. and Baez, J., 2011. Does cash for school influence young women's behavior in the longer term? Evidence from Pakistan. Policy Research Working Paper 5669. Washington, DC: World Bank.
Name of programme(s) and country/countries	Female School Stipend Programme (Pakistan)
Programme details as reported in the study	This evaluation concerns a CCT first implemented in Pakistan in 2003 aimed at improving educational attainment among girls and decreasing gender inequities. Its target is school-age girls enrolled in grades 6–8 in the worst-performing parts of the country in terms of educational attainment. Eligibility is determined at the district level (districts with lowest literacy levels) and all girls in the relevant grades are eligible. Approximately 245,000 girls had benefited from the transfer at the time of the survey. The transfer amount is 600 Pakistan rupees per student, four times a year, and continued receipt of the transfer is conditional on 80% school attendance. Transfer allocation is not randomised, therefore the comparison group is composed of girls in non-stipend districts (those districts just above the cut-off point for eligibility on the basis on literacy levels).
Evaluation methodology	Since no control group was built into the programme design, a quasi-experimental approach is used to estimate the treatment effect, namely RDD. The data come from a variety of sources: a school-level dataset including 4,000 eligible schools; special-purpose panel survey; cross-sectional nationally representative household surveys; census and administrative data. Around 20,000 individuals are represented in the sample.
Overall findings	Girls' school enrolment increased by nearly nine percentage points. Beneficiary girls were more likely to progress through school and to work less in terms of days per month. Participation in the programme delayed marriage and decreased the likelihood of pregnancy. Participation increased the rate of matriculation into higher education institutions.
Reported outcome areas	Education; Empowerment; Employment
Indicators reported	Probability of marriage; of giving birth; age at marriage; number of children; school enrolment; completion of certain grades; labour-force participation; work intensity (days worked per month).

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

Citation	Angelucci, M. (2008) 'Love on the rocks: domestic violence and alcohol abuse in rural Mexico', <i>The B.E. Journal of Economic Analysis &amp; Policy</i> 8(1): Article 43.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades is a CCT that started in 1997 and aimed to improve child school attendance and health. The programme targeted poor households within poor communities with bimonthly cash transfers given to the mother of the family with a view to targeting the funds towards improving children's education and nutritional status. Transfers were conditional on school attendance and annual health checks for adults (and more frequent for children and pregnant or lactating women). Women are also required to attend nutrition and health workshops called 'pláticas'. Transfers were from 100 Mexican pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos. Complementary interventions involved nutrition and health workshops and annual health check-ups for adults.
Evaluation methodology	The study uses the 1998 round of Oportunidades' experimental data and uses a linear probability model and Heckman Selection Model to estimate the effect of different transfer sizes on domestic violence and alcohol abuse.
Overall findings	Transfers reduced the likelihood of alcohol abuse overall. There were heterogeneous effects on drunken violence: transfers reduced violent behaviour in households on the minimum transfer and with husbands that completed primary school, but the programme caused an increase in violence committed by uneducated husbands, especially when married to younger women, if their wives were entitled to large transfers.
Reported outcome areas	Empowerment
Indicators reported	Alcohol abuse; violence by the husband.
Citation	Angelucci, M. (2004) 'Aid and migration: an analysis of the impact of PROGRESA on the timing and size of labour migration'. <i>IZA Discussion Paper 1187</i> . Bonn: IZA.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	PROGRESA is a CCT which targets poor rural households and was later expanded to the urban population. Its main monetary component is in the form of schooling subsidies to children attending the last four grades of primary school and the first three grades of secondary school. All transfers are paid bimonthly and the schooling subsidy is received upon proof of attendance at a minimum rate of 85% of classes. The size of the education transfer increases with the school grade, and is estimated to correspond to two thirds of the wage earned by a teenager in full time employment.
Evaluation methodology	The study estimates the impact of PROGRESA on labour migration, defined as the act of leaving one's hometown to seek employment elsewhere. It groups the PROGRESA cash transfers into two: UCTs and CCTs (the nutrition support and primary school grant in the first, the subsidy to secondary education in the second) and studies the impact of both types of transfer as well as of variations in the level of transfer on migration. The approach exploits village randomisation to compute average treatment on the treated effects.
Overall findings	The study shows that PROGRESA is associated with an increase in international migration, which is also a positive function of size of the transfer. The grant may loosen financial constraints. At the same time, fine-tuned conditional grants targeting prospective migrants (in the form of secondary school subsidies) reduce the short-term migration probability. As regards medium-term migration, secondary school beneficiaries are not more likely to migrate than the control group after
	they complete the subsidised education cycle.
Reported outcome areas	
Reported outcome areas Indicators reported	they complete the subsidised education cycle.

Citation	Angelucci, M., De Giorgi, G. and Rangel, M.A. (2010) 'Family networks and school enrolment: evidence from a randomized social experiment', <i>Journal of Public Economics</i> 94(4): 197–221.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	CCT programme, running from 1997, transferring 20% of the value of monthly consumption expenditures pre-programme conditional on children's attendance in primary and secondary school grades and on attendance at local health facilities.
Evaluation methodology	RCT piggybacking on evaluation data plus surname-matching algorithms
Overall findings	PROGRESA only raises secondary enrolment among households that are embedded in a family network. Eligible but isolated households do not respond.
Reported outcome areas	Education
Indicators reported	Secondary school enrolment rates; primary enrolment rates (by connected and isolated households).
Citation	Angelucci, M., Attanasio, O. and Di Maro, V. (2012) 'The impact of Oportunidades on consumption, savings and transfers', <i>Fiscal Studies</i> 33(3): 305–334.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	The study focuses on Oportunidades, a CCT, which has been in operation since 1998. It targets poor households in rural and urban areas. It has education, nutrition and health components. The nutrition component consists of a monthly cash transfer for all beneficiaries (worth around 165 Mexican pesos in 2004, ~\$14) with nutritional supplements for pregnant and lactating mothers and families with small children. This transfer is conditional on regular attendance at health centres. Additional payments are conditional on school attendance. The maximum transfer for a household from a combination of grants for different children is 1,445 pesos.
Evaluation methodology	This study uses a quasi-experimental research design. Using the ENCELURB panel survey, it employs a propensity score matching (PSM) approach, considering both urban and rural households. The sample size is 7,903 households.
Overall findings	Participation in the programme is found to have positive effects on consumption of non-durable and durable goods, an increase in savings coupled with a drop in the number and values of loans, and a reduction of in-kind transfers received by households in treatment areas.
Reported outcome areas	Poverty; Savings, investment and production

Citation	Ardington, C., Case, A. and Hosegood, V. (2009) 'Labor supply responses to large social transfers: longitudinal evidence from South Africa', <i>American Economic Journal: Applied Economics</i> , 1(1):22–48.
Name of programme(s) and country/countries	Old-Age Pension (South Africa)
Programme details	South Africa's old-age pension is a non-contributory pension. In principle it is means-tested, and the amount received depends on the recipients' other income, but in practice it pays the maximum each month (currently 940 rand) to women and men who reach pension age without access to a private pension. It pays more than twice median per capita African (Black) income, and represents an important source of income for a third of all African households in the country.
Evaluation methodology	The study quantifies the labour supply responses of prime-age adults to the presence of pensioners in their households, using longitudinal data collected in South Africa. It compares households and individuals before and after pension receipt and pension loss, which facilitates control for a host of unobservable household and individual characteristics that may determine labour market behaviour. It relies on multiple waves of data collected relating to approximately 100,000 people followed by the Africa Centre Demographic Information System (ACDIS) in one of the poorest districts in KwaZulu-Natal, north of Durban. It reports results from both cross-sectional and longitudinal analysis.
Overall findings	The study finds that large cash transfers to the elderly lead to increased employment among prime-age adults, which occurs primarily through labour migration. The pension's impact is attributable to the increase in household resources it represents, which can be used to stake migrants until they become self-sufficient, and to the presence of pensioners who can care for small children, which allows prime-age adults to look for work elsewhere.
Reported outcome areas	Employment
Indicators reported	Change in employment status; change in labour migrant status.
Citation	Asfaw, S., Davis, B., Josh, D., Handa, S. and Winters, P. (2014) 'Cash transfer programme, productive activities and labou
Name of programme(s) and country/countries	supply: evidence from a randomised experiment in Kenya', <i>Journal of Development Studies</i> 50(8); 1172–1196.  Cash Transfer for Orphans and Vulnerable Children Programme (Kenya)
Programme details	Unconditional cash transfer (UCT) which started in 2004 to build human capital and improve the care of orphans and vulnerable children (OVCs). Those eligible are households that are ultra-poor and contain OVCs, defined as household residents up to 17 years old with at least one deceased parent, or a parent who is chronically ill or whose main caregiver is chronically ill. Child-headed households received highest priority in targeting, followed by households headed by the elderly. The programme reached over 150,000 households across the country as of December 2012. Seven districts were chosen for inclusion, based on poverty levels and prevalence of HIV/AIDS, and community-based targeting is then used to identify beneficiary households. Transfers are a flat monthly transfer of 1,500 Kenyan shillings (approximately \$21; increased in the 2011–2012 budget from 1,500 to 2,000 Kenyan shillings). The value of the transfer represented an average of 14% of the expenditure of the beneficiary households in 2011. Due to inflation, the real value of the transfer declined by 40% in the period 2007–2009, and by an additional 15% from 2009–2011.
Evaluation methodology	The study was designed as an RCT, with DID used to estimate impacts, or where baseline data were not available, SD combined with inverse probability weighting (SD-IPW). The full sample covers 1,811 households.
Overall findings	Results show that the programme had a positive and significant impact on food consumption coming from home production, the accumulation of productive assets — especially the ownership of small livestock — and on formation of non-farm enterprises, especially for females. The programme has provided more flexibility to families in terms of labour allocation decisions, particularly for those who are geographically isolated. The programme was also found to reduce child labour, an important objective of the programme. However, very little impact of the programme on direct indicators of crop production is to be found.
Reported outcome areas	Poverty; Health; Savings, investment and production; Employment
Indicators reported	Consumption of different food groups (including own production), proportion of households owning large livestock/small livestock/poultry, total quantity of livestock owned, proportion of households growing crops/improved maize/using seed/using pesticide/using organic fertiliser/using inorganic fertiliser, expenditure per acre on seeds/pesticide/organic fertiliser inorganic fertiliser, whether a loan was received or credit was sought, household participation in non-farm enterprise, wage labour participation, days worked per year, participation in own farm labour, days worked per month, participation in own farm labour by children.

Citation	Attanasio O., Gómez, L.C., Heredia, P. and Vera-Hernández, M. (2005) <i>The short-term impact of a conditional cash subsidy on child health and nutrition in Colombia</i> . Report Summary: Familias 03. London: Institute for Fiscal Studies.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details	The study reports on a CCT that started in 2002 aiming to break the intergenerational transmission of poverty. Transfers were targeted to households in extreme poverty, with the programme covering 1.5 million by late 2008. Households were selected with the help of a PMT on household wealth. Transfers were on average around 30 US dollars per month, paid monthly. Transfers were conditional upon school attendance and health clinic visits for participating children under the age of 17. The health clinic condition only applied to children born before the family's registration date. In addition to the transfers there was a complementary health programme.
Evaluation methodology	Impacts were estimated using a quasi-experimental approach, using DID and controlling for observable differences at town and individual level. The study drew on a special-purpose panel survey.
Overall findings	The study estimates the impact on nutrition and health-related indicators for children in the short term, roughly one year after its implementation, and finds that the programme improved the nutritional status and lowered morbidity of young children. In particular, it increased their consumption of protein and vegetables and substantially increased attendance at growth-monitoring visits. The effect of the programme on child nutrition was varied with respect to the probability of participating in already-existing nutritional programmes.
Reported outcome areas	Health
Indicators reported	Child height-for-age z-score; newborn weight; probability of diarrhoea and respiratory disease; number of days eating specific food groups; probability of complying with a Growth and Development Programme and DPT vaccination schedule.
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Citation	Attanasio, O., Battistin, E., Mesnard, A. (2012) Food and cash transfers: evidence from Colombia. IFS Working Paper W09/15. London: Institute for Fiscal Studies.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details as reported in the study	Familias en Acción is a CCT that has been operational since 2002. Its objective is to break the intergenerational transmission of poverty and as such it targets households in extreme poverty. Targeting is done on the basis of a PMT of household wealth. The programme had 1.5 million beneficiaries by late 2008. The monthly benefits have an average value of \$30 US dollars per month. Transfers are conditional on school attendance and health clinic visits for participating children under the age of 17. Health clinic condition are only applied to children born before the family's registration date. It is supplemented with a health programme.
Evaluation methodology	The study employs a quasi-experimental approach, using DID with a special-purpose panel data covering 5,218 households.
Overall findings	The authors find a positive impact of Familias en Acción on consumption and a positive impact on share of food in total expenditure, possibly because the transfer was targeted towards women.
Reported outcome areas	Poverty
Indicators reported	Total and food consumption expenditure; share of budget devoted to food consumption; Engel curves.

Citation	Attanasio, O., Fitzsimons, E., and Gomez, A. (2005) <i>The impact of a conditional education subsidy on school enrolment in Colombia. Report Summary Familias</i> 01. London: Institute of Fiscal Studies, Centre for the Evaluation of Development Policies.
Name of programme(s) and country/countries	Familias en Acción (FA) (Colombia)
Programme details as reported in the study	CCT (conditional on children attending school) running since 2001, aimed at helping to mitigate the effects of the economic crisis on the well-being of poor households and protect and promote human capital formation. Eligibility requirements include having a household welfare indicator that is below a predefined level, having at least one child between the ages of 7–17, and living in a treatment area. Operates in 57 communities of rural Colombia, targeting around 20% of households and transferring around US\$10 for primary and US\$20 for children in secondary school through banks to women.
Evaluation methodology	Quasi-experimental methodology (as the programme was not randomly assigned, control areas were selected for the purpose of the evaluation so as to be comparable to treatment areas on the basis of a number of pre-programme dimensions). Analysis was based on a linear parametric regression framework.
Overall findings	Programme has been effective at increasing enrolment, particularly among 14–17-year-olds in both urban and rural areas. Further, males have generally benefited more than females from the programme.
Reported outcome areas	Education
Reported outcome areas Indicators reported	Education  Enrolment rates.
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Indicators reported  Citation  Name of programme(s) and	Enrolment rates.  Attanasio, O., Oppedisano, V. and Vera-Hernández, M. (2015) <i>'Should cash transfers be conditional? Conditionality,</i>
Indicators reported	Enrolment rates.  Attanasio, O., Oppedisano, V. and Vera-Hernández, M. (2015) <i>'Should cash transfers be conditional? Conditionality, preventive care, and health outcomes', American Economic Journal: Applied Economics</i> 7(2): 35–52.
Indicators reported  Citation  Name of programme(s) and country/countries  Programme details as reported in	Enrolment rates.  Attanasio, O., Oppedisano, V. and Vera-Hernández, M. (2015) <i>'Should cash transfers be conditional? Conditionality, preventive care, and health outcomes', American Economic Journal: Applied Economics</i> 7(2): 35–52.  Familias en Acción (Colombia)  FA is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a PMT on household wealth to determine eligibility. The transfer is equivalent to approximately US\$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under 17 years of age. The health clinic visitation condition only applies to children born before the family's registration date and this 'loop-hole' is exploited in order to demonstrate the effect of
Citation  Name of programme(s) and country/countries  Programme details as reported in the study	Enrolment rates.  Attanasio, O., Oppedisano, V. and Vera-Hernández, M. (2015) <i>'Should cash transfers be conditional? Conditionality, preventive care, and health outcomes', American Economic Journal: Applied Economics</i> 7(2): 35–52.  Familias en Acción (Colombia)  FA is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a PMT on household wealth to determine eligibility. The transfer is equivalent to approximately US\$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under 17 years of age. The health clinic visitation condition only applies to children born before the family's registration date and this 'loop-hole' is exploited in order to demonstrate the effect of enforcement of conditions on uptake of health centre visits.  The study makes use of a quasi-experimental design in which data from a special-purpose panel survey is analyses using
Indicators reported  Citation  Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	Enrolment rates.  Attanasio, O., Oppedisano, V. and Vera-Hernández, M. (2015) <i>'Should cash transfers be conditional? Conditionality, preventive care, and health outcomes', American Economic Journal: Applied Economics</i> 7(2): 35–52.  Familias en Acción (Colombia)  FA is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a PMT on household wealth to determine eligibility. The transfer is equivalent to approximately US\$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under 17 years of age. The health clinic visitation condition only applies to children born before the family's registration date and this 'loop-hole' is exploited in order to demonstrate the effect of enforcement of conditions on uptake of health centre visits.  The study makes use of a quasi-experimental design in which data from a special-purpose panel survey is analyses using linear regression with fixed effects. The total sample size covers 2,641 households.  Preventative care visits of children who are not subject to the conditionality requirement (in households which receive the

Citation	Attanasio, O., Fitzsimons, E., Gomez, A., Gutiérrez, M.I., Meghir, C. and Mesnard, A. (2010) 'Children's schooling and work in the presence of a conditional cash transfer program in rural Colombia', <i>Economic Development and Cultural Change</i> 58(2): 181–210.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details	FA is a CCT, implemented since 2002 in rural parts of Colombia with the aim of alleviating poverty by fostering human capital accumulation among the poorest households. The targeting took place in two stages: first municipalities, then households. The largest component of the programme is the education transfer, targeted at families with children aged 7–17. Its receipt is conditional on fulfilling certain health care requirements, including vaccinations and growth and development check-ups for children, and attendance at courses on nutrition, hygiene and contraception by the children's mothers.
Evaluation methodology	The study estimates the effects of FA within a DID framework, using pre- and post-programme data on outcomes and conditioning on a large range of household- and municipality-level characteristics. It uses survey data from a sample of randomly sampled households from 122 municipalities (57 of which are treatment and 65 of which are controls). In each municipality 100 eligible households were randomly selected for inclusion in the evaluation sample. The final sample of around 11,300 households were interviewed between June and October 2002.
Overall findings	The study finds that FA increased the school participation rates of 14–17-year-old children quite substantially, by between around 5 and 7 percentage points. It also had non-negligible effects on the enrolment of younger children, of between 1.3 and 2.8 percentage points, despite their already high participation rates in the absence of the programme. Effects are larger in urban areas, where school attendance goes up by between 3.8 hours per day for older children and 4.5 hours per day for younger children, compared to 1 hour for older rural children and 2.5 hours for younger rural children. The effects on domestic work participation are largest in urban areas, where participation is around 10 and 13 percentage points lower after the program, at 61% and 62% for older and younger children, respectively. Time spent at work (mainly domestic work) was reduced by less than the increase in time spent at school. As there is very little evidence that the programme in Colombia decreased significantly the time spent by children in income-generating activities, it seems unlikely that household income has been negatively affected through this channel.
Reported outcome areas	Employment; Education
Indicators reported	School enrolment; child participation in domestic work and in paid work.
Citation	Attanasio, O. and Mesnard, A. (2005) <i>The impact of a conditional cash transfer programme on consumption in Colombia. Report Summary Familias</i> 02. London: Institute of Fiscal Studies, Centre for the Evaluation of Development Policies.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details as reported in the study	FA is a CCT that has the objective of fostering the accumulation of human capital. It is targeted at the poorest 20% of households in selected areas in rural Colombia and had around 340,000 beneficiaries in 2004, two years after its inception. The programme has three main components: health, nutrition and education. The nutritional component is worth around US\$15 monthly and is conditional on participation in health programmes. The education component is conditional on school enrolment and attendance and transfers are US\$5.5 monthly per primary school child and US\$11 per secondary school child.
Evaluation methodology	This study employs a quasi-experimental research design. It uses a DID approach to measure impact and there is control for observable variables both at the individual and at the town level. The data is based on a special-purpose panel survey that covered 11,500 households (with 6% attrition).
Overall findings	The authors find a positive impact on total consumption and food consumption, an increase in protein-rich consumption and a positive impact on education and expenditure on children's clothes. However, no significant impact was found for the share of food in total expenditure and expenditure on alcohol and tobacco.
Overall findings  Reported outcome areas	and a positive impact on education and expenditure on children's clothes. However, no significant impact was found for

Citation	Baez, J.E. and Camacho, A. (2011) Assessing the long-term effects of conditional cash transfers on human capital: evidence from Colombia. Policy Research Working Paper 5681. Washington, DC: World Bank.
Name of programme(s) and country/	Familias en Acción (FA) (Colombia)
Programme details as reported in the study	CCT, designed as an instrument to help mitigate the effects of the economic crisis on the well-being of poor households and to protect and promote human capital formation. The programme consists of PMT-targeted subsidies to education, nutrition and health, conditional on specific behaviours associated with school participation and attendance to health checks. The program, which transfers 12,000 Colombian pesos (approximately US\$7) for each child attending primary school (grades 1–5) and 24,000 pesos (US\$14) for those in secondary school (grades 6–11), was piloted in a few municipalities in 2001, but was scaled up in the second half of 2002.
Evaluation methodology	Quasi-experimental evaluation, using SD (using OLS) with matching and fuzzy RDD for analysis. Data sources include: a household survey, a census of the poor and a database with administrative records of the program. Matching analysis draws only from the baseline survey which interviewed 6,722 households in 57 treatment municipalities and 4,562 households in nine control municipalities.
Overall findings	Robust evidence that the FA programme increases school attainment by helping participant children to finish high school. Indeed, treated children are on average between 4 and 8 percentage points — equivalent to an increase of 8—16% — more likely to graduate from high school relative to those in the control group.
Reported outcome areas	Education
Indicators reported	High school completion, test scores.
Citation	Paird C. L. Carfain, D.C. Malatagh, C.T. Özlar, D. (2012) (Effect of a coop transfer programme for caballing an provisional
Gitation	Baird, S.J., Garfein, R.S., McIntosh, C.T., Özler, B. (2012) 'Effect of a cash transfer programme for schooling on prevalenc of HIV and herpes simplex type 2 in Malawi: a cluster-randomised trial', <i>The Lancet</i> 379(9823): 1320–1329.
Name of programme(s) and country/countries	Zomba Cash Transfer Programme (Malawi)
Programme details as reported in the study	The Zomba cash transfer is a programme designed to keep girls and young women in school. It began in 2008 in Malawi and also incorporates an experimental design whereby one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted at school-age girls and young women, both in school and who recently dropped out of school — in total it had reached 1,225 girls and young women at the time of the survey. Enumeration areas were randomly allocated to treatment or control status. Within treatment numeration areas CCTs and UCTs were randomly allocated. Households were first identified if they included a girl or young woman aged 13–22 and never-married as of baseline. All eligible girls/young women were then allocated the treatment, in treatment enumeration areas. To determine the individual transfer amount, girls participated in a lottery where they picked bottle caps out of an envelope to win an amount between US\$1/month and US\$5/month. Payment is distributed monthly for tw years. The cash payment points chosen were centrally located and well-known places, such as churches, schools, etc. For each enumeration area, they were selected so that no recipient had to travel for more than 5 km to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it. Some recipients received the transfer on condition of 'satisfactory' school attendance (mor detailed criteria not given).
Evaluation methodology	The programme is an RCT so the treatment effect is estimated here using SD estimation through a logit model. The data come from the panel survey intended for the evaluation of the programme. The sample size is 1,328 (501 in the treatment group, 827 in the control group).
Overall findings	The treatment group were more likely to be enrolled in school. Baseline dropouts were more likely to re-enrol in treatmen group. The pooled treatment group had a much lower incidence of intercourse at least once a week with at least one partner and of having a sexual partner aged 25 years or older. There was no difference between pooled treatment and control groups regarding marriage, pregnancy, sexual debut, multiple partners, syphilis, HIV and HSV-2 prevalence. There were differences in magnitude of effect between UCT and CCT groups, but the only significant difference was for current pregnancy. The transfer slightly decreased the prevalence of HIV and HSV-2 in beneficiaries.
Reported outcome areas	Health; Education; Empowerment
Indicators reported	Enrolled in school; ever married; currently pregnant; 'sexual debut' (ever had sexual intercourse); unprotected sex; sexual

Citation	Baird, S., de Hoop, J. and Özler, B. (2013) 'Income shocks and adolescent mental health', <i>Journal of Human Resources</i> 48:(2) 370–403.
Name of programme(s) and country/countries	Zomba Cash Transfer (Malawi)
Programme details as reported in the study	This study seeks to identify whether a conditionality requirement makes any difference to the impact of a cash transfer. The transfer in question was introduced in Malawi in 2007 and targets school-age girls and young women who recently dropped out of school with the aim of keeping them in school or causing them to re-enrol. There is a CCT group and a UCT group with a total reach of 1,225 beneficiaries. Enumeration areas are randomly selected to conditional treatment, unconditional treatment or to control group. All girls and young women between the ages 13–22 and never-married as of baseline are eligible for the transfer. Within treatment enumeration areas, to determine the individual transfer amount, beneficiaries participate in a lottery where they pick bottle caps out of an envelope to win an amount between US\$1/month and US\$5/month. Transfers are made monthly for two years and are collected from payment points, such as churches or schools. No beneficiary has to travel more than 5 km to a payment point. Security guards are present to make sure that the money is secure and each recipient is given a sealed envelope with her name on it.  CCT recipients receive the transfer on condition of 'satisfactory' school attendance (more detailed criteria are not given).
Evaluation methodology	The impact estimation strategy is quasi-experimental, using OLS linear and logistic regression with baseline levels characteristics as controls. The data come from the special two-wave purpose survey used to evaluate the programme (follow-up is after one year). The sample size in both waves is 2,080 individuals.
Overall findings	The transfer reduced psychological distress in adolescent girls. This effect was driven by increased consumption, school attendance and leisure time resulting from the transfer. Increased transfer size led to a reduction in the positive effect on mental health. There was a negative spill-over effect on non-recipients. All programme effects were short-lived.
Reported outcome areas	Health
Indicators reported	Mental health indicator (a 12-component indicator based on self-reported responses to questions about behaviour).
Citation	Baird, S., McIntosh, C. and Özler, B. (2009) Designing cost-effective cash transfer programs to boost schooling among
Name of programme(s) and country/countries	young women in Sub-Saharan Africa. Working Paper 5090. Washington, DC: World Bank.  Zomba Cash Transfer Programme (Malawi)
country/countries  Programme details as reported in	Zomba Cash Transfer Programme (Malawi)  The Zomba Cash Transfer Programme started in 2008 with the aim of incentivising girls and young women to stay in (or return to) school. The programme has both a CCT and UCT arm. Transfer receipt is randomised at the 'enumeration area' level. To determine the individual transfer amount, girls participate in a lottery in which they pick bottle caps out of an envelope to win a monthly amount between US\$1 and US\$5. In total 1,225 girls and young women are allocated treatment. In the conditional arm, receipt is conditional on 'satisfactory' school attendance (more detailed criteria are not
country/countries  Programme details as reported in the study	Zomba Cash Transfer Programme (Malawi)  The Zomba Cash Transfer Programme started in 2008 with the aim of incentivising girls and young women to stay in (or return to) school. The programme has both a CCT and UCT arm. Transfer receipt is randomised at the 'enumeration area' level. To determine the individual transfer amount, girls participate in a lottery in which they pick bottle caps out of an envelope to win a monthly amount between US\$1 and US\$5. In total 1,225 girls and young women are allocated treatment. In the conditional arm, receipt is conditional on 'satisfactory' school attendance (more detailed criteria are not given).  The study uses panel data from the baseline and at one-year follow-up collected for the purposes of this study. The study is an RCT but DID regression using individual fixed effects is used to account for differences in treatment and control
country/countries  Programme details as reported in the study  Evaluation methodology	Zomba Cash Transfer Programme (Malawi)  The Zomba Cash Transfer Programme started in 2008 with the aim of incentivising girls and young women to stay in (or return to) school. The programme has both a CCT and UCT arm. Transfer receipt is randomised at the 'enumeration area' level. To determine the individual transfer amount, girls participate in a lottery in which they pick bottle caps out of an envelope to win a monthly amount between US\$1 and US\$5. In total 1,225 girls and young women are allocated treatment. In the conditional arm, receipt is conditional on 'satisfactory' school attendance (more detailed criteria are not given).  The study uses panel data from the baseline and at one-year follow-up collected for the purposes of this study. The study is an RCT but DID regression using individual fixed effects is used to account for differences in treatment and control groups. The full sample consists of 3,805 girls and young women who were aged 13–22 and never-married at baseline.  Transfer improved attendance and literacy overall. This effect was much starker for baseline dropouts (i.e. those who were school age but not currently attending at baseline). Transfer size made no substantial difference to either outcome, except

Citation	Baird, S., McIntosh, C., Özler, B. (2011) 'Cash or condition? Evidence from a cash transfer experiment', <i>Quarterly Journal of Economics</i> 126(4): 1709–1753.
Name of programme(s) and country/countries	Zomba Cash Transfer (Malawi)
Programme details as reported in the study	This study seeks to identify whether a conditionality requirement makes any difference to the impact of a cash transfer. The transfer in question was introduced in Malawi in 2007 and targets school-age girls and young women who recently dropped out of school, with the aim of keeping them in school or causing them to re-enrol. There is a CCT group and a UCT group with a total reach of 1,225 beneficiaries. Enumeration areas are randomly selected to conditional treatment, unconditional treatment or to control group. All girls and young women aged 13–22 and never-married as of baseline are eligible for the transfer. Within treatment enumeration areas, to determine the individual transfer amount, beneficiaries participate in a lottery in which they pick bottle caps out of an envelope to win an amount between US\$1/month and US\$5/month. Transfers are made monthly for two years and are collected from payment points such as churches or schools. No beneficiary has to travel more than 5 km to a payment point. Security guards are present to make sure that the money is secure and each recipient is given a sealed envelope with her name on it. CCT recipients receive the transfer on condition of 'satisfactory' school attendance (more detailed criteria are not given).
Evaluation methodology	The impact estimation strategy is quasi-experimental, using OLS linear and logistic regression with baseline level characteristics as controls. The data come from the special two-wave purpose survey used to evaluate the programme (follow-up is after one year). The sample size is 2,284 at baseline and 2,089 at follow-up.
Overall findings	There was a large reduction in school drop-out rate in the CCT group and a more modest reduction in the UCT group. Bigger improvements were observed in reading comprehension in the CCT group. Teen pregnancy and marriage were much lower in the UCT group and this difference is driven by the effect of girls who dropped out of school.
Reported outcome areas	Education; Empowerment
Indicators reported	School outcomes (School enrolment, literacy in English); marriage; childbearing.
Citation	Baird, S.J., Chirwa, E., de Hoop, J., Özler, B. (2013) <i>Girl power: cash transfers and adolescent welfare. Evidence from a cluster-randomized experiment in Malawi. Working Paper 19479.</i> Cambridge, MA: National Bureau of Economic Research.  Zomba Cash Transfer Programme (Malawi)
Name of programme(s) and country/countries	Zoniba Casii Iransiei Programme (Malawi)
Programme details as reported in the study	The programme is designed to keep girls and young women in school. It began in 2008 and incorporates an experimental design in which one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted at school-age girls and young women in school and who recently dropped out of school — in total it had reached 1,225 girls and young women at the time of the survey. Enumeration areas were randomly allocated to treatment or control status. Within treatment enumeration areas, conditional and unconditional transfers were randomly allocated. Households were first identified if they had a girl or young woman between the ages of 13 and 22 and never-married as of baseline. All eligible girls/young women were then allocated the treatment, in treatment enumeration areas. To determine the individual transfer amount, girls participated in a lottery in which they picked bottle caps out of an envelope to win an amount between \$1/month and \$5/month. Payment is distributed monthly for two years. The cash payment points were chosen to take place at centrally located and well-known places, such as churches, schools, etc. For each enumeration area, they were selected so that no recipient has to travel for more than five km to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it. Some recipients received the transfer on condition of 'satisfactory' school attendance (more detailed criteria not given).
Evaluation methodology	This study benefits from having been designed as an RCT. OLS regression is used to identify the programme impact. The data used come from the official survey to evaluate the programme, which consists of a two-wave panel with a pre-programme baseline and follow-up after one year. The sample is between roughly 300 to 2,000 individuals per regression.
Overall findings	The transfer reduces early marriage and makes respondents feel that their education and health are more valued in the household than before. The programme increases the target beneficiary's expenditure on herself. There was a small increase in consumption of protein and a small increase in rate of sleeping under a bed net. Programme effects were generally stronger for baseline dropouts (not enrolled in school).
Reported outcome areas	Poverty; Education; Health; Empowerment
Indicators reported	Expenditure on respondent herself over last 30 days (amount in US dollars); who decides how transfer is spent; participation in health training; preferred fertility timing (months until next child); ideal number of children over lifetime; self-perceived standing in the household (whether household cares more about respondent's education/health than 12 months ago); nutrition (number of times protein had been eaten in past seven days); respondent usually sleeps under a bed net; test scores.

Citation	Baird, S., Chirwa, E., McIntosh, C., Özler, B. (2010) 'The short-term impacts of a schooling conditional cash transfer program on the sexual behavior of young women', <i>Health Economics</i> 19(S1): 55–68.
Name of programme(s) and country/countries	Zomba Cash Transfer Programme (Malawi)
Programme details as reported in the study	The programme was designed to keep girls and young women in school. It began in 2008 and incorporates an experimental design in which one treatment group received a CCT and one a UCT (the idea being to compare the effect of conditionality). The transfer is targeted at school-age girls and young women in school and who recently dropped out of school — in total it had reached 1,225 girls and young women at the time of the survey. Enumeration areas were randomly allocated to treatment or control status. Within treatment enumeration areas conditional and unconditional transfers were randomly allocated. Households were first identified if they had a girl or young woman between the ages of 13 and 22 and never-married as of baseline. All eligible girls/young women were then allocated the treatment, in treatment enumeration areas. To determine the individual transfer amount, girls participated in a lottery in which they picked bottle caps out of an envelope to win an amount between \$1/month and \$5/month. Payment is distributed monthly for two years. The cash payment points were chosen to take place at centrally located and well-known places, such as churches, schools, etc. For each enumeration area, they were selected so that no recipient has to travel for more than 5 km to the cash payment point. Security guards were at hand to make sure that the money was secure and each recipient was given a sealed envelope with her name on it. Some recipients received the transfer on condition of 'satisfactory' school attendance.
Evaluation methodology	This study benefits from having been designed as an RCT. DID estimation is used to identify the programme impact.  The data used come from the official survey to evaluate the programme which consists of a two-wave panel with a pre-programme baseline and follow-up after one year. The sample is as large as 2,700 individuals depending on the model.
Overall findings	The transfer decreased early marriage, pregnancy and self-reported sexual activity. For beneficiaries who were not in school at baseline the decline in marriage and pregnancy were especially striking.
Reported outcome areas	Education; Empowerment
Indicators reported	Cabal angles at the selection of the sel
indicators reported	School enrolment (in school); marital status (never married); pregnancy (ever pregnant); sexual intercourse; number of partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older.
Citation	partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year
	partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older.  Barber, S.L. and Gertler, P.J. (2010) 'Empowering women: how Mexico's conditional cash transfer programme raised
Citation  Name of programme(s) and	partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older.  Barber, S.L. and Gertler, P.J. (2010) 'Empowering women: how Mexico's conditional cash transfer programme raised prenatal care quality and birth weight', <i>Journal of Development Effectiveness</i> 2(1): 51–73.
Citation  Name of programme(s) and country/countries	partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older.  Barber, S.L. and Gertler, P.J. (2010) 'Empowering women: how Mexico's conditional cash transfer programme raised prenatal care quality and birth weight', <i>Journal of Development Effectiveness</i> 2(1): 51–73.  Oportunidades (Mexico)  The programme is designed to address short-term and long-term poverty by providing cash transfers conditional on family members, especially pregnant women and young children, obtaining preventative medical care from public clinics, on attending 'pláticas' (educational talks) about health-related topics, and on school-aged children attending school. Transfers include an income transfer, meant to address immediate needs such housing, food security and medical care needs, whereas conditioning the transfer on health and education is intended for investments in children's human capital. Oportunidades is one of the largest programmes of its kind. In 2004, it distributed approximately \$3 billion US dollars to
Citation  Name of programme(s) and country/countries  Programme details	partners in past 12 months; average condom use; sexually active at least once a week; share of partners at least one year older.  Barber, S.L. and Gertler, P.J. (2010) 'Empowering women: how Mexico's conditional cash transfer programme raised prenatal care quality and birth weight', <i>Journal of Development Effectiveness</i> 2(1): 51–73.  Oportunidades (Mexico)  The programme is designed to address short-term and long-term poverty by providing cash transfers conditional on family members, especially pregnant women and young children, obtaining preventative medical care from public clinics, on attending 'pláticas' (educational talks) about health-related topics, and on school-aged children attending school. Transfers include an income transfer, meant to address immediate needs such housing, food security and medical care needs, whereas conditioning the transfer on health and education is intended for investments in children's human capital. Oportunidades is one of the largest programmes of its kind. In 2004, it distributed approximately \$3 billion US dollars to more than five million households — including approximately one third of all rural families in Mexico.  The study uses data from a controlled randomised trial to evaluate the impact Oportunidades on the birth weight of children from poor rural families and examine the pathways by which the improvements occurred. The study uses
Citation  Name of programme(s) and country/countries  Programme details  Evaluation methodology	Barber, S.L. and Gertler, P.J. (2010) 'Empowering women: how Mexico's conditional cash transfer programme raised prenatal care quality and birth weight', <i>Journal of Development Effectiveness</i> 2(1): 51–73.  Oportunidades (Mexico)  The programme is designed to address short-term and long-term poverty by providing cash transfers conditional on family members, especially pregnant women and young children, obtaining preventative medical care from public clinics, on attending 'pláticas' (educational talks) about health-related topics, and on school-aged children attending school. Transfers include an income transfer, meant to address immediate needs such housing, food security and medical care needs, whereas conditioning the transfer on health and education is intended for investments in children's human capital. Oportunidades is one of the largest programmes of its kind. In 2004, it distributed approximately \$3 billion US dollars to more than five million households – including approximately one third of all rural families in Mexico.  The study uses data from a controlled randomised trial to evaluate the impact Oportunidades on the birth weight of children from poor rural families and examine the pathways by which the improvements occurred. The study uses random-effects regression with a panel survey covering 840 women.  Birth weights average 127.3 g higher, and low birth weight incidence is 44.5% lower among beneficiary mothers. Better birth outcomes are explained entirely by better quality prenatal care. Oportunidades affected quality through empowering women with information about adequate healthcare content to expect better care, and with skills and social support to

Citation	Barber S.L. and Gertler, P.J. (2008) 'The impact of Mexico's conditional cash transfer programme, <i>Oportunidades</i> , on birthweight', <i>Tropical Medicine and International Health</i> 13(11): 1405–1414.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details	The intervention is a CCT that started in 1997. By 2007, it covered approximately five million low-income families (more than one in five of all families in Mexico) in both rural and urban settings. Beneficiaries were selected using a PMT based on estimated income. They were eligible if their income fell below a food-based poverty line (identifying extreme poverty) or below a capabilities-based poverty line (identifying poverty) that included health and education expenses. Transfers included a health transfer, fixed at approximately US\$15 per household per month. The education transfer was based on school grade and gender. The maximum monthly benefit cap for health and education together came to approximately US\$90 and US\$160 for families with children of primary and secondary school age, respectively. Total transfers for health and education averaged 17–20% of pre-programme rural per capita household consumption. Transfers were paid bimonthly and were conditional on each family member obtaining regular clinic consultations, and attending 'pláticas' (health education talks) and monthly meetings for the principal beneficiary, usually the mother in the household. Health requirements varied according to age. For pregnant women, five prenatal visits were required. Transfers were also conditional on children attending school. Oportunidades required that households prove compliance via certification at public clinics and schools. A range of complementary health-related interventions were also included, including prenatal care, growth monitoring and immunisations.
Evaluation methodology	The study involved a quasi-experimental approach drawing on a baseline census and subsequent fertility survey and using instrumental variables (IV) estimation. The sample included 804 women.
Overall findings	Beneficiary status was associated with 127.3 g higher birth weight among participating women and a 4.6 percentage point reduction in low birth weight.
Reported outcome areas	Health
Indicators reported	Birthweight; receipt of prenatal care; number of prenatal care visits.
Citation	Barber, S.L. and Gertler, P.J. (2009) 'Empowering women to obtain high quality care: evidence from an evaluation of Mexico's conditional cash transfer programme', <i>Health Policy and Planning</i> 24(1): 18–25.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details	The intervention is a CCT that started in 1997. It is a poverty-reduction programme to break the intergenerational transmission of poverty by providing incentives for parents to invest in the human capital of children. Cash transfers from Oportunidades are conditional on family members obtaining health and education services. Coverage expanded from some 300,000 rural families in 1997 to approximately 2.6 million in 2000. The programme covers approximately 5 million low-income families (more than 20% of all families in Mexico) living in both urban and rural areas.
Evaluation methodology	The study adopts a quasi-experimental approach using a panel survey with fixed-effects regression. A total of 892 wome were included in the sample (180 non-beneficiary and 712 beneficiary births).
Overall findings	Beneficiaries received 12.2% more prenatal procedures compared with non-beneficiaries.
Reported outcome areas	Health
Indicators reported	Percentage of prenatal care procedures received (history taking and diagnostics, physical examination, prevention and case management).

Citation	Barham, T., Macours, K. and Maluccio, J.A. (2013) <i>More schooling and more learning? Effects of a three-year conditional cash transfer program in Nicaragua after 10 years. IDB Working Paper 432</i> . Washington, DC: Inter-American Development Bank.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details as reported in the study	CCT, running since 2000, designed to address both current and future poverty. Households were targeted using a PMT and eligible for a food security transfer that provided a fixed amount per household regardless of the household's size and composition. Households with children aged 7–13 who had not yet completed the fourth grade of primary school were also eligible for an additional fixed bimonthly cash transfer contingent on enrolment and regular school attendance of those children and an annual transfer intended for school supplies. Over 30,000 families received bimonthly transfers equivalent to 18% of pre-programme expenditures. The programme also had a strong social marketing message that the money was intended to be used for human capital and small supply-side transfer for schools and teachers.
Evaluation methodology	Quasi-experimental methodology, based on multivariate regressions. Data sources included: a baseline census roster, short-term panel surveys with last survey 10 years later, and administrative data.
Overall findings	Paper focuses on a cohort of boys aged 9–12 at the start of the programme in 2000, finding that the short-term programme effect of a half grade increase in schooling for boys was sustained after the end of the programme and into early adulthood. In addition, results indicate significant and substantial gains in both maths and language achievement scores, an approximately one quarter standard deviation increase in learning outcomes for the now young men.
Reported outcome areas	Education
Indicators reported	Enrolment rates, grades attained, days of school missed, standardised test scores (by age and sex).
Citation	Enrolment rates, grades attained, days of school missed, standardised test scores (by age and sex).  Barham, T. and Maluccio, J.A. (2009) 'Eradicating diseases: the effect of conditional cash transfers on vaccination coverage in rural Nicaragua', <i>Journal of Health Economics</i> 28(3): 611–621.
Citation  Name of programme(s) and	Barham, T. and Maluccio, J.A. (2009) 'Eradicating diseases: the effect of conditional cash transfers on vaccination
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Citation  Name of programme(s) and country/countries	Barham, T. and Maluccio, J.A. (2009) 'Eradicating diseases: the effect of conditional cash transfers on vaccination coverage in rural Nicaragua', <i>Journal of Health Economics</i> 28(3): 611–621.  Red de Protección Social (Nicaragua)  The intervention is a CCT implemented from 2000 to reduce both current and future poverty through conditional cash transfers for health and education attainment. To identify eligible households a poverty index was created for each locality and seven groups of six localities with similar wealth rankings were created. From each of these sets of six, three localities were randomly selected for inclusion in the treatment group and three in the control group. By 2000 the programme covered six poor rural municipalities of central Nicaragua. During the first two years, the average annual family transfer was US\$272 dollars, or approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately US\$37 every two months (a total of US\$224 a year) if every health conditionality was met. The education transfer included US\$112 per household per year and a per beneficiary child transfer for school supplies of US\$21 per year. Transfers were made bimonthly. The mother in the beneficiary household received the cash transfer for health, contingent on her (1) bringing her children to scheduled preventative health care appointments – once a month for children under the age of two, and bimonthly (every other month) for those aged 2–5;
Citation  Name of programme(s) and country/countries  Programme details	Barham, T. and Maluccio, J.A. (2009) 'Eradicating diseases: the effect of conditional cash transfers on vaccination coverage in rural Nicaragua', <i>Journal of Health Economics</i> 28(3): 611–621.  Red de Protección Social (Nicaragua)  The intervention is a CCT implemented from 2000 to reduce both current and future poverty through conditional cash transfers for health and education attainment. To identify eligible households a poverty index was created for each locality and seven groups of six localities with similar wealth rankings were created. From each of these sets of six, three localities were randomly selected for inclusion in the treatment group and three in the control group. By 2000 the programme covered six poor rural municipalities of central Nicaragua. During the first two years, the average annual family transfer was US\$272 dollars, or approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately US\$37 every two months (a total of US\$224 a year) if every health conditionality was met. The education transfer included US\$112 per household per year and a per beneficiary child transfer for school supplies of US\$21 per year. Transfers were made bimonthly. The mother in the beneficiary household received the cash transfer for health, contingent on her (1) bringing her children to scheduled preventative health care appointments – once a month for children under the age of two, and bimonthly (every other month) for those aged 2–5; (2) attending bimonthly health educational workshops and; (3) ensuring adequate weight gain for her children.  The study is a quasi-experimental one using a DID approach with a special-purpose longitudinal survey of 2,229
Citation  Name of programme(s) and country/countries  Programme details  Evaluation methodology	Barham, T. and Maluccio, J.A. (2009) 'Eradicating diseases: the effect of conditional cash transfers on vaccination coverage in rural Nicaragua', <i>Journal of Health Economics</i> 28(3): 611–621.  Red de Protección Social (Nicaragua)  The intervention is a CCT implemented from 2000 to reduce both current and future poverty through conditional cash transfers for health and education attainment. To identify eligible households a poverty index was created for each locality and seven groups of six localities with similar wealth rankings were created. From each of these sets of six, three localities were randomly selected for inclusion in the treatment group and three in the control group. By 2000 the programme covered six poor rural municipalities of central Nicaragua. During the first two years, the average annual family transfer was US\$272 dollars, or approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately US\$37 every two months (a total of US\$224 a year) if every health conditionality was met. The education transfer included US\$112 per household per year and a per beneficiary child transfer for school supplies of US\$21 per year. Transfers were made bimonthly. The mother in the beneficiary household received the cash transfer for health, contingent on her (1) bringing her children to scheduled preventative health care appointments – once a month for children under the age of two, and bimonthly (every other month) for those aged 2–5; (2) attending bimonthly health educational workshops and; (3) ensuring adequate weight gain for her children.  The study is a quasi-experimental one using a DID approach with a special-purpose longitudinal survey of 2,229 individual-level observations.

Citation	Barrera-Osorio, F., Bertrand, M., Linden, L., and Perez-Calle, F. (2011) 'Improving the design of conditional transfer programs: evidence from a randomized education experiment in Colombia', <i>American Economic Journal: Applied Economics</i> . 3(2): 167–195.
Name of programme(s) and country/countries	Conditional Subsidies for School Attendance (Subsidios Condicionados a la Asistencia Escolar) (Colombia)
Programme details as reported in the study	This study focuses on a CCT which began in 2005, intended to improve school attendance and enrolment and to encourage matriculation in tertiary education. Two types of transfer are available: the basic transfer for students who have completed grades 6 to 8 and the tertiary transfer for students who completed grades 9 to 11. Eligibility is determined by age (between grades 5 and 11) and means test (child's family had to have been classified into the bottom two categories on Colombia's poverty index, the Sistema de Identificación de Potenciales Beneficios de Programas Sociales (SISBÉN)). Treatment allocation was random, conducted in public through a lottery. For the basic transfer there were two treatments: 1) 30,000 Colombian pesos paid in a lump sum each month conditional on the child attending school for at least 80% of the days that month, and 2) 20,000 pesos per month and the remaining 10,000 pesos held back each month then made available in a lump sum (savings) at the beginning of the next school year. The tertiary transfer consisted of a 20,000 peso monthly transfer then a lump sum of 600,000 pesos upon graduation (US\$300 or 73% of the average cost of the first year at a vocational school) if they enrol in a tertiary institution. If they do not enrol straight away this payment is delayed for one year. The maximum duration of participation is three years. For both of the basic transfer treatments, receipt is conditional on 80% attendance per month and students are removed from programme altogether if they fail to matriculate to the next grade twice or fail attendance condition for two months in a row or are expelled. Payments are transferred by bank transfer using a dedicated debit card.
Evaluation methodology	The study uses an experimental approach and estimates impacts using an SD estimator, controlling for socio-demographic and school characteristics. In some models school-level fixed effects are used. The data come from a special-purpose survey for this study conducted in two waves, also the national SISBÉN poverty database containing household information, and observational data from school visits. In the San Cristóbal survey site the sample was 6,875 treatment and 4,072 control individuals; in the Suba survey site it was 2,857 treatment and 3,505 control.
Overall findings	All the designs significantly increase attendance. Treatment 2 (postponing part of the transfer) increases re-enrolment while the basic treatment has no effect. Treatment 3 also increases matriculation rate in tertiary institutions. The two non-standard versions of the CCT are concluded to be superior. The added effect of these problems is driven entirely by their effect on the most at-risk students. Negative effects observed on enrolment of eligible, but non-treated, children in the household.
Reported outcome areas	Education; Employment; Health
Indicators reported	Monthly rate of school attendance (percentage of days they attend when they are meant to); enrolment in school; number of meals eaten in a day; number of meals with a common source of protein; expenditure on education; number of hours worked in the last week that the child worked and the amount of money earned during that week.
Citation	Barrera-Osorio, F., Bertrand, M., Linden, L. and Perez-Calle, F. (2008) <i>Conditional cash transfers in education design features, peer and sibling effects evidence from a randomized experiment in Colombia. Working Paper 13890.</i> Cambridge, MA: National Bureau of Economic Research.
Name of programme(s) and country/countries	Conditional Subsidies for School Attendance (Subsidios Condicionados a la Asistencia Escolar) (Colombia)
Programme details as reported in the study	This study focuses on a CCT which began in 2005, intended to improve school attendance and enrolment and to encourage matriculation in tertiary education. Two types of transfer are available: the basic transfer for students who have completed grades 6 to 8 and the tertiary transfer for students who completed grades 9 to 11. Eligibility is determined by age (between grades 5 and 11) and means test (child's family had to have been classified into the bottom two categories on Colombia's poverty index, the SISBÉN). Treatment allocation was random, conducted in public through a lottery. For the basic transfer there were two treatments: 1) 30,000 Colombian pesos paid in a lump sum each month conditional on child attending school at least 80% of the days that month, and 2) 20,000 pesos per month and the remaining 10,000 pesos held back each month then made available in a lump sum (savings) at beginning of next school year. The tertiary transfer consisted of a 20,000 peso monthly transfer then a lump sum of 600,000 pesos upon graduation if they enrol in a tertiary institution. If they do not enrol straight away this payment is delayed for one year. The maximum duration of participation is three years. For both of the basic transfer treatments, receipt is conditional on 80% attendance per month and students are removed from programme altogether if they fail to matriculate to the next grade twice or fail attendance condition two months in a row or are expelled. Payments are transferred by bank transfer using a dedicated debit card.
Evaluation methodology	The study uses an experimental approach, estimating SD estimators and instrumental variable regressions. The data come from a special-purpose survey for this study conducted in two waves, also the national SISBÉN poverty database containing household information, and observational data from school visits. In the San Cristóbal survey site the sample was 6,875 treatment and 4,072 control individuals; in the Suba survey site it was 2,857 treatment and 3,505 control.

(Cont'd)	
Overall findings	Treated students are more likely to attend school, to remain enrolled, to matriculate to the next grade, to graduate and to matriculate to a tertiary institution. Negative spill-over was observed on the education of children that were registered but not selected for treatment by the lottery.
Reported outcome areas	Education; Employment; Health
Indicators reported	Monthly rate of school attendance (percentage of days they attend when they are meant to); enrolment in school; number of meals eaten in a day; number of meals with a common source of protein; expenditure on education; number of hours worked in the last week that the child worked and the amount of money earned during that week.
Citation	Barrientos, A. and Villa J.M. (2013) <i>Anti-poverty transfers and labour participation effects. Working Paper 185.</i> Manchester: Brooks World Poverty Institute, University of Manchester.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details	FA is a CCT, introduced in 2001 with the aim of supporting the poorest households in the human capital investment of their children. Eligibility is determined by a PMT. In 2010, the programme provided monthly transfers for each child attending school of US\$7.5 and US\$15, respectively, in rural and urban areas. Transfers for children in secondary schools in large cities were higher, averaging US\$25 per month. In addition, households with children aged 0–6 were entitled to a monthly transfer of US\$30. Transfers were paid bimonthly to the mother and are conditional on minimum school attendance, immunisation, health check-ups, and on mothers attending nutrition and health sessions.
Evaluation methodology	The study examines labour market outcome effects of FA in urban areas. It relies on RDD and a large panel dataset.
Overall findings	The paper finds significant and largely positive effects on labour market outcomes. These effects are heterogeneous in household composition and gender, confirming that the effects of anti-poverty transfers on labour supply reflect a reorganisation of household productive resources in response to the transfer.
Reported outcome areas	Employment
Indicators reported	Labour market outcome variables, including labour-force participation, employment, health insurance status and job search.
Citation	Bazzi, S., Sumarto, S. and Suryahadi, A. (2012) <i>Evaluating Indonesia's unconditional cash transfer programme,</i> 2005–2006. <i>Grantee Final Report</i> New Delhi: International Initiative for Impact Evaluation (3ie).
Name of programme(s) and country/countries	Unconditional cash transfer to mitigate the effect of the removal of a fuel subsidy (Indonesia)
Programme details as reported in the study	The intervention studied here is a UCT targeted to low-income households to mitigate the shock of a fuel subsidy removal that raised the average price of fuel products by 114%. Eligibility depended on a quasi-means-testing process whereby local officials devised a list of potential recipients using their own discretion and community-based records, and then these households were means-tested on the basic of income and asset data collected on them. The transfer size is officially 300,000 Indonesian rupiahs, but in practice some local officials extracted a tax (not clear what amount). Payment timings are irregular, with two payments happening roughly within a year of each other (although some beneficiaries were still awaiting the second payment at the time of the study). It is not clear who in the household is the main recipient.
Evaluation methodology	The study uses a quasi-experimental design consisting of DID estimation with reweighting according to the likelihood of receiving treatment (a propensity score). A multinomial logit model with four outcomes relating to poverty status is also used. The data come from the nationally representative National Socioeconomic Survey household-level panel – Survei sosial ekonomi nasional (Susenas). A balanced panel is achieved of 9,048 households of which 639 have received one transfer, 1,805 have received two transfers and the remainder are the control group.
Overall findings	No difference was found in per capita expenditure growth and changes in labour supply per adult between those who received the full transfer and the control group. Lower expenditure growth and reduction in labour supply were observed among the group still expecting their final transfer. Receipt of any transfer (one or two) is associated with movement out of poverty.
Reported outcome areas	Poverty; Employment
Indicators reported	Log difference of total consumption expenditure (per capita) before and after transfer; log difference in expenditure on various food and non-food items; poverty status (chronic poverty, moving into poverty, moving out of poverty, never poor); mean hours worked by household members not currently enrolled in school.

Citation	Bazzi, S.A. (2013) 'It's all in the timing: cash transfers and household expenditures in a developing country', in S.A. Bazzi, <i>Essays in Development Economics</i> . PhD. University of California, San Diego.
Name of programme(s) and country/countries	Temporary UCT (Indonesia)
Programme details as reported in the study	This chapter considers a temporary UCT that was implemented in 2005 to compensate poor households for a sudden cost in fuel resulting from removal of fuel subsidies. It was targeted at low-income households and used a targeting approach that involved local officials devising a list of potential recipients, using 'own-discretion and community-based records'. These households means-tested on the basis of income and asset related criteria, using a PMT. Transfers were paid quarterly, for one year, at the post office. Each payment was worth about \$30 (one eighth of mean household expenditure).
Evaluation methodology	This study employs a quasi-experimental research design. It uses a DID approach with reweighting according to propensity score of receiving treatment. The data used comes from a nationally representative household-level panel data from the National Socioeconomic Survey (Susenas). The study uses a balanced panel of 9,048 households.
Overall findings	The author finds no mean difference in expenditure growth between control and beneficiary households that received timely transfers, but the growth in expenditure is lower for those households still awaiting second payment.
Reported outcome areas	Poverty
Indicators reported	Growth in log total household expenditure per capita; growth in log expenditure for different expenditure groups; growth in log total household expenditure by length of delay.
Citation	Behrman, J.R., Parker, S.W., and Todd, P.E. (2009) 'Medium-term impacts of the <i>Oportunidades</i> conditional cash-transfer program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), <i>Poverty, Inequality, and Policy in Latin America</i> . Cambridge, MA: The MIT Press.
Citation  Name of programme(s) and country/countries	program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), Poverty, Inequality, and Policy in Latin
Name of programme(s) and	program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), <i>Poverty, Inequality, and Policy in Latin America</i> . Cambridge, MA: The MIT Press.
Name of programme(s) and country/countries Programme details as reported in	program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), <i>Poverty, Inequality, and Policy in Latin America</i> . Cambridge, MA: The MIT Press.  Oportunidades (Mexico)  Mexico's flagship CCT, operating since 1997, with five million families participating in the programme by 2006. Targeted using a marginality index to identify the poorest families, the programme transfers varying amounts conditional on regular school attendance and attendance at a health talk once a month for high school students. Programme rules allow
Name of programme(s) and country/countries Programme details as reported in the study	program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), <i>Poverty, Inequality, and Policy in Latin America</i> . Cambridge, MA: The MIT Press.  Oportunidades (Mexico)  Mexico's flagship CCT, operating since 1997, with five million families participating in the programme by 2006. Targeted using a marginality index to identify the poorest families, the programme transfers varying amounts conditional on regular school attendance and attendance at a health talk once a month for high school students. Programme rules allow students to fail each grade once.  RCT evaluation assessing programme impacts using a DID approach combined with a density reweighting method to take into account attrition occurring between the baseline and follow-up surveys. Data sources include the 2003 Rural Evaluation Survey (ENCEL2003), the 1997 pre-programme Survey of Household Socioeconomic Characteristics (ENCASEH) and school-level data on characteristics that reflect school quality from the Ministry of Education. Sample:
Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	program on rural youth in Mexico', in S. Klasen and F. Nowak-Lehmann (eds), <i>Poverty, Inequality, and Policy in Latin America</i> . Cambridge, MA: The MIT Press.  Oportunidades (Mexico)  Mexico's flagship CCT, operating since 1997, with five million families participating in the programme by 2006. Targeted using a marginality index to identify the poorest families, the programme transfers varying amounts conditional on regular school attendance and attendance at a health talk once a month for high school students. Programme rules allow students to fail each grade once.  RCT evaluation assessing programme impacts using a DID approach combined with a density reweighting method to take into account attrition occurring between the baseline and follow-up surveys. Data sources include the 2003 Rural Evaluation Survey (ENCEL2003), the 1997 pre-programme Survey of Household Socioeconomic Characteristics (ENCASEH) and school-level data on characteristics that reflect school quality from the Ministry of Education. Sample: youth who were aged 9–15 prior to the programme, where attrition was reconstructed.  Youth in the treatment group have about 0.2 more years of schooling than youth in the control group, both for boys and girls. Larger effects on the order of 0.5 years are observed for the subset of youth who were near the transition between primary and secondary school at the time the programme was introduced. Estimates also suggest that boys with longer

Citation	Behrman, J.R. and Hoddinott, J. (2005) 'Programme evaluation with unobserved heterogeneity and selective implementation: the Mexican PROGRESA impact on child nutrition', <i>Oxford Bulletin of Economics and Statistics</i> 67(4): 547–569.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	The programme is a large Mexican rural anti-poverty and human resource programme, introduced by the Federal Government of Mexico as part of an effort to break the intergenerational transmission of poverty. The programme had various objectives, mainly aimed at improving the educational, health and nutritional status of poor families, and particularly children and their mothers, initially in poor rural communities with less than 2500 inhabitants. The programme comprised of CCTs, participation in 'pláticas' (meetings at which health and nutrition issues were discussed), and nutrition supplements ('papillas'), which were provided to pregnant and lactating women and children between the ages of 4 months and 2 years (and between 2–5 years of age if they were malnourished). The bimonthly transfers were conditional upon regular visits by pre-schoolers to health clinics and regular school attendance by school-age children. Transfers were equivalent to about 20% of household consumption.
Evaluation methodology	The study considers the impact of PROGRESA on child nutrition with a quasi-experimental approach, using data from the Instituto Nacional de Salud Pública to estimate child-level fixed-effects regressions. The sample covers the original 506 randomly assigned localities across seven south-central states as part of the formal evaluation, and includes 2,712 children.
Overall findings	When the impact of PROGRESA is examined based on the presumption of randomised allocations, it is found that PROGRESA had no effect, or even a negative impact, on child nutrition. However, child fixed-effects estimates that control for unobserved heterogeneity that is correlated with access to nutritional supplements indicate a significantly positive and fairly substantial programme effect of the nutritional supplements on children aged between 12–36 months.
Reported outcome areas	Health
Indicators reported	Child height.
Citation	Behrman, J.R. and Parker, S.W. (2013) 'ls health of the aging improved by conditional cash transfer programs? Evidence from Mexico', <i>Demography</i> 50(4): 1363–1386.
Name of programme(s) and country/countries	PROGRESA/Oportunidades (health and nutrition component) (Mexico)
Programme details as reported in the study	This study evaluates the impact of a CCT which began in 1997 with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). The treatment is randomised at the community level and household eligibility is determined through means-testing on per capita household income and other household characteristics. The transfer consists of two possible components: education and health. The education component of the programme initially provided grants for children between grades 3 to 9, but in 2001 the scope was expanded to included grades 10 to 12. Education transfers of between 105 and 660 Mexican pesos per child, depending on their school year, are made to beneficiary households. At grades 7 and above, the grants are slightly higher (by about 13%) for girls than boys. Transfers are conditional on regular school attendance (85% of the time) and on family members visiting health clinics for check-ups. If a student fails a grade twice then their transfer is stopped altogether. The health component consists of 180 pesos per month for mothers with children between the ages of 4 months and 2 years and women who are pregnant or lactating. For the health component, beneficiaries are required to attend monthly health and nutrition talks. Payment is wired to a nearby office where it is collected in cash. For the health component, there are complementary information sessions on health and nutritional supplements for children aged 2–3 if malnourished. In 2000, after approximately 1.5 years of the programme, the control group communities also began to receive benefits, meaning that this study tests the impact of differential exposure lengths. The programme had approximately five million beneficiaries at the time of the study.
Evaluation methodology	A quasi-experimental approach is used consisting of DID estimation with PSM of treatment and controls. The data come from a special-purpose household panel survey used to evaluate the programme. The overall sample is 8,500 individuals.
Overall findings	Positive impacts from the transfer on all health outcomes; larger impacts for women than men and particularly for the elderly (aged 70 or above).
Reported outcome areas	Health; Employment
Indicators reported	Probability of attending clinic in previous 12 months; Days reported sick in previous 4 weeks; Days unable to carry out normal activities in previous 4 weeks; Proportion with diabetes (self-reported); Proportion with high blood pressure (self-reported); Proportion able to carry out vigorous activities, such as running or carrying heavy objects; Distance (in km) able to walk before getting tired; Proportion working in the previous week in activity contributing to family income.

Citation	Behrman, R., Parker, S.W. and Todd, P.E. (2004) <i>Medium-term effects of the Oportunidades program package, including nutrition, on education of rural children age 0-8 in 1997. Technical Document Number 9 on the Evaluation of Oportunidades</i> 2004. Mexico, DF: Instituto Nacional de Salud Pública.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Operating in small rural communities since 1997, the programme provides cash grants to families in exchange for regular school attendance of children and youths as well as regular health clinic attendance and nutritional supplements for infants and very young children and for pregnant and lactating women. Its central objective is the linking of monetary transfers to investment in the human capital of poor children and family members and at time of writing covered a total of 5 million families (with payments ranging from 105–660 Mexican pesos), about one quarter of all families in Mexico. Impact on education could be mediated by several programme components including: cash transfers to the mothers in the treatment households, participation in 'pláticas' (educational talks), nutritional supplements, growth monitoring and conditionality.
Evaluation methodology	RCT, using a) DID for the original treatment and control groups for children who were of school age (6–8) in 1997 and treatment-control difference estimates for children who were of preschool age (0–5) in 1997, and b) matching estimates between those who had obtained treatment in 1998 and the 2003 matched comparison group. Analysis is based on data provided in the 2003 Rural Evaluation Survey (ENCEL), which is linked with the 1997 pre-programme Survey of Household Socioeconomic Characteristics (ENCASEH) data.
Overall findings	The evidence thus far shows strong impacts for children aged 6–8 in 1997 on their level of schooling attainment and smaller impacts for children below this age group. Impacts for the older children probably derive from the receipt of grants, whereas younger children by and large were not eligible yet or eligible for only a short period of time for the grants by 2003.
Reported outcome areas	Education
Indicators reported	(Children aged 0–8 in 1997) Enrolment rates, ever-failing, progressing on-time, grades schooling completed, entering secondary school.
Citation	Behrman, J.R., Parker, S.W., Todd, P.E. (2005) 'Long-term impacts of the Oportunidades conditional cash transfer
	program on rural youth in Mexico'. Discussion Paper 122. Göttingen: Ibero-America Institute for Economic Research, Georg-August-Universität Göttingen.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	CCT, operating since 1997, that provides grants for primary and secondary school children conditional on enrolment and attendance — with grant amounts slightly higher (by about 13%) for girls than boys in secondary and high school. The programme also provides grants for school supplies and a fixed transfer linked to regular health clinic attendance. Five million families, targeted using a marginality index, were enrolled at time of the study.
Evaluation methodology	RCT using DID and density reweighting method, based on a sample of youth who were aged 9–15 in 1997 just prior to the programme intervention. Data sources were Oportunidades' special-purpose panel surveys and the 2003 follow-up rural evaluation survey (ENCEL2003).
Overall findings	Significant positive impacts of long-term (5.5 years) exposure to the programme on school grades completed. On average, youth in the treatment group have about 0.2 more years of schooling than youth in the control group, both for boys and girls. However, no effect on cognitive tests and negative effects on employment (reduction in work) for boys and insignificant effects for girls.
Reported outcome areas	Education; Employment; Empowerment
Indicators reported	(All long-term impact on children aged 9–15 prior to programme) Enrolment rates, grades of schooling completed,

Citation	Behrman, J.R., Parker, S.W. and Todd, P.E. (2011) 'Do conditional cash transfers for schooling generate lasting benefits? A five-year follow-up of PROGRESA/Oportunidades', <i>Journal of Human Resources</i> 46(1): 93–122.
Name of programme(s) and country/countries	PROGRESA/Oportunidades (Mexico)
Programme details as reported in the study	This study evaluates the impact of a CCT which began in 1997 with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). The treatment is randomised at the community level, and household eligibility is determined according to criteria that are not explained. In its initial phase the programme provided grants for children between grades 3–9, but in 2001 the scope was expanded to included grades 10–12. Transfers of between 105 Mexican pesos and 660 pesos per child, depending on their school year, are made to beneficiary households. At grades 7 and above, the grants are slightly higher (by about 13%) for girls than boys. Transfers are conditional on regular school attendance (a minimum of 85%) and on family members visiting health clinics for checkups. If a student fails a grade twice then their transfer is stopped altogether. In 2000, after approximately 1.5 years of the programme running, the control group communities also began to receive benefits, meaning that this study tests the impact of differential exposure lengths. The programme had approximately five million beneficiaries at the time of the study.
Evaluation methodology	A quasi-experimental approach is used, consisting of DID estimation with PSM of treatment and controls. The data come from a special-purpose household panel survey used to evaluate the programme. The sample consists of 8,894 programme-eligible individuals in wave 1 and 5,591 in wave 2.
Overall findings	The transfer has positive effects on school grade attainment and reduction in child labour, but increases the likelihood of being in work for older girls and also shifts from agricultural to non-agricultural employment. Longer exposure to the programme increases the positive effect.
Reported outcome areas	Education; Employment
Indicators reported	School grades accumulated; probability of child/young person being employed (in market employment); probability of child/young person working in agriculture.
Citation	Behrman, J.R., Sengupta, P., Todd, P. (2005) 'Progressing through PROGRESA: an impact assessment of a school subsidy
	experiment in rural Mexico', Economic Development and Cultural Change 54 (1): 237–275.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	The broad objective of PROGRESA, introduced in 1997, is to improve the conditions of education, health, and nutrition for poor families, particularly for children and their mothers, by providing cash transfers conditional on regularly sending children to school (as well as other requirements not relevant to the article). At the time of writing, PROGRESA provided aid to approximately 2.6 million poor families and operated in over 50,000 localities in 31 states. The benefit levels for the time period covered by the data range from 70 to 255 Mexican pesos per month, amounting to an average of US\$55 per month, over a fifth of average family income.
Evaluation methodology	RCT evaluation design, adopting DID matching for analysis. Data sources: PROGRESA's special-purpose panel survey (baseline surveys administered in October 1997 and March 1998 and two follow-up surveys administered at approximately one-year intervals). There are over 30,000 eligible children participating in the experiment, but study's data sets pertain to over 75,000 children because, within each community, data collection was exhaustive and data are available on children from families that were ineligible for the subsidies. The data analysed covers only the first two years of the operation of PROGRESA, but longer-term impacts are simulated using a Markov schooling model to predict the effects of multiple years of exposure to the programme.
Overall findings	Enrolment rates reveal the effects of the programme only for older children, with the greatest changes observed in the age ranges and grade levels for which the school subsidies are greatest. For children aged 6–10, programme participation is associated with less grade repetition and better grade progression. For children aged 11–14, the programme decreases the drop-out rate, particularly during the transition from primary to secondary school, and encourages school re-entry among those who have dropped out.
Reported outcome areas	Education
Indicators reported	Enrolment rates, age at time of matriculation, grade repetition, and drop-out rates, and school re-entry rates among dropouts.

Citation	Behrman, J.R., Gallardo-García, J., Parker, S.W., Todd P.E., Vélez-Grajales, V. (2012) 'Are conditional cash transfers effective in urban areas? Evidence from Mexico', <i>Education Economics</i> 20(3): 233–259.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	CCT, operating since 1997, targeted at poor families as measured by a marginality index. The programme has two main subsidy components: a health and nutrition subsidy and a schooling subsidy. To receive the health and nutrition benefit, household members have to attend clinics for regular check-ups and attend informational health talks. To receive the school subsidy, children or youths in participating households have to attend school in one of the subsidy-eligible grade levels (grades 3–12) for at least 85% of school days. At time of writing, 30 million households received the benefits, which amount to about US\$35–40 monthly.
Evaluation methodology	RCT, evaluating impact by using DID matching, as this allows for time-invariant unobservable differences between the participant and nonparticipant groups that may affect participation decisions and outcomes. The main parameter of interest in this article is the average impact of treatment on the treated, for various subgroups of children/youths defined by age, gender and pre-programme poverty status. Specifically, the analysis focuses on girls and boys who were 6–20 years old in 2002. The analysis sample come from the Urban Evaluation Survey data, gathered in three rounds (baseline 2002, 2003 and 2004).
Overall findings	In the short term (1–2 years) the programme is successful in increasing school enrolment, schooling attainment and time devoted to homework for girls and boys and in decreasing working rates of boys.
Reported outcome areas	Education; Employment
Indicators reported	Schooling attainment levels, school enrolment rates, time devoted to homework, working rates and monthly wages.
Citation	Behrman J.R., Parker, S.W. and Todd, P.E. (2009) 'Schooling impacts of conditional cash transfers on young children: evidence from Mexico', <i>Economic Development and Cultural Change</i> , 57(3): 439–477.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	CCT, operating since 1997, and conditional on a) the whole family (including pre-schoolers) regularly visiting health clinics and school-aged children attending school, b) attending regular meetings ('pláticas') during which health and nutritional issues and practices are discussed. Beneficiaries receive bimonthly cash transfers equivalent on average to 20% to 30% of household consumption. The programme also delivers nutritional complements for pregnant and lactating women and children between six months and two years, and enforces growth monitoring — all potential channels of impact.
Evaluation methodology	RCT, using DID with randomised allocation and DID with matching. Data sources include: ENCEL (the Oportunidades Evaluation Survey) from 2003, linked with earlier data, particularly the 1997 pre-programme Survey of Household Socioeconomic Characteristics (ENCASEH97). Sample: children aged 0–8 pre-programme where attrition was reconstructed.
Overall findings	The empirical findings show positive programme impacts on reducing ages at entering school for the younger children, as well as on accumulated grades of schooling after 5.5 years of benefits for older children, with estimates implying a 1% reduction in the age of entry to primary and an increase in grades of schooling completed to date of about 8% to 9%.
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Reported outcome areas	Education

Citation	Benedetti, F. and Ibarrarán, P. (2015) <i>Do education and health conditions matter in a large cash transfer? Evidence from a Honduran experiment. Working Paper IDB-WP-577.</i> Washington, DC: Inter-American Development Bank.
Name of programme(s) and country/countries	Bono 10,000 (Honduras)
Programme details as reported in the study	This study evaluates the impact of the third incarnation of a CCT programme that began in the 1990s. This particular intervention began in 2010 and targets children, pregnant women and lactating mothers in poor households. Randomisation of treatment allocation occurred at the village level and household eligibility is means-tested on per capita consumption. Beneficiary households receive 1,946 lempiras per capita or (equivalent to 18% of median consumption). For children, only one child needed to be enrolled in school and to satisfy the attendance condition for all children to receive the transfer. The health transfer is conditional on being registered in a health centre but this condition only applies if there is no child eligible for an education transfer. Transfers are made three times per year.
Evaluation methodology	A quasi-experimental approach is used consisting of DID estimation. The data come from a special-purpose household panel survey intended for the evaluation of the programme. The total sample size is 4,416 households.
Overall findings	Some effects are observed on school enrolment, child labour participation and use of health services but these are smaller than in an earlier pilot possibly because conditionality was reduced compared to before.
Reported outcome areas	Poverty; Education; Employment; Health
Indicators reported	Per capita consumption; food and non-food consumption; education expenditure; likelihood of being in poverty; household income per capita; labour-force participation; school enrolment; infants had been recently weighed; reason for last health centre visit was a regular check-up; percentage of children with a full set of immunisations; incidence of health problems (e.g. diarrhoea).
Citation	Benhassine, N., Devoto, F., Duflo, E., Dupas, P. and Pouliquen, V. (2013) <i>Turning a shove into a nudge? A 'labeled cash</i>
Name of programme(s) and country/countries	transfer' for education. Working Paper 19227. Cambridge, MA: National Bureau of Economic Research.  Tayssir (Morocco)
Programme details as reported in the study	The Tayssir intervention aims to improve school attendance among poor children and increase human capital accumulation. It consists of a labelled cash transfer (LCT) and a conventional CCT. It is targeted to school-aged children in poor rural communities (detailed eligibility criteria are not given). The transfer is either made to the father or mother depending on a randomised allocation process at the school level, first to treatment or control group and within the treatment group by either CCT-to-father, CCT-to-mother, LCT-to-father or LCT-to-mother. Parents have to self-enrol in the programme at the school to be considered. The transfer is equal to 60 Moroccan dirhams per 6- to 7-year-old child, 80 dirhams for each 8- to 9-year-old child, and 100 dirhams for each 10- to 11-year-old child per month (up to 10 months per year). The total amount is distributed in three lump sums throughout the year for two years, in cash from the local post office or a programme official. In the case of the CCT, the child has to be enrolled in school and not have more than four absences in a given month to remain eligible. In the LCT group, the transfer is explicitly stated to be for education, but no conditions were formally imposed or enforced.
Evaluation methodology	The study uses a randomised experimental design to test the different interventions using OLS linear and logistic regression with baseline level characteristics as controls to estimate the treatment effect. The dataset combines a school-level dataset (data collected during surprise visits), household-level dataset, individual-level dataset comprising arithmetic scores from one child per household and data from an additional 'awareness' survey. Depending on the model the sample is between 400 and around 4,000 observations.
Overall findings	The transfer led to large increases in school enrolment and attendance overall. Conditionality and differences in targeting (male versus female recipient) made almost no difference to the results.
Reported outcome areas	Education; Employment
Indicators reported	Attending school by end of year two; never enrolled in school by end of year two; dropped out by end of year two; attendance rate during surprise school visits; completed primary school; time (minutes) spent on school, homework, chores, work, social activities, etc.; score on arithmetic test.

Citation	Bertrand, M., Mullainathan, S. and Miller, D. (2003) 'Public policy and extended families: evidence from pensions in South
	Africa', World Bank Economic Review, 17(1): 27–50.
Name of programme(s) and country/countries	South Africa Old-Age Pension (South Africa)
Programme details	South Africa's Old-Age Pension (UCT), dates back to the 1920s, when it was only for white South Africans. Following major reforms after 1992, eligibility was determined primarily by age: only women over 60 and men over 65 years of age. It is also means-tested. The pension pays lump-sum cash transfers, roughly twice the average per capita income in African households, to eligible men and women.
Evaluation methodology	The study examines how the old-age pension affects the labour supply of prime-age individuals living with an elderly household member. It uses data from the Integrated Household Survey of South Africa, a survey of a random sample of 9,000 households conducted in 1993. Results are presented from simple OLS regressions and from regressions that instrument the pension income variable with the number of age-eligible men and women in the household.
Overall findings	The study finds a sharp drop in working hours of prime-age individuals in households when women reach the age of 60 and men the age of 65, the ages at which they become eligible for pensions. It also finds that the drop in labour supply is much larger when the pensioner is a woman, suggesting an imperfect pooling of resources. The allocation of resources among prime-age individuals depends strongly on their absolute age and gender as well as their relative age. The oldest son in the household reduces his working hours more than any other prime-age household member.
Reported outcome areas	Employment
Indicators reported	Working hours and employment status of 16–50-year-olds; who benefits from the transfer/resource pooling.
Citation	Blattman C., Fiala, N. and Martinez S. (2012) 'Employment generation in rural Africa: Mid-term results from an experimental evaluation of the Youth Opportunities Program in Northern Uganda'. <i>Discussion Paper 1201</i> . Berlin: DIW Berlin.
Name of programme(s) and country/countries	Youth Opportunities Program (Uganda)
Programme details	The intervention is a CCT for youth vocational training, tools and business start-up costs, commencing in 2008, forming part of the Northern Uganda Social Action Fund (NUSAF). The two main aims are to raise youth incomes and employment, and to improve community reconciliation and reduce conflict. The programme is targeted to poor and underemployed 'youth' (aged 16–35) with a minimum capacity to benefit from vocational training. Applicants had to form groups of roughly 15 to 25 young adults interested in a vocation and submit a proposal for purchasing skills training, tools and othe materials required to start an enterprise. Groups were otherwise free of supervision or oversight in the actual spending On average, successful groups received a lump-sum cash transfer of US\$7,108 to a jointly held bank account—roughly US\$374 per group member, which is more than 20 times the average youth monthly income at the time of the baseline survey. Payments were a one-off transfer to a group bank account, after which members were allocated their share. In 2008, the government determined that it had funding for 265 of 535 eligible groups (with an average of 22 members each).
Evaluation methodology	The study was designed as an RCT, using analysis of covariance (ANCOVA) to estimate programme impacts. The special-purpose panel survey included a final sample of 2,675 individuals.
Overall findings	Mid-term results after two years suggest four main findings. First, despite a lack of central monitoring and accountability, most youth invest the transfer in vocational skills and tools. Second, the economic impacts of the transfer are large: hours of non-household employment double and cash earnings increase by nearly 50% relative to the control group. The authors estimate that the transfer yields a real annual return on capital of 35% on average. Third, the evidence suggests that poor access to credit is a major reason youth cannot start these vocations in the absence of aid. Much of the heterogeneity in impacts is unexplained, however, and is unrelated to conventional economic measures of ability, suggesting we have much to learn about the determinants of entrepreneurship. Finally, these economic gains result in modest improvements in social stability.
Reported outcome areas	Savings, investment and production; Employment; Empowerment; Health; Poverty
Indicators reported	Value of tools and machines/stock of raw materials acquired, cash earnings from previous four weeks, monthly cash earnings adjusted for hourly earnings, index of wealth score, hours spent on all economic/market activities in the previous four weeks, number of group memberships, attendance at community meetings, whether active in community meetings, whether a community leader or community mobiliser, locus of control index, access to basic services, expected five-year change in power position, optimism index, index of depression and distress symptoms.

Citation	Blattman, C., Green, E.P., Jamison, J., Lehmann, M. C. and Annan, J. (2015) <i>The returns to cash and microenterprise support among the ultra-poor: a field experiment</i> . Rochester, NY: Social Science Research Network (SSRN).
Name of programme(s) and country/countries	Women's Income Generating Support (WINGS) (Uganda)
Programme details	WINGS was an experiment from 2009 providing war-affected individuals (particularly women) in northern Uganda with an enterprise grant equivalent to US\$150, plus five days of business skills training and ongoing supervision. The objective was to support sustainable enterprises in war-torn areas. The programme was implemented in 120 villages in Kitgum and Gulu districts, with 10–17 marginalised villagers from each village being selected using community-based targeting and categorical targeting followed by interviews. Three quarters of those selected were to be women aged 14–30. The cash was framed as funds to implement business plans, the development of these being a condition of receiving the transfers, paid in two equal instalments, two and six weeks after training.
Evaluation methodology	The study investigated a wide range of impacts, including the effect of complementary self-help group training and supervision through an RCT and use of DID and SD regressions, drawing on a special-purpose panel survey. The sample included 1,800 individuals, comprised of 896 in the phase-1 treatment group and 904 in the delayed entry control group.
Overall findings	16 months after grants, participants had doubled their microenterprise ownership and incomes, mainly from petty trading. The effect of receiving group training was a doubling of earnings, but with no effect on consumption. When the control group received cash and training 20 months later, supervision was varied and a year later, supervision had increased business survival, but not consumption.
Reported outcome areas	Employment; Poverty; Health; Savings, investment and production; Empowerment
Indicators reported	Occupational choice (e.g. any non-farm self-employment, started enterprise, average work hours/chores per week); income and food security (e.g. index of income measures, earnings last harvest, monthly cash earnings, durable assets, monthly non-durable consumption, times went hungry, number of meals per day); member of community group; financial access (e.g. transfers/loans to/from other households, member of savings group, total savings/debts); health (physical health index, mortality); social relationships (community participation, social support received); empowerment (autonomy in purchases, physical/emotional abuse, degree of partner control, partner relationship quality, female and lives with partner).
Citation	Blattman, C. Fiala, N. Martinez, S. (2013) <i>The economic and social returns to cash transfers: evidence from a Ugandan aid program. Working Paper.</i> Berkeley, CA: Center for Effective Global Action (CEGA), University of California.
Name of programme(s) and country/countries	Youth Opportunities Program (YOP) (Uganda)
Programme details as reported in the study	This study considers the Youth Opportunity Program, which began operating in 2008. It is framed as an enterprise start-up programme targeted at poor and underemployed youth to reduce poverty and promote social cohesion and stability. It was originally self-targeted. Individuals were encouraged to apply in small groups and had to submit a proposal and budget (not monitored). A subsample of these were selected by government according to non-specified indicators. The 2,675 youths were randomly selected to participate, in order to achieve an RCT research design. Beneficiaries received one payment of US\$382 on average (roughly an annual income), which was distributed as a bank transfer. The transfer was conditional on vocation training, but this was not monitored.
Evaluation methodology	The study is designed as an RCT. It employs a DID approach, using a special-purpose panel survey with a total sample of 11,288 individuals (5,828 control, 5,460 treated).
Overall findings	Most invest the transfers in vocations and earnings rise by at least 40%, especially among the more credit-constrained, patient and risk-averse, higher relative returns for females.
Reported outcome areas	Poverty; Savings; Investment and production; Empowerment; Employment
Indicators reported	Participation in training; investment in capital stocks; savings; income; consumption; wealth; hours of employment; sector of employment; subjective well-being; kin integration; community participation; interpersonal aggression and disputes;

political participation.

Citation	Bobonis, H.J. (2011) 'The impact of conditional cash transfers on marriage and divorce', <i>Economic Development and Cultural Change</i> 59(2): 281–312.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA is a CCT that began in 1997, intended to improve child school attendance and health. At the time of the study it had reached over 2.6 million children. The programme has both an education and a health component. The education transfer amount begins at 100 Mexican pesos per month for households with no eligible children and increases by an additional amount between 70 to 255 pesos per month per child depending on grade level and gender up to a maximum of 625 pesos (amounts differ depending on exchange rate used). The health transfer consists of roughly 12 pesos per month and includes nutritional supplements for pregnant and breastfeeding women, newborns and malnourished children. The amount is typically equivalent to around 20–30% of household income. The transfer is conditional on school attendance (where applicable) and biannual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues and best practices are discussed.
Evaluation methodology	The study uses a quasi-experimental design in which OLS regression is used to estimate the treatment effect. The data come from the official panel survey used to evaluate the programme. The sample size is approximately 15,376 households.
Overall findings	The programme did not affect the overall proportion of marital unions. However, there was more 'turnover' in treatment villages, meaning more divorces and more new unions.
Reported outcome areas	Empowerment
Indicators reported	Proportion of women in a marital relationship; proportion of marital dissolutions among couples who were married at baseline; proportion of new unions among mothers who were single at baseline.
Citation	Bobonis, G., Castro, R., González-Brenes, M. (2013) 'Public transfers and domestic violence: the roles of private
Name of programme(s) and country/countries	information and spousal control', <i>American Economic Journal: Economic Policy</i> 5(1): 179–205.  Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades began as PROGRESA in 1997 (it was renamed in 2001) as a CCT intended to improve child school attendance and health. At the time of the study it had reached over 2.6 million children. The programme has both an education and a health component. The education transfer amount begins at 100 Mexican pesos per month for households with no eligible children and increases by an additional amount for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). The health transfer consists of roughly 12 pesos per month and includes nutritional supplements for pregnant and breastfeeding women, newborns, and malnourished children. The transfer is conditional on school attendance (where applicable) and biannual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues and best practice are discussed.
Evaluation methodology	This study uses a quasi-experimental method to evaluate programme impact. The empirical method uses a regression model with a binary outcome (Logit) and fixed effects to isolate the impact of the transfer on the various outcomes. The data come from a nationally representative household survey and the sample size here is roughly 2,800 women.
Overall findings	Beneficiaries were much less likely to be victims of physical abuse, but more likely to receive violent threats without associated abuse. This suggests attempts from the male partner to extract rents from the female beneficiary because her 'threat point' has been raised, i.e. she has more resources to bargain her way out of violence, which in turn creates an incentive for the male partner to seek out these rents.
Reported outcome areas	Empowerment

Citation	Braido, L.H.B., Olinto, P. and Perrone, H. (2012) 'Gender bias in intrahousehold allocation: evidence from an unintentional experiment', <i>Review of Economics and Statistics</i> 94(2): 552–565.
Name of programme(s) and country/countries	Bolsa Alimentação (Brazil)
Programme details as reported in the study	Bolsa Alimentação is a CCT which began to be implemented in 2001 with the intention of reducing infant mortality and nutritional deficiencies among children from very poor families. The target group is pregnant women and mothers of children under the age of seven in poor families (with monthly per capita income below a certain threshold). The designated beneficiary is the highest-ranking woman in the household. Household eligibility is PMT-based on estimated per capita income. This study exploits a fault where there were multiple errors in the registration process which led to eligible households being randomly excluded from treatment. The transfer amount is 15, 30 or 45 Brazilian reals per month depending on number of qualifying children. Typically, this is equivalent to around 8% of household expenditure. Payment is made monthly and is deposited via an ATM card given to each beneficiary allowing money to be withdrawn from certain banks and retail stores. Receipt of the transfer is conditional on compliance with vaccination schedules and regular visits to public centres for prenatal care, child-growth monitoring, and health education classes.
Evaluation methodology	The study design is quasi-experimental and uses several different models to estimate the treatment effect, specifically DID with matching and instrumental variable regression. The data come from a special-purpose survey and the sample size used here is 1,000 households.
Overall findings	The transfer increased the consumption of vegetables, fruit and grains; the effect was not driven by the targeting of women as transfer beneficiaries.
Reported outcome areas	Poverty; Health; Empowerment
Indicators reported	Log of expenditure. Expenditure on various items (general services, family items, vices, grains, vegetables, fruit, dairy, meat, oils and spices).
Citation	Brenes-Camacho, G. (2011) 'Favourable changes in economic well-being and self-rated health among the elderly', <i>Social Science &amp; Medicine</i> 72(8): 1228–1235.
Name of programme(s) and country/countries	Non-contribution pensions (Costa Rica)
Programme details	The programme is a national non-contributory pension targeted to low socioeconomic status elderly individuals. Pensions are targeted by age and based on a socioeconomic means test. After the presidential inauguration in 2006, the cash transfers were raised from 16,000 colones (approximately US\$32) per month to 35,000 Costa Rican colones (approximately US\$70) per month. The non-contributory pensions were raised again to 50,000 colones (approximately US\$100) after July 2007. In addition to the pensions, beneficiaries were eligible for free access to public health care.
Evaluation methodology	The study is a quasi-experimental one, estimating random-effects ordered probit regressions using a nationally representative longitudinal study of 2,827 adults born in 1945 or before. A total of 1,556 respondents were used in the analysis.
Overall findings	People who experienced the full increase in the level of non-contributory pension reported a greater improvement in self-rated health between waves than those who experienced a smaller increase than the rest of the interviewees. Results suggest that increases in income may lead to a greater improvement in self-rated health.
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Reported outcome areas	Health

Citation	Buser, T., Oosterbeek, H., Plug, E., Ponce, J. and Rosero, J. (2014) 'The impact of positive and negative income changes on the height and weight of young children'. <i>IZA Discussion Paper 8130</i> . Bonn: IZA.
Name of programme(s) and country/countries	Bono Desarrollo Humano (Ecuador)
Programme details as reported in the study	This study evaluates an intervention that began in 1999 that was designed as a CCT, but in practice had no punitive consequences for non-compliance with the conditionality. The aim of the intervention is to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. Targeting is intended to reach the poorest 40% of households, therefore eligibility is means-tested on household wealth as determined by an index constructed using census data. The initial transfer was US\$15 per month which increased to US\$30 in 2007 and then again to US\$35 in 2009. Transfers are collected by the mother from local bank.
Evaluation methodology	A quasi-experimental method using RDD is used to estimate the treatment effect. The data come from a special-purpose cross-sectional survey used for this evaluation which a total sample size of 2,645 (for height and weight measurements the sample reduces to 1,374).
Overall findings	Losing the transfer had negative effects on height and weight of infants; starting to receive the transfer had no effect on height and weight of infants (measured after two years). Food expenditure declined in those that lost the transfer and this decline was similar to the size of the transfer.
Reported outcome areas	Poverty; Health; Employment
Indicators reported	Child height-for-age; weight-for-age; weight-for-height; child is stunted; child is underweight; likelihood of receiving health check; change in household food expenditure; change in non-food expenditure; mother's labour supply (hours worked); mother's score on depression scale.
Citation	Bustelo, M. (2011) 'Who else benefits from conditional cash transfer programs? Indirect effects on siblings in Nicaragua', in M. Bustelo, <i>Three essays on investments in children's human capital</i> . PhD. Urbana-Champaign: University of Illinois.
Name of programme(s) and country/countries	Red de Protección Social (RPS) (Nicaragua)
Programme details as reported in the study	CCT that operated from 2000–2002, with three specific goals: (1) to supplement household income for up to three years to increase expenditures on food, (2) to reduce school desertion during the first four years of primary school, and (3) to increase the nutritional status of children under the age of five. Grants received, conditional on enrolment in school, attending preventative healthcare appointments and attending educational workshops, depended on family composition and amounted to 21% of the total annual household expenditures in beneficiaries' households in the pre-intervention year. The programme also included a small supply-side transfer for teachers.
Evaluation methodology	RCT, using DID to estimate impacts based on a special-purpose panel survey. Target sample is of 1,764 households, including 2,867 targeted children, 481 younger non-targeted siblings and 1,884 older non-targeted siblings.
Overall findings	Results show that the RPS programme increases school participation of non-targeted siblings aged 14–17. Grade progression also shows significant gains with the programme for both male and female siblings aged 14–17, who progressed two years in primary education during the intervention.
Reported outcome areas	Education
Indicators reported	(Focus on non-targeted siblings) Enrolment rates; grade progression.

Citation	Cameron, L. and Shah, M. (2014) 'Can mistargeting destroy social capital and stimulate crime? Evidence from a cash
oltation	transfer program in Indonesia', <i>Economic Development and Cultural Change</i> 62(2): 381–415.
Name of programme(s) and country/countries	Bantuan Langsung Tunai (Indonesia)
Programme details as reported in the study	The Bantuan Langsung Tunai is a UCT which began to be implemented in 2005 with the aim of compensating poor households for a sudden cost in fuel resulting from removal of fuel subsidies. Target beneficiaries are poor households, who are identified as such for having monthly expenditures less than 175,000 Indonesian rupiahs (US\$17) per capita. Eligibility was supposed to be subjected to PMT on an index of household wealth indicators using data collected by local enumerators. In practice the criteria were very inconsistently enforced. In total the transfer reached 15 million households at the time of the study. The transfer consists of 100,000 rupiahs per month and is distributed once a month for six months in cash collected from the post office.
Evaluation methodology	The evaluation relies on a quasi-experimental method consisting of logistic regression with fixed effects. The dataset is composed of nationally representative household-level cross-sectional data from two sources. The total sample size is 262,476 individuals.
Overall findings	The study focuses on the impact of the transfer on crime. It was found that leakage of the transfer to non-poor (non-eligible) recipients leads to an increase in social unrest and experience of crime.
Reported outcome areas	Empowerment
Indicators reported	A member of the household was a victim of crime (binary).
Citation	Canavire Bacarreza, G. and Vásquez-Ruiz, H. (2013) Labour supply effects of conditional transfers: analyzing the Dominican Republic's Solidarity Program. Documentos de trabajo. Economía y Finanzas CIEF. No. 13–8. Medellín:
Name of programme(s) and	
Name of programme(s) and country/countries	Dominican Republic's Solidarity Program. Documentos de trabajo. Economía y Finanzas CIEF. No. 13–8. Medellín: Universidad EAFIT.
Name of programme(s) and country/countries Programme details	Dominican Republic's Solidarity Program. Documentos de trabajo. Economía y Finanzas CIEF. No. 13–8. Medellín: Universidad EAFIT.  Programa Solidaridad (Solidarity Programme) (Dominican Republic)  The Solidarity programme is a CCT which provides cash assistance, subject to beneficiary compliance with certain requirements, and aims to address problems related to poor levels of education, malnutrition and infant mortality. It consists of two main components: a health component and an education component. The health component 'Comer es Primero' grants the household US\$18 per month to heads of households in extreme and moderate poverty; the money must be used exclusively for the purchase of food. The education component, or School Attendance Incentive (ILAE), is transferred to beneficiary households with children aged 6–16 who are enrolled in basic education between first and eighth grade. Such transfers can only be used to purchase school supplies, books, uniforms and medicine. The amount
Citation  Name of programme(s) and country/countries  Programme details  Evaluation methodology  Overall findings	Dominican Republic's Solidarity Program. Documentos de trabajo. Economía y Finanzas CIEF. No. 13–8. Medellín: Universidad EAFIT.  Programa Solidaridad (Solidarity Programme) (Dominican Republic)  The Solidarity programme is a CCT which provides cash assistance, subject to beneficiary compliance with certain requirements, and aims to address problems related to poor levels of education, malnutrition and infant mortality. It consists of two main components: a health component and an education component. The health component 'Comer es Primero' grants the household US\$18 per month to heads of households in extreme and moderate poverty; the money must be used exclusively for the purchase of food. The education component, or School Attendance Incentive (ILAE), is transferred to beneficiary households with children aged 6–16 who are enrolled in basic education between first and eighth grade. Such transfers can only be used to purchase school supplies, books, uniforms and medicine. The amount transferred depends on the number of eligible children.  The study analyses the impact of the Solidarity Programme on labour market outcomes (labour market participation, income and informality). It uses matching techniques (PSM) and data from the Dominican Republic's Evaluation of Social
Name of programme(s) and country/countries Programme details Evaluation methodology	Dominican Republic's Solidarity Program. Documentos de trabajo. Economía y Finanzas CIEF. No. 13–8. Medellín: Universidad EAFIT.  Programa Solidaridad (Solidarity Programme) (Dominican Republic)  The Solidarity programme is a CCT which provides cash assistance, subject to beneficiary compliance with certain requirements, and aims to address problems related to poor levels of education, malnutrition and infant mortality. It consists of two main components: a health component and an education component. The health component 'Comer es Primero' grants the household US\$18 per month to heads of households in extreme and moderate poverty; the money must be used exclusively for the purchase of food. The education component, or School Attendance Incentive (ILAE), is transferred to beneficiary households with children aged 6–16 who are enrolled in basic education between first and eighth grade. Such transfers can only be used to purchase school supplies, books, uniforms and medicine. The amount transferred depends on the number of eligible children.  The study analyses the impact of the Solidarity Programme on labour market outcomes (labour market participation, income and informality). It uses matching techniques (PSM) and data from the Dominican Republic's Evaluation of Social Security Survey 2010 to estimate the differences in average effect on the treatment of those treated.  The results show a negative, but very small, impact of the different components of the programme on labour market indicators, especially for the components related to children. However, the estimates show some heterogeneity in the effects on the most vulnerable sectors of the population. The reduction in labour supply is more significant for women

Citation	Cheema, I., Farhat, M., Hunt, S., Javeed, S., Pellerano, L. and O'Leary, S. (2014) Benazir Income <i>Support Programme: firs follow-up impact evaluation report.</i> Oxford: Oxford Policy Management.
Name of programme(s) and country/countries	Benazir Income Support Programme (BISP) (Pakistan)
Programme details as reported in the study	The BISP was launched in 2008 as Pakistan's main national social safety-net programme and is the largest and most systematic social protection initiative ever launched in the country. Its immediate objective was to cushion the negative effects of the food, fuel and financial crises on the poor, but its longer-term objectives are to provide a minimum income package to the poor to protect the vulnerable against chronic and transient poverty. In the period under study, eligible families were to be provided with unconditional transfers to the value of 1,000 Pakistan rupees a month paid quarterly. This is approximately 164 Pakistan rupees per adult equivalent, which is just less than 10% of the monthly per adult equivalent consumption expenditure. Transfers are paid directly to any ever-married woman, with around three quarters collecting from an ATM with a debit card. Other mechanisms included doorstep delivery by Pakistan Post and two pilot smart card and mobile phone banking mechanisms. Eligibility was determined on the basis of a PMT with the BISP intended to reach the poorest 25% of Pakistan's population, following a national poverty census.
Evaluation methodology	The study uses mixed methods, including a quasi-experimental RDD based on a large-scale household survey across four provinces, along with a combination of key informant interviews, focus group discussions, in-depth interviews and timeline interviews.
Overall findings	The study reports a wide range of impacts, including increased consumption expenditure, plus a reduction of poverty among those just below the eligibility threshold. No impact on food expenditure is found, except for increased regularity of certain food items (fish, eggs and wheat). BISP does, however, appear to have reduced wasting among girls. The study also reports a small shift in empowerment arising from receiving transfers, though 36% of women did not retain control over the transfers. No overall reduction in labour participation is found, though the BISP appears to encourage a shift among men from casual labour towards self-employment, though there is no effect on likelihood of owning assets such as land or livestock. No effect is found on primary school enrolment but some increase in health expenditure is found. An increase in saving is also found, but only in one area and no effect on borrowing is found.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production; Employment; Empowerment
Indicators reported	Household consumption (including specific categories); poverty reduction; child anthropometrics; engagement of women in productive activities and access to finance; women's agency; labour participation (including different sectors and child labour); land ownership; livestock ownership; remittances; school attendance; health expenditure and use of consultation among sick; savings; loans.
Citation	Cluver, L., Boyes, M., Orkin, M., Pantelic, M., Molwena, T. and Sherr, L. (2013) 'Child-focused state cash transfers and adolescent risk of HIV infection in South Africa: a propensity-score-matched case-control study', <i>Lancet Global Health</i> , 1 (6): e362–e370.
Name of programme(s) and country/countries	South Africa Child Support Grant and Foster Grant (South Africa)
Programme details as reported in the study	This study assesses the impact of an unconditional child grant designed to alleviate child poverty in South Africa. The grants are targeted to households containing children who are orphaned, abandoned, at risk or neglected. There is also a means test for eligibility based on household income. The grants are given to the primary caregiver of children in the household. At the time of the study the child support grant had reached 11.2 million children and the foster grant 537,000 children. The child support grant consists of a lump sum of 280 South African rand per month and the foster grant 770 South African rand per month. The transfers are distributed monthly (the payment mechanism is not specified) until the child is 18 (or 21 if still attending school).
Evaluation methodology	The study uses a quasi-experimental method which consists of logistic regression with PSM of treatment and control groups. The data come from a panel survey intended for the evaluation of this programme. The sample size is 3,401 in both waves (of whom 72% received transfer).
Overall findings	For girls, the transfer was associated with reduced incidence and prevalence of transactional sex and age-disparate sex. No consistent effects were observed for boys.
Reported outcome areas	Health; Empowerment
Indicators reported	Transactional sex; age-disparate sex; sex after drinking alcohol or taking drugs; unprotected sex; having multiple partners.

Citation	Coffey, D. (2014) 'Costs and consequences of a cash transfer for hospital births in a rural district of Uttar Pradesh, India', <i>Social Science and Medicine</i> 114: 89–96.
Name of programme(s) and country/countries	Janani Suraksha Yojana (India)
Programme details as reported in the study	This study evaluates the impact of a CCT that began in 2008, intended to encourage women to give birth in health facilities. The programme targets pregnant women in poor, rural districts who are not intending or able to give birth in a medical facility. Eligibility is determined at the district level, with districts deemed eligible if 'low-performing' in terms of pre-programme health facility delivery rates. The transfer, of 1,400 rupees, is made once on proof of delivery in an accredited health centre and must be collected as a cheque by the husband.
Evaluation methodology	This evaluation was qualitative, consisting of 114 semi-structured interviews (with 20 women) and 18 key informant interviews (with eight informants).
Overall findings	No effect was found on maternal mortality rates or maternal and infant health in districts implementing the programme. The lack of impact may be because the programme does nothing to restructure the incentives of service providers in a dysfunctional health system. Government workers try to capture rents from the transfer and the standard of care is extremely poor. Families have to scrape together money from relatives in order to be admitted to the hospital since the payment is received afterwards.
Reported outcome areas	Health
Indicators reported	N/A
Citation  Name of programme(s) and	Covarrubias, K., Davis, B. and Winters, P. (2012) 'From protection to production: productive impacts of the Malawi Social Cash Transfer scheme,' <i>The Journal of Development Effectiveness</i> 4(1): 50–77.  Social Cash Transfer Scheme (SCT) (Malawi)
country/countries	Social Sast Harriston Schotte (CST) (malarity
Programme details	The intervention is a UCT which started as a pilot in Mchinji district in 2006. It targets households that were both ultrapoor and labour constrained. Programme objectives were to reduce poverty, hunger and starvation, and improve school enrolment and attendance and health and nutrition of children among the poorest 10% of households. At the time of writing, the programme reached 28,000 households and was expected to serve 300,000 households with 910,000 children by 2015. Transfer values ranged from US\$4 per month for a household with one eligible member to US\$13 per month for households with four or more eligible members. The programme also offered a schooling attendance bonus ranging from US\$1.30 per month for primary school-age children to US\$2.60 per month for secondary school-age children. Average monthly per capita income in the initial target district was around US\$7.80, meaning the transfers represented a significant increase in regular income for beneficiaries.
Evaluation methodology	The study uses an RCT covering a full sample of 751 households. Impacts were estimated using DID and DID combined with PSM.
Overall findings	Finds that the SCT generates agricultural asset investments, reduces adult participation in low-skilled labour and limits child labour outside the home, while increasing child involvement in household farm activities. The article dispels the notion that cash support to ultra-poor households in Malawi is charity or welfare, and provides evidence of its economic development impacts.
Reported outcome areas	Savings, investment and production; Employment; Education
Indicators reported	Ownership of a range of inputs and livestock; participation in various forms of labour and employment; income from various sources; whether children were pulled from school to work for food/money; attendance at school; days of school missed in previous month.

Citation	Cruz, M. and Ziegelhofer, Z. (2014) Beyond the income effect: impacts of conditional cash transfer programs on private investments in human capital. Policy Research Working Paper Series 6867. Washington, DC: World Bank.
Name of programme(s) and country/countries	Bolsa Família (Brazil)
Programme details as reported in the study	The intervention evaluated here is a CCT which began in 2003 with the aim of improve school attendance and child nutrition. It targets poor families with children up to the age of 17 and also pregnant women and had 57.5 million individuals including almost 27.8 million children by 2009. Eligible households are identified using a means test based on household per capita income. The transfer is equivalent to around US\$9 per month in the first year, rising to \$27 per month by 2007. An extra stipend is allocated to extremely poor families (US\$30) and in 2008 an extra US\$30 adolescent grant was added for 16- and 17-year-olds. Payments are deposited monthly in a bank account and withdrawn using a Bolsa Família card. Receipt of the transfer is conditional on meeting a school attendance rate (at least 85% for children under the age of 15 or 75% for those over 15) and/or on health clinic attendance for pregnant women.
Evaluation methodology	The study design is quasi-experimental and estimates the treatment effect using a range of different models including OLS regression, instrumental variable analysis (instrument = non-labour income) and RDD. The data come from a national household cross-sectional level survey of 55,976 households.
Overall findings	In general, the transfer achieves a positive impact beyond pure income effect on the outcomes of interest; conditionalities affect spending behaviours; the gender of the recipient makes no difference to how the transfer is spent. The biggest effect is increased food expenditure.
Reported outcome areas	Education; Health
Indicators reported	Household expenditure shares on nutrition; education; school materials; healthcare.
Citation	Dabalen, A., Kilic, T. and Wane, W. (2008) Social transfers, labour supply and poverty reduction: the case of Albania. World Bank Policy Research Working Paper 4783. Washington, DC: World Bank.
Name of programme(s) and country/countries	Ndihma Ekonomike (Albania)
Programme details	The Ndihma Ekonomike (NE) was introduced in 1993 and extended to all poor households in 1995 with the objective of lifting poor households out of poverty. It was originally designed to support urban families without income and rural households with small landholdings. The programme was extended to all poor households in 1995. In 2002, the average NE benefit was 2,389 Albanian leks, roughly 50% of the poverty line and 25% of the monthly minimum wage.
Evaluation methodology	The paper estimates the effects of participation in the NE on objective and subjective measures of household poverty and
Evaluation methodology	on labour supply response. It uses the nationally representative Albanian Living Standards Measurement Surveys carried out in 2002 and 2005 and PSM methods. The final sample is a balanced panel of 2,329 individuals of whom 1,734 (74.4%) are women. The sample is heavily skewed towards women because households are overwhelmingly headed by males.
Overall findings	on labour supply response. It uses the nationally representative Albanian Living Standards Measurement Surveys carried out in 2002 and 2005 and PSM methods. The final sample is a balanced panel of 2,329 individuals of whom 1,734 (74.4%) are women. The sample is heavily skewed towards women because households are overwhelmingly headed by
	on labour supply response. It uses the nationally representative Albanian Living Standards Measurement Surveys carried out in 2002 and 2005 and PSM methods. The final sample is a balanced panel of 2,329 individuals of whom 1,734 (74.4%) are women. The sample is heavily skewed towards women because households are overwhelmingly headed by males.  The paper finds that NE households, particularly urban residents, have lower per capita consumption and are more likely to be discontented with their lives, financial situation and consumption levels than their matched comparators. The paper finds that the negative impact of NE participation on welfare is driven by a negative labour supply response among work-

Citation	Daidone, S., Davis, B., Dewbre, J., González-Flores, M., Handa, S., Seidenfeld, D. and Tembo, G. (2014) <i>Zambia's Child Grant Programme: 24-month impact report on productive activities and labour allocation</i> . Rome: Food and Agriculture Organization of the United Nations (FAO).
Name of programme(s) and country/countries	Child Grant Programme (CGP) (Zambia)
Programme details	The programme is a UCT that started in 2010, designed to increase food security and human capital development, with a focus on children under the age of five. The programme was implemented in three of the poorest districts of the country with the highest rates of mortality, morbidity, stunting and wasting of children under the age of five. It targeted households with a child under five years old that had not participated in a cash transfer programme in the past. The primary recipient of the transfer was the female in the household. The CGP reached 20,000 ultra-poor households across three districts at the time of study. Beneficiary households receive 60 Zambian kwacha per month (equivalent to US\$12), an amount intended to cover one meal a day for everyone in the household for one month. The amount of the grant was the same regardless of household size. Transfers were made bimonthly.
Evaluation methodology	The study employs an RCT, using DID or SD with inverse probability weighting to estimate effects, using the special-purpose survey covering 2,298 households.
Overall findings	The findings reveal overall positive impacts of the CGP across a broad spectrum of outcome indicators, and suggest that the programme is achieving many of its intended objectives. Specifically, the authors find strong positive impacts on household food consumption and investments in productive activities, including crop and livestock production. The programme is associated with large increases in both the ownership and profitability of non-farm family businesses; reductions in household debt levels; increases in household savings; and concordant shifts in labour supply from agricultural wage labour to better and more desirable forms of employment. The analysis reveals important heterogeneity in programme impacts, with estimated magnitudes varying over household and individual characteristics.
Reported outcome areas	Savings, investment and production; Poverty; Employment
Indicators reported	Expenditure on and ownership of a range of agricultural inputs; amount of land farmed; production and value of range of crops produced; market position of household; ownership of livestock owned; expenditure on livestock inputs; ownership and value of assets; savings, repayment of loans, purchases on credit, receipt of loans; food consumption/non-food consumption/total consumption; operation of and revenues from non-farm enterprise; provision of labour in various sources of employment (including child labour); earnings from various sources.
Citation	Daidone, S., Davis, B., Dewbre, J. and Covarrubias, K. (2014) Lesotho's Child Grant Programme: 24-month impact report on productive activities and labour allocation. Lesotho country case study report. Rome: FAO.
Citation  Name of programme(s) and country/countries	
Name of programme(s) and	on productive activities and labour allocation. Lesotho country case study report. Rome: FAO.
Name of programme(s) and country/countries	on productive activities and labour allocation. Lesotho country case study report. Rome: FAO.  Child Grants Programme (CGP) (Lesotho)  The CGP is a UCT programme starting in 2009. Transfers are aimed towards the poorest households in the country and aim to supplement household income so as to promote greater levels of education, health and nutrition — especially for children. The two eligibility criteria for the CGP are that a given household must a) have at least one resident child aged 0–17 and; b) be among the poorest in the community, based on use of PMT and community validation. The programme started with 1,250 households and expanded to five districts and approximately 20,000 households by end of 2013. In addition, and independently, village heads identify the households they deem to be worst-off in their respective communities. Originally the transfer was 120 Lesotho maloti (US\$12) per month irrespective of the number of children. In April 2013 the amount was indexed to the number of resident children as follows: 1–2 children: 360 Lesotho maloti (US\$36); 3–4 children: 600 Lesotho maloti (US\$60); 5+ children: 750 Lesotho maloti (US\$75). Transfers are paid quarterly. While the transfer is unconditional the CGP features strong messaging conveying the programmes intended purpose and desired outcomes. To the extent possible
Name of programme(s) and country/countries Programme details	on productive activities and labour allocation. Lesotho country case study report. Rome: FAO.  Child Grants Programme (CGP) (Lesotho)  The CGP is a UCT programme starting in 2009. Transfers are aimed towards the poorest households in the country and aim to supplement household income so as to promote greater levels of education, health and nutrition — especially for children. The two eligibility criteria for the CGP are that a given household must a) have at least one resident child aged 0–17 and; b) be among the poorest in the community, based on use of PMT and community validation. The programme started with 1,250 households and expanded to five districts and approximately 20,000 households by end of 2013. In addition, and independently, village heads identify the households they deem to be worst-off in their respective communities. Originally the transfer was 120 Lesotho maloti (US\$12) per month irrespective of the number of children. In April 2013 the amount was indexed to the number of resident children as follows: 1–2 children: 360 Lesotho maloti (US\$36); 3–4 children: 600 Lesotho maloti (US\$60); 5+ children: 750 Lesotho maloti (US\$75). Transfers are paid quarterly. While the transfer is unconditional the CGP features strong messaging conveying the programmes intended purpose and desired outcomes. To the extent possible beneficiaries are urged to spend the cash for the betterment of their children.  The study evaluates the programme using an RCT, with impacts estimated using either DID or SD with Inverse Probability
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Citation	Dammert, A.C. (2008) 'Heterogeneous impacts of conditional cash transfers: evidence from <i>Nicaragua'. IZA Discussion Paper 3653</i> . Bonn: IZA.
Name of programme(s) and country/countries	Atención a Crisis (Nicaragua)
Programme details as reported in the study	This study evaluates the impact of Atención a Crisis, a CCT with the objective of improving health outcomes for young children in poor families. It targets children in poor families with geographic targeting of impoverished communities and household eligibility determined with an expenditure means test. It covers 3,000 households. The basic transfer is paid bimonthly, conditional on health check-ups (not enforced), and households with children aged 7–15 can also receive the school attendance transfer, conditional on school enrolment and regular attendance (enforced). The basic transfer is on average 13% of annual per capita household expenditure (US\$224); the school attendance transfer is US\$112, with an additional annual school supplies lump sum (US\$21). Beneficiaries are also encouraged to attend information sessions or diet, health and education.
Evaluation methodology	This study employs a quasi-experimental research design, using the special-purpose panel survey with 1,359 households over three rounds. Quantile treatment effect methodology is used to measure impact.
Overall findings	The author finds heterogeneity in the impacts on total and food expenditure: households at the lower end of the expenditure distribution experienced a smaller increase in expenditures. The author also finds that boys experienced a larger positive impact from programme participation on schooling and a negative impact on the probability of engaging in labour activities and hours worked.
Reported outcome areas	Poverty; Education; Employment
Indicators reported	Expenditure; food expenditure; school enrolment; engaging in labour; hours of employment.
Name of programme(a) and	design on household welfare: comparing two diverse cash transfer programmes in rural Mexico. Working Paper 02-10.  Rome: FAO.  RDDCCESA and RDCCAMRO (Mexico)
Name of programme(s) and	PROGRESA and PROCAMPO (Mexico)
country/countries Programme details as reported in	This study evaluates and compares the impact of two interventions: PROCAMPO and PROGRESA.
the study	PROGRESA targets poor households within poor communities with transfers which are given to the mother of the family, a strategy built on the assumption that women have expenditure preferences that are most conducive to improving the children's education and nutrition. At the time of the study the transfer had reached around 2.6 million households. Eligibility is determined first at the community level (poor communities) and at the household level by a PMT (it is not clear on what indicators). On average, the bimonthly payments to households are equivalent to 29% of average per capita household income. Continued receipt of transfers is conditional on school attendance and health clinic visits. PROCAMPO began in 1994 with the aim of alleviating poverty and food insecurity and promoting rural development, specifically to offset the negative effects of the North American Free Trade Agreement (NAFTA) on farmers. Eligibility is determined by the total number of hectares of nine key crops on a farmer's land. Almost 3 million farmers received the transfer at the time of the study and the transfer is very large, equivalent to around US\$329 per recipient and US\$68 per hectare (presumably per year although this is not stated). Payments are made twice a year on the condition that the land continue to be used to grow the specified crops.
Evaluation methodology	The study uses a quasi-experimental method consisting of OLS linear and logistic regression with baseline levels characteristics as controls on a pooled panel dataset. The sample size is up to 22,000 households depending on model.
Overall findings	The programmes do not differ much in their effect on total and food consumption expenditure but PROGRESA leads to greater schooling expenditure and school attendance as well as increased health outcomes. Conditionality had little effect in terms of short-term welfare outcomes, but influences both longer-term (human capital) and medium-term (productive) investment.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production
Indicators reported	Total per capita consumption expenditure (estimated from income data) and expenditure on food, school expenses, health and hygiene, children's clothes, adult clothes, energy and other goods; total investment, agricultural investment and business investment (meaning expenditure on these activities); child school enrolment (binary); use of medical services (binary).

Citation	de Brauw, A. and Peterman, A. (2011) 'Can conditional cash transfers improve maternal health and birth outcomes? Evidence from El Salvador's <i>Comunidades Solidarias Rurales'</i> . <i>Discussion Paper 1080</i> . Washington, DC: IFPRI
Name of programme(s) and country/countries	Comunidades Solidarias Rurales (El Salvador)
Programme details	The programme is a CCT implemented from 2005. Households were eligible for the health transfer either if a member was pregnant at the time of the census or a child residing in the household was aged five or younger. To be eligible for education transfers, households were required to have children aged 6–15 residing in the household who had not completed primary school. The programme was primarily geographically targeted, being initially rolled out in the poorest 15 municipalities in the country. Beneficiaries received US\$15 per month where eligible for the health transfer, and US\$20 per month if eligible for both the health and education transfers. Transfers were conditional on growth-monitoring visits every two months and vaccinations for children, and prenatal monitoring for pregnant women. In addition to transfers, beneficiaries could attend monthly information sessions ('capacitaciones') at local village centres on topics such as education, nutrition, health and women's or children's rights. The government also implemented a series of supply-side improvements in the water and sanitation infrastructure of the communities as well as making health systems investments. Improvements in health systems took place in almost all municipalities participating in the programme.
Evaluation methodology	The study was quasi-experimental, estimating effects through DID using an RDD. It drew on a special-purpose longitudinal survey covering 3,000 households.
Overall findings	Robust impacts were found on outcomes at time of birth (skilled attendance and birth in facility), while no impacts are found on health-seeking behaviour pre- and post-birth (prenatal and post-natal care).
Reported outcome areas	Health
Indicators reported	Adequate prenatal care; skilled attendance at birth; birth in a health facility; post-natal check-up in first two weeks after birth.
Citation	de Brauw, A. and Gilligan, D. (2011) 'Using the regression discontinuity design with implicit partitions: the impacts of Comunidades Solidarias Rurales on schooling in El Salvador'. Discussion Paper 01116. Washington, DC: IFPRI.
Citation  Name of programme(s) and country/countries	
Name of programme(s) and	Comunidades Solidarias Rurales on schooling in El Salvador'. Discussion Paper 01116. Washington, DC: IFPRI.
Name of programme(s) and country/countries  Programme details as reported in	Comunidades Solidarias Rurales on schooling in El Salvador'. Discussion Paper 01116. Washington, DC: IFPRI.  Comunidades Solidarias Rurales (CSR) (El Salvador)  CCT, operating since 2005, targeted both categorically and geographically. Households with children aged five or younger are targeted for a health transfer meant to improve health and nutrition among children in that age bracket, while households with children aged 6–15 who had not completed primary school are targeted for an education transfer. Transfer size is US\$15 per month and receipt is conditional on all children aged 6–15 being enrolled in school and
Name of programme(s) and country/countries  Programme details as reported in the study	Comunidades Solidarias Rurales on schooling in El Salvador'. Discussion Paper 01116. Washington, DC: IFPRI.  Comunidades Solidarias Rurales (CSR) (El Salvador)  CCT, operating since 2005, targeted both categorically and geographically. Households with children aged five or younger are targeted for a health transfer meant to improve health and nutrition among children in that age bracket, while households with children aged 6–15 who had not completed primary school are targeted for an education transfer. Transfer size is US\$15 per month and receipt is conditional on all children aged 6–15 being enrolled in school and attending more than 80% of the time each month.  Application of RDD and partitioned cluster analysis, to identify similar groups within data, classifying individual observations into similar clusters of observations. The evaluation uses children in municipios entering in 2006 as the treatment group and children entering in 2007 as the control group. Data sources include the evaluation of CSR surveys and the sixth National Census of El Salvador (Censo Nacional de Población y Vivienda de 2007). The entire dataset
Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	Comunidades Solidarias Rurales (CSR) (El Salvador)  CCT, operating since 2005, targeted both categorically and geographically. Households with children aged five or younger are targeted for a health transfer meant to improve health and nutrition among children in that age bracket, while households with children aged 6–15 who had not completed primary school are targeted for an education transfer. Transfer size is US\$15 per month and receipt is conditional on all children aged 6–15 being enrolled in school and attending more than 80% of the time each month.  Application of RDD and partitioned cluster analysis, to identify similar groups within data, classifying individual observations into similar clusters of observations. The evaluation uses children in municipios entering in 2006 as the treatment group and children entering in 2007 as the control group. Data sources include the evaluation of CSR surveys and the sixth National Census of El Salvador (Censo Nacional de Población y Vivienda de 2007). The entire dataset includes 2,775 rural households.  The programme increased both parvularia (preschool) and primary school enrolment among children aged 6–12.

Citation	de Brauw, A., Gilligan, D.O., Hoddinott, J. and Roy, S. (2014) 'The impact of Bolsa Família on women's decision-making power', <i>World Development 59</i> : 487–504.
Name of programme(s) and country/countries	Bolsa Família (Brazil)
Programme details as reported in the study	Bolsa Família is a CCT which began in 2003 and by 2012 had reached over 12 million households. There are two parts to the transfer: a UCT to poor households below a certain income threshold and a CCT dependent on number of children between the ages of 0–15 for up to three children, or pregnant women. Potential recipients must register to be considered for the transfer. Therefore, there is an element of self-selection into the programme. Within a municipality, the probability of selection into the programme is dependent on the number of applicants: if oversubscribed then eligibility is determined by a means test of income and number of children. This study takes advantage of the self-selection element of the targeting process. Continued receipt of the CCT element is conditional on school attendance (85% for under 15s, 75% for over 15s) or health clinic attendance for pregnant women. If children identified as at risk of child labour – according to the Programme to Eradicate Child Labour (PETI) – they must attend special services provided by PETI with at least 85% attendance. The transfer is equivalent to around US\$9 per month in the first year, rising to US\$27 per month by 2007. An extra stipend is allocated to extremely poor families (US\$30) and in 2008 an extra US\$30 adolescent grant was added for 16- and 17-year-olds. Payments are deposited monthly in a bank account and withdrawn using a Bolsa Família card.
Evaluation methodology	The evaluation method is quasi-experimental, as the treatment was not randomly allocated. However, by using PSM the authors are able to rely only on SD estimates of the treatment effect. The data come from a special-purpose panel survey and the sample size ranges roughly between 2,000 and 3,000 depending on the model.
Overall findings	The transfer improved women's decision-making power over contraception. The effect is entirely driven by urban households, where the transfer significantly increased women's decision-making power over children's school attendance, health expenses, household durable goods purchase and contraception. In rural households there was no increase, but rather a possible reduction in decision-making power.
Reported outcome areas	Health; Empowerment; Savings, investment and production
Indicators reported	Woman is sole decision-maker on: clothes for self; clothes for children; school attendance; children's health expenses; durable goods; own labour supply; contraception.
Citation	De Brauw, A. and Hoddinott, J. (2011) 'Must conditional cash transfer programs be conditioned to be effective? The impact of conditioning transfers on school enrollment in Mexico', <i>Journal of Development Economics</i> 96(2): 359–370.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA is a CCT which began in 1997 intended to address the immediate needs of extreme poverty and break its intergenerational transmission. At the time of the study it had reached 2.6 million families. The transfer has two parts – health and education – which typically provide approximately 20–30% of household income in beneficiary households. Payment is made every two months and is paid in cash by programme officials at a central location. The education component analysed in this study is conditional on school attendance (85%). This study exploits an error whereby some households were not issued forms to record attendance making their education transfer essentially unconditional.
Evaluation methodology	The study method is quasi-experimental and uses a probit regression with PSM to estimate the treatment effect.  Administrative data and special-purpose cross-sectional survey from official programme evaluation were used in the evaluation. The sample contains between 700 and 5,000 households depending on model.
Overall findings	Where the transfer was de facto unconditional, the likelihood of transitioning from primary to secondary school (as opposed to dropping out) was lower, implying that conditionality is effective. Enrolment rates were lower in general among UCT recipients. Parental education level also played a significant role.
Reported outcome areas	Education
Indicators reported	School enrolment (binary).

Citation	de Groot, R., Handa S., Park, M., Osei Darko, R., Osei-Akoto I., Bhalla, G. and Ragno, L.P. (2015) <i>Heterogeneous impacts of an unconditional cash transfer programme on schooling: evidence from the Ghana LEAP Programme. Innocenti Working Paper 2015–10.</i> Florence: UNICEF Office of Research.
Name of programme(s) and country/countries	Livelihood Empowerment Against Poverty (LEAP) (Ghana)
Programme details as reported in the study	LEAP is Ghana's flagship social protection programme that started in 2008 and reached more than 116,000 extremely poor households by October 2015. The programme aims to alleviate short-term poverty and to improve human capital development by providing regular cash transfers, complementary National Health Insurance (NHIS) and encouraging school enrolment. LEAP targets extremely poor households that contain either an OVC, elderly poor, or a person with extreme disability who is unable to work. At the time of the study, households received a bimonthly transfer of 16–30 Ghanaian cedi (approximately US\$11–21), depending on the number of eligible household members. The transfer size is low compared to similar cash transfer programmes, representing just over 11% of household consumption at baseline and 7% of household consumption by 2012. Due to operational delays, beneficiaries also only received 20 months of payments during the study period, which were distributed irregularly without following the bimonthly payment pattern. Transfers for the elderly poor and with disabilities are unconditional, but transfers to households with OVCs are conditional on child enrolment and attendance, having an NHIS card, registering newborn babies, adhering to an immunisation programme and ensuring that no child is trafficked or engaged in any activities constituting the worst forms of child labour. In practice, household compliance with conditions is not verified.
Evaluation methodology	The paper uses a quasi-experimental evaluation to estimate the impact of LEAP on schooling outcomes. It uses a PSM approach to create a comparison group and a longitudinal dataset through which to estimate DID results. The sample includes a total of 1,504 households that were interviewed in both survey rounds.
Overall findings	The results show that Ghana's LEAP programme had strong impacts on children's schooling, in particular on certain subgroups. Among older (secondary school-age) children where out-of-pocket costs are highest, the programme increased enrolment by eight percentage points, with the largest impacts on boys. In contrast, among younger children where enrolment rates are already high, programme impacts are on the intensive margin, increasing full attendance by 11 percentage points, again with slightly stronger effects for boys. A slightly negative impact on enrolment was found among younger boys, driven by the combination of catch-up in the comparison group and a ceiling effect in the treatment group where the baseline enrolment rate was already 97%.
Reported outcome areas	Education
Indicators reported	Enrolment; missing school; cognitive ability; schooling expenditures.
Citation	Barbosa, A.L.N. de H. and Corseuil, C.H.L. (2014) 'Conditional cash transfer and informality in Brazil', IZA <i>Journal of Labour &amp; Development</i> 3(37): 1–18.
Name of programme(s) and country/countries	Bolsa Família (Brazil)
Programme details	The Bolsa Família is a national CCT programme aiming to improve the welfare of poor families. In 2013 it covered 13 million households. Its targeting is based on self-declared income to capture socioeconomic status and family composition.
Evaluation methodology	The study analyses the impact of the Bolsa Família on the allocation of labour inputs regarding formal and informal activities. It relies on a discontinuity in the programme eligibility rule regarding children's age to attain the identification of a Local Average Treatment Effect (LATE) parameter. It uses Brazil's Pesquisa Nacional por Amostra de Domicílios (PNAD) nationally representative household survey.
	Results suggest that the cash transfer does not affect the occupational choice of Brazilian adults either among formal and
Overall findings	informal jobs or the allocation of hours across sectors.
Overall findings  Reported outcome areas	

Citation	de Janvry, A., Finan, F., Sadoulet, E. and Vakis, R. (2006) 'Can conditional cash transfer programs serve as safety nets in keeping children at school and from working when exposed to shocks?', Journal of Development Economics 79(2): 349–373.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA was introduced in 1997 offering cash transfers to poor mothers in marginal rural communities, conditional on their children using health facilities on a regular basis and attending school between third grade of primary school and third grade of secondary school. The programme was renamed Oportunidades in 2000, and expanded to sixth grade of secondary school and to semi-urban areas. In 2004, it serviced 5 million families. The payment schedule is tailored to grade and gender, with primary school children receiving, in 1998, from US\$70/year in third grade to US\$135 in sixth grade, and secondary school children receiving from US\$200/year for boys in first grade and US\$210 for girls, to US\$220 for boys in third grade and US\$255 for girls.
Evaluation methodology	The study is an RCT estimating impacts using a linear probability model with fixed effects. Data source was PROGRESA's special-purpose panel survey, and specifically a subsample of 52,719 poor children who were between 5–17 years old in November 1997.
Overall findings	Considering shocks one at a time, we see that an unemployment or illness shock for the household head reduces the child's probability of enrolment by an average 1.7 percentage points, but that PROGRESA largely (unemployment) or fully (illness) mitigates these negative effects.
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; employment rates (in response to specific shocks).
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Citation	De Silva, I. and Sumarto, S. (2015) 'How do educational transfers affect child labour supply and expenditures? Evidence from Indonesia of impact and flypaper effects', <i>Oxford Development Studies</i> 43(4): 483–507.
Name of programme(s) and country/countries	Bantuan Siswa Miskin (BSM) cash transfer for poor students (Indonesia)
Programme details	The BSM CCT was introduced in 2008 and covers all education levels from elementary school to university. The CCT is aimed at education-related costs (such as books, school transportation and uniforms) for students from poor households who are selected by school administrators. It is fully financed by the central government and does not require any contributions or cost-sharing on the part of students as beneficiaries, nor from local governments or the schools themselves. The key objectives of the programme are to remove barriers preventing marginalised students from participating in education, to assist poor students in gaining appropriate access to education services, to prevent school drop-out, to help in meeting the educational needs of at-risk children, as well as to support the Government's Nine-Year Compulsory Education programme. In 2009, the BSM programme covered around 3.6 million students. Coverage increased to 8 million students in 2013 across the country, ranging from primary school to tertiary education level. In 2009, the unit cost per scholarship ranged between US\$30 and US\$60 depending on the level and type of school the student was attending. Poor students enrolled in madrasah (Islamic) schools received a higher amount than those in regular schools. Disbursement of the transfer was at the beginning of the academic year (usually in the months of July or August).
Evaluation methodology	The study uses a large nationally representative household survey – the National Socioeconomic Survey (Susenas) from July 2009 – to analyse how the receipt of educational transfers, scholarships and related assistance programmes affects the labour supply of children and the marginal spending behaviour of households on children's educational goods. It uses a quasi-experimental approach relying on a propensity score methodology to estimate the impact of transfers on child labour supply and educational expenditure.
Overall findings	The study finds strong effects on the reduction in the labour supply of children at the bottom of the welfare distribution due to Indonesia's education cash transfers and related assistance. Households receiving educational transfers, scholarships and assistance were also found to spend more at the margin on voluntary educational goods. At the mean, households receiving educational transfers, scholarships and assistance spend 10–14% more on their children's voluntary educational goods at the margin than they would have spent without any additional educational support.
Reported outcome areas	Education; Employment
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Citation	de Walque, D., Dow, W.H. and Nathan, R. (2014) Rewarding safer sex: conditional cash transfers for HIV/STI prevention. World Bank Policy Research Working Paper 7099. Washington, DC: World Bank.
Name of programme(s) and country/countries	Rewarding Sexually Transmitted Infection Prevention and Control (Tanzania)
Programme details	The intervention was a CCT that aimed to reduce risky sexual activity among young people, male and female, who are at high risk of HIV infection. Those eligible were males and females, aged 18–30 (and spouses aged 16 or over, with spousal pairs assigned the same intervention arm) residing in one of ten selected villages within the Kilombero and Ulanga districts. Three exclusion criteria included: being pregnant at the time of registration, having the intention to permanently migrate out of the study area within the next year, and unwillingness to participate if assigned to the control arm. The study was a small pilot study in ten villages in which individuals were randomly allocated to treatment or control The intervention group was further split up into those receiving US\$60 over the course of the study (US\$20 payments every four months) and the other receiving a lower value payment of up to US\$30 (US\$10 payments every four months). Transfers were given every four months over the 12 months of the study. Transfers were conditional on negative results of periodic screenings for sexually transmitted infections.
Evaluation methodology	The study was designed as an RCT and effects were estimated using logistic regression. The total sample size was 2,399 participants.
Overall findings	Results indicate a significant reduction in sexually transmitted infections in the group that was eligible for the (higher) US\$20 payments every four months, but no such reduction was found for the group receiving the (lower) US\$10 payments. The effects were stronger among the lower socioeconomic and higher risks groups. A post-intervention follow-up survey conducted one year after the intervention indicated a sustained effect among males, but not among females.
Reported outcome areas	Health
Indicators reported	Prevalence of a range of STIs.
Citation	Del Carpio, X.V. and Macours, K. (2009) Leveling the intra-household playing field: compensation and specialization in
	child labor allocation. World Bank Policy Research Working Paper Series 4822. Washington, DC: World Bank.
Name of programme(s) and country/countries	Atención a Crisis (Nicaragua)
Programme details	The programme was a one-year pilot programme implemented between November 2005 and December 2006, implemented as a safety net in the aftermath of severe drought to reduce the impact of the shock on human and physical capital investments. It was also intended to increase long-run upward mobility and poverty reduction through asset creation and income diversification. The programme was targeted to adult females from within six drought-affected municipalities with high a prevalence of extreme rural poverty based on a national poverty map. 3,000 households within six municipalities in the northwest of Nicaragua were selected to participate and randomly allocated either a basic CCT, the same CCT plus a scholarship for occupational training or the CCT plus a grant for productive investments. The transfers were 'sizeable' and paid bimonthly. For the basic transfer they were conditional on child primary school and health service attendance. For groups receiving productive investment grants they were conditional on developing a business plan.
Evaluation methodology	The study employed an RCT design and used household random and fixed-effects regressions to estimate effects. It used a special-purpose panel survey with a sample of 4,253 households.
Overall findings	Households that received a cash transfer reduced child labour more for older boys who had previously worked more, and for boys who were further behind in school. Households that randomly received an additional productive investment grant (targeted to women) showed an increased specialisation of older girls in non-agricultural and domestic work, but no overall increase in girls' child labour.
Reported outcome areas	Employment
Indicators reported	Number of hours worked per week spent on different activities (e.g. non-agricultural, agriculture and livestock, domestic

Citation	Del Carpio, X.V. (2008) <i>Does child labor always decrease with income? An evaluation in the context of a development program in Nicaragua</i> . World Bank Policy Research Working Paper No. 4694. Washington, DC: World Bank
Name of programme(s) and	CCT programme targeted in a shock-prone region in the northern-central part of Nicaragua (Nicaragua) [intervention
country/countries	name not provided by the paper].
Programme details	The CCT was implemented in a shock-prone region in the northern-central part of Nicaragua where beneficiaries were randomly assigned to one of three treatment groups. The selection of beneficiaries relied on a PMT approach. The intervention provides income transfers and some in-kind benefits (e.g., training) to poor families in the region to improve their human capital (i.e. education, nutrition, training, health) and physical capital (e.g., inventory for businesses, equipment). The approximate value of the cash transfers is in the range of 25–45% of household income, depending on which package the household receives. Two thirds of randomly selected families receive one of two productive options: a training programme or a matching grant for a productive investment such as a small start-up business. The conditionality of all three interventions requires that the primary female of the household attend group meetings and collect payments and that school-age children attend school regularly.
Evaluation methodology	The study analyses the impact of the programme on child labour, measured by the total number of hours worked and on the type of labour (physical and non-physical work). It uses a two-round panel (2005 and 2006) dataset from a detailed household survey designed for the programme and Tobit regression analysis. The data contain information for 4,200 households in six municipalities located in the north-central part of Nicaragua. The sample of children included in the study is restricted to those who were 8–15 years old in 2006.
Overall findings	The CCT has a decreasing effect on total hours of work for the full sample of children. Disentangling labour into two types — physically demanding labour and non-physical labour — reveals that the programme has opposite effects on each type: it decreases physically demanding labour while increasing participation in non-physical (more intellectually oriented) tasks for children. The study concludes that child labour does not always decrease with income. The relationship is complex and exhibits an inverted-U shape.
Reported outcome areas	Employment
·	Number of hours worked by child; various types of child labour (physical labour, non-physical labour, total labour hours).  Del Carpio, X.V. and Loayza N.V. (2012) <i>The impact of wealth on the amount and quality of child labor. World Bank Policy</i>
Citation  Name of programme(s) and	Del Carpio, X.V. and Loayza N.V. (2012) <i>The impact of wealth on the amount and quality of child labor. World Bank Policy Research Working Paper 5959.</i> Washington, DC: World Bank.
·	Del Carpio, X.V. and Loayza N.V. (2012) The impact of wealth on the amount and quality of child labor. World Bank Policy
Citation  Name of programme(s) and	Del Carpio, X.V. and Loayza N.V. (2012) <i>The impact of wealth on the amount and quality of child labor. World Bank Policy Research Working Paper 5959.</i> Washington, DC: World Bank.
Citation  Name of programme(s) and country/countries	Del Carpio, X.V. and Loayza N.V. (2012) <i>The impact of wealth on the amount and quality of child labor. World Bank Policy Research Working Paper 5959</i> . Washington, DC: World Bank.  Atención a Crisis (Nicaragua)  The CCT consists of three packages of private cash transfers to poor rural households in Nicaragua, conditional on children's school attendance and health check-ups, over a one-year period. It was implemented for one year among poor rural households during 2006 as a pilot to be fully evaluated, thus featuring all the relevant characteristics of an experimental, randomised trial. The objectives of the programme were, in the short term, to help households cope with adverse effects from drought, as a safety-net mechanism, and, in the longer term, to improve the human capital of beneficiary households. The programme was also aimed at improving the asset base, through the creation of new
Citation  Name of programme(s) and country/countries  Programme details	Del Carpio, X.V. and Loayza N.V. (2012) <i>The impact of wealth on the amount and quality of child labor. World Bank Policy Research Working Paper 5959.</i> Washington, DC: World Bank.  Atención a Crisis (Nicaragua)  The CCT consists of three packages of private cash transfers to poor rural households in Nicaragua, conditional on children's school attendance and health check-ups, over a one-year period. It was implemented for one year among poor rural households during 2006 as a pilot to be fully evaluated, thus featuring all the relevant characteristics of an experimental, randomised trial. The objectives of the programme were, in the short term, to help households cope with adverse effects from drought, as a safety-net mechanism, and, in the longer term, to improve the human capital of beneficiary households. The programme was also aimed at improving the asset base, through the creation of new economic activity, for a subset of beneficiary households.  The study analyses the impact of Atención a Crisis and of its different transfer components on child labour in poor households. Using data collected from a sample of about 3,000 eligible households in the treatment group, and a random sample of about 1,000 eligible households in the communities that were randomly assigned to the control group, the study examines the impact of the transfer on the number of hours worked per child in the week previous to the survey. The regression on child labour hours is estimated using a Tobit procedure. The study also carries out a pre-/post-treatment
Citation  Name of programme(s) and country/countries  Programme details  Evaluation methodology	Del Carpio, X.V. and Loayza N.V. (2012) The impact of wealth on the amount and quality of child labor. World Bank Policy Research Working Paper 5959. Washington, DC: World Bank.  Atención a Crisis (Nicaragua)  The CCT consists of three packages of private cash transfers to poor rural households in Nicaragua, conditional on children's school attendance and health check-ups, over a one-year period. It was implemented for one year among poor rural households during 2006 as a pilot to be fully evaluated, thus featuring all the relevant characteristics of an experimental, randomised trial. The objectives of the programme were, in the short term, to help households cope with adverse effects from drought, as a safety-net mechanism, and, in the longer term, to improve the human capital of beneficiary households. The programme was also aimed at improving the asset base, through the creation of new economic activity, for a subset of beneficiary households.  The study analyses the impact of Atención a Crisis and of its different transfer components on child labour in poor households. Using data collected from a sample of about 3,000 eligible households in the treatment group, and a random sample of about 1,000 eligible households in the communities that were randomly assigned to the control group, the study examines the impact of the transfer on the number of hours worked per child in the week previous to the survey and the number of days in which any amount of work was done per child during the 12 months previous to the survey. The regression on child labour hours is estimated using a Tobit procedure. The study also carries out a pre-/post-treatment evaluation of the differences (DID estimation) in child labour between treatment and control groups.  Atención a Crisis affected the volume and quality of child labour, reducing it in the aggregate and steering it towards skill-forming activities. The programme appears to have reduced the use of child labour for household chores and farm work, while increasing it for non-trad

Citation	Department of Social Development, South African Social Security Agency and UNICEF (2011) <i>Child Support Grant Evaluation 2010: qualitative research report.</i> Pretoria: UNICEF South Africa.
Name of programme(s) and country/countries	Child Support Grant (South Africa)
Programme details as reported in the study	This study evaluates a UCT, which began in 1998, intended to improve child health and well-being outcomes. The intervention targets children under 18 in poor households (in its first phase it targeted only children under the age of seven). Eligibility is means-tested on the income of beneficiary (child), applicant (caregiver) and her partner. Eligibility is reassessed annually. In its first phase the programme offered 100 South African rand per child, but increased incrementally to 250 rand at time of study (for up to six children). Transfers are made monthly and are collected by the primary caregiver in person at an office or from a bank, ATM or shop.
Evaluation methodology	This evaluation was qualitative, using data from focus group discussions and key informant interviews.
Overall findings	The diversity of grant collection points means it is becoming easier to obtain the cash. The grant is primarily used as an income top-up. The female caregiver is generally responsible for spending the grant. A potential role is sighted for transfer in reducing school drop-out but there is no conclusive evidence of this. Health care is generally cheap or free so the grant makes little difference except that some used it for private health care. There is no evidence that the grant reduced child labour participation. There is some speculation that the grant may reduce risky sex among adolescent girls.
Reported outcome areas	Poverty; Education; Employment; Health; Empowerment
Indicators reported	N/A
Citation	Djebbari, H. and Smith, J. (2008) 'Heterogeneous impacts in PROGRESA', <i>Journal of Econometrics</i> 145(1–2): 64–80.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	This study considers PROGRESA, the CCT targeted at Mexico's rural poor. In 1999 (its second year) its coverage was 2.6 million families, about 40% of rural households. Targeting has two stages: geographic targeting of remote and poor communities and selection of households within these communities using a poverty index. The transfer consists of two components. A food cash transfer, conditional on visits to the health centre and participation in health talks. An education component for households with school-age children with varying transfer levels depending on age and sex of the children, conditional on school attendance. Transfers are paid bimonthly.
Evaluation methodology	This study employs a quasi-experimental research design and uses OLS linear and logistic regression with fixed effects. The data used is drawn from a special-purpose longitudinal survey, covering about 10,188 households.
Overall findings	The authors find a positive impact on consumption for all but a small fraction of beneficiaries. They also highlight systematic variation in impacts: impacts associated with the extensions of eligibility to less poor villages and/or less poor individuals are smaller than those for the population already covered.
Reported outcome areas	Poverty; empowerment
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Indicators reported	Household expenditure; decision-making power of the female household head.

Citation	Dubois, P., de Janvry, A. and Sadoulet, E. (2012) 'Effects on school enrollment and performance of a conditional cash
	transfer program in Mexico', <i>Journal of Labor Economics</i> 30(3): 555–589.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	CCT, operating since 1997, aimed at creating incentives to increase the human capital of children of poor rural households, thus attempting to break the intergenerational inheritance of poverty. To do this, the programme provides cash transfers and in-kind benefits to poor households, conditional on the child's school attendance and on regular visits to health centres. On average, these cash transfers represent 22% of the income of beneficiary families. The programme was covering 2.6 million rural families in extreme poverty in 2000, corresponding to about 40% of all rural families in Mexico.
Evaluation methodology	The analysis is based on a dynamic model of education demand incorporating the PROGRESA grants system using the randomised experimental data from PROGRESA. Data sources were: ENCASEH97 (Encuesta de Características Socioeconómicas de los Hogares) and ENCEL (Encuesta de Evaluación) of March 1998 and October 1998.
Overall findings	We find that PROGRESA had a positive impact on school continuation at all grade levels, whereas for performance it had a positive impact at the primary school level, but a negative effect at the secondary school level.
Reported outcome areas	Education
Indicators reported	Performance; school continuation (enrolment).
Citation	Edmonds, E.V and Schady, N. (2008) <i>Poverty alleviation and child labor. Policy Research Working Paper</i> . Washington, DC:
	World Bank.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (BDH) (Ecuador) – formerly Bono Solidario
Programme details as reported in the study	UCT with strong social marketing campaign, in place since 1998. While the intent of the programme was to assist poor families during an economic crisis, the programme continued well past the crisis. Means-tested as of 2001, based on the Selben index, the BDH transfers US\$15 per month, slightly less than a tenth of the monthly income of recipient households.
Evaluation methodology	RCT, with impact estimated using an instrumental variable approach. Data from special-purpose panel survey, with randomisation at the household level.
Overall findings	Random assignment of the BDH income is associated with less work for pay, less involvement in the family farm or business, increased schooling and fewer children working in some way without attending school.
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; child labour rates.
Citation	Edmonds, E.V., Mammen, K. and Miller, D.L. (2004) <i>Rearranging the family? Income support and elderly living arrangements in a low-income country. Working Paper 10306.</i> Cambridge, MA: National Bureau of Economic Research.
Name of programme(s) and country/countries	Old-Age Pension (South Africa)
Programme details as reported in the study	The South African old-age pension is a UCT which was introduced to ensure a minimum income for the elderly. It was originally only accessible to whites, but was extended to black and coloured elderly persons following the end of apartheid. The transfer is targeted at women over the age of 60 and men over the age of 65. Eligibility is determined by a means test of household wealth (the mechanism is not specified here). The transfer amount is equivalent to approximatel twice the median per capita monthly household income of a black household. Payment is distributed monthly (the mechanism is not specified).
Evaluation methodology	The study takes advantage of the age-based eligibility criteria to estimate the treatment effect through a RDD. The data are taken from a population and housing census and the sample size in this study is approximately 137,295 individuals.
Overall findings	In expectation of the transfer, potential beneficiaries alter their household structure: prime-working-age women depart and children and young women join, suggesting that an externality of the pension is that working-age women are enabled to take up better livelihood opportunities.
Reported outcome areas	Empowerment
Indicators reported	Number of children in household; number of working-age women in house; births in household in past year; household size; lives alone (or with spouse).

Citation	Edmonds, E.V. and Schady, N. (2012) 'Poverty alleviation and child labor', <i>American Economic Journal: Economic Policy</i> 4(4): 100–124.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details as reported in the study	The BDH transfer is US\$15 per household per month, 7% of monthly expenditure for recipient households. The amount does not vary across eligible families. The transfer is paid to mothers, and does not have any conditions attached.
Evaluation methodology	The study draws on data from an experimental evaluation in which parishes were first randomly selected and, within them, households were randomly allocated to treatment or control groups. The sample covers 1,883 children. The study focuses on intent-to-treat effects given high non-compliance with the experiment. The results are based on an instrumental variables (IV) approach, instrumenting receipt of transfer with lottery assignment, and are relevant for children whose likelihood of receiving transfers was affected by the lottery.
Overall findings	The BDH results in reductions in all kinds of child work, including paid employment. The decline in paid employment is large, and concentrated among children who were students at the time of random assignment. Lottery-induced take-up of the BDH is associated with a 41% decline in paid employment for the full sample and a 78% decline for children who were students at baseline. Child labour declines with the BDH even though the size of the transfer is less than foregone child labour earnings. Fewer than 2%of children in paid employment report earning less than US\$15 a month and mediar earnings are US\$80 per child per month. The authors argue that the rigidities in hours in paid employment and in the length of the school day explain why paid employment declines despite the fact that the transfer does not cover foregone earnings.
Reported outcome areas	Education; Employment
Indicators reported	Child participation in various types of employment (paid and unpaid); hours worked in various economic activities and household chores, monthly earnings and school enrolment.
Citation	Evans, D.K., Hauslade, S., Kosec, K. and Reese, N. (2014) <i>Community-based conditional cash transfers in Tanzania:</i> results from a randomized trial. Washington, DC: World Bank.
Name of programme(s) and country/countries	Tanzania Social Action Fund (Tanzania)
Programme details	The programme was a pilot starting in 2010 to test how a CCT programme could be implemented through a social fund using a community-driven development approach. The pilot targeted the poorest and most vulnerable districts based on ranking of indicators (poverty, food insecurity, primary school enrolment, access to safe water, health facilities, roads and AIDS prevalence) and an index of relative poverty and deprivation. The study covered three districts and 80 communities (40 treatment and 40 control). Beneficiaries had to be vulnerable households and were identified using a combination of community management committees and PMT as a cross-check. Transfers ranged from a minimum of US\$12 to a maximum of US\$36 every two months, depending on the number of people in the household. Transfers were made to a community-managed account with community management committees manually distributing to beneficiaries. To receive transfers, children from beneficiary households had to attend school and the elderly and children had to visit health facilities. Failure to comply met with warning, then reduction in transfers and eventual removal. There was a case management system for appeals and complaints such as exclusion errors, payments and quality of services.
Evaluation methodology	The study was designed as an RCT, with impacts estimated using a DID approach. The final sample included 3,436 households.
Overall findings	The CCT led to improvements in health, use of health insurance to finance medical care, attendance and completion of primary school (particularly for girls). There was also a significant increase in ownership of livestock and improvement in community trust. There was no difference in expenditure on food or non-food household items and the programme did not significantly affect savings or spending on average.
Reported outcome areas	Health; Education; Poverty; Employment
Indicators reported	Health facility visits; visit to hospital or taking medication if sick; use of health insurance if sick; reported sickness in past four weeks; duration of sickness; child anthropometrics (height, weight, middle-upper-arm circumference, oedema, height-for-age, weight for length, BMI), educational (child literacy, school attendance, taken exam, completed specific education levels); annual household expenditure on different items; value of food consumption in past week; child household activities; ownership of assets; savings and credit (ownership of bank account, non-bank savings, taken out a loan); community trust; community participation and perceptions of public service quality; value of transfers received from other sources and given out; ownership of land, durable assets and livestock; housing conditions.

Citation	Feldman, B.S., Zaslavsky, A.M., Ezzati, M., Peterson, K.E. and Mitchell, M. (2009) 'Contraceptive Use, birth spacing, and autonomy: an analysis of the Oportunidades program in rural Mexico', <i>Studies in Family Planning</i> , 40(1): 51–62.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades began as PROGRESA in 1997 and is a CCT which aims to alleviate poverty in order to improve health and education outcomes for the next generation. Eligible communities were first selected based on census data, then the eligibility of individual households was determined based on the same census data. 78% of households in treatment areas were eligible, and of these almost all enrolled (there was an element of self-selection). The transfer amount is roughly equivalent to 20% of a household's pre-programme expenditures. Continued receipt of the transfer is conditional on school enrolment for children aged 8–18 and attendance of 85%; health check-ups for all family members dependent on age group; attendance of primary beneficiary at public health seminars; pregnant women attending five antenatal visits, and both they and their children below the age of two taking nutritional supplements; post-partum visits to health centre and check-ups for newborns. The frequency and method of payment are not specified.
Evaluation methodology	The study uses a quasi-experimental method to estimate the treatment effect. Panel data from the evaluation survey of the programme are pooled and logistic regression and proportional hazards survival models are used to estimate the overall impact and the effect of the programme on women with different fertility patterns. The sample is between 8,000 and 1,700 individuals depending on the model.
Overall findings	Beneficiaries were more likely to use modern contraceptives in the short-run, although the difference disappeared over time. Birth spacing was very similar between treatment and control groups.
Reported outcome areas	Health; Empowerment
Indicators reported	Log odds of using modern contraception; likelihood of giving birth during the programme period.
Citation	Fernald, L.C.H., Gertler, P.J. and Hou, X.H. (2008) 'Cash component of conditional cash transfer program is associated with higher body mass index and blood pressure in adults', <i>Journal of Nutrition</i> 138(11): 2250–2257.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are determined according to their share of poor inhabitants, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount starts from roughly 100 Mexican pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). Payments are made on a bimonthly basis. The transfer is conditional on school attendance and biannual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues, and best practices are discussed.
Evaluation methodology	The study relies on a quasi-experimental design which includes the use of OLS linear and logistic regression and instrumental variable analysis. The data come from a special-purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The total sample size is 3,688 (2,039 in early intervention group, 1,649 in later intervention/control group).
Overall findings	Increasing the cumulative cash transfer to the household was associated with higher BMI, the likelihood of being overweight or obese and the likelihood of hypertension. Results could be explained by leakage of fortified food supplements intended for pregnant women to other household members.
Reported outcome areas	Health
	BMI; overweight (binary); obesity grade; diastolic blood pressure; systolic blood pressure; hypertension; self-reported

Citation	Fernald, L.C.H., Gertler P.J. and Neufeld, L.M. (2008) 'Role of cash in conditional cash transfer programmes for child health, growth, and development: an analysis of Mexico's Oportunidades', <i>The Lancet</i> 374(9615): 828–837.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are determined according to their share of poor inhabitants, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount starts from roughly 100 Mexican pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). At the time of the study, 4 million households had partaken in the programme. Retargeting happens every three years. Payments are made on a bimonthly basis. The transfer is conditional on school attendance and biannual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues and best practices are discussed. There are special complementary programmes for children, adolescents and pregnant, lactating or post-partum women (some of which are also compulsory, although this is not specified).
Evaluation methodology	The study relies on a quasi-experimental design which includes the use of OLS linear and logistic regression. The data come from a special-purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The total sample size is 2,449.
Overall findings	Larger cumulative transfers are associated with significantly better outcomes in child physical, cognitive and language development. All children had been in programme for their entire lives so this study showed that longer exposure to the programme continued to lead to marginal improvements year on year.
Reported outcome areas	Health; Education
Indicators reported	(All indicators are for children) Height-for-age z-score; stunted; BMI for age percentile; overweight or obese; haemoglobin sick days in the four weeks before the survey; motor skills test; cognitive memory tests; language development.
Citation	Fernald, L.C.H., Gertler P.J. and Neufeld, L.M. (2009) '10-year effect of Oportunidades, Mexico's conditional cash transfer programme, on child growth, cognition, language, and behaviour: a longitudinal follow-up study', <i>The Lancet</i> 374(9706): 1997–2005.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	This study evaluates a CCT, which began in 1997, with the aim of improving education and health outcomes (and achieving human capital accumulation in the long run). Poor areas are determined according to their share of poor inhabitants, and within them low-income (i.e. eligible) households are identified using 1997 census data. Randomisation of treatment allocation happens at the village level. The control group received the transfer at a later date. The transfer amount starts from roughly 100 Mexican pesos per month for households with no eligible children then an extra grant for every eligible child up to a maximum of 625 pesos (amounts differ depending on exchange rate used). At the time of the study, 4 million households had partaken in the programme. Retargeting happens every three years. Payments are made on a bimonthly basis. The transfer is conditional on school attendance and biannual health checks for adults and attendance at educational sessions in which health, hygiene, nutrition issues and best practices are discussed. There are special complementary programmes for children, adolescents and pregnant, lactating or post-partum women (some of which are also compulsory, although this is not specified).
Evaluation methodology	The study uses a quasi-experimental design that relies on multivariate linear regression. The data come from a special-purpose cross-sectional survey which is combined with data from Oportunidades official baseline. The sample size is 2,093 (1,093 early intervention, 700 late intervention).
Overall findings	No statistically significant differences are observed between early and late intervention groups in the outcome variables, except with regard to behavioural problems. When interacted with maternal education, a positive treatment effect on height-for-age is observed for early intervention cases where the mother has low or no education.
Reported outcome areas	Health; Education
Indicators reported	(All indicators are for children) Height-for-age z-score; BMI for age score; verbal assessment score; cognitive assessment

Citation	Fernald, L.C.H. and Gunnar, M.R. (2009) 'Poverty-alleviation program participation and salivary cortisol in very low-income children', <i>Social Science &amp; Medicine</i> 68(12):2180–2189.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details	Oportunidades is a large-scale CCT which began in 1997 and was designed to relieve extreme poverty in Mexico.  Unrestricted cash payments – typically worth about 20–30% of household income – were distributed by the programme only if children, pregnant women, lactating women and other family members complied with a series of requirements, including prenatal care, well-baby care and immunisation, nutrition monitoring and supplementation, and participation in educational programmes regarding health, hygiene and nutrition.
Evaluation methodology	The study employed a quasi-experimental approach, using multi-level regression to estimate impacts on cortisol levels. A health visit was made to random sample within the already randomised sample of treatment and control households. The total sample covered 1,197 children.
Overall findings	There was a large and significant programme effect of lowering cortisol in children of mothers with high depressive symptoms but not in children of mothers with low depressive symptomatology.
Reported outcome areas	Health
Indicators reported	Salivary cortisol levels.

Citation	Fernald, L.C.H. and Hidrobo, M. (2011) 'Effect of Ecuador's cash transfer program (Bono de Desarrollo Humano) on child development in infants and toddlers: a randomized effectiveness trial', <i>Social Science &amp; Medicine</i> 72(9): 1437–1446.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details	The programme was a UCT rolled out using a randomised design from 2004. Mothers of children aged 0–16 qualified for the programme if they were in the bottom two poverty quintiles according to the Sistema de Selección de Beneficiarios (Selben). There was a random community-level assignment to treatment or control groups. In 2006 the transfer was US\$15 per month (and did not depend on the number of children in the household). This was approximately 6–10% of an average household's pre-transfer expenditure for households in the bottom two poverty quintiles. Transfers were distributed via private banks. Technically, recipients were expected to take children to preventative health check-ups and required a minimum level of attendance at school for school-aged children. The BDH, however, is more similar to a UCT due to the lack of verification of compliance with the conditions set out in the programme's mandate.
Evaluation methodology	The study was designed as an RCT and used OLS and probit estimation to investigate the programmes impacts. A total of 1,196 children were covered in the sample.
Overall findings	Results indicate that in rural areas, being randomised to receive the BDH in very early childhood led to significantly better performance on the number of words a child was saying, and on the probability that the child was combining two or more words. There were no significant effects on language development for children in urban areas, and there were no effects on height-for-age z-score or haemoglobin concentration in rural or urban areas.
Reported outcome areas	Education; Health
Indicators reported	Child score on Spanish version of the short form of the MacArthur-Bates Communicative Development Inventory (CDI) language test; height-for-age; haemoglobin levels.
Citation	Ferré, C. and Sharif, I. (2014) Can conditional cash transfers improve education and nutrition outcomes for poor children in Bangladesh? Evidence from a pilot project. World Bank Policy Research Working Paper 7077. Washington, DC: World Bank.
Name of programme(s) and country/countries	Shombhob (Bangladesh)
Programme details	Shombhob was a pilot CCT which ran from April 2012 to December 2013. It aimed to reduce household poverty levels, to increase school attendance at primary school and improve nutritional status of children. Eligible households included very poor households with children aged 0–36 months or children attending primary school. Targeting was done using a PMT. Three types of transfer were set up depending on the household demographic composition. Beneficiary households received (i) a transfer of 400 Bangladesh takas (approximately US\$5) per household if the household members included one or more children aged 0–36 months; (ii) 400 takas per household if eligible families had one or more children going to primary schoo and (iii) 800 takas for those households with children below 36 months of age as well as children going to primary school. These transfers were a flat amount and did not vary with the number of children in any category. Thus, the maximum benefit amount a household could receive was 800 takas per month (about 14% of the lower poverty line and 18% of the 2010 food poverty line). Transfers were given bimonthly. An electronic payments system was used, which provided cash cards to beneficiary mothers to make transfers electronically to their accounts with the post office. For those with children aged 0–36 months, it required monthly attendance at growth monitoring, and a (non-mandatory) nutrition session for mother/caregiver. For those with children going to primary school, it required regular school attendance (at least 80% every month). School attendance was monitored at the school level by Shombhob officers using the attendance sheets supplied by the schools. Transfers were complemented with growth monitoring and nutrition sessions.
Evaluation methodology	The study used a quasi-experimental approach employing DID to estimate the impacts of the pilot. A longitudinal survey was used covering 2,718 households.
Overall findings	Given implementation challenges the intervention was not able to improve school attendance. However, the analysis shows that the pilot had a significant impact on the incidence of wasting among children who were 10–22 months old when the programme started, reducing the share of children with weight-for-height below two standard deviations from the World Health Organization benchmark by 40%. The pilot was also able to improve nutrition knowledge: there was a significant increase in the proportion of beneficiary mothers who knew about the importance of exclusively breastfeeding infants until the age of six months. The results also suggest a significant positive impact on food consumption, especially consumption of food with high protein content.
Reported outcome areas	Poverty; Education; Health
Indicators reported	Household consumption; household food consumption; school attendance for primary-school-aged (6–15 years old) beneficiary children; incidence of underweight, wasting and stunting among beneficiary children under 3 years of age; nutrition-related knowledge and practices in beneficiary households with at least one child aged 0–36 months.

Citation	Ferreira, F.H.G., Filmer, D. and Schady, N. (2009) Own and sibling effects of conditional cash transfer programs: theory and evidence from Cambodia. Policy Research Working Paper 5001, Impact Evaluation Series 36. Washington, DC: World Bank.
Name of programme(s) and country/countries	CESSP Scholarship Programme (CSP) (Cambodia)
Programme details as reported in the study	'Labelled' CCT Scholarship operating in 100 of the approximately 800 middle schools in Cambodia, for a total of 3,800 scholarships offered in 100 of 800 schools (selected where poverty rates were highest). Households were targeted using PMT-like scoring and given a modest scholarship worth between 2–3% of the total expenditures of the average recipient household. Money was handed out by the principal at school and did not include any monitoring of compliance to conditionality.
Evaluation methodology	RCT using RDD to estimate impact, based on a special-purpose panel survey of 3453 randomly selected applicants and their families in five provinces.
Overall findings	Scholarship recipients were more than 20 percentage points more likely to be enrolled in school and ten percentage points less likely to work for pay. However, the school enrolment and work of ineligible siblings was largely unaffected by the program.
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; child labour rates (recipients and siblings).
Citation	Ferro, A.R. and Nicollela, A.C. (2007) 'The impact of conditional cash transfer programmes on household work decisions in Brazil'. Paper presented at the IZA/World Bank Conference on Employment and Development.
Name of programme(s) and country/countries	Brazilian educational CCTs (Brazil)
Programme details	The study examines the impact of Brazil's CCTs with an educational component, that is, conditional on school attendance. These are programmes that target families with children from aged 6–15. Each family is able to receive grants for up to three children. Eligibility is determined based on household per capita monthly income and families are required to sign up for programmes. The conditionality requires children attend at least 85% of school days. Beneficiaries are regularly recertified and eligibility verified.
Evaluation methodology	The study uses a nationally representative household survey – the PNAD 2003 – and a quasi-experimental approach to estimate the labour supply (decision to work and number of hours worked) impact of CCTs on children and their parents. It estimates the impact of CCTs on the decision to work and on number of hours worked. Labour-force participation conditional on grants is estimated using a probit model. For the hours equations, a Heckman selection model is used.
Overall findings	The results show that CCTs reduce the probability of work for children, but not their time spent in the labour market, and that the programme is more efficient for girls than for boys. Three years after being adopted nationally, the CCTs seem to have the expected reduction in child labour. This result was obtained for four groups: 6–10 years girls from both urban and rural areas 11–15 urban boys and 11–15 rural girls. For the 6–10 age group, CCT programs reduce the probability of work for urban girls by 0.6 percentage points and by 4.0 percentage points for rural girls. The effect is not significant for boys in this age group. For 11–15-year-old rural girls, we find larger effects of CCTs: a decrease of 12.9 percentage points in the probability of working. In urban areas, an additional benefit may reduce the proportion of working boys aged 11–15 by 4.8 percentage points. Parents' labour participation is not affected, but their working hours change as a result of CCTs.
Reported outcome areas	Employment
Indicators reported	Decision to work/labour participation; weekly hours worked (children and their parents).

Citation	Filmer, D. and Schady, N. (2008) <i>Getting girls into school: evidence from a scholarship program in Cambodia. Policy Research Working Paper 3910.</i> Washington, DC: World Bank.
Name of programme(s) and country/countries	Japan Fund for Poverty Reduction (JFPR) scholarship programme (Cambodia)
Programme details as reported in the study	CCT Scholarship (conditional on enrolment, passing the grade and less than ten days' absence per year) which started operations in 2004, attempting to increase the proportion of girls who make the transition from primary school to lower secondary school, and to encourage girls to complete the lower secondary school cycle. Targeted at poor girls (PMT-like scoring, but loosely applied) who were completing sixth grade (last grade of primary school) within 93 lower secondary schools, covering approximately 45 girls within each of these schools. Scholarships amounted to US\$45 each, almost exactly equivalent to average household spending per student in lower secondary school, and were delivered for three years of the lower secondary cycle.
Evaluation methodology	Quasi-experimental evaluation, using PSM to estimate impact. Two data sources: application forms for the scholarship programme and data on school enrolment and attendance from an unannounced school visit. Full sample 3,623 girls; trimmed sample 3,065 girls.
Overall findings	The scholarship programme increased the enrolment and attendance of recipients at programme schools by about 30 percentage points. Larger impacts are found among girls with the lowest socioeconomic status at baseline.
Reported outcome areas	Education
Indicators reported	Enrolment rates; attendance rates.
Indicators reported  Citation	Enrolment rates; attendance rates.  Filmer, D. and Schady, N. (2009) <i>Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999</i> . Washington, DC: World Bank.
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Citation  Name of programme(s) and	Filmer, D. and Schady, N. (2009) <i>Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999</i> . Washington, DC: World Bank.
Citation  Name of programme(s) and country/countries  Programme details as reported in	Filmer, D. and Schady, N. (2009) <i>Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999</i> . Washington, DC: World Bank.  CESSP Scholarship Programme (Cambodia)  This is a study of a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The larger transfer is equivalent to US\$60 and the smaller to US\$45 per year. Payment is distributed three times per year at a public
Citation  Name of programme(s) and country/countries  Programme details as reported in the study	Filmer, D. and Schady, N. (2009) <i>Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999</i> . Washington, DC: World Bank.  CESSP Scholarship Programme (Cambodia)  This is a study of a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The larger transfer is equivalent to US\$60 and the smaller to US\$45 per year. Payment is distributed three times per year at a public ceremony. The transfer is conditional on school enrolment and regular attendance.  The impact is estimated using a quasi-experimental method, namely RDD. The data come from a special-purpose cross-section survey at baseline, data from unannounced visits to verify attendance, and a follow-up cross-section after
Citation  Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	Filmer, D. and Schady, N. (2009) <i>Are there diminishing returns to transfer size in conditional cash transfers? Policy Research Working Paper 4999.</i> Washington, DC: World Bank.  CESSP Scholarship Programme (Cambodia)  This is a study of a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The larger transfer is equivalent to US\$60 and the smaller to US\$45 per year. Payment is distributed three times per year at a public ceremony. The transfer is conditional on school enrolment and regular attendance.  The impact is estimated using a quasi-experimental method, namely RDD. The data come from a special-purpose cross-section survey at baseline, data from unannounced visits to verify attendance, and a follow-up cross-section after 18 months. There are 26,537 individuals in the initial baseline and 3,500 in follow-up.  Compared to no transfer, receiving any transfer greatly increased the likelihood of the child being present in school on a given day. Little difference in attendance was observed when comparing different transfer levels (US\$60 or US\$45)

Citation	Filmer, D. and Schady, N. (2011) 'Does more cash in conditional cash transfer programs always lead to larger impacts on school attendance?', <i>Journal of Development Economics</i> 96(1): 150–157.
Name of programme(s) and country/countries	CESSP Scholarship Programme (Cambodia)
Programme details as reported in the study	This is a study is of a CCT which began in 2005, intended to reduce school drop-out among primary school students in poor areas who are at risk of not enrolling in secondary school. Eligible candidates are identified using a means test of the likelihood of the child dropping out of school based on their responses to a baseline test. The higher transfer is then allocated to the 25 children most likely to drop out per school, then the lower transfer to the next 25 most likely. The larger transfer is equivalent to US\$60 and the smaller to US\$45 per year. Payment is distributed three times per year at a public ceremony. The transfer is conditional on school enrolment and regular attendance.
Evaluation methodology	The impact is estimated using a quasi-experimental method, namely RDD in a range of iterations, for example controlling for school fixed effects, and reducing the sample to those only around the cut-off point. The data come from a special-purpose cross-section survey at baseline, data from unannounced visits to verify attendance and a follow-up cross-section after 18 months. There are 26,538 individuals in the initial baseline and 3,500 in follow-up.
Overall findings	School drop-out was much lower for non-recipients: those receiving the lowest transfer were 23 to 28 percentage points more likely to be in school. Raising the transfer level only achieves a further increase in attendance likelihood of 1 to 2 percentage points.
Reported outcome areas	Education
Reported outcome areas Indicators reported	Education  School attendance (child's presence at school during unannounced visit).
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Indicators reported	School attendance (child's presence at school during unannounced visit).  Fitzsimons, E. and Mesnard, A., (2014) 'Can conditional cash transfers compensate for a father's absence?', World Bank
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Indicators reported  Citation  Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	School attendance (child's presence at school during unannounced visit).  Fitzsimons, E. and Mesnard, A., (2014) 'Can conditional cash transfers compensate for a father's absence?', <i>World Bank Economic Review</i> 28(3): 467–491.  Familias en Acción (Colombia)  CCT which has been in place in several rural areas of Colombia since 2002 and has since expanded to cover urban areas. The programme aims to alleviate poverty by fostering human capital accumulation among the poorest households through conditional subsidies for investments in education, nutrition and health.  RCT, with analysis performed using a fixed-effects linear probability model and addressing non-random attrition. Data from the special-purpose panel survey from the programme evaluation (2002, 2003, 2006), including 11,500 households in the full sample (subsample includes households with at least one child between 7–14 years of age at the baseline and present throughout three rounds).  This article investigates how the permanent departure of the father from a household affects children's school enrolment and work participation in rural Colombia. The results indicate that the permanent departure of the father decreases children's school enrolment by approximately five percentage points and increases child labour by three percentage points. This article explores

Citation	Galiani, S., Gertler, P. and Bando, R. (2014) Non-contributory pensions. IDB Working Paper Series 517. Washington, DC:
Citation	Inter-American Development Bank.
Name of programme(s) and country/countries	Programa de Atención a Adultos Mayores en Zonas Rurales (Assistance for Older Rural Adults Programme) (Mexico)
Programme details as reported in the study	This study considers a Mexican UCT targeted on the basis of categorical criteria (beneficiary has to be at least 70 years of age) and geographical criteria (only elderly in rural communities of up to 20,000 inhabitants are eligible). The programme was introduced in 1997 and has 2.1 million beneficiaries. The bimonthly transfer is 1,000 Mexican pesos (\$90). Complementary activities include workshops and social development activities.
Evaluation methodology	This study uses a quasi-experimental research design. The authors use DID with two different comparison groups. The data source is a panel survey collected by National Public Health Institute, covering 3,556 individuals.
Overall findings	Mental health is significantly improved; proportion of treated individuals doing paid work is reduced (and instead do more unpaid work inside the household); treated households show higher levels of consumption expenditures.
Reported outcome areas	Empowerment; Employment; Poverty
Indicators reported	Geriatric Depression Scale; proportion in paid work; proportion doing unpaid work in home enterprises; hours worked per week; household consumption; marginal propensity to consume pension.
Citation	Galiani, S. and McEwan P.J. (2013) 'The heterogeneous impact of conditional cash transfers', Journal of Public Economics 103: 85–96.
Name of programme(s) and country/countries	Programa de Asignación Familiar (PRAF) (Honduras)
Programme details as reported in the study	CCT in operation since 1990 in its phase 1, offering an education grant (about US\$50 per year) for children aged 6–12 and a health grant for children under three or pregnant mothers (about US\$40 per year). During the two years of phase 2 implementation, transfers were distributed in November 2000, May–June 2001, October 2001 and late 2002. Conditions included enrolment in school (enforced) regularly attending grades 1 to 4 and regularly visiting a health centre (not enforced). Supply-side funds to schools were also planned but badly implemented.
Evaluation methodology	RCT (randomised by municipality), with impact estimated using a single cross-section with OLS. Data sources include the 2001 Honduran Census, matched to municipal-level treatment data.
Overall findings	The Honduran CCT increased the enrolment of eligible children by eight percentage points, a 12% increase over the control group enrolment rate. It also decreased the proportion of children who work outside the home by three percentage points (or 30%), and decreased the proportion who work inside the home by four percentage points (or 29%).
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; work inside and outside home.
Citation	Gee, K.A. (2010) 'Reducing child labour through conditional cash transfers: evidence from Nicaragua's <i>Red de Protección Social'</i> , <i>Development Policy Review</i> 28(6): 711–732.
Name of programme(s) and country/countries	Red de Protección Social (RPS) (Nicaragua)
Programme details	The RPS is a CCT which was first implemented in 2000 as a cluster-randomised experiment that included 42 eligible districts in rural Nicaragua. It is conditional on children's regular school attendance and health care visits.
Evaluation methodology	The study estimates the causal impact of a CCT offer on both the incidence and duration of child labour. It uses data from the International Food Policy Research Institute relating to RPS, Nicaragua's cluster-randomised CCT, to evaluate whether or not a CCT offer does, in fact, reduce the occurrence and duration of child labour. The study also compares its findings with those on four other CCT programmes carried out across Latin America and discusses how the structure of each programme's incentives, including differences in targeting, subsidy amounts and educational requirements, might contribute to the variation in their effectiveness in reducing child labour. It uses data from 2000 (baseline), 2001 and 2002.
Overall findings	The study finds that the offer of an RPS subsidy causes the estimated probability that a child will engage in work activities to be reduced by approximately 10.6%. The offer of an RPS subsidy reduces the hours that a child will engage in work activities, given that the child is currently working, by 3.7 hours on average.
Reported outcome areas	Employment
Indicators reported	Probability that a child is working; number of hours a child has worked during the immediate past seven days (not

Citation	Gertler, P.J. and Fernald, L.C. (2004) 'The medium term impact of <i>Oportunidades</i> on child development in rural areas. Final report'. Cuernavaca: Instituto Nacional de Salud Pública (mimeo).
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades, operating since 1997, is a means-tested CCT conditional on the household engaging in a set of behaviours designed to improve health and nutrition, including prenatal care, well-baby care and immunisation, nutrition monitoring and supplementation, preventative check-ups, and participation in educational programmes regarding health, hygiene and nutrition. An additional cash transfer is given to households with school-age children if the children are enrolled and attend school. At the time of the paper, the CCT provided benefits to some 4.2 million families.
Evaluation methodology	RCT evaluation, estimating impact using PSM. Specifically, to estimate medium-term effects of the CCT, the study tests the outcomes on three different groups: those who started receiving benefits in 1998 (original treatments), those who started receiving benefits about a year and a half after the first cohort (original controls), and those who never received benefits (new controls). Data sources were Oportunidades' Encuesta de Evaluación de los Hogares (ENCEL) panel surveys and the 2000 census to identify new controls with retrospective info. The original ENCEL sample consisted of a panel of approximately 24,000 households in 506 communities.
Overall findings	Overall, the study finds large and lasting impacts of Oportunidades on motor and behavioural development. Specifically, it finds a 15% improvement in motor skills averaged across the eight skills tests in boys and a 10% average increase across the eight skills tests in girls and an improvement of about 9% in the socio-emotional development of girls, and a positive but non-significant improvement in boys.
Reported outcome areas	Education
Indicators reported	(Medium-term impact, 3–6 years on the programme, in rural areas) Motor skills, socio-emotional development; cognitive development.
Citation	Gertler, P.J. (2004) 'Do conditional cash transfers improve child health? Evidence from PROGRESA's control randomized experiment'. <i>American Economic Review</i> 94(2): 336–341
Name of programme(s) and	Gertler, P.J. (2004) 'Do conditional cash transfers improve child health? Evidence from PROGRESA's control randomized experiment', <i>American Economic Review</i> 94(2): 336–341.  PROGRESA (Mexico)
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Name of programme(s) and country/countries Programme details as reported in	experiment', <i>American Economic Review</i> 94(2): 336–341.  PROGRESA (Mexico)  This is a study of a CCT that began in 1997, intended to address the immediate needs of extreme poverty and break its intergenerational transmission. At the time of the study 2.6 million households were enrolled in the programme. The targeting mechanism is not described in this study although it is clear that randomisation is used. The transfer is typically equivalent to around 20–30% of household income and is distributed every two months. Receipt is conditional on the immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, the attendance of other family members for annual check-ups and the attendance of all adult family members at educational
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Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	experiment', <i>American Economic Review</i> 94(2): 336–341.  PROGRESA (Mexico)  This is a study of a CCT that began in 1997, intended to address the immediate needs of extreme poverty and break its intergenerational transmission. At the time of the study 2.6 million households were enrolled in the programme. The targeting mechanism is not described in this study although it is clear that randomisation is used. The transfer is typically equivalent to around 20–30% of household income and is distributed every two months. Receipt is conditional on the immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, the attendance of other family members for annual check-ups and the attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues and best practices are discussed.  A quasi-experimental method is used, making use of a longitudinal household survey and OLS linear and logistic regression. The sample sizes are 7,703 for the morbidity analysis and around 2,000 for the anaemia and weight analysis. Children in the treatment group experienced large reduction in illness over time compared to control group. Children born into intervention families were less likely to be ill than those in non-intervention families. Anaemia was also much lower in

Citation	Gertler, P.J., Martinez, S.W., Rubio-Codina, M. (2012) 'Investing Cash Transfers to Raise Long-Term Living Standards', American Economic Journal: Applied Economics 4(1): 164–92.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades was established in 1997 with the objective of breaking the intergenerational transmission of poverty by alleviating current poverty while investing in the human capital of the next generation. In 2010 it had 5.8 million beneficiaries. Targeting involves two stage: targeting of marginalised rural communities and then selection of households within these communities using a PMT. Beneficiary households receive transfers for three years, before being recertified. At a minimum they then continue to receive the transfer for six more years (i.e. a programme duration of minimum of nine years). The cash transfer has two components. The first component is fixed cash transfer of 90 Mexican pesos per month, conditional on family members obtaining preventative medical care. The second component – for those households with school-age children - comes in the form of education scholarships and is conditional on school attendance and outcomes The transfer level depends on the age and gender of the child and ranges from 50–225 pesos.
Evaluation methodology	This study utilises an RCT research design and uses DID to estimate effects. It draws on the ENCELURB panel survey with a sample size of 12,302 households (7,658 treated and 4,644 control).
Overall findings	The authors find a range of positive impacts, including increased ownership of productive farm assets; increased agricultural production; a greater likelihood of starting non-agricultural microenterprises, as well as significantly higher agricultural income and household expenditure. There is no significant impact on long-term health outcomes.
Reported outcome areas	Savings, investment and production; Poverty; Health
Indicators reported	Ownership of productive assets (animals, land); agricultural production; having non-agricultural microenterprise; credit; household consumption; agricultural income; transfers from friends; sick days; inactivity; ability to perform activities.
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Citation	Gilligan, D.O., Margolies, A., Quiñones, E. and Roy, S. (2013) <i>Impact evaluation of cash and food transfers at Early Childhood Development centres in Karamoja, Uganda. Final impact report.</i> Washington, DC: IFPRI.
Name of programme(s) and country/countries	World Food Programme (WFP) Karamoja cash transfer pilot (Uganda)
Programme details	The paper reports on a one-year pilot CCT study starting in 2011 which arose out of a desire to understand the relative effect of cash transfers versus food transfers on household and child food security. It also sought to investigate the impact of participation in Early Childhood Development (ECD) centres separately and jointly with cash or food transfers on child development and nutrition. The pilot covered 98 villages across three districts. Intended beneficiaries of the intervention included all households with a child aged 3–5 who participated in an ECD centre. Each ECD centre was randomly allocated either to act as a control, cash or food transfer group. The monthly transfer per child was 25,500 Ugandan shillings in total (roughly US\$10.25), equal to the estimated amount of cash required to purchase a basket similar to the food transfer, though regularity of payments varied in practice. Payments were made electronically to parents through a card. In the original design, it was intended that transfers would be conditional on preschool children maintaining 80% attendance rates at the ECD centre, though due to difficulties in monitoring attendance rates, the transfers were made conditional only on children being enrolled in the ECD centres.
Evaluation methodology	The study was an RCT, randomised at the level of the ECD. A total of 2,838 households were surveyed at both baseline and follow-up. Analysis of covariance models were used to estimate the impacts of the intervention.
Overall findings	The overwhelming conclusion from the evidence is that food transfers affected very few outcome measures whereas cash transfers had broad impacts across a range of outcomes. On topics including household food security, frequency of child food consumption, anaemia prevalence, ECD participation and child cognitive and non-cognitive development, cash transfers consistently caused positive impacts for key outcomes, while food transfers had surprisingly few positive impacts (e.g. on frequency of child consumption of corn soya blend), and appear to have caused a worsening anaemia status in some children.
Reported outcome areas	Health; Poverty; Education
Indicators reported	Dietary diversity index; dietary diversity score; food consumption score; number of days child consumed a food group in last seven days; household daily calorie intake; household monthly food consumption; household value of food consumption; household value of total consumption; anthropometrics (stunted, underweight); child participation in ECD centres; cognitive and non-cognitive development.

Citation	Gitter, S.R. and Caldes, N. (2010) Crisis, food security, and conditional cash transfers in Nicaragua. Working Paper Series
	2010-07. Towson, MD: Towson University, Department of Economics.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details	This CCT programme was designed to lift poor households out of poverty and also to mitigate the long-term consequences of negative economic shocks by providing a safety net. Poverty-based geographic targeting was employed, after which 21 communities across two departments in the north-western part of the country were randomly selected as beneficiaries and 21 selected as control communities. Transfers were given to women in beneficiary households, with the average household receiving C\$ 3,885 (US\$302), or about 18% of total annual household consumption expenditures. The transfers consisted of two parts: an annual food security transfer of 2,880 Nicaraguan córdobas (\$224) and, for households with children aged 7–13 who had not completed the fourth grade, a bimonthly transfer for school attendance of 1,440 córdobas per year and an additional 275 córdobas for school supplies. Transfers were conditional on a number of things, including households attending bimonthly health education workshops, taking children under five to health care appointments, ensuring adequate weight gain for children below the age of four, having up-to-date vaccinations for all children under the age of five, ensuring school enrolment and 85% attendance rates for those children aged 7–13 years old who had not completed fourth grade of primary school, and grade progression at the end of school year. Additional complementary activities included the bimonthly health workshops, child-growth monitoring, provision of anti-parasite pills, vitamins and iron supplements and vaccinations for children up to the age of five.
Evaluation methodology	The study was designed as a cluster RCT, covering a sample of 1,045 households. Impacts were measured using DID.
Overall findings	RPS was able to increase food consumption and variety. Additionally, nutrition education programs provided by RPS appear to have been successful, as household expenditure share on food increased (although not significantly).
Reported outcome areas	Poverty; Health
Indicators reported	Total per capita food expenditure; food diversity; food expenditure by food group; percentage of household budget spent on food.
Citation	Gitter, S.R. and Barham, B.L. (2008) 'Women's power, conditional cash transfers, and schooling in Nicaragua', World Bank
	Economic Review 22(2): 271–290.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details as reported in the study	The RPS transfer is a CCT designed to alleviate poverty following a financial crisis. Starting in 2001, it consists of a basic transfer for poor households and an additional transfer for households with children aged 7–13 who have not completed the fourth grade. Teachment and control processors adjusted and the grade polyment and the grade po
	the fourth grade. Treatment and control areas are selected randomly and there are also household eligibility criteria which are not specified. The transfer consists of a health and nutrition basic transfer plus an education stipend and grant for school supplies if applicable. On average the total transfer is 3,885 córdobas per year or 18% of annual household consumption. Payment is made bimonthly. For the health and nutrition basic transfer all recipients had to attend bimonthly health and nutrition lectures and take children under the age of five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children who had not completed the fourth grade.
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	which are not specified. The transfer consists of a health and nutrition basic transfer plus an education stipend and grant for school supplies if applicable. On average the total transfer is 3,885 córdobas per year or 18% of annual household consumption. Payment is made bimonthly. For the health and nutrition basic transfer all recipients had to attend bimonthly health and nutrition lectures and take children under the age of five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children who had not completed the fourth grade.  The study uses a quasi-experimental design with DID used to estimate the treatment effect. The data come from a special-purpose panel survey containing approximately 4,500 households.  The transfer increased school enrolment. When the recipient was female, her education level was positively linked to better education outcomes for boys. There was no such relationship for girls, suggesting the returns for the mother from

Citation	Green, E.P., Blattman, C., Jamison, J. and Annan, J. (2015) 'Women's entrepreneurship and intimate partner violence: a cluster randomized trial of microenterprise assistance and partner participation in post-conflict Uganda', <i>Social Science &amp; Medicine</i> 33: 177–188.
Name of programme(s) and country/countries	Women's Income Generating Support (WINGS) (Uganda)
Programme details	The WINGS programme involved four days of business skills training plus a start-up grant of US\$150 and follow-up support by trained field staff. The training taught participants how to create a business plan, budget, market goods and services and keep basic financial records. As a variant of the programme, participants were invited to participate with their partners, in which case an additional day of training was given to cover barriers to female entrepreneurship, communication and joint problem-solving.
Evaluation methodology	The study estimates impacts on economic and social outcomes by using two cluster-randomised pragmatic superiority trials. The study estimated effects using OLS regression with a single cross-section, but based on the special-purpose survey and randomised allocation. In total there were 1,800 participants (896 treatment and 904 delayed entry control households).
Overall findings	The study investigates, in particular, the effect of a cash transfer programme on intimate-partner violence. When they included household partners (often husbands) in the beneficiary process they found small, non-significant decreases in abuse and marital control, and large increases in the quality of relationships, but no effects on women's attitudes towards gender norms and a non-statistically significant reduction in autonomy.
Reported outcome areas	Empowerment; Employment; Savings, investment and production
Indicators reported	Empowerment (e.g. partner support index, partner relationship index, physical/emotional abuse in past eight months,
	marital control in past eight months, perception of women's autonomy/rights, self-reported autonomy/influence in purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).
Citation	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American</i>
	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American Research Review</i> , 49(3): 153–175.
Citation  Name of programme(s) and country/countries	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American</i>
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Name of programme(s) and country/countries Programme details as reported in	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American Research Review</i> , 49(3): 153–175.  PRAF, PROGRESA and RPS (Mexico, Honduras, Nicaragua)  Three CCTs implemented in rural areas, encouraging the accumulation of human capital and relatively short-term (one to three years in their pilot phase). Only RPS provided additional supply-side incentives, since these were not implemented in PRAF and not contemplated during PROGRESA's initial phase. PRAF and RPS focused on primary school attendance,
Name of programme(s) and country/countries Programme details as reported in the study	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American Research Review</i> , 49(3): 153–175.  PRAF, PROGRESA and RPS (Mexico, Honduras, Nicaragua)  Three CCTs implemented in rural areas, encouraging the accumulation of human capital and relatively short-term (one to three years in their pilot phase). Only RPS provided additional supply-side incentives, since these were not implemented in PRAF and not contemplated during PROGRESA's initial phase. PRAF and RPS focused on primary school attendance, while PROGRESA included incentives for children in secondary school.  RCT, estimating impacts with DID. However, since assignment (and not participation) is random, the estimated parameters actually capture the Intention to Treat (ITT) effect on the population of compliers. The available data for these programs correspond to baseline and follow-up surveys in the targeted communities. Each survey constitutes a representative sample of individuals in the selected villages, except in Mexico, where the information constitutes a census. Once homogenised, the PRAF survey contains data for 3,227 children (from 2000 and 2002). The survey for PROGRESA contains baseline information (1997–1998) for approximately 24,885 young children across three follow-ups six months apart. Finally, the data for Nicaragua's RPS contain a baseline (collected in 2000) and two follow-ups in 2001 and 2002,
Name of programme(s) and country/countries Programme details as reported in the study  Evaluation methodology	purchases); economic (e.g. index of income measures, employment/occupational index, starting employment, doing business, work hours per week, monthly cash earnings, durable assets, non-durable consumption).  Ham A. (2014) 'The impact of conditional cash transfers on educational inequality of opportunity', <i>Latin American Research Review</i> , 49(3): 153–175.  PRAF, PROGRESA and RPS (Mexico, Honduras, Nicaragua)  Three CCTs implemented in rural areas, encouraging the accumulation of human capital and relatively short-term (one to three years in their pilot phase). Only RPS provided additional supply-side incentives, since these were not implemented in PRAF and not contemplated during PROGRESA's initial phase. PRAF and RPS focused on primary school attendance, while PROGRESA included incentives for children in secondary school.  RCT, estimating impacts with DID. However, since assignment (and not participation) is random, the estimated parameters actually capture the Intention to Treat (ITT) effect on the population of compliers. The available data for these programs correspond to baseline and follow-up surveys in the targeted communities. Each survey constitutes a representative sample of individuals in the selected villages, except in Mexico, where the information constitutes a census. Once homogenised, the PRAF survey contains data for 3,227 children (from 2000 and 2002). The survey for PROGRESA contains baseline information (1997—1998) for approximately 24,885 young children across three follow-ups six months apart. Finally, the data for Nicaragua's RPS contain a baseline (collected in 2000) and two follow-ups in 2001 and 2002, providing information for 2,038 children.

Citation	Handa, S., Park, M., Darko, R.O., Osei-Akoto, I., Davis, B. and Daidone, S. (2014) 'Livelihood Empowerment Against Poverty program impact evaluation. Report'. Chapel Hill, NC: Carolina Population Center, University of North Carolina.
Name of programme(s) and country/countries	Livelihood Empowerment Against Poverty (LEAP) (Ghana)
Programme details as reported in the study	LEAP is a UCT established in 2008 with the objective of alleviating short-term poverty and improving long-term human capital development. It targets poor households, employing categorical targeting criteria: those households with an OVC, elderly poor person or person with extreme disability unable to work. In 2014 coverage was 70,000 households. Transfers are bimonthly and range from 8–15 Ghanaian cedis, depending on family size. Beneficiaries also receive free participation in the NHIS health insurance scheme.
Evaluation methodology	This study has a quasi-experimental research design and uses PSM and multivariate analysis to assess impact. The data source is the nationally representative Institute of Statistical, Social and Economic Research (ISSER) household survey and a follow-up of subsample of 1,613 households.
Overall findings	This study assesses the impact of LEAP on a wide range of outcomes and generally has mixed findings. It finds no impact on total consumption, but positive impacts on non-consumption (savings) and some productivity indicators. The authors also find positive impacts on health insurance coverage, but mixed results on morbidity and health care seeking behaviour. Education impacts were positive: the authors show increased primary and secondary school attendance and reduced grade repetition among primary and secondary school children.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production; Employment
Indicators reported	Total expenditure; expenditure for different expenditure groups; school enrolment; grade repetition; school attendance; health insurance coverage; morbidity; health care seeking behaviour; happiness; debt repayment; loan holding; credit given to others; gifts received and given; savings; labour supplied and hired; seed expenditure.
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Citation	Handa, S., Tucker Halpern, C., Pettifor, A. and Thirumurthy, H. (2014) 'The government of Kenya's cash transfer program reduces the risk of sexual debut among young people age 15-25', <i>PLoS</i> ONE, 9(1): e85473.
Name of programme(s) and country/countries	Handa, S., Tucker Halpern, C., Pettifor, A. and Thirumurthy, H. (2014) 'The government of Kenya's cash transfer program reduces the risk of sexual debut among young people age 15-25', <i>PLoS</i> ONE, 9(1): e85473.  Cash Transfer for Orphans and Vulnerable Children (Kenya CT-OVC) (Kenya)
Name of programme(s) and	reduces the risk of sexual debut among young people age 15-25', PLoS ONE, 9(1): e85473.
Name of programme(s) and country/countries Programme details as reported in	reduces the risk of sexual debut among young people age 15-25', <i>PLoS</i> ONE, 9(1): e85473.  Cash Transfer for Orphans and Vulnerable Children (Kenya CT-OVC) (Kenya)  The Kenya CT-OVC is an unconditional child grant which was introduced in 2007 to provide support for OVCs. The transfer is targeted at orphans (at least one biological parent deceased) and vulnerable children (either chronically ill or whose main carer is chronically ill). The transfer had reached 134,000 households and 280,000 orphaned and vulnerable children by 2012. Eligibility is by PMT using data on wall and floor material, access to potable water, type of lighting fuel and ownership of small assets. Eligible households are selected by a local committee based on these poverty criteria. Households are then enumerated by central body. Child-headed households are prioritised. The transfer is equivalent to
Name of programme(s) and country/countries  Programme details as reported in the study	reduces the risk of sexual debut among young people age 15-25', <i>PLoS</i> ONE, 9(1): e85473.  Cash Transfer for Orphans and Vulnerable Children (Kenya CT-OVC) (Kenya)  The Kenya CT-OVC is an unconditional child grant which was introduced in 2007 to provide support for OVCs. The transfer is targeted at orphans (at least one biological parent deceased) and vulnerable children (either chronically ill or whose main carer is chronically ill). The transfer had reached 134,000 households and 280,000 orphaned and vulnerable children by 2012. Eligibility is by PMT using data on wall and floor material, access to potable water, type of lighting fuel and ownership of small assets. Eligible households are selected by a local committee based on these poverty criteria. Households are then enumerated by central body. Child-headed households are prioritised. The transfer is equivalent to US\$20 per month which is distributed monthly and collected in cash from the post office.  The study uses a quasi-experimental method. The estimation model is a logistic regression controlling for various factors. The data come from a special-purpose panel survey used to evaluate the programme and the sample size is 1,433
Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	reduces the risk of sexual debut among young people age 15-25', <i>PLoS</i> ONE, 9(1): e85473.  Cash Transfer for Orphans and Vulnerable Children (Kenya CT-OVC) (Kenya)  The Kenya CT-OVC is an unconditional child grant which was introduced in 2007 to provide support for OVCs. The transfer is targeted at orphans (at least one biological parent deceased) and vulnerable children (either chronically ill or whose main carer is chronically ill). The transfer had reached 134,000 households and 280,000 orphaned and vulnerable children by 2012. Eligibility is by PMT using data on wall and floor material, access to potable water, type of lighting fuel and ownership of small assets. Eligible households are selected by a local committee based on these poverty criteria. Households are then enumerated by central body. Child-headed households are prioritised. The transfer is equivalent to US\$20 per month which is distributed monthly and collected in cash from the post office.  The study uses a quasi-experimental method. The estimation model is a logistic regression controlling for various factors. The data come from a special-purpose panel survey used to evaluate the programme and the sample size is 1,433 overall and 350 in the subsample which was sexually active.  Participating in the programme reduced the odds of sexual debut by 31%. Among those who were sexually active there were no differences between beneficiaries and non-beneficiaries with regard to risky sexual behaviours. Since the

Citation	Handa, S., Peterman, A., Davis, B. and Stampini, M. (2009) 'Opening up Pandora's box: the effect of gender targeting and conditionality on household spending behavior in Mexico's <i>Progresa</i> Program', <i>World Development</i> 37(6): 1129–1142.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA is a CCT which began in 1997 with the aim of developing the human capital of poor, rural households by improving education, health and nutrition outcomes. By 1999 it had reached 2.6 million households. The transfer has two components: health and education. Communities were targeted based on a marginality measurement constructed using census data (indicators included share of illiterate adults, access to water and drainage, availability of electricity and population working in the primary sector.) Households in marginal communities were then selected on the basis of a poverty means test. The transfer amount is typically 19.5% of household expenditure. The education component is conditional on school attendance (85%). The food grant component is conditional on regular check-ups and nutritional talks every two months.
Evaluation methodology	The study uses a quasi-experimental method in which OLS linear and logistic regression with fixed effects is used to estimate the treatment effect. The data come from a special-purpose longitudinal survey (for this programme) containing 10,188 households.
Overall findings	The transfer led to increase in food expenditure and consumption. It increased women's decision-making power through the ability to spend their own extra cash. However when the transfer increased general income, women's spending patterns did not change, suggesting that cash transfers crowd out intra-household transfers between husband and wife.
Reported outcome areas	Poverty; Education; Empowerment
Indicators reported	Per capita household expenditure; decision-making power of the female household head; schooling expenditure (and other disaggregated expenditures).
Citation	Palermo, T., Alvia, C., Davis, B., Handa, S., Hurrel, A., Hussein, A., Musemb, D., Ochieng, S., Pearson, R., Pellerano, L., Visra, A. and Ward, P. (2012) 'The impact of the Kenya Cash Transfer Program for Orphans and Vulnerable Children on household spending', <i>Journal of Development Effectiveness</i> 4(1): 9–37.
Name of programme(s) and country/countries	Cash Transfer Programme for Orphans and Vulnerable Children (CT-OVC) (Kenya)
Programme details as reported in the study	This programme considers the CT-OCV programme that was set up in 2007 with the objective of providing regular cash transfers to families living with OVC to encourage fostering and retention of children and to promote their human capital development. It targets those who are ultra-poor and contain an OVC. By 2011, it covered 130,000 households and 260,000 OVCs. The programme uses geographical targeting of districts based on overall poverty levels and prevalence of HIV/AIDS. Community members then compile a list of potentially eligible households, then a PMT is applied by officials. The monthly transfer was 2,000 Kenyan shillings in 2011–2012.
Evaluation methodology	This study employs an RCT research design and uses DID to measure impact. The data source is a special-purpose panel survey of 2,759 households (two thirds of those received the treatment).
Overall findings	As a result of the programme, participating households had significantly higher expenditure than control households on food, health and clothing, and significantly less spending on alcohol and tobacco. Programme impacts were also seen on spending in four of seven food groups.
Overall findings  Reported outcome areas	food, health and clothing, and significantly less spending on alcohol and tobacco. Programme impacts were also seen on

Citation	Haushofer, J., Reisinger, J. and Shapiro, J. (2015) 'Your gain is my pain: negative psychological externalities of cash transfers'. Princeton University (mimeo).
Name of programme(s) and country/countries	Give Directly cash transfer RCT (Kenya)
Programme details as reported in the study	UCT pilot, launched in 2011, and designed as an experiment to address several long-standing questions in the economics literature. Targeted to villages with a high proportion of households living in thatched roof homes (rather than metal). Within villages, eligibility was based on living in a house with a thatched roof. Transfer size and frequency were randomly allocated: US\$404 as compared to US\$1,520 (\$404 represented at least twice the monthly average household income in the area) and one-off as compared to monthly over nine months. Transfers were made through the mobile money system M-Pesa.
Evaluation methodology	RCT, reporting OLS estimates of heterogeneous effects for treated households and untreated households, based on data from the programme evaluation's special-purpose panel (control villages only surveyed at endline).
Overall findings	The study finds that changes in wealth have sizeable effects on psychological well-being, in particular life satisfaction. Individuals are generally more satisfied with their life when their own wealth increases. They become, however, less satisfied when the average wealth of others in their village increases, and this effect might more than offset the direct impact from changes in their own wealth. However, no additional impact was identified of changes in inequality on life satisfaction above and beyond the impacts of changes in one's own wealth or the average wealth of the village, while reported changes in satisfaction dissipate quickly over time.
Reported outcome areas	Health; Poverty; Savings, investment and production; Employment; Empowerment
Indicators reported	Health (happiness, life satisfaction, depression, stress, cortisol, psychological well-being index, medical expenditure past month); poverty (total food consumption, non-durable expenditure); education (education expenditure); savings, investment production (value of non-land assets, value of livestock, value of durable goods, value of savings, land owned); employment (wage labour primary income source, own farm primary income source, non-agricultural business primary income source, total monthly revenue/expenses/profit); empowerment (physical violence, sexual violence, emotional violence, justifiability of violence, female empowerment index).
Citation	Haushofer, J. and Shapiro, J. (2013) 'Household response to income changes: Evidence from an unconditional cash
	transfer program in Kenya'. Princeton University (mimeo).
Name of programme(s) and country/countries	GiveDirectly experiment (Kenya)
Programme details as reported in the study	This study assesses the two-year GiveDirectly experiment in Kenya. This UCT programme ran from 2011–2013, with the objective of alleviating poverty and testing cash transfer design parameters. Targeting involved geographic targeting of area and village, then random selection of beneficiaries and their treatment at the village level among those with a thatched roof. The transfer level is US\$404 up to US\$1,520, depending on treatment. Payment frequency is monthly or lump-sum, depending on treatment. Payments are made for a maximum of nine months and are paid electronically.
Evaluation methodology	Utilising an RCT research design, the authors employ OLS to measure impacts. They use a special-purpose panel survey with two rounds and a sample size of 1,008 households (503 treated across three treatment arms; 505 control).
Overall findings	The authors find positive effect on monthly consumption and psychological well-being and female empowerment, as well as a reduction of cortisol production (i.e. lower stress). The gender of the recipient does not affect outcomes.
Reported outcome areas	Poverty; Savings, investment and production; Empowerment; Health
Indicators reported	Household consumption; Engel curves; expenditure elasticities for different expenditure items; investment in assets; food security; psychological well-being (happiness, life satisfaction, stress, depression); cortisol production; female empowerment.

Citation	Hidrobo, M., Hoddinott, J., Peterman, A., Margolies, A. and Moreira, V. (2012) 'Cash, food or vouchers? Evidence from a randomized experiment in northern Ecuador'. Discussion Paper 1234. Washington, DC: IFPRI.
Name of programme(s) and country/countries	World Food Programme (WFP) Colombian refugee RCT (Ecuador)
Programme details	This short-term CCT programme ran between April 2011 to September 2011 for urban-based refugees through a WFP initiative to address the food security and nutrition needs of Colombian refugees and to support their integration into Ecuadorian communities. It was implemented in seven urban centres in the provinces of Carchi and Sucumbios (both border provinces that receive high influxes of Colombian refugees and cross-border traffic). Neighbourhoods within these urban centres were chosen for the intervention by WFP in consultation with the United Nations High Commissioner for Refugees (UNHCR) as areas that had large numbers of Colombian refugees and relatively high levels of poverty. Household targeting was carried out by visiting each household in the selected neighbourhood and administering a one-page questionnaire, used to develop a PMT to define programme eligibility. Based on point scores by nationality, all Colombian and mixed-nationality households were enrolled. In addition, all households that reported receiving the government's social safety-net transfer program, the Bono de Desarrollo Humano, were automatically excluded from eligibility. Transfers were equivalent to US\$40 per month per household and transferred monthly onto pre-programmed bank cards. All participants participated in nutrition training, and transfers were conditional on attendance. The programme also involved nutrition sensitisation aimed at influencing behaviour change and increasing knowledge of recipient households, especially in regard to dietary diversity. In addition to monthly meetings, posters and flyers on nutrition were developed and posted at distribution sites, including supermarkets, banks and community centres, to further expose participants to knowledge messaging.
Evaluation methodology	The study was an RCT, covering a total of 2,122 households. Impacts were estimated using analysis of covariance models.
Overall findings	Cash transfers significantly improved the quantity and quality of food consumed as measured by the value of per capita food consumption, per capita caloric intake and dietary diversity measures.
Reported outcome areas	Poverty; Education; Health
Indicators reported	Value of food consumption; health and education expenditures; non-food expenditures; value of per capita food consumption; per capita caloric intake; per capita caloric intake by food group; household dietary diversity score/index/food consumption score; number of days in last week household consumed (food groups).
Citation	Hidrobo, M., Peterman, A. and Heise, L. (2013) <i>The effect of cash, vouchers and food transfers on intimate partner violence: evidence from a randomized experiment in northern Ecuador.</i> Working Paper. Washington, DC: IFPRI.
Name of programme(s) and country/countries	Cash transfer to vulnerable refugees and poor Ecuadorians in urban areas (Ecuador)
Programme details as reported in the study	This intervention is a short-term UCT, introduced in 2011, to improve the food security of vulnerable refugees and poor Ecuadorians in urban areas and to improve the role of women in household decision-making. The target groups are vulnerable refugees and poor households in refugee areas, and women are unofficially targeted to be primary beneficiary. Urban areas were selected on percentage of refugees and poverty level. A census was then taken of the areas and a PMT then used to determine eligibility (based on household demographics, nationality, labour-force participation, food security and asset ownership). Households were excluded if receiving the BDH. Treatment and control status was then randomised across barrios. Treatment consisted of three arms: cash, food voucher, food transfer. Each of the treatments was equivalent to US\$40 per month per household. Retargeting took place during the six months that the transfers lasted: the wealth threshold was raised to exclude households deemed too well-off. The transfer was paid monthly through a pre-programmed ATM card given to each beneficiary each month allowing money to be withdrawn from certain banks. Receipt was conditional on attending nutrition training (delivered at time of monthly distribution). Nutritional recipes were also distributed throughout the six months. Posters and flyers were available advertising nutrition and sanitation information.
Evaluation methodology	This study benefits from the programme having been designed as an RCT. The estimation method is ANCOVA estimation. The data come from a special-purpose panel survey to evaluate the programme. The total sample size is 1,231 women in both panel waves.
Overall findings	The cash transfer significantly decreased controlling behaviour and moderate physical violence by partner. For women with low decision-making power the effect of the transfer is only significant for physical violence. The cash transfer slightly decreased women's sole decision-making over family planning (for some reason this result is not discussed).
Reported outcome areas	Empowerment
Indicators reported	Women make sole or joint decision on: own work, children's education, children's health, own health, food purchases, asset purchases. Domestic abuse by partner (controlling, emotional, physical/sexual)

Citation	Hidrobo, M., Hoddinott, J., Margolies, A., Moreira, V., Peterman, A. (2012) <i>Impact evaluation of cash, food vouchers, and food transfers among Colombian refugees and poor Ecuadorians in Carchi and Sucumbíos.</i> Final Report. Washington, DC: IFPRI.
Name of programme(s) and country/countries	Cash transfer to vulnerable refugees and poor Ecuadorians in urban areas (Ecuador)
Programme details as reported in the study	This intervention is a short-term UCT, introduced in 2011, to improve the food security of vulnerable refugees and poor Ecuadorians in urban areas and to improve the role of women in household decision-making. The target groups are vulnerable refugees, poor households in refugee areas and women are unofficially targeted to be primary beneficiary. Urban areas were selected on percentage of refugees and poverty level. A census was then taken of the areas and a PMT then used to determine eligibility (based on household demographics, nationality, labour-force participation, food security, and asset ownership.) Households were excluded if receiving the BDH. Treatment and control status was then randomised across barrios. Treatment consisted of three arms: cash, food voucher, food transfer. Each of the treatments was equivalent to US\$40 per month per household. Retargeting took place during the six months that the transfers lasted: the wealth threshold was raised to exclude households deemed too well-off. The transfer was paid monthly through a pre-programmed ATM card given to each beneficiary each month allowing money to be withdrawn from certain banks. Receipt was conditional on attending nutrition training (delivered at time of monthly distribution). Nutritional recipes were also distributed throughout the six months. Posters and flyers made available advertising nutrition and sanitation information.
Evaluation methodology	Due to the randomisation of treatment allocation this study is an RCT. The treatment impact is estimated using ANCOVA estimation. The data are taken from a special-purpose panel survey collected to evaluate the programme. The sample contains 3,331 households at baseline and 2,122 at follow-up (30% were excluded from the programme part of the way through due to retargeting)
Overall findings	The cash transfer increased per capita food consumption, but slightly less than the voucher and food basket interventions. The cash transfer increased dietary diversity, decreased feelings of discrimination and increased trust in institutions and people — the impacts are larger for Colombians than Ecuadorians. Anaemia was significantly lower in cash beneficiary children compared to control group. Cash transfer led to significant decrease in physical/sexual violence and controlling behaviour by partner.
Reported outcome areas	Poverty; Health; Empowerment
Indicators reported	Log value of per capita food consumption; Log per capita caloric intake; dietary diversity; number of days out of the last seven that household consumed: cereals, veg, fruit, meat, eggs, etc.; Log of household expenditure on: personal care, house items, transport, water, entertainment, clothing, education, health, luxuries, etc. Trust of individuals and institutions (e.g. would go to police if victim of crime; trust in neighbours and government, etc.); experience of discrimination on the basis of race, gender, etc.; participation in community groups. Anaemia measures for children and adolescents. Women make sole or joint decision on: own work, children's education, children's health, own health, food purchases, asset purchases. Domestic abuse by partner (controlling, emotional, physical/ sexual).

Citation	Hidrobo, M. and Fernald, L. (2013) 'Cash transfers and domestic violence', Journal of Health Economics 32(1): 304-319.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details as reported in the study	The BDH was introduced in 1999 to guarantee minimum consumption level, increase human capital and reduce malnutrition and disease in children. It is targeted at the poorest 40% of households. Eligibility is means-tested on household wealth as determined by an index constructed using census data. Treatment was allocated randomly to half of eligible households. The transfer value was initially US\$15 per month, increasing to US\$30 in 2007, then to US\$35 in 2009. In total it is equivalent to around 9% of household expenditure. Cash is collected from the local bank every month. Despite being designed as a CCT, in practice there are no punitive consequences for non-compliance with the conditionality. In the study sample, 27% of respondents believed that school attendance was a condition of receipt.
Evaluation methodology	Treatment was randomly allocated, so this study is an RCT which estimates the treatment effect using SD estimation. The data are taken from a special-purpose panel survey to evaluate the programme. The sample was restricted to mothers living with their husbands at baseline with a total sample size of 1,250 (836 in the treatment group, 414 in the control group).
Overall findings	The cash transfer had a different impact depending on the woman's education level: for women with above primary education the transfer decreases psychological violence by partner; for women with primary or less the transfer impact depends on her partner's education relative to hers; for women with education equal to or above partner's the transfer increases emotional violence.
Reported outcome areas	Empowerment
Indicators reported	Emotional violence; controlling behaviour by male partner; physical violence; sexual violence.

Citation	Hoddinott, J., Skoufias, E. and Washburn, R. (2000) The impact of PROGRESA on consumption. Final Report. Washington,
	DC: IFPRI.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	PROGRESA was a national anti-poverty programme adopted by the federal government in 1997. The programme included cash transfers linked to children's enrolment and regular school attendance and clinic attendance. The programme also included in-kind health benefits and nutritional supplements for children up to five and pregnant and lactating mothers. Cash transfers were targeted specifically at the mother of the family. As of 1999, PROGRESA covered approximately 2.6 million families (about 40% of all rural families and about 11% of all families in Mexico). The programme operated in almost 50,000 localities, more than 2,000 municipalities in 31 states, with a budget of approximately US\$777 million for 1999, equivalent to 0.2% of gross domestic product (GDP).
Evaluation methodology	The study draws on the RCT evaluation of PROGRESA, covering 24,000 households from across 506 communities. The study uses fixed-effects regression using the panel survey associated with the RCT.
Overall findings	The PROGRESA programme appeared to have sizeable and significant effects on the consumption of beneficiary households. For example, household consumption was around 15% higher among beneficiary households. The value of food consumption was marginally higher (2%). Median caloric acquisition per capita rose by 8% and dietary diversity also improved.
Reported outcome areas	Health; Poverty
Indicators reported	Total calories available per person per day (from different food groups); non-food expenditures.
Citation	Hoddinott, J. and Wiesmann, D. (2008) <i>The impact of conditional cash transfer programs on food consumption in Honduras, Mexico and Nicaragua</i> . Rochester, NY: Social Science Research Network (SSRN).
Name of programme(s) and country/countries	Study reports findings on: (1) Programa de Asignación Familiar (PRAF); (2) Oportunidades; and (3) Red de Protección Social (RPS)
Programme details	No programme details given.
Evaluation methodology	The study draws on the randomised design of PRAF and Oportunidades, using special-purpose panel data to estimate DID effects. For RPS, the study again uses DID, with an annual household panel survey from before and after the programme. Overal sample sizes for the different programme estimates are: PRAF: 3,300 households, Oportunidades: 13,200 and RPS: 800.
Overall findings	Overall, PRAF, PROGRESA and RPS have only small effects on caloric acquisition at the household level. There are no statistically significant effects of PRAF or RPS and PROGRESA raises caloric acquisition by only 3.6%. However, there are larger and statistically significant effects on dimensions of diet quality.
Reported outcome areas	Health
Indicators reported	Total calories consumed; calories from different food groups; number of foods.
Citation	Hoddinott, J. and Skoufias, E. (2004) 'The impact of PROGRESA on food consumption', <i>Economic Development and Cultural Change</i> 53(1): 37–61.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	PROGRESA (later called Oportunidades) provided cash transfers linked to children's enrolment and regular school attendance and to clinic attendance. The programme also included in-kind health benefits and nutritional supplements to children up to five years old and pregnant and lactating women and instructional meetings ('pláticas') on health and nutrition issues. PROGRESA targeted the mother of the family and by 2000 reached approximately 2.6 million families (around 40% of all rural families). The programme operated in around 50,000 localities and over 2,000 municipalities in 31 states with a budget equivalent to around 0.2% of GDP.
Evaluation methodology	The study uses a longitudinal sample of around 24,000 households and exploits the random allocation of households to treatment status to investigate the impact of PROGRESA on household diets. The study estimates impacts using fixed-effects regression.
Overall findings	By November 1999, beneficiary households in treatment localities obtained 6.4% more calories than did comparable households in control localities. The authors find that the impact is greatest on the acquisition of calories from vegetable and animal products — a finding consistent with the view of respondents themselves that PROGRESA was enabling them to 'eat better'.
Reported outcome areas	Health
Indicators reported	Per capita household caloric availability (total calories, calories from grains, calories from fruit and vegetables, calories

Citation	Jones, N. and Samuels, F. (2015) 'The role of cash transfers in maximising schools' protective effects for children in extreme settings: an ecological approach', <i>International Journal of Educational Development</i> 41: 217–225.
Name of programme(s) and country/countries	Cash Transfer for Orphans and Vulnerable Children (CT-OVC) (Kenya) Palestinian National Cash Transfer Programme (PNCTP) (Palestine) Juntos (Peru)
Programme details as reported in the study	This study qualitatively evaluates three interventions, all intended to address the needs of poor and vulnerable households, with a focus on children. The Kenyan CT-OVC is a quasi-CCT which began in 2009 and reaches 150,000 extremely poor households supporting a vulnerable child or orphan. Households receive a lump sum of 4,000 Kenyan shillings every two months (regardless of household size) which they collect in cash from the post office. To comply with the programme's conditions, caregivers officially must send the child to school, immunise them, take them for health monitoring and attend awareness-raising sessions. However, the conditions are not enforced. The Palestinian PNCTP is a UCT which began in 2010–2011 and reaches 150,000 extremely poor households, female-headed households and households with vulnerable people. Households receive between 750 to 1,800 New Israeli shekels quarterly, which is paid into a bank account or given by cheque. The Peruvian Juntos programme is a CCT which began in 2005 and reaches 455,000 households below the poverty line with children under the age of 14. Households receive a lump sum of 100 soles (same amount for every household) on a monthly basis which is collected in cash from a bank. Transfer receipt is conditional on school attendance, obtaining civic documentation, health checks and attending awareness-raising sessions (these conditions are enforced).
Evaluation methodology	The impact of these interventions is explored using qualitative methods, namely community mapping, focus groups, interviews, key informant interviews, and observational case studies. The sample size in Kenya is 91 respondents; in Palestine, 161 respondents; and in Peru, 64 respondents.
Overall findings	There is a positive impact of receiving the cash transfer on children's confidence and self-esteem and it encourages school attendance. Supply-side shortcomings are identified, such as low education quality, which is still a persistent problem.
Reported outcome areas	Education
Indicators reported	N/A
Citation	Karlan, D., Osei, R., Osei-Akoto, I. and Udry, C. (2014) 'Agricultural decisions after relaxing credit and risk constraints', Quarterly Journal of Economics 129(2): 597–652.
Name of programme(s) and country/countries	Innovation for Poverty Action randomised trial (Ghana)
Programme details	The study reports on several experiments carried out in northern Ghana from 2009 in which farmers were randomly assigned to receive cash grants, grants of or opportunities to purchase rainfall index insurance, or a combination of the two. Farmers were given unconditional grants of around US\$85 per acre (an average of \$420 per recipient) as cash grants, and the rainfall insurance grants were equivalent to US\$47 per acre. Transfers were made according to preferences. For example, if beneficiary stated half would be spent on seed and half on harvest labour then half was given before planting and half before harvest. The trial was conducted over three years.
Evaluation methodology	The study was evaluated using an RCT, with effects estimated using an IV approach. The sample frame for the study was from communities in northern Ghana where maize farming was dominant and households with some maize farming but not > 15 acres of land. 502 households in total participated and were allocated to one of the four groups (including a control group).
Overall findings	The study finds that cash transfers, when combined with access to weather index, has a higher impact on certain outcomes, including the value of chemical inputs used and involvement and employment in non-farm income-generating activities.
Reported outcome areas	Employment; Savings, investment and production; Poverty; Health
Indicators reported	Land preparation costs; number of acres cultivated; value of chemicals used; wages paid to hired labour; total costs invested on farm; value of harvest; proportion of land planted with maize; average weekly orchard income; non-farm income-generating activity (yes/no); number of household members working in non-farm income-generating activity;

Citation	Kassouf, A.L. and De Oliveira, P.R. (2012) Impact evaluation of the Brazilian non-contributory pension program Benefício de Prestação Continuada (BPC) on family welfare. Partnership for Economic Policy (PEP) Working Paper 2012-12. Nairobi: PEP.
Name of programme(s) and country/countries	Benefício de Prestação Continuada (BPC) (Brazil)
Programme details	The BPC, first introduced in Brazil in 1996, is a non-contributory pension (old-age and disability). The old-age component provides a minimum wage to individuals aged 65 or more with a per capita family income no greater than 25% of the current minimum wage. In 2008, the BPC programme benefited almost 3 million people (elderly and disabled).
Evaluation methodology	The paper evaluates the effects of the BPC on household composition and on labour market outcomes of the elderly and their co-residing relatives. Using data from Brazil's nationally representative household survey, PNAD (2001–2008), it implements an RDD and various econometric models to explore the 'discontinuity'. The discontinuity arises because poor individuals become eligible when they turn 65. This is the current cut-off, changing over time (it was 70 from 1996–1997, 67 until 2003 and 65 since then). In addition to regression discontinuity, other methods used in the study include PSM and DID estimations.
Overall findings	The study reports results on the effects of the BPC on labour and educational outcomes of beneficiaries and their co-residents. It finds that there are no changes in household composition due to the programme. It finds decreases in the labour-force participation of the elderly, indicating that the programme makes it possible for these older poor individuals to retire. Also, the study reports a drop in labour-force participation of co-residents. However, the effect is heterogeneous and the effect is concentrated for adults over the age of 30, while there is no effect for young adults. When analysing only rural areas, the study reports a decrease in labour participation of the elderly and co-residents aged 18–50 receiving BPC. The study also reports a decrease in child labour.
Reported outcome areas	Employment; Education
Indicators reported	Changes in household composition; labour-force participation (beneficiaries and co-residents) – participating in labour-force and number of hours worked per week; child labour and school attendance.
Citation	Kohler, H.P. and Thornton, R.L. (2012) 'Conditional cash transfers and HIV/AIDS prevention: unconditionally promising?' World Bank Economic Review 26(2): 165–190.
Name of programme(s) and country/countries	Malawi Incentive Programme (Malawi)
Programme details as reported in the study	This study evaluates a CCT, which began in 2006, with the specific aim of reducing risky sexual behaviour and hence the spread of HIV infection. The intervention targets 1,307 men and women at risk of HIV. Respondents are randomly selected from a sample of men and women who participated in an earlier longitudinal study and had agreed to an HIV test at an earlier stage. Transfer amounts are randomly allocated and range from zero to approximately four months' wages. The transfer consists of a voucher given at the start of the year which is redeemable at end of year if (negative) HIV status is maintained, at which point a lump-sum payment is given. If enrolled as a couple, both parties have to maintain their HIV status. If one member of a couple is already HIV positive, he or she would automatically receive the money at the end providing the other has maintained negative status.
	spread of HIV infection. The intervention targets 1,307 men and women at risk of HIV. Respondents are randomly selected from a sample of men and women who participated in an earlier longitudinal study and had agreed to an HIV test at an earlier stage. Transfer amounts are randomly allocated and range from zero to approximately four months' wages. The transfer consists of a voucher given at the start of the year which is redeemable at end of year if (negative) HIV status is maintained, at which point a lump-sum payment is given. If enrolled as a couple, both parties have to maintain their HIV status. If one member of a couple is already HIV positive, he or she would automatically receive the money at the end
the study	spread of HIV infection. The intervention targets 1,307 men and women at risk of HIV. Respondents are randomly selected from a sample of men and women who participated in an earlier longitudinal study and had agreed to an HIV test at an earlier stage. Transfer amounts are randomly allocated and range from zero to approximately four months' wages. The transfer consists of a voucher given at the start of the year which is redeemable at end of year if (negative) HIV status is maintained, at which point a lump-sum payment is given. If enrolled as a couple, both parties have to maintain their HIV status. If one member of a couple is already HIV positive, he or she would automatically receive the money at the end providing the other has maintained negative status.  A quasi-experimental design is used, consisting of logistic regression on individual-level panel survey data collected for
the study  Evaluation methodology	spread of HIV infection. The intervention targets 1,307 men and women at risk of HIV. Respondents are randomly selected from a sample of men and women who participated in an earlier longitudinal study and had agreed to an HIV test at an earlier stage. Transfer amounts are randomly allocated and range from zero to approximately four months' wages. The transfer consists of a voucher given at the start of the year which is redeemable at end of year if (negative) HIV status is maintained, at which point a lump-sum payment is given. If enrolled as a couple, both parties have to maintain their HIV status. If one member of a couple is already HIV positive, he or she would automatically receive the money at the end providing the other has maintained negative status.  A quasi-experimental design is used, consisting of logistic regression on individual-level panel survey data collected for the project. The sample size is between 1,748 and 3,258 depending on the analytical model.  The prospect of receiving a cash transfer increased some risky behaviours among men and reduced some risky behaviours in women. There is no consistent pattern to the impact of the (anticipation of the) transfer, even taking into

Citation	Langendorf, C., Roederer, T., de Pee, S., Brown, D., Doyon, S., Mamaty, A-A., Touré, L.W., Manzo, M.L. and Grais, R.F. (2014) 'Preventing acute malnutrition among young children in crises: a prospective intervention study in Niger', <i>PloS Medicine</i> 11 (9): e1001714.
Name of programme(s) and country/countries	A prospective nutrition intervention study (Niger)
Programme details	The study was prospective intervention study conducted between August and December 2011 in 48 rural villages located within 15 km of a health centre. The study was set up to allow a controlled comparison between different strategies aimed at preventing malnutrition in young children. The target population was households with children in Madarounfa health district in the southern part of Maradi region. Households were randomly allocated to receive either cash transfers alone (equivalent to US\$59) or cash plus one of a specific type of nutritional supplements (equivalent to US\$52 for the cash plus supplementary foods). Transfers were made monthly. In addition to transfers and/or food supplements, beneficiaries were also given nutritional information on purchasing food for children, including diet diversity.
Evaluation methodology	The study was an RCT covering 4,176 children. Impacts on moderate acute malnutrition, severe acute malnutrition and mortality were estimated as adjusted Hazard Ratios.
Overall findings	The incidence of moderate acute malnutrition was about twice as high among children who received the cash-only intervention as among those who received any of the food supplement plus cash. However, the incidence of severe acute malnutrition was about three times higher among the children who received the Super Cereal+ (SC+) only intervention than among those who received the SC+ with cash intervention.
Reported outcome areas	Health
Indicators reported	Moderate acute malnutrition; severe acute malnutrition; mortality.
Citation	
Citation  Name of programme(s) and	Leroy, J.L., Gadsden, P., González de Cossío, T. and Gertler, P. (2013) 'Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico', <i>Journal of Nutrition</i> 143(3): 378–383.  Programa de Apoyo Alimentario (PAL) (Mexico)
	Leroy, J.L., Gadsden, P., González de Cossío, T. and Gertler, P. (2013) 'Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico', <i>Journal of Nutrition</i> 143(3): 378–383.
Name of programme(s) and country/countries	Leroy, J.L., Gadsden, P., González de Cossío, T. and Gertler, P. (2013) 'Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico', <i>Journal of Nutrition</i> 143(3): 378–383.  Programa de Apoyo Alimentario (PAL) (Mexico)  PAL was launched in 2003 to attend to the needs of communities that were not eligible for Oportunidades. Most PAL beneficiary households received in-kind transfers (food baskets), though others received cash transfers. All transfers were conditional upon attending nutrition and health education sessions and participating in programme-related logistic activities, though these were never strictly enforced. Households in targeted communities were eligible if they fell below a 'needs' poverty line as defined by the Ministry of Social Development. Beneficiaries received either a cash transfer of 150 Mexican pesos/per month or a monthly food basket with a cost to the government of 150 pesos (about US\$14 at the time of the evaluation). Households received the transfers every two months. The objectives of the programme were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households' dietary
Name of programme(s) and country/countries Programme details	Leroy, J.L., Gadsden, P., González de Cossío, T. and Gertler, P. (2013) 'Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico', <i>Journal of Nutrition</i> 143(3): 378–383.  Programa de Apoyo Alimentario (PAL) (Mexico)  PAL was launched in 2003 to attend to the needs of communities that were not eligible for Oportunidades. Most PAL beneficiary households received in-kind transfers (food baskets), though others received cash transfers. All transfers were conditional upon attending nutrition and health education sessions and participating in programme-related logistic activities, though these were never strictly enforced. Households in targeted communities were eligible if they fell below a 'needs' poverty line as defined by the Ministry of Social Development. Beneficiaries received either a cash transfer of 150 Mexican pesos/per month or a monthly food basket with a cost to the government of 150 pesos (about US\$14 at the time of the evaluation). Households received the transfers every two months. The objectives of the programme were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households' dietary and health practices.  The study employed a cluster RCT to estimate the differential impact of the cash and in-kind transfers. 208 eligible communities were randomly assigned to one of four groups: food basket without education; food basket with education;
Name of programme(s) and country/countries Programme details  Evaluation methodology	Leroy, J.L., Gadsden, P., González de Cossío, T. and Gertler, P. (2013) 'Cash and in-kind transfers lead to excess weight gain in a population of women with a high prevalence of overweight in rural Mexico', <i>Journal of Nutrition</i> 143(3): 378–383.  Programa de Apoyo Alimentario (PAL) (Mexico)  PAL was launched in 2003 to attend to the needs of communities that were not eligible for Oportunidades. Most PAL beneficiary households received in-kind transfers (food baskets), though others received cash transfers. All transfers were conditional upon attending nutrition and health education sessions and participating in programme-related logistic activities, though these were never strictly enforced. Households in targeted communities were eligible if they fell below a 'needs' poverty line as defined by the Ministry of Social Development. Beneficiaries received either a cash transfer of 150 Mexican pesos/per month or a monthly food basket with a cost to the government of 150 pesos (about US\$14 at the time of the evaluation). Households received the transfers every two months. The objectives of the programme were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households' dietary and health practices.  The study employed a cluster RCT to estimate the differential impact of the cash and in-kind transfers. 208 eligible communities were randomly assigned to one of four groups: food basket without education; food basket with education; cash transfer with education; or control. Impacts were estimated using DID on a full sample of 3,010 women.  With respect to the control group, the programme increased women's weight (420 +/- 230 g; P = 0.032); this was equivalent to 53% increase in weight gain over that observed in the control group in a 23-month time period. The greatest impact was found in already obese women: 670 +/- 320 g (p = 0.019). The impact was marginally significant in women with a pre-programme BMI between 25 and 30 kg/m²: 540 +/- 360 g (p = 0.067). No

Citation	Leroy, J.L., Gadsden, P., Rodríguez-Ramírez, S. and González de Cossío, T. (2010) 'Cash and in-kind transfers in poor rural communities in Mexico increase household fruit, vegetable, and micronutrient consumption but also lead to excess energy consumption', <i>Journal of Nutrition</i> 140(3): 612–617.
Name of programme(s) and country/countries	Programa de Apoyo Alimentario (PAL) (Mexico)
Programme details	PAL is a conditional cash and in-kind food support programme launched in 2003 to meet needs of communities that were not eligible for PROGRESA (i.e. where there was no nearby school or health clinic). The objectives were to lower poverty, increase the daily food intake and nutritional status of beneficiary households, and improve households' dietary and health practices. PAL was targeted to communities that do not receive benefits from other federal food aid programs, have less than 2500 inhabitants, and have a high level of marginalisation based on multidimensional poverty. Households within these communities were eligible if they fell below the 'needs' poverty line as defined by the Mexican Ministry of Social Development. Beneficiaries were given a monthly transfer of cash or food equivalent to US\$14 at the time. Beneficiary households were required to attend nutrition and health education sessions and had to participate in programme-related logistic activities to receive the benefits. These programme conditions, however, were not strictly enforced.
Evaluation methodology	A community RCT was used to evaluate the impact of the programme. A random sample of 208 communities were selected, within which 33 households were randomly selected. The communities were then assigned to one of four study groups: food basket without education, food basket with education, cash transfer with education or control. The final sample included 5,823 households. A DID approach was used to estimate the effects.
Overall findings	The programme was associated with increases in the consumption of total energy (5%), energy from fruits and vegetables (24%), and energy from animal source foods (24%). It also affected iron, zinc and vitamin A and C consumption (p< 0.05).
Reported outcome areas	Health
neporteu outcome areas	Health
Indicators reported	Energy consumption (incl. from various specific sources); nutrient consumption (including range of specific nutrients).
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Citation  Name of programme(s) and	Energy consumption (incl. from various specific sources); nutrient consumption (including range of specific nutrients).  Leroy, J.L., García-Guerra, A., García, R., Dominguez, C., Rivera, J. and Neufeld, L.M. (2008) 'The <i>Oportunidades</i> program increases the linear growth of children enrolled at young ages in urban Mexico', <i>Journal of Nutrition</i> 138(4): 793–798.
Citation  Name of programme(s) and country/countries	Energy consumption (incl. from various specific sources); nutrient consumption (including range of specific nutrients).  Leroy, J.L., García-Guerra, A., García, R., Dominguez, C., Rivera, J. and Neufeld, L.M. (2008) 'The <i>Oportunidades</i> program increases the linear growth of children enrolled at young ages in urban Mexico', <i>Journal of Nutrition</i> 138(4): 793–798.  Oportunidades (Mexico)  Oportunidades is a large-scale poverty-alleviation programme that provides CCTs and includes a strong nutrition component. The primary goal of Oportunidades is to increase human capital through the simultaneous investment in health, education and nutrition. Beneficiary families receive a monthly cash transfer to improve their purchasing power. It also provides milk-based micronutrient fortified foods targeted to children and pregnant and lactating women. The programme's health component also includes the provision of obligatory, preventative and curative health services such as the immunisation of children, child-growth monitoring and prenatal and post-partum care visits. The programme started operating on a small scale in rural areas but was since expanded to urban areas in 2002 and has enrolled a total
Citation  Name of programme(s) and country/countries  Programme details	Energy consumption (incl. from various specific sources); nutrient consumption (including range of specific nutrients).  Leroy, J.L., García-Guerra, A., García, R., Dominguez, C., Rivera, J. and Neufeld, L.M. (2008) 'The <i>Oportunidades</i> program increases the linear growth of children enrolled at young ages in urban Mexico', <i>Journal of Nutrition</i> 138(4): 793–798.  Oportunidades (Mexico)  Oportunidades is a large-scale poverty-alleviation programme that provides CCTs and includes a strong nutrition component. The primary goal of Oportunidades is to increase human capital through the simultaneous investment in health, education and nutrition. Beneficiary families receive a monthly cash transfer to improve their purchasing power. It also provides milk-based micronutrient fortified foods targeted to children and pregnant and lactating women. The programme's health component also includes the provision of obligatory, preventative and curative health services such as the immunisation of children, child-growth monitoring and prenatal and post-partum care visits. The programme started operating on a small scale in rural areas but was since expanded to urban areas in 2002 and has enrolled a total of 5 million households in all regions of the country.  This study focused specifically on urban households as part of the urban roll-out of PROGRESA. The study uses a quasi-experimental approach, drawing on a special-purpose longitudinal study and employing DID and PSM techniques. The full
Citation  Name of programme(s) and country/countries  Programme details  Evaluation methodology	Energy consumption (incl. from various specific sources); nutrient consumption (including range of specific nutrients).  Leroy, J.L., García-Guerra, A., García, R., Dominguez, C., Rivera, J. and Neufeld, L.M. (2008) 'The <i>Oportunidades</i> program increases the linear growth of children enrolled at young ages in urban Mexico', <i>Journal of Nutrition</i> 138(4): 793–798.  Oportunidades (Mexico)  Oportunidades is a large-scale poverty-alleviation programme that provides CCTs and includes a strong nutrition component. The primary goal of Oportunidades is to increase human capital through the simultaneous investment in health, education and nutrition. Beneficiary families receive a monthly cash transfer to improve their purchasing power. It also provides milk-based micronutrient fortified foods targeted to children and pregnant and lactating women. The programme's health component also includes the provision of obligatory, preventative and curative health services such as the immunisation of children, child-growth monitoring and prenatal and post-partum care visits. The programme started operating on a small scale in rural areas but was since expanded to urban areas in 2002 and has enrolled a total of 5 million households in all regions of the country.  This study focused specifically on urban households as part of the urban roll-out of PROGRESA. The study uses a quasi-experimental approach, drawing on a special-purpose longitudinal study and employing DID and PSM techniques. The full sample covers 432 children who were under 24 months old at baseline, from 733 households.  There was no overall association between programme participation and growth in children aged 6–24 months. However, children in intervention families younger than 6 months of age at baseline grew 1.5 cm (P < 0.05) more than children in comparison families, corresponding to 0.41 height-for-age z-scores (P < 0.05). They also gained an additional 0.76 kg (P < 0.01) or 0.47 weight-for-height z-scores (P < 0.05). Children living in the poorest intervention h

Citation	Levy, D. and Ohls, J. (2007) Evaluation of Jamaica's PATH Program. Final Report. Washington, DC: Mathematica Policy Research, Inc.
Name of programme(s) and country/countries	Programme of Advancement Through Health and Education (PATH) (Jamaica)
Programme details	PATH was established in 2001 in response to concerns about poverty levels in Jamaica. The aim was to target households that were among poorest in the country. By 2002 the programme had become nationwide and at the time of the report, about 245,000 individuals had signed up for PATH, of whom about 180,000 received benefits in a typical month. To participate in the programme, a household had to apply to its Ministry of Labour and Social Security parish office and provide detailed information about its demographic and socioeconomic characteristics. They would then be given a score on a scale used to determine eligibility. Transfers included: (1) Child assistance grants for health and education up to the age of 17 (each child only eligible for one type – health if 0–5 and education if 6–17). Average monthly benefits per child in 2005 were about US\$6.50; (2) Social assistance grants for adults provided grants to poor pregnant or lactating mothers, elderly poor (over the age of 65), and poor, disabled and destitute adults under 65. The average monthly benefit per person was the same as the benefit in the child assistance grants. As a reference, the minimum wage in Jamaica for general workers was about US\$160 per month at the time of reporting. Households received grants every two months, based on the number of eligible members, disbursed through cheques sent to them through the local post office. Health grants were conditional on children up to the age of six visiting a health clinic and the education grants were conditional on regular school attendance. Initially, the receipt of benefits was conditional on adults making regular health clinic visits but this changed shortly after the programme was launched, and benefits for adults are no longer conditional. There is a compliance assessment for the education- and health-based conditions.
Evaluation methodology	The study used a quasi-experimental approach to estimating the programme's impacts, employing RDD. It makes use of a special-purpose longitudinal survey conducted for the evaluation. Sample sizes for education outcomes included 7,751 individuals and that for health outcomes was 3,756 children and 1,379 for the elderly.
Overall findings	PATH has increased school attendance by approximately half a day per month. The estimated increase is about 3% over the baseline level, and it is statistically significant. Health care visits for children aged 0–6 increased by approximately 38% as a result of PATH. The impact of PATH on health care visits by the elderly shows no evidence of effects on this group. While PATH was successful at increasing school attendance and preventative health visits, there is no evidence that it was able to affect longer-term outcomes such as grades, advancement to next grade or health care status.
Reported outcome areas	Education; Health
Indicators reported	Number of days attended school; number of visits to a health centre for preventative reasons in past 6 months.
Citation	Lincove, J. A. and Parker, A. (2015). 'The influence of conditional cash transfers on eligible children and their siblings', <i>Education Economics</i> , 24(4): 352-373.
Name of programme(s) and country/countries	RPS (Nicaragua)
Programme details	Nicaragua's RPS CCT pilot was implemented from 2000 to 2002 with the objective of supplementing income, reducing school drop-out rates and improving the health and nutrition of children. The transfer represents on average 20% of beneficiary income and is made up of three transfers: a food security transfer (the 'bono alimentario'), a school attendance transfer (the 'bono escolar') and a school supplies transfer. The pilot programme followed an experimental design to facilitate evaluation.
Evaluation methodology	The paper estimates the direct effects of the RPS on eligible and ineligible children, as well as the indirect effects of sibling eligibility. It estimates programme effects through DID models that estimate the effects of the treatment on changes in outcome measures for the treated.
Overall findings	The paper finds positive effects on all eligible children and ineligible boys when an eligible sibling is present. This is driven by a larger income effect for boys than girls in a setting where boys are more likely to be out of school and engaging in work. This suggests that extra income induced parents to provide more human capital investments for all male children, while female children benefited only if they were eligible for CCTs.
Reported outcome areas	Employment; Education
Indicators reported	Probability of working and number of weekly hours worked by age group and gender (boys and girls); probability of attending school by age and sex; impact on type of work (available upon request).

Citation	Lovo, S. (2011) 'Pension transfers and farm household technical efficiency: evidence from South Africa', American
	Journal of Agricultural Economics 93 (5): 1391–1405.
Name of programme(s) and country/countries	Old-Age Pension Programme (South Africa)
Programme details	The intervention is a non-contributory pension which was the result of the extension to the black population of the white social pension system established during apartheid. All women over the age of 60 and men over 65 are eligible, though the programme incorporates a means test based on recipient wealth. In practice it covers most black African households. Transfers are about twice the median per capita income of an African household, paid monthly.
Evaluation methodology	Impacts are estimated using quasi-experimental methods — the use of IV with the third wave of the KwaZulu-Natal Income Dynamic Survey (KIDS). The full sample used covers 549 households.
Overall findings	The receipt of a pension from the Old-Age Pension Programme has a positive and relevant effect on farm household technical efficiency. The pension transfer, therefore, improves the ability of farm households to make use of the best available technologies.
Reported outcome areas	Savings, investment and production
Indicators reported	Technical efficiency, measured using six outputs (maize production, value of vegetable/fruit/other production, income from animals and off-farm income) and six inputs (male household members, female members, land, hired labour, livestock and cost of inputs).
Citation	Macours, K., Schady, N. and Vakis, R. (2012) 'Cash transfers, behavioral changes, and cognitive development in early childhood', <i>American Economic Journal: Applied Economics 4</i> (2): 247–273.
Name of programme(s) and	Atención a Crisis (Nicaragua)
country/countries	The study evaluates a CCT which began in 2005, designed to improve health outcomes for young children in poor
Programme details as reported in	The study evaluates a CCT which began in 2005, designed to improve health outcomes for voling children in hoor
the study	families. At the time of the study the transfer had reached 3,000 households. Treatment allocation is randomised at the community level and household eligibility determined by an expenditure-based means test (90% of households are eligible). At a public lottery households are randomly assigned one of three treatments: 1) a basic transfer equivalent to on average 15% of annual per capita household expenditure; 2) the basic transfer plus a scholarship for a vocational course; 3) the basic transfer plus a lump sum to start a non-agricultural business. The basic transfer is distributed every two months for one year. To receive the basic transfer, households with children aged 0–5 must attend regular health checkups (but this is not enforced) and in those households with children aged 7–15 who had not finished primary school, the children had to meet school enrolment and regular attendance conditions. Complementary information sessions on diet, health and education are offered.
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the study  Evaluation methodology	families. At the time of the study the transfer had reached 3,000 households. Treatment allocation is randomised at the community level and household eligibility determined by an expenditure-based means test (90% of households are eligible). At a public lottery households are randomly assigned one of three treatments: 1) a basic transfer equivalent to on average 15% of annual per capita household expenditure; 2) the basic transfer plus a scholarship for a vocational course; 3) the basic transfer plus a lump sum to start a non-agricultural business. The basic transfer is distributed every two months for one year. To receive the basic transfer, households with children aged 0–5 must attend regular health checkups (but this is not enforced) and in those households with children aged 7–15 who had not finished primary school, the children had to meet school enrolment and regular attendance conditions. Complementary information sessions on diet, health and education are offered.  The quasi-experimental method makes use of a panel survey (baseline, endline and two years after transfer had stopped) and uses OLS linear and logistic regression models to estimate the transfer impact. The sample size is 4,245 in total but
	families. At the time of the study the transfer had reached 3,000 households. Treatment allocation is randomised at the community level and household eligibility determined by an expenditure-based means test (90% of households are eligible). At a public lottery households are randomly assigned one of three treatments: 1) a basic transfer equivalent to on average 15% of annual per capita household expenditure; 2) the basic transfer plus a scholarship for a vocational course; 3) the basic transfer plus a lump sum to start a non-agricultural business. The basic transfer is distributed every two months for one year. To receive the basic transfer, households with children aged 0–5 must attend regular health checkups (but this is not enforced) and in those households with children aged 7–15 who had not finished primary school, the children had to meet school enrolment and regular attendance conditions. Complementary information sessions on diet, health and education are offered.  The quasi-experimental method makes use of a panel survey (baseline, endline and two years after transfer had stopped) and uses OLS linear and logistic regression models to estimate the transfer impact. The sample size is 4,245 in total but 2,400 for most indicators.  Higher expenditure levels observed in households that received the lump-sum payment – this effect does not disappear

Citation	Macours, K., Premand, P. and Vakis, R. (2012) Transfers, diversification and household risk strategies: experimental evidence with lessons for climate change adaptation. World Bank Policy Research Working Paper 6053. Washington, DC: World Bank.
Name of programme(s) and country/countries	Atención a Crisis (Nicaragua)
Programme details	The Atención a Crisis programme was a one-year pilot programme implemented between November 2005 and December 2006. It was implemented in the aftermath of a severe drought and had two objectives. First, it aimed to serve as a short-run safety net by providing cash transfers to reduce the need for adverse coping mechanisms (e.g. taking children out of school or reductions in food consumption). Second, the programme intended to promote long-run upward mobility and poverty reduction by enhancing the asset base and income diversification capacity of households. 3,000 households were selected to participate in the programme and allocated to one of three different options: (i) a basic CCT; (ii) the basic CCT plus a scholarship for an occupational training; and (iii) the basic CCT plus a grant for productive investments. The basic CCT was conditional on children's primary school and health service attendance during the one-year time period. Households received a transfer of US\$145 even if they did not have children while those with children aged 7–15 enrolled in and attending primary school received an additional US\$90 per household and an additional US\$25 per child (all amounts referring to the total transfer received over the year). The school enrolment and attendance requirement was carefully monitored, though child visits to the health centres were not monitored. Transfers were provided bimonthly.
Evaluation methodology	The study is designed as an RCT, using OLS and IV approaches to estimate impacts of the transfers. A total of 3,918 households were included in the sample.
Overall findings	Two years after the end of the intervention, households eligible for the complementary interventions were better protected against the negative impact of drought shocks. For total and food consumption, as well as for income, the negative impact of shocks is completely offset. These results hold for the intervention that provided households with a productive grant to invest in a non-agricultural self-employment activity, as well as for the other complementary intervention aimed at building skills through vocational training. In addition, for households eligible for the productive investment grant there was a significant positive impact on consumption and income at average levels of drought. Hence, This intervention helped to both increase and smooth consumption and income. The paper further shows that the complementary interventions increased households' participation in non-agricultural activities, as well as returns from such activities.
Reported outcome areas	Poverty; Savings, investment and production; Employment
Indicators reported	Total consumption; per capita income; total food consumption per capita; total non-food consumption per capita; participation in non-agricultural wage/self-employment; non-agricultural wage income; profits of non-agricultural business; value of livestock sold or self-consumed; value of business assets; increase in profits in 12 months.
Citation	Macours, K. and Vakis, R. (2009) Changing households' investments and aspirations through social interactions: Evidence from a randomized transfer program. World Bank Policy Research Working Paper 5137. Washington, DC: World Bank.
Name of programme(s) and country/countries	Atención a Crisis (Nicaragua)
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Evaluation methodology	The study was implemented as an RCT. The sample included a total of 3932 households (6,333 child-level observations) with impacts estimated using multiple regression. The study was restricted to the six drought-prone municipalities in which the pilot was implemented.
Overall findings	Study compares outcomes across different packages received. The authors find that those leaders receiving cash plus a productive investment package have some statistically higher rankings on certain economic outcomes, such as income from non-agricultural activities and value of animal stock, as well as slightly more positive mental attitudes.
Reported outcome areas	Education; Health; Savings, investment and production
Indicators reported	Human capital investment (attending school, number of days absent, school expenditure, share of food expenditures for animal products/vegetables and fruit); economic activities (income from non-agricultural self-employment, income from commercial activities, income from agricultural wages, value animal stock, total income); attitudes (positive expectations about the future, happy, feeling of moving forward in life, sum of positive feelings, depression scale, no risk management).

Citation	Maluccio, J.A. (2010), 'The Impact of conditional cash transfers on consumption and investment in Nicaragua', <i>Journal of Development Studies</i> , 46(1): 14–38.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details as reported in the study	RPS is a CCT programme set up in 2000 (discontinued in 2006) with the objective of increasing food expenditure, reducing primary school drop-out rates and improving nutritional status. Targeting involved geographic targeting of poor communities based on a marginality index and a means test of households within those communities. Transfers are bimonthly. During the first two years, the average annual family transfer was US\$272 dollars, approximately 17% of pre-programme total annual household expenditures. All families with children received a health transfer of approximately US\$37 every two months (a total of US\$224 per year) if every health conditionality was met. The education transfer included US\$112 per household per year and a per beneficiary child transfer for school supplies of US\$21 per year.
Evaluation methodology	The authors use a DID approach to analyse impact, using a special-purpose longitudinal survey of five waves (1,764 households in 2000, with some attrition in subsequent years).
Overall findings	The programme increased current expenditures, but did not increase agricultural or non-agricultural investment. The marginal propensity to consume out of the transfers is nearly one.
Reported outcome areas	Poverty; Education; Savings, investment and production; Employment
Indicators reported	Total expenditure; food expenditure; education expenditure; marginal propensity to consume; number of consumer durables; value of consumer durables; number of agricultural goods; value of agricultural goods; has any expenditure on agricultural or non-agricultural equipment; expenditure on agricultural or non-agricultural equipment; number of types of animals owned; value of animals owned; tropical livestock units; if non-agricultural home production for sale; if resell/retail purchased goods; if services of some sort (not day labour) are sold.
Citation	Maluccio, J.A. (2005) 'Coping with the "Coffee Crisis" in Central America: the role of the Nicaraguan <i>Red de Protección Social'</i> . Food Consumption and Nutrition Division Discussion Paper 188. Washington, DC: IFPRI.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details	The programme began in 2001 as a CCT modelled on PROGRESA designed to address both current and future poverty via cash transfers targeted at households living in extreme poverty. Specific objectives included: (1) supplementing household income for up to three years to increase expenditure on food, (2) reducing school desertion during the first four years of primary school, and (3) increasing the health care and nutritional status of children under the age of five. For the pilot, the government selected the departments of Madriz and Matagalpa from the northern part of the Central Region, on the basis of poverty as well as their capacity to implement the program. Within these departments, six out of 20 municipalities were chosen. Transfers were composed of: (1) a food security transfer (US\$224, equivalent at the time to 2,880 Nicaraguan córdobas per household per year). On its own, the food security transfer represented about 13% of total annual household expenditure in beneficiary households before the programme; and (2) a school attendance transfer (US\$112, equivalent to 1,440 Nicaraguan córdobas per household per year) plus an additional annual cash transfer for school supplies (US\$21, equivalent to 275 Nicaraguan córdobas per child). Over the two years, the actual average monetary transfer was approximately US\$300 (or 18% of total annual household expenditure). Transfers were made bimonthly. The food security transfer was contingent upon attendance at bimonthly health education workshops held within the community and on taking children under the age of five to preventative health care appointments. The specific health care services required by the programme were provided free of charge to beneficiary households and included growth monitoring, vaccination and provision of anti-parasites, vitamins and iron supplements. The school attendance transfer was contingent on enrolment only. To enforce compliance with programme requirements, beneficiaries did not receive the food and/or education component(s) of the tra
Evaluation methodology	The pilot was evaluated using an RCT study that gathered longitudinal survey data covering a total of 4,188 households. The study estimates the impacts of the programme using DID.
Overall findings	The programme was found to have protected households against falls in per capita expenditure and, while not significantly depressing labour supply relative to before the programme, muted additional labour supply for beneficiaries in coffee-growing areas, relative to their counterparts outside the programme.
Reported outcome areas	Poverty; Employment; Education; Health
Indicators reported	Per capita real annual expenditure; per capital real annual food expenditure; total hours worked in past week; average hours per worker worked last week; total hours dedicated to agriculture last week; fraction of labour allocated to agriculture last week; engaged in small business activity; primary school enrolment; child labour; height-for-age; participation in the coffee sector.

Citation	Maluccio, J.A. and Flores, R. (2005) Impact evaluation of a conditional cash transfer program: the Nicaraguan Red de Protección Social. <i>IFPRI Research Report 141</i> . Washington, DC: IFPRI.
Name of programme(s) and country/countries	RPS (Nicaragua)
Programme details	Nicaragua's RPS CCT was introduced in 2000 and was expanded in 2002 for another three years. It is designed to address both current and future poverty via cash transfers targeted at households that live in poverty in rural Nicaragua. The RPS's specific objectives include supplementing household income for up to three years to increase expenditures on food, reducing school drop-out rates during the first four years of primary school, and increasing the health care and nutritional status of children under the age of five. The transfers are conditional and households are monitored to ensure that they undertake the prescribed actions intended to improve their children's human capital. During the first year of operation, about 10% of beneficiaries were penalised at least once and therefore did not receive a (full) transfer. Over the two years, the actual average education monetary transfer (excluding the teacher transfer) was approximately 17% of total annual household expenditure). The bono escolar or 'school attendance transfer' is paid every other month, contingent on enrolment and regular school attendance of children ages 7–13 who have not completed fourth grade of primary school. In addition, for each eligible child, the household received an annual cash transfer intended for school supplies, contingent on enrolment. To increase resources available to the schools, there was also a small cash transfer, known as the bono a la oferta or 'teacher transfer'.
Evaluation methodology	The evaluation design is based on a randomised, community-based intervention with measurements before and after the intervention in both treatment and control communities. It relies on data from a randomised, community-based intervention with measurements before and after the intervention in both treatment and control communities. Data used for the evaluation were drawn from an annual household panel data survey implemented in both intervention and control areas of RPS before the start of the program, in 2000, and after the programme began operations, in 2001 and 2002. The study estimates programme effects through DID models that estimate the effects of the treatment on changes in outcome measures for the treated.
Overall findings	Examining separately women and men (aged 15 and over), there were no significant changes in labour participation in the previous week. There was a small decline (of about three hours) in reported hours worked in the preceding week by adult women living in intervention comarcas, consistent with increased responsibilities associated with the programme. However, the double-difference estimated effects, while negative, are small and insignificant. For men, there is evidence of a reduction of hours worked in the last week, of about six hours in both years. In sum, labour market participation was apparently little changed over the course of the programme, although there was an indication of slightly fewer hours worked by men in the previous week, relative to the control group.
Reported outcome areas	Poverty; Health; Education; Employment
Indicators reported	Per capita annual total household expenditures; per capita annual food expenditure; food shares (%); composition of food expenditure; hours worked last week; remittance behaviour; school enrolment rates; school attendance; school advancement; child labour working/not working; child health care: percentage taken to a health care provider, percentage weighed, percentage with updated vaccination; child nutritional status; child wasting, percentage children underweight, iron supplement, anaemia, average haemoglobin.
Citation	Maluccio, J. (2003) 'Education and child labor: experimental evidence from a Nicaraguan conditional cash transfer program'. Study prepared by IFPRI (mimeo).
Name of programme(s) and country/countries	RPS (Nicaragua)
Programme details	Nicaragua's RPS, piloted in 2000 and extended in late 2002 for three years, is designed to address both current and future poverty via cash transfers targeted to households living in poverty in rural Nicaragua. RPS's specific objectives include: supplementing household income for up to three years, reducing school drop-out rates during the first four years of primary school and increasing the health care and nutritional status of children under five years of age. The RPS is made up of two main components: an education component and a health, nutrition and food security component.
Evaluation methodology	The study uses household and individual data collected before and after RPS was implemented in both the intervention and control <i>comarcas</i> . It uses the double-difference method to calculate 'average programme impact'. It relies on two data sources: the RPS baseline (2000, carried out before the start of the programme) and the RPS follow-up (2001). Both were conducted in all 42 intervention and control <i>comarcas</i> .
Overall findings	The study finds that RPS had a significant and substantial effect on schooling matriculation and enrolment during its first year of operation. Moreover, it led to a substantial reduction in child labour for the school-age population. It is, therefore, possible for a cash transfer programme aimed at education to reduce child labour, even during a general economic downturn such as occurred during this time.
	Education; Employment
Reported outcome areas	Education, Employment

Citation	Manley, J., Fernald, L. and Gertler, P. (2015) 'Wealthy, healthy and wise: does money compensate for being born into difficult conditions?' <i>Applied Economics Letters</i> 22(2): 121–126.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details	Oportunidades was a CCT established in 1997 (when it was known as PROGRESA). It involves monetary transfers to poo households conditional on the household members' coming in for medical check-ups, sending children to school and/ or attending educational discussions with care providers. The transfer consists of three parts: a grant for consumption of food, awarded conditional on attendance at scheduled visits to health centres; a per child grant for school materials, awarded yearly, and a per child grant awarded monthly. The amount of the last portion of the transfer varies according to the grade the child is in.
Evaluation methodology	The study uses quasi-experimental methods to estimate the impact of Oportunidades on health and educational outcomes, using an IV approach and the original programme evaluation data.
Overall findings	Improvements in child development are more linked to the transfers themselves than to other portions of the programme which involve medical check-ups as well as educational sessions for mothers.
Reported outcome areas	Health; Education
Indicators reported	Height-for-age; BMI; test scores (verbal, cognitive and strengthsand difficulties questionnaire).
Citation	Martinez, S. (2004) 'Pensions, poverty and household investments in Bolivia'. University of California at Berkeley (mimeo)
Name of programme(s) and country/countries	Bono Solidario (BONOSOL) (Bolivia)
Programme details	The BONOSOL pension programme started in 1997 and emerged as part of the ambitious social and economic reforms implemented by the Bolivian government during the mid-1990s. The pension was designed as an annuity of US\$248 to all Bolivians aged 65 and over. The transfer was a substantial amount of money, equivalent to 27% of national per capita income, 50% of annual income for the poor and 85% of annual income for the extreme poor. In 2001 the transfer payment was reduced to US\$120, still a sizeable transfer for poor households, at 13% of per capita annual income.
Evaluation methodology	The study estimates the effect of the BONOSOL transfer on consumption using a quasi-experimental approach. DID RDD is used to compare eligible and non-eligible households, using two nationally representative repeated cross-section household surveys. The full sample includes 96,237 individuals from 21,221 households for both rounds of data.
Overall findings	This study finds positive effects of the programme on household consumption and children's human capital, consistent with previous research on cash transfer programs in developing countries. However, the increase in food consumption for impoverished households in rural areas is equivalent to over one and a half times the value of the pension. A significant fraction of this increase is derived from consumption of home-produced agricultural products such as meats and vegetables. These results suggest that cash transfers to poor and liquidity constrained households may facilitate productive investments which boost consumption through multipliers on the transfer. This proposition is supported by evidence that beneficiary households in rural Bolivia increase animal ownership, expenditures on farm inputs, and crop output, although the specific choice of investment differs according to the gender of the beneficiary. These results are consistent with the presence of credit constraints that limit poor households' ability to invest, and suggest that cash transfers may be an effective way to reduce extreme poverty, as poor households with under-capitalised assets and opportunities put the transfer to work.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production
Indicators reported	Value of monthly food consumption; value of monthly home-produced food consumption; food consumption by food group; value of monthly home-produced consumption by food group; monthly non-food consumption; ownership of specific animals and number of animals owned; monthly expenditure on agricultural inputs; enrolment in school.

Citation	Masino, S. and Niño-Zarazúa, M. (2014) Social service delivery and access to financial innovation: the impact of Oportunidades' electronic payment system in Mexico. WIDER Working Paper 2014/034. Helsinki: UNU-WIDER.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Oportunidades (formerly PROGRESA) is Mexico's flagship anti-poverty social protection programme launched in 1997 to cover 300,700 households in 6,344 rural municipalities. By 2013, the programme supported nearly six million household living in 109,852 marginalised rural, peri-urban or urban localities. Its objective is to break the intergenerational cycle of poverty by enhancing the development of human capabilities through education, health and nutrition and provide income supplements to poor families in exchange for certain commitments, such as regular school attendance and periodic health clinic visits. While income supplements were initially paid in cash at distribution points in towns, this involved a range of costs for recipient households. In 2003 an electronic payment system was introduced to make the delivery of grants more efficient and to broaden the limited financial inclusion in the country.
Evaluation methodology	The study uses a quasi-experimental evaluation design to investigate the four-year impact of an electronic transfer programme on savings decisions, transaction costs and coping strategies against idiosyncratic risks. The study draws on a pooled panel survey containing 3,003 households and exploits the exogenous establishment of electronic payment hubs to estimate impacts through a multivariate regression framework, combined with matching techniques.
Overall findings	The results indicate that households which received their transfer in a bank account decreased their participation in informal saving arrangements, increased the frequency of remittance reception and were more likely to use their savings to cope with idiosyncratic shocks. The authors also find a degree of outcome heterogeneity, which seems to be contingent upon the environments that characterise rural as opposed to urban areas in Mexico.
Reported outcome areas	Savings, investment and production
Indicators reported	Participation in informal savings, home savings, remittances and use of own savings to cope with idiosyncratic shocks.
Citation	Merttens, F., Hurrell, A., Marzi, M., Attah, R., Farhat, M., Kardan, A. and MacAuslan, I. (2013) <i>Kenya hunger safety net programme monitoring and evaluation component impact evaluation final report: 2009 to 2012</i> . Oxford: Oxford Policy Management.
Name of programme(s) and country/countries	Hunger Safety Net Programme (HSNP) (Kenya)
Programme details	Kenya's HSNP is a UCT that aims to reduce poverty in northern Kenya. During the pilot phase, the HSNP delivered regular cash transfers to beneficiary households – approximately 300,000 beneficiaries (60,000 households) – targeted under three different targeting mechanisms: Community-based targeting: the community collectively selects households they consider most in need of cash transfers, up to a quota of 50% of all households; Dependency ratio: households are selected if the proportion of members under 18 or over 55 years old, disabled or chronically ill exceeds a specified number; and Social pension: Any individual aged 55 or over is eligible for cash transfers (so one household could receive multiple transfers).
Evaluation methodology	The study analyses the impacts of the HSNP on households after 24 months from the point of targeting. It relies on information collected via both quantitative and qualitative approaches over three years between August 2008 and November 2012. The impact evaluation is underpinned by an experimental quantitative survey design, using an RCT approach using a panelled household survey. The measure of programme impact derives from a comparison of baseline and follow-up data (after two years of programme operation) using DID impact analysis. The evaluation includes a qualitative component, focus group discussions (with female and male beneficiaries and non-beneficiaries), key informant interviews (with community elders, teachers, labourers, minority groups and traders), household case studies (a 'qualitative panel' of beneficiaries and non-beneficiaries) and participatory methods (social mapping, timelines and community wealth ranking).
Overall findings	The study finds that the HSNP stops or slows the slide into poverty, has a significant impact on food security, helps households retain livestock and enables households to spend more on health care. It does not appear to be creating dependency by negatively impacting labour supply. Given the low value of the transfer, and the fact that there are no graduation criteria – i.e. households are not removed from the programme once they reach a certain level of income or assets – this result is not unexpected. In treatment areas, the proportion of household members aged 18–54 whose mair activity is unpaid work has fallen with statistical significance, indicating that more household members of working age are being required to engage in income-producing activities.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production; Employment; Empowerment
Indicators reported	Food security, food consumption, dietary diversity, child nutrition, livestock retention, ownership of productive assets, health expenditure, health status, education expenditure, school attendance, performance; inflation, food prices; local economy, pastoralist livelihoods; saving, borrowing credit; coping with shocks; women's empowerment (control of household budget, income-generating activities); household mobility, household dependency; vulnerability to shocks; household composition; social tensions; informal social pension; self-reported changes in household work patterns and business activities; proportion of adults engaged in productive work; change in type of work.

Citation	Merttens, F., Pellerano, L., O'Leary, S., Sindou, E., Attah, R., Jones, E. and Martin, S. (2015) <i>Evaluation of the Uganda Social Assistance Grants for Empowerment (SAGE) Programme: impact after one year of programme operations 2012–2013. Evaluation Report.</i> Oxford: Oxford Policy Management and Kampala: Department of Anthropology and Sociology, University of Makerere.
Name of programme(s) and country/countries	Social Assistance Grants for Empowerment (SAGE) consisting of Vulnerable Family Support Grant (VFSG) and Senior Citizens Grant (SCG) (Uganda)
Programme details as reported in the study	This study evaluates the impact of two UCTs — a family support grant and an old-age grant — which began in Uganda in 2011. The aim of the programme is to help to tackle chronic poverty and address the impact of poverty on social cohesion and the ability of chronically poor people to access healthcare, education and other key services. The target group is vulnerable families and elderly individuals. In total the transfer had reached approximately 600,000 people in 95,000 households at the time of the study. There were eligibility requirements based on PMT which are not described in the study. A census-style registration process was carried out by local government. Women are selected as the main recipien of the VFSG. The transfer is supposed to be 25,000 Ugandan shillings per month but in practice on average it was 10,900 Ugandan shillings per month (13% of total household consumption). Delivery of payment is officially bimonthly, but in practice it is delivered much less frequently. The payment is delivered by electronic transfer to a bank/credit account.
Evaluation methodology	This study has a quantitative evaluation component and a qualitative component. The evaluation is quasi-experimental in design, using regression discontinuity analysis and DID with PSM. This component uses data from a special-purpose panel survey to evaluate the programme, providing a sample size of 1,944 respondents for the SCG, 1,865 for the VFSG. The qualitative data are drawn by 128 focus group discussions and over 140 individual interviews, covering 1,164 respondents in total.
Overall findings	Both transfers increased food expenditure. However, no effect has been observed (yet) on child malnutrition. The VFSG transfer improved savings while SCG improved access to credit. No impacts were observed on education or health outcomes according to quantitative analysis and no significant impact was observed on empowerment of women.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production; Empowerment
Indicators reported	Monthly expenditure on food (and total), meals per day; child malnutrition (stunting, wasting); purchase of productive assets; savings, access to credit; school enrolment and attendance, child labour; illness or injury in last 30 days; migration; receipt of other transfers; civic participation.
Citation	Miller, C.M., Tsoka, M. and Reichert, K. (2011) 'The impact of the Social Cash Transfer Scheme on food security in Malawi', <i>Food Policy</i> 36(2): 230–238.
Name of programme(s) and country/countries	Social Cash Transfer Scheme (Malawi)
Programme details	The intervention is a UCT, established as a pilot in 2006 to try and improve food security by targeting bimonthly transfers to the country's most destitute households. Intended beneficiaries were ultra-poor households (those in the lowest economic quintile, with no assets, consuming one meal a day) that were also labour constrained (having a dependency ratio higher than three). As of 2010, the programme was operational in seven districts (out of 28) and reached over 83,000 households. Beneficiaries were identified using a mixture of community-based targeting with PMT for welfare ranking and final section. Retargeting took place every four years. Transfer levels depended on household size. At the time of study, monthly values were 600 Malawian kwacha (MK), MK1,000, MK1,400 and MK1,800 for one, two, three and four or more household members respectively (equivalent at the time to US\$4.30, US\$7.14, US\$10 and US\$12.85 respectively). An additional educational bonus was added for each school-going child (MK200 for primary school and MK400 for secondary school). The average transfer size was MK2,000 (US\$14) per month). Payments were made manually and there were no formal conditions attached to receiving the transfers.
Evaluation methodology	The study reports on the findings of an RCT, which covered 752 households. Impacts are estimated using DID.
Overall findings	Each of the tested outcomes yields large effect sizes that are highly statistically significant, demonstrating a sizeable impact of cash transfers on food security and food diversity in rural Malawi.
Reported outcome areas	Poverty; Health
Indicators reported	Weekly total/per capita expenditure; weekly total/per capita food expenditure; proportion of expenditure spent on food; proportion stating food consumption is less than enough; whether household members go more than eight days a month without adequate food; whether household members are still hungry after meals; consumption of at least two meals a day; proportion eating different food groups; food diversity score.

Citation	Miller, C. and Tsoka M. (2012) 'Cash transfers and children's education and labour among Malawi's poor', <i>Development Policy Review</i> 30(4): 499–522.
Name of programme(s) and country/countries	Social Cash Transfer Scheme – Mchinji Pilot (Malawi)
Programme details as reported in the study	UCT, launched in 2006, targeted at ultra-poor households that are also labour constrained. At time of writing, it targeted 24,300 households and 98,000 beneficiaries, adopting a community-based means-tested targeting strategy. The value of the transfer depends on the size of the household and the number of school-aged children. On average, beneficiary households receive approximately US\$14 (MK 2,000) per month (accounting for 60% of pre-transfer expenditures on average).
Evaluation methodology	RCT, estimating impacts with DID. Data sources include a special-purpose panel survey and school visits. The final analysis includes 1,242 children and young people in 513 households.
Overall findings	Compared with non-beneficiaries, intervention children experienced a five percentage point difference in enrolment, higher educational expenditures, fewer absences, and a ten percentage point decrease in labour outside the home.
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; days absent; educational expenditures; work inside and outside the home.
Citation	Mo, D., Zhang, L., Yi, H., Luo, R., Rozelle, S., Brinton, C. (2013) 'School dropouts and conditional cash transfers: evidence from a randomised controlled trial in rural China's junior high schools', <i>Journal of Development Studies</i> 49(2): 190–207.
Name of programme(s) and country/countries	CCT in North/North-West China's junior high schools, China
Programme details as reported in the study	CCT, launched in 2009 as part of an RCT. Targeted at the poorest students ranked in each school and amounting to 500 Chinese renminbi, a significant proportion of the average annual income of a farmer. Paid per semester if the child was still in school at the end of each semester with attendance rates of over 80%.
Evaluation methodology	RCT, estimating impacts with DID. Data sources: special-purpose panel survey and school visits. The final analysis includes 1,242 children and young people in 513 households.
Overall findings	Compared with non-beneficiaries, intervention children experienced a five percentage point difference in enrolment, higher educational expenditures, fewer absences, and a ten percentage point decrease in labour outside the home.
Reported outcome areas	Education; Employment
Indicators reported	Enrolment rates; days absent; educational expenditures; work inside and outside the home.
Citation	Mochiah, E.E-A., Osei, R.D. and Akoto, I.O. (2014) <i>The impact of conditional cash transfer programmes on household work decisions in Ghana</i> . WIDER Working Paper, 2014/116. Helsinki: UNU-WIDER.
Name of programme(s) and country/countries	Livelihood Empowerment Against Poverty (LEAP) (Ghana)
Programme details	The LEAP cash transfer programme provides cash and health insurance to extremely poor households across Ghana to alleviate short-term poverty and encourage long-term human capital development. It started as a trial in March 2008 with 1,654 beneficiary households in 21 districts, and then began expanding gradually. By March 2012, 68,000 households from 100 districts were benefiting from LEAP. After an increase in the transfer value by the government of Ghana, the new value of the transfer corresponded to 21% of consumption (up from 11% initially and then 7%).
Evaluation methodology	The study examines the impact of LEAP on household supply of labour for agriculture, paid employment and non-farm enterprise. It uses a DID approach to estimate the effects of the programme on 3,008 households.
Overall findings	The study finds that the cash transfer leads to a reduction in agricultural labour supply but increases that of paid employment.
Reported outcome areas	Employment
Indicators reported	Households' supply of labour for agriculture, paid employment, and non-farm enterprise; households' overall labour

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

Citation	O'Brien, C., Marzi, M., Pellerano, L. and Visram, A. (2013) <i>Kazakhstan: external evaluation of BOTA programmes: the impact of BOTA's conditional cash transfer (CCT) programme 2011–2012</i> . Oxford: Oxford Policy Management.
Name of programme(s) and country/countries	BOTA (Kazakhstan)
Programme details	The BOTA Foundation set up the CCT programme to improve the lives of children in Kazakhstan by offering a regular monthly income to poor households to increase access to education and other social sector services. To be eligible, the household must live in an area supported by the CCT, and must contain a member who matches one of the four defined categories of beneficiary: (i) children aged four or over until they must start school; (ii) women who are pregnant or have an infant under six months old; (iii) children with disabilities; and (iv) school-leavers aged 16–19 who are starting work. Eligibility rules also require households to qualify as poor according to a short computer test that compares its characteristics with households from the national household survey. Transfer values in 2012 ranged between US\$24 and US\$35 per beneficiary per month.
Evaluation methodology	The report examines three sets of questions: programme impact, operational effectiveness and targeting effectiveness. For the programme impact evaluation, the report focuses on BOTA's ECD component in the Almaty province. It estimates impact by comparing outcomes in two similar groups of communities: one that received BOTA's CCT in 2011–12 and one that did not. Relying on a cluster RCT (randomisation by group of villages), the report uses a DID approach to estimate BOTA's impact on the households that it intended to reach.
Overall findings	The report finds that the BOTA did not have an effect on household composition, has reduced the need to resort to inadequate care and is associated with an increase in preschool attendance. It has also had positive effects on some aspects of health care. It seems that the CCT has not encouraged previously economically inactive people to look for a job This is in line with what was expected, as the CCT was not designed to affect the work choices of all household members, including teenagers and pensioners. But the CCT seems to have led to a small but significant increase in the proportion of the child's main carers who are in paid employment outside the household (28% in treatment areas against 21% in control areas). Moreover, carers who work are likely to be engaged in economic activities for roughly three hours per week more as a result of the BOTA programme. There is a reduction in the small proportion of main carers who are engaged in self-employment and a small, but statistically insignificant, drop in those who say they are economically inactive. Despite this, most carers (67%) remain economically active, as they are often still looking after other young children at home.
Reported outcome areas	Education; Health; Employment; Savings, investment and production; Poverty
Indicators reported	Household composition; child care and home environment; preschool enrolment and attendance; conditions at preschool; health and nutrition (e.g. dietary diversity, meals/day, pneumonia, diarrhoea); sources of income; economically active/inactive, paid employment outside the household, proportion of people in or out of work, economic activity status, employment of child's main carer; institutional and informal transfers; consumption and savings
Citation	Oosterbeek, H., Ponce, J. and Schady, N. (2008) <i>The impact of cash transfers on school enrollment: evidence from Ecuador. Policy Research Working Paper 4645.</i> Washington, DC: World Bank.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (BDH) (Ecuador)
Programme details as reported in the study	UCT (with strong social marketing campaign encouraging school attendance and visits to health centres) launched in 2003 to improve the formation of human capital among poor families in Ecuador. The programme's education component aims at children aged 6–15. The transfer equals US\$15 per family per month and is independent of the number of children. Some surveys indicate that one third of beneficiaries state that they believe that the transfers are conditional.
Evaluation methodology	RCT, using DID and RDD to estimate impacts. Data comes from the programme's special-purpose panel survey. In the paper, 1,309 families around the first quintile of the poverty index were randomly assigned to treatment and control groups. For the RDD data were collected from 1,221 families around the second quintile of the poverty index.
Overall findings	Around the first quintile of the poverty index the impact is positive (10%) while it is equal to zero around the second quintile. This suggests that for the poorest families the programme lifts a credit constraint and that this is not the case for families close to the eligibility threshold.
	Education
Reported outcome areas	Education

Citation	Ospina, M. (2010) 'The indirect effects of conditional cash transfer programs: an empirical analysis of Familias En Acción' PhD. Georgia State University.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details as reported in the study	FA is a CCT set up in 2002 to foster the accumulation of human capital. It has 1.5 million beneficiaries. Targeting is based on geographic targeting of communities that meet a specific list of criteria (including infrastructure and size) and poverty targeting of poor households (those in the poorest income quintile). There is a nutritional and education component. All beneficiary households with children under the age of seven can receive the nutrition transfer, which is conditional on health check-ups, vaccinations and attendance in health courses. There is an additional education component for children aged 7–18, conditional on regular school attendance. The transfer level for the education component depends on the age of the child and transfers are paid bimonthly. Average transfer received per household is 61,500 Colombian pesos, which represents approximately 25% of average household income of beneficiary households.
Evaluation methodology	This study has a quasi-experimental research design and employs DID and Tobit models. The data comes from a special-purpose panel survey (with some attrition), covering 6,519 households.
Overall findings	The programme is effective in protecting food consumption, but not non-food consumption from shocks, and it reduces consumption fluctuations in response to idiosyncratic shocks, but not to covariate shocks. The programme consistently reduces the number of hours of child labour and increases the number of study hours, but not school attendance, for households under shocks. The programme provides strong incentives for children to combine work and school when households are exposed to shocks. Males increase paid work at the expense of domestic labour and females increase domestic labour at the expense of leisure time. There are positive impacts on hours spent in school (for those not previously in school) and a decrease in domestic labour, particularly for young children. There is a significant decrease in paid work for older boys (not significant for other groups).
Reported outcome areas	Poverty; Education; Employment
Indicators reported	Interaction of treatment and different shocks on: total consumption; food consumption; non-food consumption; consumption as response to shock; children's time at school and at work; children's participation in school full time and
	work full time; hours of paid work; hours of domestic labour; hours of school; hours spent on leisure; hours spent on homework/studying; participation in paid work; participation in domestic work, participation in leisure time activities
Citation	
Citation	homework/studying; participation in paid work; participation in domestic work, participation in leisure time activities
Citation  Name of programme(s) and country/countries	homework/studying; participation in paid work; participation in domestic work, participation in leisure time activities  Parker, S.W. and Skoufias, E. (2000) <i>The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report</i>
Name of programme(s) and	homework/studying; participation in paid work; participation in domestic work, participation in leisure time activities  Parker, S.W. and Skoufias, E. (2000) <i>The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report</i> Washington, DC: IFPRI.
Name of programme(s) and country/countries	Parker, S.W. and Skoufias, E. (2000) <i>The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report</i> Washington, DC: IFPRI.  PROGRESA (Mexico)  PROGRESA is a CCT, first introduced in 1997, that has grown rapidly, now covering 2.6 million families in extreme poverty in rural areas, corresponding to about 40% of all rural families in Mexico. PROGRESA selects its beneficiary families through a three-stage targeting mechanism. At the household level, households are judged to be poor both on the basis of income levels and on the basis of a number of other characteristics as well, such as running water in the household, dependency ratios, ownership of durable goods, animals and land, and the presence of disabled individuals. After three years, families may renew their status as PROGRESA beneficiaries, subject to a re-evaluation of their socioeconomic conditions. Cash benefits correspond on average to a 22% increase in the income levels of the beneficiary families and
Name of programme(s) and country/countries Programme details	Parker, S.W. and Skoufias, E. (2000) <i>The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report</i> Washington, DC: IFPRI.  PROGRESA (Mexico)  PROGRESA is a CCT, first introduced in 1997, that has grown rapidly, now covering 2.6 million families in extreme poverty in rural areas, corresponding to about 40% of all rural families in Mexico. PROGRESA selects its beneficiary families through a three-stage targeting mechanism. At the household level, households are judged to be poor both on the basis of income levels and on the basis of a number of other characteristics as well, such as running water in the household, dependency ratios, ownership of durable goods, animals and land, and the presence of disabled individuals. After three years, families may renew their status as PROGRESA beneficiaries, subject to a re-evaluation of their socioeconomic conditions. Cash benefits correspond on average to a 22% increase in the income levels of the beneficiary families and are given directly to the mother of the family. The majority of benefits are linked to children's school attendance.  The report analyses the impact of PROGRESA on work and time allocation of its beneficiaries. It estimates the impact of PROGRESA on work activities of men, women and children using before and after programme implementation data. It also uses a special time use module to look at the impact of PROGRESA on leisure time, as well as time allocated to different work activities and school in the case of children. To analyse participation in work for both adults and children, the authors use DID
Name of programme(s) and country/countries Programme details  Evaluation methodology	Parker, S.W. and Skoufias, E. (2000) <i>The impact of PROGRESA on work, leisure and time allocation. IFPRI Final Report</i> Washington, DC: IFPRI.  PROGRESA (Mexico)  PROGRESA (Mexico)  PROGRESA is a CCT, first introduced in 1997, that has grown rapidly, now covering 2.6 million families in extreme poverty in rural areas, corresponding to about 40% of all rural families in Mexico. PROGRESA selects its beneficiary families through a three-stage targeting mechanism. At the household level, households are judged to be poor both on the basis of income levels and on the basis of a number of other characteristics as well, such as running water in the household, dependency ratios, ownership of durable goods, animals and land, and the presence of disabled individuals. After three years, families may renew their status as PROGRESA beneficiaries, subject to a re-evaluation of their socioeconomic conditions. Cash benefits correspond on average to a 22% increase in the income levels of the beneficiary families and are given directly to the mother of the family. The majority of benefits are linked to children's school attendance.  The report analyses the impact of PROGRESA on work and time allocation of its beneficiaries. It estimates the impact of PROGRESA on work activities of men, women and children using before and after programme implementation data. It also uses a special time use module to look at the impact of PROGRESA on leisure time, as well as time allocated to different work activities and school in the case of children. To analyse participation in work for both adults and children, the authors use DID probit models. To estimate the impact on hours spent in each activity, they use Heckman selection correction equations.  The paper's results show clear negative impacts of PROGRESA on children's labour market participating prior to the proparam. For girls, in spite of their overall lower participation rouse in participation to the programme, there are also significant reductions associated with PROGRESA, With respect t

Citation	Paxson, C. and Schady, N. (2010) 'Does money matter? The effects of cash transfers on child development in rural Ecuador', <i>Economic Development and Cultural Change</i> 59(1): 187–229.
Name of programme(s) and	Bono de Desarrollo Humano (Ecuador)
country/countries	
Programme details	The intervention is a UCT that started in 2003. It replaced the earlier Bono Solidario with improved means-based testing to target regular transfers to the poorest households. Transfers were targeted to mothers of households that were in the poorest two quintiles of a government poverty ranking. 85% of families in rural areas and poorer urban areas of Ecuador were surveyed and assigned a poverty index (called the Selben index) which was used to assess eligibility for the programme. Transfers were equivalent to US\$15 per month per family, which represented a 10% increase in family expenditure for the average eligible family. This was relatively small by comparison to other cash transfers in Latin America. Transfers were made through banks, though beneficiaries did not require an account to receive transfers and were allowed to accumulate these for up to four months Although the programme was not explicitly conditional, it was advertised as a social programme intended to benefit children. This could have produced a 'flypaper' effect, so that families used these transfers differently from other sources of income.
Evaluation methodology	The evaluation involved an RCT covering a full sample of 3,244 households (though results were only presented for rural households). Seemingly unrelated regression was then used to estimate impacts of the programme.
Overall findings	They found no treatment effects for the sample as a whole, but did find positive but modest effects for the poorest children. Consistent with these results, they found that the haemoglobin levels of the poorest families in the treatment group improved, and that the poorest children in the treatment group were more likely to receive deworming treatments.
Reported outcome areas	Education; Health; Empowerment
Indicators reported	Cognitive and behavioural indicators (Spanish version of Peabody picture vocab test, Woodcock-Johnson-Muñoz cognitive tests and Behaviour Problems Index); child physical development (haemoglobin level, height-for-age and fine motor control); mother's physical and mental health (haemoglobin level, depression scale, measure of maternal punitiveness and lack of warmth and subjective social status).
Citation	Pellerano, L., Jakobsen, M., Moratti, M., Bajgar, M. and Barca, V. (2014) <i>Lesotho Child Grants Programme impact evaluation</i> . Maseru: UNICEF-Lesotho, and Oxford: Oxford Policy Management.
Name of programme(s) and country/countries	Child Grants Programme (Lesotho)
Programme details	The CGP is a UCT established in 2011 targeting poor and vulnerable households with children. As of March 2014 it covered 19,800 beneficiary households. The programme uses community-based targeting to identify eligible households. Transfers were 360 Lesotho maloti (US\$36) for households with 12 children, 600 maloti (US\$60) if 3–4 children and 750 maloti (US\$75) if five or more children. This represented around 21% of household monthly consumption. Transfers were paid quarterly through manual payments. Respondents received a very effective messaging that that the cash transfer should be spent on children. Complementary activities included Emergency Support Grants, which were bimonthly top-ups of 400 maloti disbursed with the CGP.
Evaluation methodology	The programme evaluation was designed as an RCT, which covered a sample of 2,701 households. The study employed DID to estimate the impacts of the study.
Overall findings	The programme contributed to increasing levels of expenditure on schooling, clothing and footwear for children. However, it was not associated with a significant reduction in poverty rates among beneficiary households two years after the introduction of the pilot, though welfare in other areas had increased (e.g. real consumption expenditure and food security). No effects were found on access to health facilities, though there was a significant reduction in the proportion of young children suffering an illness. There was also a significant effect on school enrolment, though no noticeable impact on other dimensions of school progression. Evidence was mixed on child time use. Among the households more generally, there was no clear impact on labour participation, though the grant was associated with increasing crop-based farming investments and activities but limited impact on livestock activities. No detectable impacts were found on savings or borrowing, though beneficiaries were significantly less likely to engage in disruptive coping strategies.
Reported outcome areas	Poverty; Education; Health; Savings, investment and production; Employment
Indicators reported	Expenditure on various items; consumption expenditure; dietary diversity index; consumption of specific food groups in past week; food availability (range of indicators); poverty headcount; poverty gap; severity of poverty; engagement in range of specific coping strategies; utilisation of health services; amount spent on child health care; child experience of illness (various indicators); ownership of child health card; number of growth monitoring checks; child weight; school/nursery enrolment; proportion of children missed school; average number of days missed; school progression and completion (various indicators); expenditure on education (various indicators); ownership of school-related items (various indicators); number of hours spent on activities (various indicators); engagement in work (various indicators); child hours spent in any labour activity; birth registration; child needs deprivation (various indicators); any income from (range of sources); engagement in/hours spent on (range of labour activities); operation and success of non-farm enterprises; ownership and use of land (range of indicators); crop production (various crops); use of inputs (various); purchase of production assets; ownership of livestock (range of livestock); income from sales of livestock by-products; use of livestock inputs; housing quality; use of credit; made savings (range of options); receipt of other transfers including remittances / amount received; receipt of range of informal support.

Citation	Perova, E. (2010) 'Three essays on intended and not intended impacts of conditional cash transfers'. PhD. University of
Gitation	California, Berkeley.
Name of programme(s) and country/countries	Juntos (Peru)
Programme details as reported in the study	Juntos is a CCT which started in 2005 with the aim of reducing poverty in the short term and reducing its intergenerational transmission by incentivising human capital formation. Eligibility is first determined at the district level, based on historical exposure to violence and various poverty indicators. Within each district household eligibility is determined using a means test (based on census data) and the presence of a child under the age of 14; selected beneficiaries were then validated at the community level. Roll-out was supposed to prioritise the neediest districts first but in practice it was randomised. Households receive a lump sum of 100 nuevos soles and transfer payment is made at irregular intervals that are more or less bimonthly. Transfer receipt is conditional on the attendance of children under five at regular health checks and a programme of vaccinations, a school attendance rate of at least 85%, and attendance of pregnant and lactating women at health checks. Non-compliance results in loss of transfers.
Evaluation methodology	The study uses data from several different nationally administered surveys which were conducted before and after programme roll-out. The estimation strategy is essentially a DID technique which takes advantage of the longitudinal data. Matching is also used to test robustness.
Overall findings	Election turnout increased in districts which had started receiving the transfer. Arrival of the programme was associated with a change in attitude to democracy and politics. Physical and emotional violence against women in beneficiary households decreased by nine and 11 percentage points respectively. This finding suggests a link between transfer income and women's reservation utility or out-of-marriage options.
Reported outcome areas	Empowerment
Indicators reported	Likelihood of voting; election turnout; perceptions about the importance of democracy; perception of improvement in community well-being; perception of improvement in household well-being (and whether this was due to government transfers); ever experienced physical/sexual/emotional violence (females only); experienced physical/sexual/emotional violence in the last 12 months.
Citation	Perova, E., and Vakis, R. (2012) 'Five years in <i>Juntos</i> : new evidence on the program's short and long-term impacts', <i>Economía</i> 35(69): 53–82.
Name of programme(s) and country/countries	Juntos (Peru)
Programme details as reported in the study	Juntos is a CCT which began in 2005 with the aim of breaking the intergenerational transmission of poverty. The programme targets households below poverty line with children under the age of 14. Eligible districts are first selected according to exposure to violence and poverty level then household eligibility is assessed by means of a PMT using poverty indicators that are constructed using census data. The timing of the roll-out of treatment is essentially randomised across districts. Households receive a lump sum of 100 nuevos soles each month providing they comply with regular health conditions — health checks for children under six, prenatal and post-natal checks for women — and education conditions — school attendance of at least 85% for children aged 6—14 who did not complete primary school.
Evaluation methodology	The study design is quasi-experimental, making use of instrumental variable analysis, matching, and intensity (dose) analysis. The data come from a special-purpose longitudinal survey collected in order to evaluate this programme.
Overall findings	Almost all indicators are higher (better) among beneficiaries with longer treatment spells. The effects on the whole are very small.
Reported outcome areas	Poverty; Education; Employment; Health; Empowerment
Indicators reported	Consumption (expenditure); received health check; received vaccination; did not experience illness; maternity-related

	0.159) mg retinol equivalents/d. No differences were found between the NSG and CG ( $P > 0.05$ ). The Oportunidades programme, therefore, is seen to have had a positive impact on the diet of children, though the effects of the programme
	(6.5, 9.0) mg/d; zinc, 7.5 (6.4, 8.6) and 7.6 (6.5, 8.7) mg/d; and vitamin A, 0.109 (0.071, 0.147) and 0.120 (0.080,
	supplement (SG), beneficiaries of the programme who did not consume the food supplement (NSG) and the control group (CG). Relative to the NSG and CG, respectively, the SG consumed greater amounts of energy, iron, 7.6 (6.3, 8.9) and 7.7
Overall findings	Comparisons were made among children who received all the benefits of Oportunidades, including the fortified food
Evaluation methodology	The study notes that the specific programme components responsible for improvements in child nutrition had not been identified, and sets out to investigate the underlying causes, exploiting the fact that not all children from beneficiary households consumed the nutritional supplement. The programme impact on dietary intake was estimated using multipl linear regression models. A total of 1,601 children were included in the analysis.
Programme details	The aim of Oportunidades is to break the intergenerational cycle of poverty by using cash transfers, targeted to the poorest families, as incentives for investing in children's education, health and nutrition. In addition to cash transfers, households with young children are provided with a fortified food supplement (Nutrisano) plus a basic primary health car package that includes nutrition education. Pregnant and breastfeeding mothers also receive a fortified food (Nutrivida).
country/countries	
Name of programme(s) and	Oportunidades (Mexico)
Citation	Ramirez-Silva, I., River, J.A., Leroy, J.L. and Neufeld, L.M. (2013) 'The <i>Oportunidades</i> Program's fortified food supplement but not improvements in the home diet, increased the intake of key micronutrients in rural Mexican children aged 12–59 months', <i>Journal of Nutrition</i> 143(5): 656–663.
Indicators reported	Mathematics and language test scores.
Reported outcome areas	Education
Overall findings	The study finds that, regardless of the specification and sample used, there was no impact of the program on test scores suggesting that attempts at building human capital, as measured by cognitive achievement, require additional and alternative interventions to those employed in BDH.
Evaluation methodology	The study uses a quasi-experimental design, employing a fuzzy RDD using an IV approach that exploits BDH's targeting mechanism. The data used come from a single cross-section gathered between November 2004 and February 2005, around one and a half years after the launch of the BDH.
uic suuy	6–15 must enrol in school and attend 90% of school days a month. The health component required children under the age of six to attend health centres for bimonthly growth and development monitoring check-ups. Such children also receive nutritional supplements and immunisation.
Programme details as reported in the study	Starting in 2003 as a CCT, the main objective of BDH is to improve the formation of human capital among poor families through providing cash transfers relating to education and health. In return for the educational transfers, children aged
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Citation	Ponce, J. and Bedi, A.S. (2010) The impact of a cash transfer program on cognitive achievement: the Bono de Desarrollo Humano of Ecuador, <i>Economics of Education Review</i> 29(1): 116–125.

Citation	Raymond, M. and Sadoulet, E. (2003) Educational grants closing the gap in schooling attainment between poor and
	non-poor. CUDARE Working Paper 986. Berkeley, CA: Department of Agricultural and Resource Economics, University of California.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	CCT, born in 1997 and designed to encourage poor families in rural areas to invest further in their children's education and human capital in general. Higher investments are promoted with educational grants, nutritional cash transfers and monthly visits to the health clinic. The educational component is made up of a monthly stipend (capped at 790 Mexican pesos or about US\$90 per month per household in January 2000) given for every child attending third grade of primary school up to the third year of secondary school. These benefits increase with each grade, with a large increase between primary and secondary school (slightly higher for girls than for boys in secondary school). The grants are paid to the mother of the family every two months, conditional on a minimum attendance of 85% of school days per month. The programme also provides an amount for school supplies at the beginning of every school year. In 2000 the programme was reaching 2.6 million households.
Evaluation methodology	Quasi-experimental design measuring impact using ITT. Data sources are the baseline survey (ENCASEH) of November 1997 and the evaluation surveys (ENCEL) of October 1998 and November 1999 (11,000 households with school-age children).
Overall findings	While drop-out rates increase by 0.3% going down each percentile in poverty, the grants more than compensate this effect by reducing the drop-out rate by 0.5% for every percentile of poverty. These gains cumulate to raise schooling attainment of poor children by 0.6 per year.
Reported outcome areas	Education
Indicators reported	Drop-out rates (enrolment rates).
Citation	Ribas, R.P. (2014) Liquidity constraints, informal financing and entrepreneurship: direct and indirect effects of a cash transfer programme. Working Paper 131. Amsterdam: International Policy Centre for Inclusive Growth.
Name of programme(s) and country/countries	Bolsa Família (Brazil)
Programme details	Bolsa Família is a CCT established in 2003. By 2006, eligible households included extremely poor families with no children, those whose per capita monthly income was below US\$38, and poor families with children up to 15 years old or pregnant women, whose per capita monthly income was below US\$76. In 2006 the programme covered about 20% of Brazilian households, 70% of them living in urban settlements. Transfers were means-tested, based on income reported by beneficiaries on the single registry of social policies, which is cross-checked against other government databases. The monthly benefit is composed of two parts: US\$38 for extremely poor families regardless of the number of children, and US\$11 per child, up to three children, for poor families. Families that receive the benefit can be dropped from the programme if they do not comply with a number of conditionalities and also if their per capita income becomes greater than the eligibility cut-off point. Benefits required household commitment in terms of children's attendance at school and attending health services. However, if the family registered was extremely poor with no children, the transfer was considered unconditional.
	considered anotherical.
Evaluation methodology	The study employed a quasi-experimental approach, using fixed-effects regression and IV with repeated cross-section surveys from Brazil's National Household Survey (PNAD). The full sample covers 129,298 individuals.
Evaluation methodology  Overall findings	The study employed a quasi-experimental approach, using fixed-effects regression and IV with repeated cross-section
	The study employed a quasi-experimental approach, using fixed-effects regression and IV with repeated cross-section surveys from Brazil's National Household Survey (PNAD). The full sample covers 129,298 individuals.  Results suggest that the programme, which assists 20% of Brazilian households, has increased the number of small entrepreneurs by 10%. However, this increase is almost entirely driven by the indirect effect (i.e. spill overs to others rather than beneficiaries themselves), related to an increase in private transfers among poor households. The direct response of participants actually reduces the overall effect by 40%. This drawback seems to be induced by households'

Citation	Ribas, R.P., Soares, F.V., Teixeira, S.C., Silva, E. and Hirata, G. (2010) <i>Beyond cash: assessing externality and behaviour effects of non-experimental cash transfers. Working Paper 65.</i> Brasilia: International Policy Centre for Inclusive Growth.
Name of programme(s) and country/countries	Tekoporã (Paraguay)
Programme details	The programme is a CCT established in 2005 and designed as part of the general effort to meet the Millennium Development Goals. The programme seeks to reduce extreme poverty by giving direct cash transfers to poor households with children, and to lessen potential future poverty by encouraging investments in human and social capital. Households were eligible for the programme if they met all the following conditions: (1) had children under the age of 15 or pregnant women; (2) lived in the priority areas of the programme (the poorest districts in the country), and (3) had a non-monetary quality of life index of below 40 points. The pilot covered about 4,500 households in five districts of two departments. By 2009 it had reached 15 districts in five departments. Transfers were composed of a basic transfer of 60,000 guaraníes (US\$12) per month plus 30,000 guaraníes (US\$6) per child or pregnant woman up to a limit of four children per household. Transfers were paid monthly and were conditional on school attendance, regular visits to health centres and periodic immunisations. The programme also included a family support component that, among other objectives, aimed to increase the household's productive capacity and social participation.
Evaluation methodology	The study used a quasi-experimental approach, drawing on a census and evaluation survey follow-up, estimating impacts using a combination of PSM and Weighted Least Squares. The evaluation sample covers a total of 1,089 households. The approach used also aims to disentangle income effects from substitution effects and unexplained effects.
Overall findings	The results indicate that the programme has a small impact on consumption and a considerable impact on savings. In the absence of externalities, however, the programme would have a higher effect on consumption, mostly associated with the cash transfer, and a lower effect on savings. The impact on the pattern of consumption is significantly related to a substitution effect, and is not related to the increase in income.
Reported outcome areas	Poverty; Savings, investment and production
Indicators reported	Household consumption (per capita, per capita food consumption, savings rate, share of food and other categories of expenditures).
Citation	Rubio-Codina, M. (2009) Intrahousehold Time Allocation in Rural Mexico: Evidence from a Randomized Experiment, Institute for Fiscal Studies (mimeo)
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details as reported in the study	Launched in 1997, Oportunidades is an anti-poverty programme aimed at increasing basic education school enrolment and reduce child labour by linking part of the benefit to school attendance. More generally, the CCT provides financial incentives for positive behaviour in health, education and nutrition. There were 5 million beneficiary households in 2008.
Evaluation methodology	RCT, using DID to estimate impacts. Data consists of the programme evaluation's special-purpose panel survey, a panel of the 24,077 eligible and ineligible households in the 506 eligible experimental communities. The final sample consists of the 35,148 individuals in 7,967 eligible households with weekday time use information in May 1999.
Overall findings	Findings show increases in schooling and reductions in children's participation in market and nonmarket work. Although the program does not seem to substantially alter adults' time allocation, evidence suggests that adult women substitute for children's time in non-remunerated activities.
Reported outcome areas	Empowerment; Employment; Education
Indicators reported	Intra-household time allocation, market (paid) work, farm work, domestic work and the sum of the three (all work), schooling and leisure.

Citation	Ruiz-Arranz, M., Davis, B., Handa, S., Stampini, M. and Winters, P. (2006) 'Program conditionality and food security: the impact of PROGRESA and PROCAMPO transfers in rural Mexico', <i>Revista Economía</i> 7(2): 249–278.
Name of programme(s) and country/countries	PROGRESA/ PROCAMPO (Mexico)
Programme details as reported in the study	This study evaluates and compares the impact of two interventions: PROCAMPO and PROGRESA. PROGRESA targets pool households within poor communities with transfers given to the mother of the family, a strategy built on the assumption that women have expenditure preferences that are most conducive to improving the children's education and nutrition. At the time of the study the transfer had reached around 2.6 million households. Eligibility was determined first at the community level (poor communities) and at the household level by a PMT (on what indicators it is not clear). On average, the bimonthly payments to households were equivalent to 29% of average per capita household income. Continued receipt of transfers was conditional on school attendance and health clinic visits. PROCAMPO began in 1994 with the aim of alleviating poverty and food insecurity and promoting rural development, specifically to offset the negative effects of NAFTA on farmers. Eligibility is determined by the total number of hectares of nine key crops on a farmer's land. Almost 3 million farmers received the transfer at the time of the study, and the transfer is very large, equivalent to around US\$329 per recipient and US\$68 per hectare (presumably per year although this is not stated). Payments are made twice a year on the condition that the land continues to be used to grow the specified crops.
Evaluation methodology	The study uses a quasi-experimental method in which instrumental variable analysis is used to estimate the treatment effect. The data come from the official panel surveys of the programmes.
Overall findings	Both programmes increase total consumption, but through different means: PROGRESA through increased food purchases, PROCAMPO through increased yield from home production.
Reported outcome areas	Poverty; Health
Indicators reported	Food consumption per person per month (disaggregated according to type of food); caloric availability; calorie share; dietary diversity; food purchased; calories from home production.
Citation	Ruiz-Arranz, M., Davis, B., Stampini, M., Winters, P. and Handa, S. (2002) More calories or more diversity? An econometric evaluation of the impact of the PROGRESA and PROCAMPO transfer programmes on food security in rural Mexico. ESA Working Paper 02-09. Rome: FAO.
Name of programme(s) and country/countries	(1) PROGRESA, (2) PROCAMPO (Mexico)
Programme details	PROGRESA: A CCT set up in 1997 as a mechanism for addressing extreme poverty in rural areas. A primary thrust of PROGRESA is to develop the human capital of poor households by improving education, health and nutrition outcomes. Average payments to beneficiary households in 1997 were substantial, representing 29% of average per capita income of beneficiaries. Transfers were bimonthly and aimed at women in poor households. By the end of 1999, PROGRESA provided bimonthly transfers to approximately 2.6 million households or about 40% of all rural families and 11% of all Mexican families. The programme operated in almost 50,000 communities, and had a budget of around 20% of the total budget allocation for poverty alleviation. Targeting included identification of 'marginal' communities with high poverty indicators, followed by households, using a household census, combined with community validation. Payments are made contingent upon families visiting health clinics, attending public health lectures, and sending their children to school. PROCAMPO: Established in 1994 to support a 15-year transition to free trade. Transfers are aimed at producers, typically men. Eligibility was given to land parcels and those with usufruct over these land parcels. PROCAMPO covered 95% of the cultivated area in Mexico that had been planted in corn, beans, sorghum and wheat, covering on average 14 million hectares of land each year, reaching almost three million producers in 1998. An eligibility roster was fixed prior to the start of programme and no new properties were added. Producers are given a fixed payment per hectare, based around the total hectares of nine key crops (corn, beans, rice, wheat, sorghum, barley, soybeans, cotton and cardamom) that were planted in the three agricultural years prior to and including August 1993. In 1997, payments – made annually – averaged US\$329 per recipient and US\$68 per hectare. Transfers were made by cheque. PROCAMPO requires farmers to continue to produce on the land registered in the programme,
Evaluation methodology	A combination of experimental and quasi-experimental approaches was used, drawing on the randomised experimental data from the PROGRESA evaluation. A range of regression approaches was used, including OLS, probit, IV and a Heckman selection model. The full sample covers 9,841 households.

(Cont'd)	
Overall findings	The authors show that both programmes boost total food consumption and caloric intake in similar proportions. However, PROCAMPO has a larger impact on meat and vegetable consumption and PROGRESA on the other food category. Furthermore, increased food security is achieved through different channels: PROGRESA through purchases while PROCAMPO through investment in home production. They also find that cash transfers linked to information on nutrition and health increase food diversity. PROCAMPO households that also receive PROGRESA, and the information that goes with it, are more likely to be eating a more varied diet than households that get PROCAMPO only.
Reported outcome areas	Poverty; Health; Savings, investment and production
Indicators reported	Total expenditure on food and specific foods; share of total food consumption represented by different food groups; caloric availability from range of food groups; probability of eating range of food groups; number of foods eaten; a range of dietary diversity indices; calories from home production.
Citation	Sadoulet, E., de Janvry, A. and Davis, B., (2001) 'Cash transfer programs with income multipliers: PROCAMPO in Mexico',
	World Development 29(6): 1043–1056.
Name of programme(s) and country/countries	PROCAMPO (Mexico)
Programme details	PROCAMPO is a crop-based cash transfer that began in 1994 and was introduced to compensate farmers for the expected negative effect of NAFTA on the price of basic crops. Eligible households included those that had planted at least one of the nine eligible staple crops during the 1991–1993 agricultural cycles. The programme had substantial coverage, covering 95% of the area that had been planted in corn, beans, sorghum and wheat. Transfers were made on a per hectare basis. In 1997, transfers represented on average US\$329 per recipient and US\$68 per hectare, which was 46% of gross maize income for a farmer obtaining an average yield of 1.06 tonnes per hectare at average prices. Transfer levels were supposed to remain constant in real terms for ten years, though this was not maintained. Transfers represented around 8% of total household income in 1997 for households in the targeted Ejido communities. Payments were made twice a year (based around the two agricultural cycles) and were collected from one of over 700 offices around the country. Transfers were conditional on land being used for crops, livestock or forestry, or being part of an approved environmental programme.
Evaluation methodology	The study uses quasi-experimental methods with a nationwide panel survey of Ejido communities, with 958 households in the sample used. It employs Robust Regression estimation to estimate the impacts of the programme.
Overall findings	The study estimates income multiplier effects from PROCAMPO in the range of 1.5–2.6. Impacts are enhanced for those households that have access to technical assistance. Overall, the income multiplier decreases from 0.33 to 0.23 when technical assistance is not received.
Reported outcome areas	Poverty
Indicators reported	Change in agricultural income.

	Sadoulet, E., Finan, F., de Janvry, A. and Vakis, R. (2004) 'Can conditional cash transfer programs improve social risk management? Lessons for education and child labor outcomes'. World Bank Discussion Paper SP 0420. Washington, DC: World Bank.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	PROGRESA is a CCT programme, first implemented in 1997, that reached 4 million families in 2003. The transfer payment schedule is tailored to grade and gender, with primary schoolers receiving from US\$70 per year in third grade to US\$135 in sixth grade, and secondary schoolers receiving from US\$200 per year for boys in first grade and US\$210 for girls to US\$220 for boys in third grade and US\$255 for girls. The transfers are paid to poor mothers in marginal rural communities, conditional on their children using health facilities on a regular basis and attending school between third grade of primary school and third grade of secondary school. Children cannot miss more than three days of school per month without losing the transfer, and will not receive the transfer if they have not visited a health centre.
Evaluation methodology	The paper explores the role of PROGRESA in serving as a risk management instrument for the poor. It focuses on the school and labour choices of children between the ages of 8–16 over the period 1997–2000. Identification of the programme's impact is based on a DID model using panel data for PROGRESA villages with random treatments and controls.
Overall findings	The study suggests that PROGRESA transfers and the conditionality on school attendance serve to deter using child labour as a risk-coping strategy. Impact on school enrolment is higher for girls than for boys. Overall, the impacts are positive for secondary school and primary school children, but smaller for secondary school. This is an indication that the decision to enrol into secondary school is the biggest hurdle and the grade at which PROGRESA has its greatest effect. The most dramatic impact on child labour occurs among children aged 12–14 in 1997. PROGRESA reduces the probability that boys work by seven percentage points on average, and has a larger absolute impact on boys than on girls, which is unsurprising given that girls work less.
Reported outcome areas	Education; Employment
Indicators reported	School enrolment; child worked in previous week.
Indicators reported  Citation	School enrolment; child worked in previous week.  Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70 y más in Mexico. 3ie Impact Evaluation Report 5.</i> New Delhi: International Initiative for Impact Evaluation (3ie).
Citation	Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70</i>
Citation  Name of programme(s) and	Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70 y más in Mexico. 3ie Impact Evaluation Report 5</i> . New Delhi: International Initiative for Impact Evaluation (3ie).
Citation  Name of programme(s) and country/countries  Programme details as reported in the study	Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70 y más in Mexico. 3ie Impact Evaluation Report 5.</i> New Delhi: International Initiative for Impact Evaluation (3ie).  70 y más (Mexico)  The intervention studied here is an old-age pension that was introduced in 2007 to improve the living conditions of the elderly poor and to improve the social protection of the elderly in Mexico. The target group is individuals aged 70 or more and living in a locality with 2,500 or fewer inhabitants (this expanded to those residing in a locality with 3,000 or fewer inhabitants after 2011). Initially there were 1 million beneficiaries, rising to 1.8 million after 2 years. Eligibility depends on being aged 70 or above and residing in a rural locality (with 2,500 or fewer inhabitants). Localities were incorporated gradually into the programme meaning that roll-out was staggered. The transfer is 500 Mexican pesos (approximately
Citation  Name of programme(s) and country/countries  Programme details as reported in	Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70 y más in Mexico. 3ie Impact Evaluation Report 5</i> . New Delhi: International Initiative for Impact Evaluation (3ie).  70 y más (Mexico)  The intervention studied here is an old-age pension that was introduced in 2007 to improve the living conditions of the elderly poor and to improve the social protection of the elderly in Mexico. The target group is individuals aged 70 or more and living in a locality with 2,500 or fewer inhabitants (this expanded to those residing in a locality with 3,000 or fewer inhabitants after 2011). Initially there were 1 million beneficiaries, rising to 1.8 million after 2 years. Eligibility depends on being aged 70 or above and residing in a rural locality (with 2,500 or fewer inhabitants). Localities were incorporated gradually into the programme meaning that roll-out was staggered. The transfer is 500 Mexican pesos (approximately US\$40) per month and payment is distributed every two months.  Since treatment allocation is not random, a quasi-experimental method is used, namely DID with fixed effects. The data come from a special-purpose panel survey to evaluate the programme consisting of 5,270 individuals in both waves,
Citation  Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	Salinas Rodríguez, A., Manrique-Espinoza, B., Moreno-Tamayo, K., Torres Pereda, P., De la Cruz-Góngora, V., Ángeles Tagliaferro, G. and Téllez-Rojo Solís, M.M. (2014) <i>Impact evaluation of the non-contributory social pension programme 70 y más in Mexico. 3ie Impact Evaluation Report 5.</i> New Delhi: International Initiative for Impact Evaluation (3ie).  70 y más (Mexico)  The intervention studied here is an old-age pension that was introduced in 2007 to improve the living conditions of the elderly poor and to improve the social protection of the elderly in Mexico. The target group is individuals aged 70 or more and living in a locality with 2,500 or fewer inhabitants (this expanded to those residing in a locality with 3,000 or fewer inhabitants after 2011). Initially there were 1 million beneficiaries, rising to 1.8 million after 2 years. Eligibility depends on being aged 70 or above and residing in a rural locality (with 2,500 or fewer inhabitants). Localities were incorporated gradually into the programme meaning that roll-out was staggered. The transfer is 500 Mexican pesos (approximately US\$40) per month and payment is distributed every two months.  Since treatment allocation is not random, a quasi-experimental method is used, namely DID with fixed effects. The data come from a special-purpose panel survey to evaluate the programme consisting of 5,270 individuals in both waves, reduced to 4,023 for nutrition indicator sample.  Transfers raised protein and carbohydrate intake and increased the adequacy level of this intake. The impacts on energy, macronutrient intake and adequacy of intake were significantly higher among women. The transfer improved elderly

Citation	Schady, N., Araujo, M.C. (2006) Cash transfers, conditions, school enrollment, and child work: evidence from a randomized experiment in Ecuador. Policy Research Working Paper Series 3930. Washington, DC: World Bank.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details as reported in the study	The BDH is an intervention designed as a CCT but with low publicising of conditions and no consistent enforcement of them in practice. It was introduced in 1999 with the intention of guaranteeing minimum consumption level, increasing human capital and reducing malnutrition and disease in children. The programme targets the poorest 40% of households, which are identified using a mean-test of household wealth (an index constructed using census data). In the first phase, the transfer was equivalent to US\$15 per month, increasing to US\$30 in 2007 and then to US\$35 in 2009. Payments are collected from the local bank.
Evaluation methodology	The study uses a quasi-experimental method, relying on a DID estimator and using data from a special-purpose panel survey. The sample size ranges from 666 to 3,001 depending on the model.
Overall findings	The transfer had a large, positive impact on school enrolment, about ten percentage points, and a large, negative impact on child work, about 17 percentage points. A significant effect on school enrolment was observed ONLY when the recipient believed there was a condition attached (although the condition was not real and was never enforced).
Reported outcome areas	Education; Employment
Indicators reported	School enrolment; child worked in the last week (regardless of whether paid or not).
Citation	Schady, N. and Araujo, M.C. (2008) 'Cash transfers, conditions, and school enrollment in Ecuador', <i>Economía</i> 8(2): 43–70.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details as reported in the study	BDH is a large cash transfer programme which, as of 2004, had a budget of around 0.7% of Ecuador's GDP. Eligibility for transfers is determined by a PMT which, in theory, should see the 40% of households with the lowest proxy scores eligible for the US\$15 monthly transfers (which accounts for about 9% of pre-transfer household expenditure). However, initially the government did not have the budget to make transfers to all households in the first two quintiles of the composite welfare index, so expansion of the coverage of benefits took place gradually. While transfers were originally intended to be conditional on school enrolment and attendance, among other requirements, in practice the programme did not monitor the schooling condition because of administrative constraints.
Evaluation methodology	The study draws on baseline and follow-up data designed for the official BDH evaluation, comprising a sample size of 1,306 households and 2,875 school-age children. It exploits the random allocation of households into the treatment and control groups and estimates effects using OLS and IV estimators. The study also estimates the differences in outcomes between households that believed there to be a condition attached to the transfer versus those that did not using matching methods.
Overall findings	The reduced-form estimates imply that school-age children in households that were BDH lottery winners were 3.2 to 4.0 percentage points more likely to be enrolled in school than children in households that were lottery losers. The results are robust to defining the dependent variable in levels or changes, and they are insensitive to the addition of a large number of controls. The findings on the effect of perceived conditionalities suggest that the impact of the BDH programme on enrolment was only significant among households that believed there was a schooling requirement associated with the transfers.
Overall findings  Reported outcome areas	percentage points more likely to be enrolled in school than children in households that were lottery losers. The results are robust to defining the dependent variable in levels or changes, and they are insensitive to the addition of a large number of controls. The findings on the effect of perceived conditionalities suggest that the impact of the BDH programme on enrolment was only significant among households that believed there was a schooling requirement associated with the

Citation	Schady, N. and Rosero, J. (2007) <i>Are cash transfers made to women spent like other sources of income? Policy Research Working Paper 4282</i> . Washington, DC: World Bank.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details as reported in the study	The BDH is an intervention designed as a CCT but with low publicising of conditions and no consistent enforcement in practice. It was introduced in 1999 with the intention of guaranteeing minimum consumption level, increasing human capital and reducing malnutrition and disease in children. The programme targets the poorest 40% of households, which are identified using a means test of household wealth (an index constructed using census data). In the first phase, the transfer was equivalent to US\$15 per month, increasing to US\$30 in 2007 and then to US\$35 in 2009. Payments are collected from the local bank.
Evaluation methodology	The intervention was designed as an RCT but in practice allocation was not random. The estimation methodology is therefore quasi-experimental, relying on OLS regression with controls, DID and instrumental variable regression. The data come from the panel evaluation of the programme and the sample used here consists of 773 households.
Overall findings	Food expenditure as share of total expenditure increases in mixed-adult households but not in women-only households, indicating women's bargaining power is increased. Bargaining power increased more in households where the women had relatively less education than the men.
Reported outcome areas	Empowerment
Indicators reported	Share of expenditure on food items.
Citation	Schady, N., (2012) 'Cash transfers and anemia among women of reproductive age', Economics Letters 117(3): 887–890.
Name of programme(s) and country/countries	Bono de Desarrollo Humano (Ecuador)
Programme details	The programme was a UCT starting in 2003. At the time of study it covered approximately 40% of the population of Ecuador and was therefore among the largest cash transfer programmes in Latin America in terms of proportional coverage. The programme made transfers of US\$15 to eligible households on a monthly basis, which were equivalent to around 10% of the total consumption of the average recipient household. Transfers were made to women, and came with no conditions attached. Households were eligible for the programme if they had a low score on a PMT. Parishes were randomly selected to enter either as immediate treatment or delayed treatment, in which case eligible households received transfers two years later.
Evaluation methodology	The evaluation was an RCT, covering a sample of 1,400 mothers. Impacts were estimated using multivariate regression and an IV approach.
Overall findings	The modest cash transfer substantially reduced anaemia among women of reproductive age.
Reported outcome areas	Health
Indicators reported	Elevation-adjusted haemoglobin level; proportion of households that was anaemic.

	Schultz P. (2004) 'School subsidies for the poor: evaluating the Mexican Progresa poverty program', <i>Journal of Development Economics</i> 74(1): 199–250.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	CCT, means-targeted on the basis of data collected in 1997 in selected poor rural communities. The grant was available to the eligible poor mothers of a child enrolled in school in grades three to nine and confirmed by their teacher to have a school attendance rate of at least 85%. The educational grants started at 70 Mexican pesos per month and increased several fold at the higher grades.
Evaluation methodology	RCT using DID to estimate impacts. The data analysed in this article includes children aged 5–16 in the initial household census (PROGRESA's special-purpose panel survey) and aged 6–16 in the subsequent three rounds of the household survey, and age 6–18 in the final survey conducted in November 1999.
Overall findings	The level of enrolment rates of comparably poor children in PROGRESA localities (treatment) are higher than in non-PROGRESA localities (control) in the three survey rounds collected after September 1998. It is statistically significantly different from zero within each distinguished group of children who had completed grades one to six in the previous year. These differences are often larger for girls than boys. The cumulative cohort effect on schooling attainment are extrapolated, and the DID estimator implies that the programme has caused an increment of 0.66 years on the baseline level of 6.80 years of schooling. Also, there was no statistical evidence that poor women who had a PROGRESA-eligible child were more likely to have a birth in the six months preceding the last survey in November 1999 than comparable women, nor was it evident that fertility of young women aged 15–19 was affected by the school subsidy.
Reported outcome areas	Education; Employment; Empowerment
Indicators reported	Enrolment rates; paid work participation rates; hours worked; fertility rates.
Citation	Seidenfeld, D. and Handa, S. (2011) Results of the three year impact evaluation of Zambia's cash transfer pro(gram in Monze District. Final Report. Washington, DC: American Institutes for Research.
Citation  Name of programme(s) and country/countries	
Name of programme(s) and	Monze District. Final Report. Washington, DC: American Institutes for Research.
Name of programme(s) and country/countries Programme details as reported in	Monze Cash transfer (Zambia)  The Monze Cash transfer (Zambia)  The Monze UCT, which was initiated in 2007, targets labour-constrained and destitute households with the aim of lifting them out of poverty. First, community-based targeting is employed to nominate households which meet the eligibility criteria (not specified, but based on poverty status) then data is collected on these to confirm the decision. These households are then ranked and the most destitute 10% become eligible. Treatment is allocated randomly and the control group has a delayed treatment after three years. The transfer amount is a lump sum of 40,000 Zambian kwacha per month if the household has no children; 50,000 kwacha per month if the household does have children. Payment is made
Name of programme(s) and country/countries  Programme details as reported in the study  Evaluation methodology	Monze cash transfer (Zambia)  The Monze UCT, which was initiated in 2007, targets labour-constrained and destitute households with the aim of lifting them out of poverty. First, community-based targeting is employed to nominate households which meet the eligibility criteria (not specified, but based on poverty status) then data is collected on these to confirm the decision. These households are then ranked and the most destitute 10% become eligible. Treatment is allocated randomly and the control group has a delayed treatment after three years. The transfer amount is a lump sum of 40,000 Zambian kwacha per month if the household has no children; 50,000 kwacha per month if the household does have children. Payment is made bimonthly so two rounds of payment are given in one go.  The study is quasi-experimental in design and estimates the transfer impact using a DID model with PSM. The data come from a household panel survey with two waves consisting of 1024 households in total (516 in the treatment, 508 in the
Name of programme(s) and country/countries Programme details as reported in the study	Monze cash transfer (Zambia)  The Monze UCT, which was initiated in 2007, targets labour-constrained and destitute households with the aim of lifting them out of poverty. First, community-based targeting is employed to nominate households which meet the eligibility criteria (not specified, but based on poverty status) then data is collected on these to confirm the decision. These households are then ranked and the most destitute 10% become eligible. Treatment is allocated randomly and the control group has a delayed treatment after three years. The transfer amount is a lump sum of 40,000 Zambian kwacha per month if the household has no children; 50,000 kwacha per month if the household does have children. Payment is made bimonthly so two rounds of payment are given in one go.  The study is quasi-experimental in design and estimates the transfer impact using a DID model with PSM. The data come from a household panel survey with two waves consisting of 1024 households in total (516 in the treatment, 508 in the control).  The transfer is found to increase the likelihood of school enrolment, particularly for young children. Ownership of some productive assets increased. No statistically significant impact was found on food expenditures or health outcomes.

Citation	Siaplay, M. (2012) 'The impact of social cash transfers on young adults' labor force participation, schooling, and sexual behaviors in South Africa'. PhD. Oklahoma State University.
Name of programme(s) and country/countries	Old-Age Pension (South Africa)
Programme details as reported in the study	The South African old-age pension is a UCT which was introduced to ensure a minimum income for the elderly. It was originally only accessible to whites, but was extended to black and coloured elderly persons following the end of apartheid. The transfer is targeted at women over the age of 60 and men over the age of 65. Eligibility is determined by a means test of household wealth (the mechanism is not specified here). It is received by round 80% of black women and 77% of black men, 14% of white women and 7% of white men. The transfer amount is equivalent to approximately twice the median per capita monthly household income of a black household (around 1,080 and 1,140 South African rand per month in 2010). Payment is distributed monthly (the mechanism is not specified).
Evaluation methodology	This study takes advantage of the age criteria cut-off point to use RDD – a quasi-experimental method for estimating the treatment effect. The data are taken from a panel survey for a different purpose which followed young adults, and the sample size is roughly 3,500 individuals.
Overall findings	The pension had no effect on the labour-force participation and school enrolment of young adults (aged 14–20). The male pension did have a positive effect on the labour-force participation of adult males aged 21–26 and a negative one on their school enrolment; young adult females who live with female pension recipients become sexually active 15.3% later on average. Young males and females living with a female recipient are 9.1% and 24.1% less likely to get married. Young males and females living with a male recipient are 21.4% and 23.8% more likely to get married. Living with a pension recipient had no effect on multiple partners or condom use.
Reported outcome areas	Employment; Education; Empowerment; Health
Indicators reported	Labour-force participation; school enrolment; sexual intercourse (ever); multiple partners; condom use; marriage.

Citation	Skoufias, E., Unar, M. and González de Cossío, T. (2013) 'The poverty impacts of cash and in-kind transfers: experimental evidence from rural Mexico', <i>Journal of Development Effectiveness</i> 5(4): 401–429.
Name of programme(s) and country/countries	Programa de Apoyo Alimentario (PAL) Food Support Programme (Mexico)
Programme details	PAL is a conditional cash and food transfer programme in the poor rural areas of southern Mexico designed to alleviate poverty through the improvement of the food and nutrition conditions of targeted households living in rural poor communities with a population of under 2,500 and with a high and very high marginality index. In order to be covered by the programme, localities have to meet requirements such as having a population of under 2500, having a high or very high marginality and being accessible, and close enough to a DICONSA (government food distribution network) store, because the distribution system was implemented by DICONSA. The original programme transfer consists of a monthly food basket with a value of about US\$15 at the time of programme implementation (2003) and it is accompanied by an educational component, the requirement to attend initial programme organisation sessions, followed by diet, nutrition and health-related educational sessions. PAL offers nutrition and health education sessions ('pláticas'), as well as participation in programme-related logistic activities. However, attendance at the 'pláticas' is not a requirement for the receipt of the benefits.
Evaluation methodology	The article exploits the unique experimental design (randomisation of the type of programme benefit received at the locality level) of the PAL to analyse and compare the programme's in-kind and cash transfers in the poor rural areas of southern states of Mexico. It examines the impacts of such transfers not only on some key components of total consumption, that is food and non-food, but also on production as summarised by the allocation of family labour between agricultural and non-agricultural activities. The estimated impacts of PAL on the outcome variables of interest are based on the DID estimator which compares differences between the treatment and control groups before and after the start of PAL and offers the advantage that any time-invariant pre-programme unobserved heterogeneity between the treatment and control groups is eliminated in the estimation of impacts. The DIDs estimator is applied on repeated observations from households and their members in treatment and control villages surveyed for the purpose of evaluating the impact of the PAL programme.
Overall findings	The intent-to-treat effect on poverty of cash transfers of real value 25% less than the market value of in-kind transfers is identical to that of in-kind transfers. Potential explanations of this result are investigated by looking into the differences in impacts of in-kind and cash transfers on food consumption and non-food expenditures and on the allocation of family labour between agricultural and non-agricultural activities. Both in-kind and cash transfers have equally large positive impacts on food consumption. Non-food expenditures are also higher in the localities with cash transfers, whereas they remain unaffected in the localities with in-kind transfers. Both kinds of transfer have a significant impact on the time allocation of males (and not females) who switch from agricultural to non-agricultural activities. But, the availability of cash transfers has a significantly higher marginal effect than in-kind transfers on the shift towards non-agricultural activities. Overall, the findings suggest that cash transfers may be better than in-kind transfers at mitigating the impact of market imperfections, thus increasing both equity and efficiency.
Reported outcome areas	Poverty; Employment
Indicators reported	Headcount poverty ratio, gap poverty ratio, severity of poverty ratio; food and non-food consumption; adult working/not working (paid or unpaid over the previous week); participation in agricultural and non-agricultural activities.
Citation	Skoufias, E. and Di Maro, V. (2008) 'Conditional cash transfers, adult work incentives, and poverty', <i>Journal of Development Studies</i> 44(7): 935–960.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details as reported in the study	PROGRESA was set up in 1997 with the objective of combating the different causes of poverty, with a health, nutrition and education component. By 2004 it had almost 5 million beneficiaries. Transfers are bimonthly and the average monthly payment, distributed to the mothers in beneficiary families, amounts to 20% of the value of pre-programme monthly consumption. The educational component – paid bimonthly – is conditional on regular school attendance and the transfer level depends on the age and gender of the children. The health and nutrition component includes cash transfer and nutritional supplements and is conditional on health attendance.
Evaluation methodology	This study utilises an RCT research design and uses DID to estimate effects. It draws on the ENCEL panel survey with a sample size of 183,646 individuals.
Overall findings	The programme does not have any significant effect on adult labour-force participation and leisure time. However, participation in PROGRESA leads to a substantial reduction in poverty. Poverty-reduction effects are stronger for the poverty gap and severity of poverty measures.
Reported outcome areas	Poverty; Employment
Indicators reported	Participates in all work; participates in salaried work; participates in self-employment/business; daily hours of leisure; poverty headcount; poverty gap; poverty severity.

Citation	Skoufias, E., Unar, M. and González Cossío, T. (2008) The impacts of cash and in-kind transfers on consumption and labor supply: experimental evidence from rural Mexico. Policy Research Working Paper 4778. Washington, DC: World Bank.
Name of programme(s) and country/countries	Programa de Apoyo Alimentario (PAL) (Mexico)
Programme details as reported in the study	This study considers the impact of the PAL CCT running in Mexico from 2005. Its objective is to improve the food and nutrition conditions of targeted households living in rural poor communities. Its target group are poor, rural households not covered by other interventions and it covers 150,000 households (but only 5% of these receive cash). It employs geographic targeting (population under 2,500 with a very high marginality index and not covered by other programmes, close to road and DICONSA store). The monthly transfer, delivered through DICONSA stores, is either 150 Mexican pesos (US\$13, mean share 11.5% of pre-programme consumption) or an equivalent food basket. Transfers are conditional on diet, nutrition and health-related educational sessions, but attendance is not monitored.
Evaluation methodology	The study employs an RCT research design and uses DID to assess impact. The study uses a panel survey of 5,851 households.
Overall findings	The transfer has a large and positive impact on total and food consumption and reduction of poverty. It has no impact on labour market participation, but it does induce beneficiary households to switch their labour allocation from agricultural to non-agricultural activities.
Reported outcome areas	Poverty; Employment
Indicators reported	Total household consumption; household food consumption; participation in the labour market; participation in agricultural and non-agricultural activities; poverty head count, poverty gap, poverty severity.
Citation	Skoufias, E. and Parker, S.W. (2001) 'Conditional cash transfers and their impact on child work and schooling: evidence from the PROGRESA programme in Mexico'. <i>IFPRI FCND Discussion Paper 123</i> . Washington, DC: IFPRI.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	Mexico's PROGRESA is a CCT aimed at alleviating poverty in rural areas. While providing cash transfers, it aims to increase families' investment in human capital as defined by education, health and nutrition. To achieve this objective, PROGRESA conditions cash transfers on children's school enrolment and regular school attendance, as well as clinic attendance. It includes in-kind health benefits and nutritional supplements for children up to the age of five and for pregnant and lactating women. PROGRESA covers 2.6 million families in extreme poverty in rural Mexico — about 40% of all rural families in Mexico.
Evaluation methodology	The paper investigates whether PROGRESA can simultaneously combat the problems of low school attendance and child work. It relies on data from a quasi-experimental design to evaluate the impact of the programme involving a sample of communities that receive benefits and comparable communities that receive benefits at a later time. It estimates the effect of treatment on the treated using both DID and cross-sectional difference estimators.
Overall findings	The paper finds significant increases in the school attendance of boys and girls that are accompanied by significant reductions in the participation of boys and girls in work activities. The programme has a lower impact on the incidence of work for girls relative to boys. Children, in particular boys and girls of secondary school age, are much more likely to attend school and to spend more time on school activities. In terms of work, boys of secondary school age also show strong reductions in participation in both market work and domestic work. Girls, on the other hand, show reductions in participation and/or hours spent in domestic work at all ages.
Reported outcome areas	Education; Employment
Indicators reported	School attendance; working/not working as reported in previous week and covering participation in selling a product, helping in family business, making products to sell, washing, cooking and ironing, working in agricultural activities or caring for animals (domestic activities not included in definition); impact on three types of work, participation and hours spent in: market work, farm work and domestic work, also time spent in school.

Citation	Skovdal, M., Robertson, L., Mushati, P., Sherr, L., Nyamukapa, C. and Gregson, S. (2014) 'Acceptability of conditions in a community-led cash transfer programme for orphaned and vulnerable children in Zimbabwe', <i>Health Policy and Planning</i> 29(7): 809–817.
Name of programme(s) and country/countries	Community-led cash transfer programme (Zimbabwe)
Programme details as reported in the study	This study evaluates a community-led CGP which was designed to promote community engagement in order to better meet the wider goals of providing support for orphaned and vulnerable children. The programme began in 2009 and includes both a CCT and a UCT treatment arm which had collectively reached 2,844 households at the time of survey. Eligibility was determined using a community-led selection process: household census data was collected and eligible households selected through a community consultation exercise. Eligible households were then randomly allocated to treatment or control groups. The transfer consists of US\$18, given every two months, plus an extra US\$4 per child living in the household (up to a maximum of three children). The CCT group have to comply with a school attendance condition (90% attendance) and attendance at parenting skills workshops. Cash is distributed from designated pay points. The duration of the programme is two years.
Evaluation methodology	There was a quantitative component to the evaluation insofar as beneficiaries were interviewed at endline to give feedback on the programme (there was no counterfactual). The bulk of the analysis comes from qualitative analysis consisting of individual interviews, focus group discussions and key informant interviews. In total 62 qualitative interviews and 5,167 quantitative surveys were collected at endline (but not used for impact evaluation in this study).
Overall findings	Conditionality widely accepted by recipients because conditions were deemed fair and for the benefit of the child. The fact that there was a clear purpose/earmarking of the transfer improved bargaining power of women.
Reported outcome areas	Empowerment
Indicators reported	This study is qualitative so there are no specific indicators.
Citation	Stecklov, G., Winters, P., Todd, J. and Regalia, F. (2007) 'Unintended effects of poverty programmes on childbearing in less
	developed countries: experimental evidence from Latin America', <i>Population Studies</i> 61(2): 125–140.
Name of programme(s) and country/countries	PROGRESA, Programa Asignación Familiar (PRAF) and Red de Protección Social (RPS) (Mexico, Honduras, Nicaragua)
Programme details as reported in the study	This study evaluates three interventions, the first of which is PROGRESA which began in Mexico in 1997 with the aim of addressing the immediate needs of extreme poverty and break its intergenerational transmission. It had reached around 2.6 million families at the time of study. It is targeted to poor households within poor communities. Poor areas determined according to their share of poor inhabitants; low-income households identified initially using 1997 census data; random assignment of villages to early and later treatment; all eligible households offered the transfer. The cash transfer is given to the mother of the family, a strategy designed to target the funds within the household to improving the children's education and nutrition. Transfers are typically equivalent to 20–30% of household income. Receipt is conditional on immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual checkups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues and best practices are discussed. Complementary programmes include immunisations, nutritional supplements, health checks, workshops on health, hygiene and nutrition.
	The Honduran PRAF was introduced to alleviate poverty among its target group of children, pregnant women and lactating mothers in poor households. Eligibility is means-tested on per capita consumption. The transfer is 1,946 lempiras per capita or 18% of median consumption. For children, only one child needed to be enrolled in school and satisfy the enrolment condition for all children to receive the transfer. The second and third transfers are conditional on a child aged 6–18 who had not completed ninth grade being enrolled in school. The health transfer is conditional on being registered in a health centre. The same conditions applied in Bono 10,000 except that only one child per household was subject to the education condition and the health condition only applied if there was no child eligible for an education transfer.
	The Nicaraguan RPS was introduced in 2001 to relieve poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control localities were then selected randomly. The transfer consists of a basic transfer plus education stipend and grant for school supplies if applicable. On average the total transfer is 3,885 Nicaraguan córdobas per year, about 18% of annual household consumption. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that have not completed the fourth grade. Immunisations and healthcare services are offered free of charge.

(Cont'd)	
Evaluation methodology	These interventions all include an element of randomisation therefore this study treats them as RCT. SD and DID estimates are given. The data come from the panel surveys collected in order to evaluate the programmes: two waves for PRAF, three waves for RPS and six waves for PROGRESA. The samples are 6546 households for PRAF, 2409 for RPS and 8817 for PROGRESA.
Overall findings	The PRAF in Honduras raised fertility by 2-4 percentage points which may be a consequence of increased marriage rate. No impact was found in the other countries on fertility. No primary mechanism, was identified for how the transfer might be affecting fertility.
Reported outcome areas	Health; Empowerment
Indicators reported	Woman has given birth in past 12 months; whether woman has given birth in last 12 months or is at least three months pregnant.
Citation	Stecklov, G., Winters, P., Stampini, M. and Davis, B. (2005) 'Do conditional cash transfers influence migration? A study using experimental data from the Mexican PROGRESA programme', <i>Demography</i> , 42(4): 769–790.
Name of programme(s) and country/countries	PROGRESA (Mexico)
Programme details	PROGRESA was originally launched in 1997 to address extreme poverty in rural Mexico and promote the development of human capital of poor households by improving education, health and nutrition outcomes. Two forms of cash transfers are provided to households to meet these objectives: a food grant and a school scholarship. Each component is linked to conditional requirements. Eligible households were selected in three stages, including the identification of recipient communities based on a marginality index, a census of all households in the potential target locations and the computation of scores for each household used to include those above a certain cut-off and the review of household lists by community assemblies. By the end of 1999, the year corresponding to the data used in the study, PROGRESA provided bimonthly transfers to approximately 2.3 million households or about 40% of all rural families and 11% of all Mexican families.
Evaluation methodology	The study uses experimental data from PROGRESA to evaluate the effects of CCTs on migration both domestically and to the United States. It uses a DID approach and data from two main sources for the empirical analysis: the census (ENCASEH) conducted in November 1997 in all communities considered for participation in PROGRESA, including those later assigned to control and treatment groups; and, the ENCEL surveys. As part of an evaluation based on an experimental design, 506 PROGRESA communities in seven regions were selected and randomly allocated into treatment and control groups, only households in the treatment communities received PROGRESA for the duration of the evaluation. As part of this evaluation, follow-up surveys (ENCELs) were conducted every six months in these selected communities for approximately three years.
Overall findings	The study examines how PROGRESA affects domestic and U.S. migration. The results indicate that while migration levels were increasing over this period, PROGRESA slowed this increase for households in treatment communities. PROGRESA did little to stem the flow of rural migration to domestic, primarily urban destinations, but it did have a more substantial and significant effect on the flow of migrants to the United States. The size of the coefficient on PROGRESA in the U.S. migration models indicates that PROGRESA, after only 20 months of operation, reduced the probability of U.S. migration by about 0.2 percentage points when the other variables are set at their means. The substantive impact of the programme is more obvious when the authors account for the fact that migration levels to the United States are quite low, particularly when spanning such a short period. In that sense, the odds of migration provide a better gauge. A simple calculation shows that the odds of U.S. migration are reduced by roughly 58% as a result of PROGRESA.
Reported outcome areas	Employment

Citation	Stecklov, G., Winters, P., Todd, J. and Regalia, F. (2006) <i>Demographic externalities from poverty programs in developing countries: experimental evidence from Latin America.</i> Working Paper 2006-1, Washington, DC: American University, Department of Economics.
Name of programme(s) and country/countries	PROGRESA, Programa Asignación Familiar (PRAF) and Red de Protección Social (RPS) (Mexico, Honduras, Nicaragua)
the study	This study evaluates three interventions, the first of which is PROGRESA which began in Mexico in 1997 with the aim of addressing the immediate needs of extreme poverty and break its intergenerational transmission. It had reached around 2.6 million families (at the time of study). It is targeted to poor households within poor communities. Poor areas determined according to share of poor; low-income households identified initially using 1997 census data; random assignment of villages to early and later treatment; all eligible households offered the transfer. The cash transfer is given to the mother of the family, a strategy designed to target the funds within the household to improving the children's education and nutrition. Transfers are typically equivalent to 20–30% of household income. Receipt is conditional on immunisation of babies and regular health checks, regular attendance of pregnant and lactating women at clinics, attendance of other family members for annual check-ups, attendance of all adult family members at educational sessions in which health, hygiene, nutrition issues and best practices are discussed. Complementary programmes include immunisations, nutritional supplements, health checks, workshops on health, hygiene and nutrition.
	The Honduran PRAF was introduced to alleviate poverty among its target group which is children, pregnant and lactating mothers in poor households. Eligibility is means-tested on per capita consumption. The transfer is 1,946 Honduran lempiras per capita, which is 18% of median consumption. For children, only one child needed to be enrolled in school and satisfy the enrolment condition for all children to receive the transfer. The second and third transfers are conditional on the enrolment in school of a child aged 6–18 who had not completed ninth grade. The health transfer is conditional on being registered in a health centre. The same conditions applied for Bono 10,000 except that only one child per household was subject to the education condition and the health condition only applied if there was no child eligible for an education transfer.
	The Nicaraguan RPS was introduced in 2001 to relieve poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control localities were then selected randomly. The transfer consists of a basic transfer plus education stipend and grant for school supplies if applicable. On average the total transfer is 3,885 Nicaraguan córdobas per year, about 18% of annual household consumption. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under the age of five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children that have not completed the fourth grade. Immunisation and healthcare services are offered free of charge.
Evaluation methodology	These interventions all include an element of randomisation, therefore this study treats them as an RCT. SD and DID estimates are given. The data come from the panel surveys collected in order to evaluate the programmes: two waves for PRAF, three waves for RPS and six waves for PROGRESA. The samples are 6,546 households for PRAF, 2,409 for RPS and 8,817 for PROGRESA.
Overall findings	The PRAF in Honduras raised fertility by 2–4 percentage points which may be a consequence of increased marriage rate. In Mexico and Nicaragua, contraceptive use rose among beneficiaries, possibly due to decreased migration and reduced periods of spousal separation. An unintended consequence of the programmes may be that women have higher exposure to fertility due to lower migration levels.
Reported outcome areas	Health; Empowerment
Indicators reported	Woman has given birth in past 12 months; whether woman has given birth in last 12 months or is at least three months pregnant.

Citation	Strobbe, F. and Miller, C. (2011) Cash transfers in an epidemic context: the interaction of formal and informal support in rural Malawi. Policy Research Working Paper 5824. Washington, DC: World Bank.
Name of programme(s) and country/countries	Mchinji Social Cash Transfer Pilot (Malawi)
Programme details as reported in the study	The scheme started in 2007 and covers more than 3,000 households in rural villages in the Mchinji area (central Malawi) with the objective of alleviating poverty, reducing malnutrition and improving school enrolment among the poorest 10% of households through regular and reliable cash transfers. It targets households that are both ultra-poor and labour constrained (those with no able bodied member aged between 19–64 who is fit for work), or when one able bodied adult must care for more than three dependents (i.e. children, elderly, chronically ill persons).
Evaluation methodology	The study is based on data from a cluster-randomised evaluation involving a longitudinal dataset covering 749 adult-headed households. Quantile regression was used to estimate impacts at the median and at the .25 and .75 quantiles.
Overall findings	The authors find that the programme led to a statistically significant reduction in the level of consumption expenditures for those households receiving cash transfers. The study also confirms the presence of crowding out effects on private arrangements when looking at gifts and (to a lesser extent) remittances, while informal loans seem to be completely independent from the receipt of the cash transfer.
Reported outcome areas	Poverty; Savings, investment and production
Indicators reported	Total consumption expenditures; food consumption expenditures; receipt of private transfers, remittances, gifts and loans
Citation	Svarch, M. (2009) 'Do conditional cash transfers affect credit market outcomes: evidence from households in Mexico'. MSc. The Ohio State University.
Name of programme(s) and country/countries	PROGRESA / Oportunidades (Mexico)
Programme details	The programme is a CCT that started in 1997, designed to simultaneously intervene in the areas of health, education and nutrition by targeting households in extreme poverty with regular cash transfers. Transfers are aimed at mothers and the value depends on level of school and gender of the child. Aside from the core transfer, additional transfers were available for elderly household members over the age of 70, a savings account transfer for students who finish high school, and educational scholarships. There were also maximum amounts allowable per household. The transfer received by these households represented, on average, around 22% of household income. Transfers were conditional upon whether their children attend school, at any level between the third grade of primary school and the third grade of high school. To continue receiving the transfer, the children should not miss more than three days of school per month and must also attend community health centres and workshops. Complementary interventions include basic preventative health services workshops in health and nutrition and nutritional supplements for children under five.
Evaluation methodology	The study focuses on urban households only, drawing on data from three rounds of the special-purpose Urban Household Evaluation Surveys, with a full sample of 14,713 urban households. It employs Fixed Effects, IV and Tobit estimation to estimate impacts.
Overall findings	The econometric results suggest that participation in the programme increases the likelihood of participation in credit markets (either as a consequence of the risk-coping effect or the creditworthiness effect). The results reflect the behaviour of urban households, as there are no credit market data for the rural households and, because of the conflicting effects, these cannot be generalised.
Reported outcome areas	Savings, investment and production
Indicators reported	Probability that a household participated in the credit market, amount of credit applied for.

Citation	Teixeira, C.G. (2010) A heterogeneity analysis of the Bolsa Familia programme effect on men and women's work supply. IPC-IG Working Paper 61. Brasilia: International Policy Centre for Inclusive Growth.
Name of programme(s) and country/countries	Bolsa Família (Brazil)
Programme details	The Bolsa Família is Brazil's national CCT programme, targeting families below the poverty line. In 2006, it covered 11.1 million Brazilian families. The Bolsa Família targets two types of family: the first is characterised by a monthly per capita income between US\$23 and US\$46 and receives variable transfers of US\$7 per child or pregnant woman up to the limit of three eligible people/children; the second is characterised by a monthly per capita income of less than US\$23 and receives an additional US\$23 on top of the variable transfer.
Evaluation methodology	The paper employs a quasi-experimental approach and data from Brazil's nationally representative household survey, PNAD, to analyse the impact of the Bolsa Família on the labour supply of beneficiaries as measured by probability of working and number of hours worked by both men and women. The analysis is undertaken using the values of the transfers as the treatment indicator and uses Propensity Score Weighting to estimate how average treatment effects on the treated vary according to the amount received.
Overall findings	The study finds that the Bolsa Família marginally diminishes the supply of weekly work hours of working adults. The heterogeneous impacts of the cash transfers on men and women depending upon how they are placed in formal and informal sectors, agricultural and non-agricultural sectors and wage rate ranges are also assessed. The results indicate a nil average effect on probability of working and a marginal reduction in the supply of labour hours for men and women. The impact is greater for informal workers and unpaid workers and is more significant for higher values of the transfers.
Reported outcome areas	Employment
Indicators reported	Probability of working and number of weekly hours worked by men and women by gender; informality; self-employment; agricultural activities and intervals of wage rate.
Citation	The Kenya CT-OVC Evaluation Team (2012) 'The impact of Kenya's Cash Transfer for Orphans and Vulnerable Children on human capital', <i>Journal of Development Effectiveness</i> 4(1): 38–49.
Name of programme(s) and country/countries	Orphan and Vulnerable Children Cash Transfer (OVC-CT) (Kenya)
Programme details as reported in the study	The OVC-CT is a national child-protection programme that provides a flat monthly transfer to ultra-poor families with orphans and vulnerable children aged 17 years and below. OVCs are those with at least one deceased parent or a parent who is chronically ill or whose main caregiver is chronically ill. It currently reaches 130,000 households and over 260,000 OVCs across the country. The objective of the transfers is to encourage fostering and retention of children and to promote their human capital development. The monthly transfers were 1,500 Kenyan shillings (US\$20) and this was raised further in the 2011–2012 Kenyan budget. Beneficiary households are informed that the care and protection of the resident OVC is their responsibility in return for receiving the cash payment. Currently there are no punitive sanctions for non-compliance with this responsibility, although several districts planned to test punitive conditions in an expansion of the programme scheduled for 2012.
Evaluation methodology	The study uses data from a cluster-randomised social experiment that was conducted in 2007–2009 to evaluate the impact of the programme on children's human capital development. It estimates programme impacts on children aged 6–17 using DID children. The final sample includes 4,082 and 2,108 children in intervention and control households respectively.
Overall findings	While no meaningful impact is found at the primary level, large impacts are found at the secondary level for overall school enrolment and grade-for-age. Further probing of the data unveils that the programme has managed to encourage school returners.
Reported outcome areas	Education

Citation	Todd, J.E., Winters, P. and Stecklov, G. (2011) 'Evaluating the impact of conditional cash transfer programs on fertility: the case of the <i>Red de Protección Social</i> in Nicaragua', <i>Journal of Population Economics</i> 25(1): 267–290.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details as reported in the study	The RPS is a CCT which began in 2001 with the aim of alleviating poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households in programme localities were eligible (with some exceptions). Treatment and control areas were selected randomly. The transfer consists of a lump-sum health and nutrition transfer of US\$224 per year plus lump-sum education grant of US\$112 per year if household has children aged 7–13 who had not completed the fourth grade. On average the total transfer was 3,885 Nicaraguan córdobas per year, 18% of annual household consumption (21% with the child grant). The transfer is distributed every two months. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under the age of five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children who had not completed the fourth grade.
Evaluation methodology	The programme was designed as an RCT and the treatment effect is estimated here using a stratified Cox model and DID estimation. The data are taken from a special-purpose panel survey to evaluate the programme with a baseline and three follow-ups. The sample size is approximately 1,670 households.
Overall findings	The transfer decreased the probability of a birth among beneficiaries, indicating that it increased birth spacing.
Reported outcome areas	Health; Empowerment
Indicators reported	Woman has given birth in the past 30 months.
Citation	Todd, J.E., Winters, P. and Hertz, T. (2010) 'Conditional cash transfers and agricultural production: lessons from the Oportunidades experience in Mexico', Journal of Development Studies 46(1): 39–67.
Name of programme(s) and country/countries	Oportunidades (Mexico)
Programme details	The programme is a CCT that started in 1997, targeting extremely poor households. The programme delivers cash transfers for nutrition and health to all eligible households, while education transfers are granted to children aged 8–18. The total amount a household can receive is capped; in 1998, the maximum was 585 Mexican pesos, which is about 20% of the value of total household consumption. Transfers require complication with a set of activities related to health and/or education of children in beneficiary households.
Evaluation methodology	The study uses data from the experimental design of PROGRESA, employing OLS SD and OLS SD with inverse weighting by propensity score, as well as a range of non-linear estimators (e.g. Probit, Poisson, Tobit). The full sample includes 9,936 households.
Overall findings	The programme is found to increase the value and variety of food consumed from own production and to increase land use, livestock ownership and crop spending. Impact estimates are found to differ across land use categories and PROCAMPO participation. Results support the hypothesis that transfers influence agricultural production and impacts are greater for households invested in agriculture.
Reported outcome areas	Savings, investment and production; Health
Indicators reported	Whether household consumes from own production; per capita value of own production; number of foods/food groups from own production; consumption of a range of foods from own production; land use; livestock ownership; agricultural spending.

Citation	Tommasi D. (2015) <i>How cash transfers improve child development. Université Libre de Bruxelles. ECARES Working Paper 2015-19.</i> Brussels: Solvay Brussels School of Economics and Management, European Center for Advanced Research in Economics and Statistics.
Name of programme(s) and country/countries	Atención a Crisis (Nicaragua)
Programme details as reported in the study	Launched in 2005 and lasting one year, the programme experimented with a CCT and graduation packages. Group 1 was offered a CCT conditional on children receiving regular health checks and attending primary school. Group 2 was offered the CCT plus the possibility of one household member attending a vocational training course and labour market and business-skill training workshops. Group 3 was offered the CCT plus a large lump-sum payment to start a small non-agricultural activity. The basic component of the transfer for all households in the treatment groups was large, corresponding to 15% of yearly per capita expenditures, approximately US\$145. Households with children aged 7–15 and enrolled in primary school received another US\$90 per household and an additional US\$25 per child. In practice, the transfer was unconditional as conditionality was not monitored, and households were not penalised for non-compliance.
Evaluation methodology	The method draws on the randomised assignment to the CCT, using data drawn from the programme evaluation's special-purpose panel survey, with a sample consisting of 1172 households (29.3% of the original sample) and 2060 children. Impacts are estimated using seemingly unrelated regressions (SUR) and using a Quadratic Almost Ideal Demand System for impacts on expenditure.
Overall findings	The cash transfers improved child development via a strong income effect and a change in knowledge towards child-rearing practices. However, both mechanisms were effective only in those households where the mother was likely to be already powerful at the baseline.
Reported outcome areas	Empowerment; Health; Poverty
Indicators reported	Bargaining power of mothers, indices of family well-being, child-rearing practices, resource shares allocated to different food and other expenditure items.
Citation	Urquieta J., Angeles, G., Mroz, T., Lamadrid - Figueroa, H. and Hernández, B. (2009) 'Impact of <i>Oportunidades</i> on skilled
Name of programme(s) and country/countries	attendance at delivery in rural areas', <i>Economic Development and Cultural Change</i> , 57(3): 539–558.  Oportunidades (Mexico)
	attendance at delivery in rural areas', Economic Development and Cultural Change, 57(3): 539–558.
country/countries Programme details	Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades is a CCT programme that started in rural areas in 1997 and focused on families living in extreme poverty. It aimed to improve the education, health, nutrition and living conditions of population groups in extreme poverty and to break the intergenerational cycle of poverty. By 2005, the programme had enrolled 5 million families in urban and rural areas, containing more than 25 million people across the country. There are three major components to the programme. First, cash transfers to families of children attending school (payments varied according to the number of children in the family and their age and gender, being larger for girls in higher education grades). Payments were made to the female head of the household, and are conditioned on compliance with the attendance of children at school and other responsibilities. Second, the programme offered an essential health care package that included pregnancy and delivery care for women enrolled in the programme. A series of health promotion talks were also included that were presented monthly covering information on family planning, prenatal care, alarm signs during pregnancy and newborn care. In the case of delivery attendance, health institutions are responsible for providing delivery attendance in their facilities. Attendance at the health promotion talks and medical check-ups are requirements for continuing enrolment in the programme and receiving cash payments. Third, the programme also distributed nutritional supplements with minerals and vitamins for all children under the age of two,
country/countries	Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades is a CCT programme that started in rural areas in 1997 and focused on families living in extreme poverty. It aimed to improve the education, health, nutrition and living conditions of population groups in extreme poverty and to break the intergenerational cycle of poverty. By 2005, the programme had enrolled 5 million families in urban and rural areas, containing more than 25 million people across the country. There are three major components to the programme. First, cash transfers to families of children attending school (payments varied according to the number of children in the family and their age and gender, being larger for girls in higher education grades). Payments were made to the female head of the household, and are conditioned on compliance with the attendance of children at school and other responsibilities. Second, the programme offered an essential health care package that included pregnancy and delivery care for women enrolled in the programme. A series of health promotion talks were also included that were presented monthly covering information on family planning, prenatal care, alarm signs during pregnancy and newborn care. In the case of delivery attendance, health institutions are responsible for providing delivery attendance in their facilities. Attendance at the health promotion talks and medical check-ups are requirements for continuing enrolment in the programme and receiving cash payments. Third, the programme also distributed nutritional supplements with minerals and vitamins for all children under the age of two, pregnant or lactating women and undernourished children 2—4 years old.  The study uses an RCT design, employing DID and RDD methods to estimate impacts. The full sample covers 2,790
country/countries  Programme details  Evaluation methodology	Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades (Mexico)  Oportunidades is a CCT programme that started in rural areas in 1997 and focused on families living in extreme poverty. It aimed to improve the education, health, nutrition and living conditions of population groups in extreme poverty and to break the intergenerational cycle of poverty. By 2005, the programme had enrolled 5 million families in urban and rural areas, containing more than 25 million people across the country. There are three major components to the programme. First, cash transfers to families of children attending school (payments varied according to the number of children in the family and their age and gender, being larger for girls in higher education grades). Payments were made to the female head of the household, and are conditioned on compliance with the attendance of children at school and other responsibilities. Second, the programme offered an essential health care package that included pregnancy and delivery care for women enrolled in the programme. A series of health promotion talks were also included that were presented monthly covering information on family planning, prenatal care, alarm signs during pregnancy and newborn care. In the case of delivery attendance, health institutions are responsible for providing delivery attendance in their facilities. Attendance at the health promotion talks and medical check-ups are requirements for continuing enrolment in the programme and receiving cash payments. Third, the programme also distributed nutritional supplements with minerals and vitamins for all children under the age of two, pregnant or lactating women and undernourished children 2–4 years old.  The study uses an RCT design, employing DID and RDD methods to estimate impacts. The full sample covers 2,790 individuals.

Citation	Villa, J.M. (2014) The length of exposure to antipoverty transfer programmes: what is the relevance for children's human capital formation? Working Paper 206. Manchester: Brooks World Poverty Institute, University of Manchester.
Name of programme(s) and country/countries	Familias en Acción (Colombia)
Programme details as reported in the study	FA is a CCT designed to break the intergenerational transmission of poverty. Beginning in 2001, it targets households in extreme poverty, using a PMT on household wealth to determine eligibility. The transfer is equivalent to approximately US\$30 per month on average and is paid monthly. Receipt of the transfer is conditional on school attendance and health clinic visits for participating children under the age of 17.
Evaluation methodology	The study uses a quasi-experimental method in which the treatment effect is estimated using intensity (dose) analysis. The dataset includes a national household survey containing a total sample of 1,641,551 households and also data from administrative sources.
Overall findings	Longer exposure to anti-poverty programmes leads to a higher accumulation of years of education and school registration rates.
Reported outcome areas	Education
Indicators reported	Years of education; school registration (if enrolled at the age of seven).
Citation	Winters, P., Stecklov, G. and Todd, J. (2009) 'Household structure and Short-Run economic change in Nicaragua', <i>Journal of Marriage and Family</i> 71(3): 708–726.
Name of programme(s) and country/countries	Red de Protección Social (Nicaragua)
Programme details as reported in the study	The RPS is a CCT which began in 2001 with the aim of alleviating poverty following a financial crisis. Eligible localities were selected (through an unspecified set of criteria) and all households (with some exceptions) in programme localities were eligible. Treatment and control areas were selected randomly. The transfer consists of a lump-sum health and nutrition transfer of US\$224 per year plus lump-sum education grant of US\$112 per year if household has children aged 7–13 yet to complete fourth grade. On average the total transfer was 3,885 Nicaraguan córdobas per year or 18% of annual household consumption (21% with the child grant). The transfer is distributed every two months. For the health and nutrition basic transfer all recipients have to attend bimonthly health and nutrition lectures and take children under the age of five to preventative health care checks. The education grant is conditional on enrolment and regular attendance of all eligible children who had not completed fourth grade.
Evaluation methodology	The programme was designed as an RCT and the treatment effect is estimated here using SD estimation. The data come from a community census and a panel with baseline and one wave. The sample is 1,397 households in all panel waves
Overall findings	The transfer prevented family re-agglomeration following a financial crisis (household size grew more in control households, mostly through young men and women with kinship ties to household head returning to household). The transfer beneficiary households continued to send off young adult members suggesting the transfer lifted constraints to economic migration.
Reported outcome areas	Empowerment
Indicators reported	Household size; number of different household members (e.g. children of different ages, adults, gender, etc.); nuclear household/vertical household (including an extra generation above)/complex household (including different kin combinations); reason that members left the household (e.g. migration) and type of individual that left (male, female, etc.).

Citation	World Bank (2011) <i>Program Keluarga Harapan: main findings from the impact evaluation of Indonesia's pilot household conditional cash transfer program.</i> Jakarta: World Bank Office.
Name of programme(s) and country/countries	Programme Keluarga Harapan (Indonesia)
Programme details	Programme Keluarga Harapan is a CCT that was established in 2007. It is intended to address poor human development outcomes. Four specific programme objectives include: (i) improving the socioeconomic conditions of the poorest households; (ii) improving the educational level of children; (iii) improving the health and nutritional status of pregnant women, post-partum mothers and children under the age of six in the poorest households; and (iv) improving access to and the quality of education and health services, especially for the poorest households. The programme targets households that are classified as extremely poor according to government statistics based on economic and asset-based poverty measurements. Households also must have include either a pregnant or lactating woman, children aged 0–15 or children aged 16–18 who have yet to complete nine years of basic education. The programme initially provided benefits to 432,000 'extremely poor' households in seven provinces. The amount of the cash transfer was designed to be approximately equal to 15–20% of the estimated consumption of poor households. Annual household disbursements vary between 600,000 Indonesian rupiah (Rp) and Rp2.2 million per year. The amount is based on the number of the children in the household and their ages. It includes a fixed transfer of Rp200,000 per household, with the following additions: 800,000 rupiah for a child under the age of six; Rp800,000 for a pregnant or lactating mother; Rp400,000 for a child of primary school age; and Rp800,000 for a child of secondary school age. The minimum transfer per household was Rp600,000 and the maximum Rp2,200,000. Payments were made quarterly, transferred directly to mothers through the nearest post office. Beneficiary households are intended to stay in the programme for a period of approximately two to four years. A large number of conditions were attached to receiving the transfers, covering use of specific health care services, children being enrolled in school and having at least an 85%
Evaluation methodology	The study uses a quasi-experimental approach, drawing on a special-purpose longitudinal survey of 13,976 households. The survey sampling frame draws mostly from households in Java, which is similar to actual programme allocation. IV regression is used to estimate programme impacts.
Overall findings	The programme improved the welfare of beneficiary households. Their average monthly expenditures increased by Rp19,000 per person, equal to a 10% increase in comparison to pre-programme levels. Households used this additional income to increase their spending on food (especially high protein foods) and health costs. There is no evidence that beneficiaries misspent the additional funds on non-productive goods such as tobacco or alcohol. The programme also demonstrated a positive impact in terms of helping households to increase their use of primary healthcare services. Beneficiary households, however, did not demonstrate increased usage of recommended vitamins (iron tablets for pregnant women or vitamin A for children), which was partly due to insufficient stocks. There is no evidence yet of changes in long-term health outcomes and the pilot programme had little impact on changing education behaviours.
Reported outcome areas	Education; Employment; Poverty; Health
Indicators reported	Very wide range of indicators spanning: education; child labour; household consumption; health behaviours and health outcomes.
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Citation	Yanez-Pagans, M. (2008) 'Culture and human capital investments: evidence of an unconditional cash transfer program in Bolivia'. <i>Discussion Paper 3678</i> . Bonn: IZA.
Name of programme(s) and country/countries	Bolivida (Bolivia)
Programme details as reported in the study	Old-age UCT pension, launched in 2001, targeted at citizens aged 65 and over, distributing annuities of US\$120.  Transfers accounted for 50% and 85% of the annual income of poor and extremely poor households.
Evaluation methodology	Quasi-experimental design, estimating impacts with RDD based on data from two nationally representative cross-sectional Living Standards Measurement Study Surveys (LSMS) collected in 2000 and 2001 by the Bolivian National Institute of Statistics (INE). The sample comprises all school-age children who live in households with at least one person in the between the ages of 55 and 74, a total 1,380 school-age children and 520 eligible elders distributed among 886 households.
Overall findings	The core finding is that Bolivida transfers to women lead to substantial improvements in children's human capital investments. As far as ethnicity, eligibility leads to lower increases in schooling investments among indigenous households compared to their non-indigenous counterparts.
Reported outcome areas	Education
Indicators reported	Schooling expenditures (linked to women's ethnicity, culture, etc.).



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