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Towards Gender Equality

A Review of Evidence on Social Safety Nets in Africa

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A review of evidence on Social Safety Nets in Africa

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Abstract

Over the last decade, social safety nets (SSNs) have rapidly expanded in Africa, becoming a core strategy for addressing poverty, responding to shocks, increasing productivity and investing in human capital. Poverty, vulnerability and well-being have inherent gender dimensions, yet only recently has gender equality been considered as a potential program objective. This study reviews the evidence on the impact of SSNs on women's wellbeing in Africa, while contributing to an understanding of how SSNs affect gender equality. We first motivate and take stock of how gender shapes the design and effectiveness of SSNs in Africa. We then summarize evidence from rigorous impact evaluations of SSNs on women's wellbeing across five key domains from 38 studies on 28 SSN programs across 17 countries. We find substantial evidence that, in many instances, SSNs decrease intimate partner violence and increase psychological wellbeing for women, as well as moderate evidence that SSNs increase dietary diversity and economic standing. We find minimal evidence that SSNs improve women's food security and nutrition; however, few studies measure these outcomes for women. Finally, a substantial body of evidence reports on the impact of SSNs on women's empowerment and intra-household bargaining power, however, with weak and mixed results. Our findings are generally promising, since most SSNs are not designed specifically to increase women's wellbeing. However, the results show that household-level impacts do not automatically imply individual women benefit, and further that conclusions from global evidence reviews do not necessarily apply in Africa. There is little research that rigorously identifies the design features and impact pathways from SSNs to gender equality and women's wellbeing, suggesting a priority for future research.

1. Introduction

Over the last decade, social safety nets (SSN) have rapidly expanded on the African continent, becoming a core strategy for addressing poverty and vulnerability, responding to shocks, increasing productivity and investing in human capital. Popularity among governments and other stakeholders has been bolstered by regional evidence showing that SSNs are effective in combating poverty and food insecurity, increasing resilience and agricultural productivity, and improving the education and wellbeing of future generations (Garcia and Moore 2012; Bastagli et al. 2016; Handa et al. 2018; Hidrobo et al. 2018). By 2017, every country on the continent had at least one SSN, while the average country had 15, ranging from two (Republic of Congo and Gabon) to 56 (Burkina Faso) (Beegle, Coudouel, and Monsalve 2018). Further, African governments have committed to institutionalizing SSNs, with 32 countries establishing national social protection strategies or policies by 2017.

While the design and system integration of SSNs continue to evolve, at their core, SSNs operated in Africa typically consist of non-contributory economic support to households and individuals given at regular, sustained intervals—including common forms of cash, vouchers or in-kind transfers, fee waivers, cash-for-work (CfW) or public works programs (PWPs), and school feeding.¹ According to the World Bank, on average, countries on the continent spend 1.6 percent of their gross domestic product (GDP) on SSNs (representing 4.6 percent of total government spending), and SSNs cover 10 percent of the African population, with cash transfers accounting for nearly 41 percent (and growing) of the share of SSN spending (Beegle, et al. 2018). Thus, by coverage alone, and political commitment to continue expanding them, SSNs, and non-contributory SSNs in particular, represent an important policy tool for reaching poor populations across countries and at scale.

Poverty, vulnerability and well-being have inherent gender dimensions, thus it is not surprising that gender considerations have historically motivated and driven certain design features of SSNs. Since

¹ Social safety nets (or social assistance) fall within broader typologies of social protection (including for example, input and fuel subsidies, micro-finance, contributory social insurance, among others) are likely to be diverse with substantial heterogeneity in gendered designs and implications. The definition and focus on SSNs and non-contributory programming adopted in this chapter aligns with recent prominent reports from Africa (Beegle et al. 2018).

the late 1990s, with the emergence of social welfare policies in Latin America, women were targeted as transfer recipients for their *instrumental* value in helping the program to achieve their intended outcomes, particularly those related to household food security and child human capital (health and nutrition). These design considerations built on a large body of literature on intra-household dynamics showing that men and women often spend income differently, and women often do so in ‘family friendly’ ways. In addition, targeting women may have been preferred from an operational point of view, because women are often responsible for taking children to the health clinic, for example, or *perceived* as having more free time to attend training sessions as part of co-responsibilities. Despite targeting women as recipients for *instrumental* reasons, the evidence causally attributing differences in outcomes to recipients’ sex are scarce and yield mixed findings (Bastagli et al. 2016; Yoong, Rabinovich, and Diepeveen 2012). Further, others have argued that making women responsible for fulfilling conditionalities or work requirements attached to programs has exacerbated gender inequalities in care work, thus limiting poor women’s opportunities to engage in more productive work (Molyneux 2006).

More recently, the narrative has expanded to acknowledge the *intrinsic* value of increasing gender equality and facilitating women’s empowerment, broadly defined. In 2016, the Sustainable Development Goals (SDGs) called for social protection policies as a target under Goal 5 as an avenue for reducing unpaid care (Gender equity and empowerment of women and girls), in addition to calling for minimum social protection coverage, by sex and age, as part of Goal 1 (end poverty and inequality). In 2018, the Social Protection Inter-Agency Cooperation Board of the ILO formed its first ever working group on “Gender” in preparation for the 63rd Commission on the Status of Women (CSW), with a priority theme on social protection systems (UN Women 2018). Through preparation for CSW, background discussion papers have addressed the importance of SSNs to address gender dimensions of wellbeing.² Among these, a statement from the African Member States calls for an “agenda for action [to] optimize current efforts and investments in social protection . . .by making [it] gender responsive and attuned to the needs and

² Background papers can be accessed on the UN Women webpage: <http://www.unwomen.org/en/csw/csw63-2019/preparations/expert-group-meeting>

challenges of women and girls” (Africa Ministerial Pre-CSW 2019, 2). Thus, SSNs, which traditionally have been focused on poverty and vulnerability, are now additionally being championed for improving gender equality.

Despite this recent attention to gender equality and women’s empowerment, it is worth reflecting on the breadth of rigorous evidence available to guide programming to achieve these goals. The majority of papers commissioned for CSW to inform whether SSNs are achieving results for women has primarily summarized ‘promising’ case studies and highlighted successes, rather than providing a comprehensive understanding of impacts, including those where results have been less positive. This is not surprising: since SSNs broadly have poverty objectives, there has been less focus on exploring program designs that focus on gender equality. However, recent reviews at the global level broadly agree on a number of conclusions. These include that there is promising evidence that SSNs can facilitate gender equality and women’s empowerment, but that such effects are not assured and may depend critically on program designs that reflect the relevant context. In addition, for many domains of women’s wellbeing, additional research is needed (de la’ O Campos 2015; Newton 2016; van den Bold, Quisumbing, and Gillespie 2013). Further, there is little research that rigorously identifies the design features and impact pathways that contribute to the impact of SSNs on gender equality and women’s wellbeing (Bastagli et al. 2016). Finally, despite calls for integration of gender within program design, implementation and monitoring/evaluation, there are few examples where this has been fully taken onboard (World Bank 2014).

Past reviews of the evidence have drawn heavily on Latin America, where SSNs were scaled up in the early 2000s. Since program design, poverty dynamics and gender norms underlying potential for program impact are likely to vary by region, region-specific learning is needed. For example, Africa has higher poverty rates and a larger poverty gap, as well as poorer access to services and lower quality infrastructure than Latin America. Although poverty rates have been declining in Africa, the total number of poor is increasing. According to the World Bank, the total number of poor increased from 280 million (1990) to 390 million (2013), with the majority of poor residing in rural areas and engaged in subsistence

farming or low-paying income generating activities (Beegle, Coudouel, and Monsalve 2018). In addition, poor populations in Africa are more likely to live in areas which are drought or conflict prone, with deteriorating services and governance structures. Due to these factors, SSNs in Africa have traditionally had greater focus on resilience and shock-responsivity, with fewer punitive co-responsibilities related to service provision. In addition, SSNs on the continent are more likely to be unconditional, involve community structures, particularly to support targeting and implementation (Garcia and Moore 2012).

From a gender perspective, Africa is likely to be unique in a number of important ways related to social norms and demographics. For example, Africa has a higher share of HIV-affected households (including households taking care of orphans and vulnerable children), higher fertility rates, and earlier marriage transitions, including into polygamous marriages. HIV is known to disproportionately affect women due to biological susceptibility to transmission, as well as exacerbate women's caregiving burden to the sick and to adopted children. Due to the wide diversity of program typologies and objectives, women have not necessarily been targeted *instrumentally* as recipients of SSNs in Africa—however coverage by sex may vary by program type (Garcia and Moore 2012). These unique considerations translate into both opportunities and potential restrictions on how SSNs can be leveraged by and for women on the continent. If social and gender norms underlying household division of power and economic opportunities for women differ on a regional or national level, then the transferability of program design cannot be assumed based on evidence from other regions.

This paper contributes to a broader understanding of the evidence on how SSNs in Africa affect gender equality and women's empowerment. First, we motivate and take stock of how gender is factored into SSN design. Second, we summarize evidence from rigorous evaluations of the impact of SSNs on women's wellbeing across five key domains. Third, we summarize literature regarding program design features to understand how much we know about gender-sensitive design features—and if they truly result in better outcomes for women and their households. We close with recommendations for future

research on how to improve the impact of SSNs in Africa on gender equality and women's empowerment.³

2. SSNs in Africa: The role of gender in program design

The motivations for gender-sensitive SSNs stem from deep seated gender norms that determine differential roles and responsibilities for women and men (girls and boys), within households, communities and society at large. These differential roles result in differential economic and social assets, risks and vulnerabilities leading to different experiences of poverty. Further, even when faced with common risks, men and women's coping strategies differ and tend to make women worse off on a range of outcomes such as food and nutrition security, lower wages, and safety (Kumar and Quisumbing 2014). Due to structural inequalities and perpetuated by gender norms, women and girls face unequal opportunities of participating in and fully benefitting from economic and social activities, politics, and local governance. SSNs have potential to directly address some of these gender inequities by addressing poverty and providing complementary skills, linkages to service provision. However, as previously discussed, this potential does not result in automatic benefits for women, and SSNs may also reinforce, rather than address, inequalities.

SSNs use multiple instruments and design features to address gender objectives. Broadly, programming approaches can be categorized into three groups on a "gender-sensitivity-continuum" as *gender-blind*, *gender-neutral* and *gender-transformative* (FAO 2018). *Gender-blind* (or *gender-discriminatory*) interventions are those that fail to recognize gender issues by ignoring gender roles and gender gaps (in various dimensions) in their design, thereby reinforcing gender inequalities. *Gender-neutral* interventions may recognize gender issues in their design but take no measures to address these gender inequalities. *Gender-transformative* (or *gender-sensitive*) interventions, on the other hand, are interventions that not only recognize the gender inequalities but also take measures to address them.

³ We originally aimed to provide an understanding from publicly available databases on the coverage of SSNs, and the targeting of programming based on sex of recipient. However, we were not able to make these calculations due to data unavailability. Thus, we discuss implications of this limited understanding and the need for better data collection on sex disaggregation of SSN coverage and on differences in outcomes by sex in the conclusion.

Since, both *gender-neutral* and *gender-transformative* interventions recognize gender issues, they are further classified as “*gender-aware*.” There are multiple resources that provide guidance on how to design and implement gender-transformative social protection programs, all of which emphasize the importance of being gender-aware along all the stages of the program cycle: design, implementation, monitoring and evaluation.

While a full review of design features is outside the scope of this paper and has been detailed elsewhere (FAO 2018; Holmes and Jones 2010a; UN Women 2018), we provide a brief description of design and implementation features with gender implications, alongside examples from SSNs in Africa.

- a. *Gender-based targeting*: One of the most prevalent gender-aware design features is the targeting of transfers or benefits to women, rather than to men or to households. Some programs specifically target women (girls) as primary caregivers of young children, or do so to meet program objectives related to maternity benefits (Grépin, Habyarimana, and Jack 2019; Cohen et al. 2017), or widow pension programs, or those aimed at specifically benefiting adolescent girls (Baird, De Hoop, and Özler 2013; Kilburn, Pettifor, et al. 2018). While putting benefits in the hands of women (girls) may enhance pre-conditions for favorable impacts, simply *reaching* women (girls) does not equal *benefiting* women (girls) for transformative outcomes.
- b. *Conditionality and behavioral features*: Traditionally, conditionalities and behavioral requirements, such as school enrollment or health monitoring visits were often placed on SSNs. However, in Africa, conditions are more frequently viewed as a continuum, where features such as indirect conditions (with no punitive measures), nudges, labeling and messaging are seen to be beneficial alternatives to punitive ‘co-responsibilities’ (Pellerano and Barca 2014). For example, a cash transfer program in the Zomba district of Malawi tested both unconditional transfers and those conditional on schooling for young women, with the hypothesis that conditional transfers would help increase human capital and transitions to adulthood, providing benefits outweighing the time and cost of school attendance (Baird, McIntosh, and Özler 2011).

- c. *Payments and transfer mechanisms*: A large body of literature indicates that benefits should be reliable, timely and sizeable for them to have the intended protective, preventive and promotive impacts. If the benefits are not reliable and timely, they can lead to suboptimal coping strategies that widen gender asset gaps or lead to worse comparative outcomes for women. The situation is more nuanced, however, for the size of the transfer, whether cash or in-kind, and the ability of the woman as the recipient to make autonomous decisions about them. It is hypothesized that if transfers are smaller in amount, women may likely have greater control over how to spend them or are easier to hide from their spouse. However, there is little empirical evidence from Africa verifying this claim, and benefits of larger value presume greater potential for addressing economic constraints in general. How benefits are delivered to or collected by the recipients also has many gender implications. If there are mobility restrictions for women (either due to seclusion norms or due to safety concerns), benefits that are delivered far from their homes are not gender-aware. Electronic transfers can be cost-effective, safe, reduce stigma (as they are not observable), and reduce threat of expropriation from partners or family. Electronic transfers also may have wider benefits of financial inclusion of women and their economic empowerment. For example, a cash transfer program run by an NGO in Niger tested mobile money versus physical transfers and provided women with mobile phones (Aker et al. 2016). Providing mobile phones, money accounts and training to program staff and recipients are important as women may not own or be equipped to access mobile transfers.
- d. *Integrated approaches*: Theoretically, the addition of ‘plus’ components, or integrating SSNs with linkages to other services has high potential for enhancing a gender-transformative design (Roelen et al. 2017). As previously described, this is simply because the focus of the additional component can be either directed at enhancing women’s status or wellbeing (including economic status) or be focused on facilitating impacts on gender-equality via addressing masculinities or involving men as allies. One example is the Government of Ghana’s Livelihood Empowerment Against Poverty (LEAP) 1000 program, which bundles together an unconditional cash transfer (UCT) for pregnant

and lactating women, with a health insurance waiver for the national scheme—allowing women to access health care during the critical maternity and post-partum period.

- e. *Gender-aware operational features*: Programs can be mindful of gendered social risks related to women's child care and domestic duties by incorporating operational features that can accommodate these risks. Ethiopia's Productive Safety Net Program takes this into account by providing child-care facilities at the public works locations, flexible work hours for women, and, direct support (UCTs) for women in advanced stage of pregnancy and/or nursing (if labor supply requirement is not fulfilled by other household members) (Holmes and Jones 2010b). Women are also involved in the targeting process and selection of community assets to be built as part of the public works (Coll-Black et al. 2012).

3. SSNs in Africa: Impacts on women's wellbeing outcomes

This section reviews the evidence from rigorous evaluations of SSNs on women's outcomes focusing on five key domains: 1) food security and nutrition, 2) economic standing and productivity, 3) empowerment, 4) psychological wellbeing and 5) gender-based violence. These domains were chosen based on overall perceived importance to women's overall wellbeing, as well as potential for impacts based on dominant program objectives of SSNs. In addition, global reviews have tended to focus on outcomes traditionally linked to women, including early marriage, sexual and reproductive health, and maternal health, so less is known regarding the domains we examine (Bastagli et al. 2016). We include only outcomes measured at the individual woman level including samples with women aged 18 years or older (rather than those measured among female headed-households or which measure comparative gaps between women and men). We focus on rigorous experimental and quasi-experimental studies (with identification of a credible counterfactual) taking place after the year 2000 through June 2019, in Africa. Published studies in journals or books, as well as working papers and reports are included. In addition, we do not investigate impacts on outcomes for adolescent girls, which are important, but are being reviewed elsewhere. We conduct a rigorous review, starting first by aggregating studies in recent relevant reviews,

and conducting forward and backward citations of key qualifying studies. Further, we search websites of organizations known to conduct impact evaluations of SSNs in Africa, including the Transfer Project, IFPRI, World Bank, Oxford Policy Management (OPM), Innovations for Poverty Action (IPA) and the Overseas Development Institute (ODI). Finally, upon aggregation of evidence, where gaps exist, in terms of large-scale programming or typologies of SSN, we inquire with key researchers and conduct searches via Google Scholar, using combinations of SSN type and outcome examined.⁴

Tables 1-5 summarize the evidence in each domain, ordering studies by country (and year) in alphabetical order.⁵ Columns 2 – 5 summarize program details, including program name (and implementer categorization), type of program, economic and other benefits, recipient and target group. Columns 6 - 7 report evaluation details, including evaluation design (sample) and years of data collection. Columns 8 - 11 report impact findings, including the indicator used, control group mean, effect size and interpretation of findings or additional information provided. We report coefficients as they appear in reviewed studies for average impacts, and summarize heterogeneous impacts in Column 11, as not all studies are powered for heterogeneous impacts, and additional analysis is largely upon the discretion of authors. In addition to summarizing impact estimates, we augment the discussion of each key domain with noteworthy or insightful qualitative studies as relevant, but do not include a full qualitative review, particularly with respect to unpacking key mechanisms or program design features.

3a. Women's food security and nutrition

In total, six studies were identified which examined impacts on women's food security and nutrition domains, representing six countries and 58 individual indicators (27 nutritional indicators including body mass index (BMI) and anemia, 30 dietary diversity indicators and 1 food security indicator, representing

⁴ We reviewed the first ten pages of results for each of the Google Scholar searches, and limited our review to results published after 2000. Results differ slightly from those presented in our companion book chapter, Peterman et al. (2019), as several additional studies were identified post-production. A full list of keywords used in the searches is available in Appendix A.

⁵ Studies (or evaluations) refer to impacts of one specific program—therefore, if there are two publications on the same program (evaluation), we list both, however count them as one study. Alternatively, if one paper examines impacts on two distinct programs/evaluations, then we count them as two studies.

food coping strategies) (Table 1). Only two studies were published, and four represented working papers or reports, dated from 2017 to 2019. Four studies represented NGO-led programs of cash transfers or cash plus (CCTs and UCTs) in Malawi, Nigeria, South Africa and Rwanda—while the remaining studies examine government UCT and cash plus programs in Egypt and Lesotho. In general, results indicate few significant impacts of programs on women’s individual outcomes, with two studies (33%) showing positive results, and the remaining with non-significant findings or negative findings. When examining indicator groups, dietary diversity indicators showed more promising results (43% positive and significant), while nutritional biomarkers and food security were less promising (4% and 0% positive and significant, respectively). While overall results indicate limited impacts, several studies report that impacts were realized in certain subgroups, for anemia measures: among young women in poorer households in South Africa, or on women in households that were given autonomy of choice over lump sum vs. flow payments in Rwanda. Notably, the negative and significant findings regarding women’s nutritional biomarkers in Nigeria appear to be driven entirely by samples of households with pregnant women at baseline, thus results regarding weight loss and reductions in BMI cannot be taken as strictly adverse program impacts (Carneiro et al. 2019).⁶ Thus, while we conclude that there is little evidence supporting positive impacts on SSNs on nutrition or food security overall, the latter limited by unavailability of studies, there is some promise for dietary diversity indicators.

The limited evidence on women’s food security and nutrition is notable, as improving these outcomes is often a main objective of SSNs. However, as this review shows, such outcomes tend to be measured only at the household or child level. Recent global reviews and meta-analyses suggest the average social protection program increases the value of food consumed at the household level by 14% and caloric acquisition by 8%, including increases in consumption from fruits and vegetables, grains and animal source foods (Hidrobo et al. 2018). Studies from Africa make up the majority of the global

⁶ No detailed explanation is given by authors of this finding; however, additional analyses may be available as the technical report is expanded into formalized academic papers. One might expect that the comparison to a randomized control group would net out any unusual weight-loss effects among women who were pregnant at baseline. Indeed, authors show that both samples with pregnant women and without pregnant women at baseline are balanced across key BMI indicators. Authors exclude women who are pregnant at endline from this analysis.

evidence across the food consumption categories—thus it is surprising that none of these studies collects intra-household measures. The evidence on positive impact for nutritional biomarkers is more limited, with global reviews suggesting that child nutrition specifically is unlikely to be influenced by economic transfers alone (de Groot et al. 2017). Despite this, as women’s food security and nutrition are determinants of many other wellbeing indicators, including individual health (particularly during pregnancy and post-partum), cognitive ability and productivity, there is value to measure potential beneficial effects for these outcomes. In addition, while food security is often a proxy for household poverty and used in SSN targeting formulas, evidence indicates that household resources are not necessarily allocated evenly across household members. For example, using cross-country data from sub-Saharan Africa, Brown and colleagues (2019) find that approximately 75% of undernourished women and children are not found in the poorest 20% of households. They conclude that intrahousehold inequalities are responsible in part for this pattern, though common health risks are also important. Therefore, we conclude that there is indication that SSNs *have potential* to increase food security and nutrition of women, however studies must proactively collect and report on these data to fully understand this potential.

[Table 1 here]

3b. Economic standing and productivity

In total, 16 studies were identified which examined impacts on women’s economic standing and productivity domains, representing 11 countries and 201 individual indicators (Table 2). We break these indicators down as follows: a) labor force participation (extensive margin, e.g., any formal or informal wage work, any own farm or self-employment non-farm work, 78 indicators), b) work intensity (intensive margin, e.g., hours or days worked, wage rate, 68 indicators), c) savings (12 indicators), d) expenditure (11 indicators), e) credit, debt or loans (1 indicator), f) durable or productive asset ownership or control, including livestock (30 indicators) and g) aggregate economic wellbeing (1 indicator). Among these studies, five were published, and the remaining 11 represented working papers or reports, dating from

2014 to 2019. Four studies represented NGO-led programs in Kenya, Malawi, Nigeria and South Africa—while the majority were government-run cash transfers (primarily UCTs) with three programs incorporating CfW or PWPs. Overall, eight studies (50%) reported at least one positive outcome, whereas four studies (26%) showed mixed or negative results. When examining indicator groups, indicators of labor force participation were positive 33% of the time (3% negative), and indicators of work intensity were positive 21% of the time (6% negative). Other indicators of economic standing were more promising, with positive impacts ranging from 40-100% of the time, and no negative impacts—however, they were measured less frequently (savings, 100%; expenditure, 55%; credit, loans or debt, 100%; asset ownership, 40%; and aggregate economic wellbeing, 100%). It should be noted that although there were negative impacts realized in several studies, in two cases, these impacts related exclusively to either samples of elderly women over age 60 (Daidone et al. (2014) in Lesotho), in relation to work in hard manual labor (Malawi Cash Transfer Evaluation Team 2016a) or shifting labor from work outside the household to own small businesses (Carneiro et al. 2019). Therefore, the only impact which can be interpreted as strictly adverse is that in Malawi, which finds that the typical wage of young women who received a CCT and were out of school at baseline decreased two years post program (however, authors note that the overall percentage of wage work in the sample is low, Baird et al. (2019)). Therefore, we conclude there is little evidence of ‘dependency’ effects for women due to these economic benefits, which has been suggested as a potential unintended adverse effect of SSNs.

There is now a robust global literature on the economic impacts of SSNs, which shows increases in household economic standing, including on poverty measures, assets, productivity, savings and land ownership (Bastagli et al. 2016; Hidrobo et al. 2018). Despite this, as we show here, economic indicators measured in evaluation studies in Africa typically disaggregate measures for individual women related to labor force participation only (accounting for 73% of the indicators reviewed here). Results for labor force participation and work are diverse, with some studies documenting large or small increases (Nigeria, Bastian et al. (2019); Ghana, Ghana LEAP 1000 Evaluation Team, (2018)), while others document shifts in labor allocation between farm and non-farm activities (Lesotho, Daidone et al. (2014)),

or no change on average (Kenya, Asfaw et al. (2014). One study with a gender-sensitive design and objectives of increasing women's employment, provided vouchers for subsidized childcare to mothers of young children and found substantial effects on both employment (17% increase) and income (24% increase) of women living in low-income areas of Nairobi (Clark et al. 2019).

Although CfW and PWP increased labor force participation in two cases (Liberia and Tanzania), a third study found no impacts (Ethiopia) pointing towards the need for broader evidence on these programming typologies. While this is not surprising, as global reviews have pointed out, there is a need to measure outcomes of these programs more broadly to ensure that the benefits of the work outweigh the costs (Gehrke and Hartwig 2018). Qualitative work can shed additional light on gender dynamics in economic standing and on how transitions in and out of income-generating activities may lead to more or less preferred work outlets for women that both provide economic support, sufficient leisure time, and also mitigate risk against violence and harassment, protect from other hazards and allow flexible hours for childcare.

[Table 2 here]

3c. Women's empowerment

In total, 17 studies were identified that examined impacts on direct measures of women's empowerment, representing 11 countries and 162 individual indicators (Table 3). We break these indicators down as follows: a) primary decision-making power (31 indicators), b) joint or shared decision-making power (123 indicators), c) agency or locus of control (4 indicators), d) self-efficacy (3 indicators), and e) aggregate empowerment (1 indicator). Eight studies were published, and the remaining nine were working papers or reports, dated from 2013 to 2019. Studies were split between government, NGO, and other programs, across a range of economic transfer modalities (including CCTs, UCTs, vouchers, in-kind and plus programs). Overall, six studies (35%) reported at least one positive outcome, whereas three studies (18%) found mixed or negative impacts, and the remaining eight found no relationship (47%). When examining indicator groups, indicators of joint or shared decision-making appear the most

promising (24% positive, 2% negative), while primary or sole decision-making are less promising (13% positive, 6% negative). Only one indicator of autonomy (out of four, 25%) was positive and significant, while for other measures of self-efficacy or overall empowerment, there were no significant impacts. The adverse impacts were found for women's control over decision-making in Egypt, Malawi and Senegal. In Malawi and Senegal, select reductions in women's decision-making were found on day-to-day purchases (Malawi) and on crop decisions (Senegal), impacts which had faded in Senegal by endline—and are overshadowed by other increases in decision-making in Malawi. In Egypt's Takaful, there were reductions observed on women's decision-making regarding children's schooling and taking children for visits to doctors. However, qualitative evidence from the same program suggests some dimensions of improvement in women's bargaining power or autonomy, derived primarily from the benefits of the program for the household budget (El Didi et al. 2018).

Overall, the evidence found for this domain does not align with the narrative that giving SSN benefits directly to women (as done in the majority of studies included) necessarily results in a shift in power dynamics in the household and higher direct measures of women's empowerment. In only two studies, authors were able to contrast impacts by gender of recipient. In Kenya, Haushofer and Shapiro (2016) examine the impact of the *GiveDirectly* UCT on locus of control and randomly select men versus women as target recipients. They find no significant impacts overall, or by sex of recipient. Ambler (2016) examines the effects of the South African old age pension among women and men on primary decision-making (for day-to-day purchases and an overall category on four domains). However, in this case, not only does the pension result in increased decision-making for women (alongside increases in personal income share), but there are no increases for men.

Although few studies are able to investigate potential program design variations or mechanisms responsible for shifting outcomes, it is likely that mixed results stem in part from ambiguity in measurement of empowerment. Over 95% of the outcomes measured represent conventional household decision-making questions on standard domains regarding household purchases, education or health. Qualitative and other measurement work around these measures suggests they do not adequately capture

nuances in empowerment experienced by women in different settings, and in particular fail to capture motivation behind or power associated with autonomy (Bonilla et al. 2017). It is likely that more holistic measures of empowerment, for example, autonomy and self-efficacy across different life spheres, would more accurately capture meaningful changes. Several evaluations of SSNs are underway using the Women's Empowerment in Agriculture Index (WEAI) measure which would represent a large improvement over current measures, including the ability to compare men versus women in the same household.

[Table 3 here]

3d. Psychological wellbeing

In total, nine studies were identified which examined impacts on women's psychological wellbeing, representing six countries and 45 individual indicators (Table 4). We break these indicators down as follows: a) mental health and depression (7 indicators), b) stress, distress and worry (including cortisol biomarkers, 19 indicators), c) life satisfaction, quality of life or happiness (10 indicators), d) other emotional wellbeing indicators (including trust, optimism, hope, future outlook, 8 indicators), and e) aggregate psychological wellbeing (1 indicator). Seven studies were published, and the remaining two represented working papers or reports, dated from 2013 to 2019. Studies were split between NGO and government programs (3 versus 6), and a range of cash transfer modalities (including CCTs, UCTs, and plus programs). Overall, five studies (56%) reported at least one positive outcome, one study (11%) showed negative results and the rest found no relationship (33%). When examining indicator groups, the one aggregate measure is significant, and in addition, indicators of life satisfaction are most promising (70% positive, 0% negative), as well as stress and worry (47% positive, 5% negative) and mental health (43% positive, 0% negative). Other emotional wellbeing measures are moderately promising (38% positive, 0% negative). Similar to the food security domain, the South Africa NGO evaluation found no significant average impacts, but found reductions in depression and hope among female youth with higher poverty levels at baseline (Kilburn et al. 2018). The one study showing adverse impacts on stress among

female youth in Tanzania, while not fully explained, reports equivalent (and larger) decrease in stress among male youth in the same sample (PSSN Youth Evaluation Team 2018).

While psychological wellbeing is rarely acknowledged as an objective or potential outcome of SSNs, there is a growing evidence base suggesting that poverty and mental wellbeing are linked and reinforcing (Lund et al. 2010). Further, poor mental health, is linked to a host of adverse outcomes, including poor physical health, low productivity, substance abuse, intra-household violence and suicide. Women consistently show higher rates of depression as compared to men, a gap that first emerges in adolescence and persists through age 45 to 50 years, making these findings particularly notable (Cyranowski et al. 2000). Several studies examine mechanisms, particularly within young women in Malawi, finding that improvements may be due to a wide range of factors, including better physical health, increased schooling, family support, higher consumption, leisure, caregiver stress levels and reductions in hard labor (Baird, De Hoop, and Özler 2013, Angeles et al. 2019;). Two studies examine design factors, one finding that conditions attached to cash resulted in smaller mental health impacts for young women (potentially due to distress attached to fulfilling conditions, Baird et al. (2013)) and one finding no differences on a range of psychological wellbeing outcomes between monthly versus lump-sum UCTs (Haushofer and Shapiro 2016). Overall, results indicate promise in leveraging SSNs to improve psychological wellbeing of women.

[Table 4 here]

3e. Exposure to violence and abuse

In total, five studies were identified which examined impacts on women's gender-based violence, representing five countries and 28 individual indicators (Table 5). We break these indicators down as follows: a) controlling behaviors (4 indicators), b) emotional violence (5 indicators), c) physical violence (8 indicators), d) sexual violence (6 indicators), and e) aggregate violence measures (5 indicators).⁷ Only

⁷ In reporting on IPV domains, we follow guidance from the WHO Violence Against Women Multi-Country Study and include impacts based on aggregates for each type of violence, rather than for each behaviorally specific

one study was published, and the remaining four represented working papers or reports, dated from 2016 to 2018. Studies were split between NGO and government programs (2 versus 3), and a range of cash transfer modalities (including CCTs, UCTs, and plus programs). Although studies were screened for broad typologies of violence, the only study which measured non-intimate partner outcomes from multiple perpetrators was in Tanzania among youth (PSSN Youth Evaluation Team 2018). The remaining studies, and all significant indicators refer to IPV—therefore, for ease of description—we refer to IPV when describing results. Overall, four studies (80%) reported at least one positive (i.e., reduction in IPV) outcome, whereas one study found no relationship (20%). When examining indicator groups, indicators of physical IPV are most promising (63% positive, 0% negative), followed by controlling behaviors (50% positive, 0% negative), emotional IPV (40% positive, 0% negative), aggregate measures (20% positive, 0% negative) and sexual IPV (17% positive, 0% negative). Measures of both experience (any) and intensity (frequency) are significant. The latter have rarely been measured in global studies, so this represents a substantial contribution to the overall evidence base. No adverse impacts of SSNs are documented within the studies found, either on average or within sub-groups. This is also notable, given the fear of stakeholders that giving economic benefits to women may increase risk of violence within the household or community. One study, Haushofer et al. (2019) in Kenya randomizes gender of the transfer recipient and finds no differences for reductions in physical IPV; however, reductions in sexual IPV are only observed when women receive transfers.

These results are in line with a recent mixed-method review of the linkages between cash transfers specifically and IPV in low- and middle-income countries, which found 16 out of 22 studies (or approximately 73%) included documented decreases in IPV (Buller et al. 2018). The findings presented

indicator of the modified conflict tactic scale. For example, we report only on coefficients for ‘physical IPV’ rather than coefficients on individual acts (e.g., ‘pushed or shook you’ or ‘slapped you’), as studies are rarely powered to identify impacts on individual acts (however may present them for transparency). In 3 studies included here, individual acts are reported on as binary indicators. In Haushofer et al. (2019), for the main effects corresponding to across village estimates, 4 out of 4 (physical IPV), and 2 out of 2 (sexual IPV) individual acts are significant and negative (represent reductions in IPV). For the spillover effects, corresponding to within village effects, 2 out of 4 (physical IPV) and 0 out of 2 (sexual IPV) individual acts are significant and negative. In Peterman et al. (2018), 0 out of 5 (controlling behaviors), 2 out of 4 (emotional IPV), 2 out of 7 (physical IPV) and 0 out of 2 (sexual IPV) individual acts are significant and negative. In Heath and colleagues. (2018), 6 out of 7 (controlling behaviors), 1 out of 4 (emotional IPV) and 1 out of 5 (physical IPV) individual acts are significant and negative.

here (of which only South Africa overlaps) represented even more promising results, however, with similar findings that physical IPV showed most consistent declines. Buller and colleagues suggest three mechanisms through which cash can lead to declines: 1) increases in economic standing and emotional wellbeing, 2) decreases in intra-household conflict, and 3) increases in women’s empowerment. Studies included here provide evidence for all three pathways. One interesting aspect of the studies included relates to household structure—particularly from West Africa. In Mali, Heath et al. (2018) find that when transfers are given to male household heads, reductions in IPV are concentrated among polygamous households, via reductions in men’s stress, anxiety and household disputes. In contrast, in Ghana, Peterman et al. (2018) find that transfers, paired with health insurance waivers, given to women result in decreases (primarily frequency) of IPV concentrated in non-polygamous households. In both cases, polygamous households had higher levels of IPV at baseline, indicating extended families are more conflictual, with implications for the targeting of SSNs and the expected wellbeing gains for men and women. Despite these promising results, we still know little about multiple types of violence, including violence against children, violence from co-wives or broader community—suggesting the need to collect more holistic measures within evaluations to understand full effects on violence and underlying mechanisms (Peterman et al. 2017).

[Table 5 here]

4. Evidence on gender-implications of program design and operational features

In this section, we provide evidence of differential effects of design features that have been tested empirically. While some of these factors have been noted in the previous section, a small number of studies exist which do not explicitly measure the outcome domains we focus on, and therefore it is worth summarizing implications for women and households more generally. We organize design considerations into four categories (described in Section 2): 1) gender-based targeting, 2) conditionalities and behavioral

features, 3) payment modalities and mechanisms and 4) integrated approaches, including cash plus programming.

4.1 Gender-based targeting

Yoong and colleagues (2012) review rigorous studies between 1990 and 2010 to answer the question “what is the evidence of the impact on family well-being of giving economic resources to women relative to the impact of giving them to men? (p. iv).” The authors find that transfers targeted to women lead to positive impacts on child wellbeing, mainly through improvements in health and education. However, increasing women’s control over transfers does not guarantee positive outcomes overall and depends greatly on program type. Moreover, among the 15 studies included, only two were from Africa (both examining old-age pension programs in South Africa). More recent reviews update this literature, providing several other case studies from Africa. For example, an RCT in Burkina Faso randomized whether education-focused cash transfers were given to mothers or fathers (Akresh, De Walque, and Kazianga 2016). Findings indicate that giving transfers to the mothers and fathers has similar positive impacts on child enrollment. In addition, giving transfers to the father actually leads to better child nutrition outcomes, however, only in years when rainfall is low. The findings also suggested that transfers to fathers led to greater investments in productive assets and an increase in production of cash crops. As previously summarized, UCTs provided by the NGO *GiveDirectly* generally found no significant differences on aggregate domains analyzed (or weakly significant differences, see Table 4) between randomized transfers to women as compared to men on average, including those we report in previous sections (Haushofer and Shapiro 2016). The only notable exception is the aforementioned impact on sexual IPV, where reductions are observed only in households where women receive transfers. The labeled cash transfer program in Morocco, mentioned in Section 2 also randomized the sex of the transfer recipient (Benhassine et al. 2015). Findings show no significant difference in impact on children’s school participation by sex of the recipient. Therefore, while there may be reasonable motivation to target women as part of SSN strategies, we have little concrete evidence that this matters specifically for women’s wellbeing or gender-equality outcomes or other household-level outcomes.

4.2 Conditionalities and behavioral features

The results from a Burkina Faso study on conditionalities suggest that CCTs outperform UCTs for children's school enrollment and most health outcomes (Akresh, De Walque, and Kazianga 2016). Further, the same study finds that conditionalities (around enrollments and regular attendance) had no differential impacts on enrollment rates among children who are typically “favored” by parents – boys, older children and higher ability children (Akresh, De Walque, and Kazianga 2016). Conversely, conditions were much more effective at increasing enrollment among girls, younger children and lower-ability children, who were initially less likely to be enrolled. Yet in another setting, the “labeled cash transfers” provided by the Moroccan government for improving school enrollment (mentioned in Section 2) were just as effective at increasing school participation as compared to a conditional model—and were more effective at reducing dropout (Benhassine et al. 2015). It is argued that the endorsement effect (parents update their beliefs about the value of education) along with low pupil absenteeism, in this context, were important enabling factors. An aforementioned study in the Zomba district of Malawi provided cash transfers to secondary school-aged girls and households, randomizing UCTs in one group and cash transfers conditional on attending school regularly to the other (Baird, McIntosh, and Özler 2011). Findings from the two-year follow up show significant improvements in schooling outcomes, particularly in the CCT arm, including reduced drop out and increased learning. However, UCTs were more effective in reducing rates of teen pregnancy and marriage. Despite these initial differences, two years post-intervention, the CCT benefits on education and fertility were largely only sustained for the group of females who were out-of-school at baseline, while the UCT benefits had largely dissipated (Baird et al. 2019).⁸ A maternity benefit program implemented in the slums around Nairobi randomized labeled cash transfers with and without additional top-ups for delivering at a pre-committed health facility to pregnant women to encourage institutional deliveries (Cohen et al. 2017). The authors find significant

⁸ This summary of the results leaves out important nuances, as the authors show that children born to the UCT beneficiaries have higher height-for-age scores, and differences also emerge across women's wellbeing outcomes included in this review—including positive impacts in nutrition and food security, as well as mental health experienced by both arms across different time periods.

positive effects of the labelling with the pre-commitment on institutional delivery, as well as on quality of the facility as compared to control group; however, they find no significant impacts of the labeling alone. In summary, these four studies suggest a diverse role for the continuum between UCT and CCT, depending on important considerations on the context, program objectives, target group, conditioning behavior and quality of supply-side infrastructure.

4.3 Payments and transfer mechanisms

Recent studies provide some evidence on the issue of transfer size. A study in Nigeria, examined the impact of a UCT that randomly varied the disbursement structure to women with equivalent values given monthly or quarterly (Bastian, Goldstein, and Papineni 2019). Overall, they found that women, regardless of payment structure, were more likely to work, increasing both participation in farm work and non-farm businesses. Importantly, the quarterly payments were half as costly to implement, making them potentially more cost-effective. In Kenya, Haushofer and Shapiro (2016) compare the effect of predictability and size of *GiveDirectly* UCTs. They find that larger transfers (US\$1,525 versus US\$404) lead to greater asset accumulation and lower stress (as measured by self-reported Cohen scale). When comparing unpredictable lumpy and predictable monthly transfers, surprisingly, they find that the former group have lower cortisol levels (no difference in self-reported measures). However, they do find large positive impacts of larger transfers on women's empowerment (a scale comprised of gender-based violence measures, including attitudes).

In addition, how benefits are delivered and collected can have important implications for women. As previously discussed, women in Niger who received cash transfers via mobile money (versus manual payments) spent their transfers on a more diverse set of goods and better-quality foods (leading to improved diets- quality and frequency) with no offsetting negative effects on households' asset holdings. Women receiving the electronic transfer traveled shorter distances, spent less time traveling and were more likely to cultivate cash crops usually grown by women. Impacts on proxies for women's status,

including if she visited the market in the past week, or was involved in selling grain for the household also increased. Electronic transfers were less observable, which allowed women to conceal funds from others for a short period and retain control. The beneficial effects on diets persisted six months after the program (when all the cash was gone). A maternity benefit program implemented by a micro-health insurance organization in rural Kenya, provided maternity vouchers to be used at health facilities, which would cover the cost of antenatal, delivery, postnatal visits and a small premium to cover the administrative costs to adopting such vouchers (Grépin, Habyarimana, and Jack 2019).⁹ Some women in the program received “full vouchers” which required them to make no payments at all, while others received “copay vouchers” which required them to make small copayments. Additionally, some women were selected to receive text messages via SMS reminding them of their antenatal and postnatal visits and encouraging health facility delivery. Full vouchers increased institutional deliveries significantly, whereas the copay vouchers and the SMS treatment had no significant impact on institutional deliveries. Overall, promising but scarce evidence in on payment and transfer mechanisms suggests room for innovative research in this area.

4.4 Integrated designs and plus components

Despite the potential of integrated programming, current evaluations tend to evaluate SSNs as a bundle, and thus tell us about impacts as an aggregate, rather than assessing the specific added effect of a plus component or service linkage. For example, among the programs included in this evidence review, government programs in Mali and Ghana have additional plus components (training sessions on a variety of health and wellbeing topics in Mali and health insurance waivers in Ghana), yet evaluations are not able to assess the differential impacts of these components (Heath, Hidrobo, and Roy 2018; Peterman et al. 2018). To our knowledge, only three evaluations are publicly available at the time of writing which assesses differential effects of plus components. One is a study that examined the impacts of a UCT with

⁹ This program also provided UCTs and CCTs, however, does not investigate the relative benefits of cash versus vouchers. Therefore, we restrict the discussion here to the results on the vouchers treatment.

measures to support livelihoods, which added an experimental behavior change communication (BCC) component focused on parenting and early child development (ECD) implemented by the Government of Niger (*Projet Filets Sociaux*). The evaluation found that after two years, there were positive impacts attributed to cash alone (which included exclusive breastfeeding, children's food security, and lower reliance on harsh discipline, amongst others), however, few additional impacts due to the parenting component (Barry et al. 2017). In addition, a UCT plus livelihoods program in Lesotho generally found larger impacts of the combined programming, including on poverty and consumption, agricultural inputs and assets, child nutrition and on women's dietary diversity (as reported in Table 1) (FAO and UNICEF 2018). Finally, cash plus agricultural extension and management advice experiments in Malawi and Senegal (included in this review) generally showed that combined treatments led to increased female decision-making in Malawi, but not in Senegal (Ambler et al. 2019). Despite very limited evidence, there are several ongoing or completed studies with forthcoming evaluations that directly speak to these design considerations, including in progress evaluations in Mozambique (cash plus child protection case management), Ethiopia (PWP and UCT with variable plus components including nutrition BCC, business grant development, aspirations and action around social norms), and forthcoming studies in Madagascar (cash plus family budgeting), Kenya (cash plus aspirational messaging) and Nigeria (cash plus asset transfers and economic strengthening). These new-generation studies will be able to inform questions on whether plus components both have added and synergistic impacts in comparison to SSNs alone—both for women's outcomes as well as for households in general.

5. Research and Policy implications

Despite high-level commitments made by African members states and global stakeholders to advancing gender equity through SSNs, and the important role of this shared objective, there remain significant evidence gaps in understanding what this means in practice. The volume of research conducted in Africa has increased exponentially over the last several years. Of the research summarized here regarding

impacts on women (including published and working papers), only five studies were released before 2016 (one from 2009, two from 2013, and one each from 2014, and 2015). This means that until recently, a review reflecting the realities and priorities of SSNs on the African continent was not possible. We show there is substantial evidence that in many instances SSNs decrease IPV (particularly physical violence) and increase psychological wellbeing for women, increasing life satisfaction and decreasing stress. In addition, there is moderate evidence that SSNs increase dietary diversity, as well as economic standing for women (including savings, expenditures and asset ownership), however, changes in labor force participation tend to be modest. We find minimal evidence the SSNs improve food security and nutrition, however, there are few studies that measure these outcomes for women. Finally, a substantial body of evidence reports on the impact of SSNs on women's empowerment and intra-household bargaining power, however, with weak and mixed results. This domain is dominated by measures of intra-household bargaining, which have weaknesses in measurement and analysis. Notably, there are few studies suggesting that SSNs are adversely affecting women across the domains we examine. This implies that even across the gender-sensitivity continuum, the risk of doing harm is low—at least within samples of beneficiary women.

Providing a region-specific understanding of SSN impacts on women, rather than households in general, is important for a number of reasons. First, although there is now a large body of evidence showing impacts of SSNs at the household level—our findings suggest that in many cases, our knowledge of impacts at the individual level is lacking, and the requisite data are not necessarily collected or analyzed automatically. Second, few of the studies included in this review are able to disentangle design components in relation to impacts on women or gender-gaps. Therefore, we know very little about how programs can be modified in terms of design or operation to move towards gender-transformative approaches. Third, analysis shows that conclusions from global evidence reviews do not necessarily translate to Africa-specific findings. For example, Bastagli and colleagues (2016) conclude there is strong evidence on women's empowerment, and women's decision-making specifically, while we find relatively weak evidence for changes in decision-making in Africa. Finally, several evaluations highlight unique

regional demographic features, including targeting and impacts of individuals in polygamous partnerships, which has critical implications for women's outcomes. These features highlight the need for a regional body of evidence for women, rather than relying on household-level or global lessons. Although few studies were designed to specifically address shock-responsiveness or fragility, this is another area where there is an evidence gap, and room for regional-specific learning.

A notable gap in the evidence presented here is the diversity of program typologies studied. In all but two cases (CfW and PWP), programs consisted of cash transfers (of varying designs, with and without additional components), therefore we know little about how non-cash modalities affect women. For example, we found no evaluations of in-kind transfers alone or of school feeding programs however, we acknowledge that the latter primarily focus on school-age children and rarely measure individual-level outcomes for adults. There are also other program typologies which are not strictly SSNs, for example, graduation or livelihood programs may add to researchers' understanding of how economic programs work for women. NGOs including BRAC and Concern Worldwide are implementing bundled programming, in a diverse set of countries, which incorporate both cash and asset transfers, alongside training, coaching and access to financial instruments.

There are a number of limitations worth mentioning. Although we summarized available evidence across domains for adult women, we do not summarize research which focuses exclusively on outcomes for children, including adolescent girls. A full review of gender impacts would consider the entire life-cycle as outcomes and experiences early in life have long-lasting effects for future wellbeing. Although adolescent populations are extremely relevant for Africa, given the increasing numbers of children and youth ('the youth bulge')—this evidence is being summarized elsewhere, thus we do not cover it explicitly here. In addition, a true gender-analysis of outcomes would give comparative impacts for men and women across the same outcomes for the same studies. However, due to lack of data for the evaluations included in this review, we are unable to examine true 'gender disaggregated' impacts. We do not consider qualitative work in our review, although qualitative methodologies are needed to capture a holistic understanding of women's lived experiences. In addition, while we report all indicators directly

from reviewed papers, a minority of sources explicitly control for the multiple hypothesis testing. A more sophisticated aggregation methodology, for example, meta-analysis would account for magnitude of effects, or weighting to account for multiple rounds of impacts in studies across time. Finally, although we include grey literature, it is likely that the measures reported suffer in part from publication (analysis) bias.

To move from promise to successful implementation of gender-transformative SSNs in Africa, we must invest in evidence generation. First, we lack basic information about the coverage and targeting of SSNs by sex in Africa, which to the best of our knowledge remains unknown, and has implication for the significance of research gaps.¹⁰ Second, future research should be able to not only demonstrate impacts on women’s wellbeing—but also to inform mechanisms related to design features and how they may differ by underlying gender inequalities in a given setting. Quantitative research able to inform design decisions will be maximized by randomized variation, including programming able to identify unbundled contribution of components, in addition to synergistic contributions on women’s and men’s wellbeing. It is likely that qualitative and political economy analysis will also play an important role in understanding both impacts as well as constraints to adoption of gender-transformative programming. Finally, in areas where measurement is weak, investments must be made in refining or applying better measures to leverage the full potential of research efforts. We welcome future regional research that has potential to contribute to this goal.

¹⁰ We sought to inform this gap by searching three well known databases with global coverage indicators for sex-disaggregated data on the number of beneficiaries: The World Bank Atlas of Social Protection: Indicators of Resilience and Equity (ASPIRE) database International Policy Centre for Inclusive Growth’s (IPC-IG) catalogue of non-contributory social protection in Africa and the International Labor Organization (ILO) Social Security Inquiry database Our search focused on cash transfers (conditional – CCTs and unconditional -- UCTs), vouchers or in-kind transfers, CfW or PWPs, and school feeding. Despite coverage by other key demographic indicators (e.g., age), there were no available indicators which allowed the computation of disaggregation by sex, representing a data gap. Although most programs did not report the number of beneficiaries by sex, many stated that they targeted and/or prioritized women or assigned quotas for women or female-headed households. For example, in the IPC-IG’s catalogue, 12 programs (approximately 9%) had “women or girls” as their primary target category. Thus, to the best of our knowledge, although often assumed to be the case, we are unable to say with certainty if women are targeted at increased rates (as compared to men) or if there is equitable coverage more generally for women and men in Africa.

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TABLES

Table 1. Review of SSN impacts on women's food security and nutrition in Africa

No	Authors	Program details				Evaluation details		Program impacts			
		Country: Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	Breisinger et al. (2018)†	Egypt: Takaful (Govt)	UCT ¹	Monthly: EGP 325 w/ additional by number of children & education level	Primarily women in poor HHs w/children <18 years	RDD [5,738 women]	2017	Body mass index (BMI)	28.367 [#]	OLS: 0.565 (0.506)	No additional analysis conducted.
								Overweight (25 < BMI < 30)	0.407 [#]	OLS: 0.000 (0.045)	
								Obese (BMI > 30)	0.324 [#]	OLS: 0.010 (0.043)	
								Dietary diversity score (range 0-9)	4.104 [#]	OLS: -0.070 (0.120)	
2	FAO and UNICEF (2018)†	Lesotho: Child grant program (CGP) + SPRINGS (Govt)	UCT plus	Quarterly payments of 360-750 LSL variable by number of children. Approx. 19.5% of BL consumption. Plus component: SPRINGS, a community development package consisting of: a) savings & loan groups, b) homestead gardens, c) market clubs, d) nutrition BCC & d) one stop shops (outreach groups).	Poor & vulnerable HHs with children <18 years	PSM [2,011 women]	2017-2018	Women's dietary diversity score (cash)	5.592	OLS: 0.556 (0.365)	No additional analysis conducted.
								Women's dietary diversity score (cash plus)	5.592	OLS: 1.123 (0.343)***	
								Woman consumed starchy staples (cash)	0.902	OLS: -0.019 (0.035)	
								Woman consumed starchy staples (cash plus)	0.902	OLS: 0.007 (0.043)	
								Woman consumed dark green leafy vegetables (cash)	0.586	OLS: 0.134 (0.059)**	
								Woman consumed dark green leafy vegetables (cash plus)	0.586	OLS: 0.273 (0.063)***	
								Woman consumed vitamin A rich fruits & vegetables (cash)	0.616	OLS: 0.12 (0.059)**	
								Woman consumed vitamin A rich fruits & vegetables (cash plus)	0.616	OLS: 0.247 (0.058)***	
								Woman consumed other fruits & vegetables (cash)	0.722	OLS: 0.028 (0.053)	
								Woman consumed other fruits & vegetables (cash plus)	0.722	OLS: 0.041 (0.057)	
								Woman consumed organ meat	0.418	OLS: 0.201 (0.057)***	
								Woman consumed organ meat (cash plus)	0.418	OLS: 0.197 (0.056)***	
								Woman consumed meat & fish (cash)	0.639	OLS: 0.036 (0.064)	
								Woman consumed meat & fish (cash plus)	0.639	OLS: 0.068 (0.058)	
								Woman consumed eggs (cash)	0.532	OLS: -0.035 (0.071)	
								Woman consumed eggs (cash plus)	0.532	OLS: 0.031 (0.067)	
								Woman consumed legumes, nuts & seeds (cash)	0.644	OLS: 0.064 (0.065)	

No	Authors	Program details				Evaluation details		Program impacts											
		Country: Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms								
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)							
3	Baird, McIntosh, and Ozler (2019)*	Malawi: Zomba cash transfer program (NGO)	UCT vs. CCT	Young women: USD 1, 2, 3, 4 or 5 (lottery) Guardians: USD 4, 6, 7, or 10 (RS) Approx. 10% of BL HH expenditure; conditional on school attendance	Never married young women age 13-22 & guardians	RCT [2,049 young women 18-27]	2007, 2012	Woman consumed legumes, nuts & seeds (cash plus)	0.644	OLS: 0.124 (0.056)**									
								Woman consumed milk & milk products (cash)	0.533	OLS: 0.028 (0.071)									
								Woman consumed milk & milk products (cash plus)	0.533	OLS: 0.135 (0.065)**									
								Times ate protein rich food (CCT, BL dropouts, during, 7-day)	3.678	OLS: 0.326 (0.202)									
								Times ate protein rich food (CCT, BL dropouts, end, 7-day)	3.989	OLS: 0.224 (0.192)									
								Times ate protein rich food (CCT, BL dropouts, 2-years post, 7-day)	3.741	OLS: 0.228 (0.181)									
								Times ate protein rich food (CCT, BL schoolgirls, during, 7-day)	3.967	OLS: 0.385 (0.195)***									
								Times ate protein rich food (CCT, BL schoolgirls, end, 7-day)	4.052	OLS: 0.596 (0.174)***									
								Times ate protein rich food (CCT, BL schoolgirls, 2-years post, 7-day)	4.134	OLS: 0.072 (0.141)									
								Times ate protein rich food (UCT, BL schoolgirls, during, 7-day)	3.967	OLS: 0.445 (0.199)***									
								Times ate protein rich food (UCT, BL schoolgirls, after, 7-day)	4.052	OLS: 0.338 (0.153)**									
								Times ate protein rich food (UCT, BL schoolgirls, 2-years post, 7-day)	4.134	OLS: -0.043 (0.240)									
								Anemic (CCT, BL dropouts, 2-years post)	0.255	OLS: 0.039 (0.035)									
								Anemic (CCT, BL schoolgirls, 2-years post)	0.243	OLS: 0.012 (0.031)									
								Anemic (UCT, BL schoolgirls, 2-years post)	0.243	OLS: -0.065 (0.033)*									
								4	Carneiro et al. (2019)†	Nigeria: Child Development Grant Program (NGO)	UCT plus	Monthly transfer of 3,500 Naira & low intensity vs. high intensity nutrition BCC	Pregnant woman & women with a child < 2 years	RCT [4,239 HHs]	2014, 2018	Weight (HHs with a pregnant woman at BL)	50.1	OLS: -0.36 (0.21)*	
																Weight (HHs without a pregnant woman at BL)	49.6	OLS: -0.04 (0.33)	
																Height (HHs with a pregnant woman at BL)	156.9	OLS: 0.02 (0.11)	
																Height (HHs without a pregnant woman at BL)	156.3	OLS: 0.03 (0.19)	
BMI (HHs with a pregnant woman at BL)	20.6	OLS: -0.15 (0.09)*																	
BMI (HHs without a pregnant woman at BL)	20.3	OLS: 0.00 (0.11)																	
Percent thin (BMI < 18, HH with a pregnant woman at BL)	22.9	OLS: 4.97 (1.81)***																	
Percent thin (BMI < 18, HH without a pregnant woman at BL)	28.9	OLS: -2.83 (2.36)																	
Percent normal (18 < BMI < 25, HH with a	69.7	OLS: -5.79 (1.96)***																	

No	Authors	Program details				Evaluation details		Program impacts			
		Country: Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
								pregnant woman at BL)			
								Percent normal (18 < BMI < 25, HH without a pregnant woman at BL)	65.0	OLS: 1.65 (2.48)	
								Percent overweight (BMI > 25, HH with a pregnant woman at BL)	7.4	OLS: 0.97 (1.02)	
								Percent overweight (BMI > 25, HH without a pregnant woman at BL)	6.1	OLS: 1.12 (1.13)	
								Middle upper arm circumference (MUAC, HH with a pregnant woman at BL)	256.2	OLS: -0.27 (1.04)	
								MUAC (HH without a pregnant woman at BL)	251.5	OLS: 0.93 (1.29)	
								Percent malnourished (MUAC < 220, HH with a pregnant woman at BL)	6.9	OLS: 1.10 (1.10)	
								Percent malnourished (MUAC < 220, HH without a pregnant woman at BL)	9.2	OLS: -1.74 (1.80)	
								Percent malnourished (MUAC < 230, HH with a pregnant woman at BL)	14.5	OLS: 1.59 (1.59)	
								Percent malnourished (MUAC < 230, HH without a pregnant woman at BL)	18.6	OLS: -0.85 (2.33)	
5	Kilburn et al. (2019)*	South Africa: HIV Prevention Trials Network 068 (NGO)	CCT	Monthly: Young women ZAR100 (~US\$ 10), Parents: ZAR 200 (~US\$ 20). Approx. 15.7% of BL HH expenditure; conditional on school attendance	Never married or pregnant young women aged 13-20 attending grades 8-11	RCT [2,533 young women]	2012, 2015	Food worry (past 12 months)	0.357	OLS: -0.01 (0.01) ²	Despite no impacts overall, authors find reductions in food worry among female youth in poorer households (interaction term=0.07 (0.03)**), indicating that the poverty mechanism is stronger among those initially worst off financially.
6	McIntosh and Zeitlin (2018)†	Rwanda: Give Directly (NGO) vs. Gikuriro	UCT vs. plus	RS total amounts of US\$ 41, 84, 117 and 532 variable by HH size at RS lump-sum vs.	Poor HHs with pregnant or lactating mother, child(ren) under age 5, or malnourished	RCT [1,581 mothers]	2016, 2017	Anemia (cash transfer, overall)	0.12	OLS: -0.016 (0.028)	No differential effects for small lump-sum vs. monthly flow payments, however a reduction of -0.19
								Anemia (cash transfer, additional effect of each US\$ 100)	0.12	OLS: -0.00023 (0.00031)	

No	Authors	Program details				Evaluation details		Program impacts			
		Country: Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
				monthly payments, vs. Gikuriro program ³	child(ren)			Anemia (differential effect of Gikuriro)	0.12	OLS: -0.0075 (0.022)	(0.81)** for HHs given a choice between the two, suggesting autonomy over benefits results in gains.

Notes: * refers to peer-reviewed journal article; † refers to working paper or technical report; # denotes baseline full sample (rather than control mean); OLS is coefficient from ordinary least squares regression. Significance levels bolded if significant at the conventional level: * p<0.1, where additional levels being ** p<0.05; *** p<0.01 (reported as in the original article).

Abbreviations: BL = baseline; C = control or comparison group; CCT = conditional cash transfer; EGP = Egyptian pound; HH = household; LSL = Lesotho Loti; RDD = regression discontinuity design; RS = randomly selected; T = treatment or program group; UCT = unconditional cash transfer; ZAR = South African rand.

- 1 Takaful designed as a CCT, conditional on school attendance and health care utilization, however during the evaluation period (approximately two years of implementation), conditions had yet to be implemented. Impacts taken from RDD models, however authors present instrumental variable estimates which are largely consistent.
- 2 Impact coefficient reported in graphic form in publication, point estimate obtained via personal communication to author (January 2, 2019).
- 3 Gikuriro combines a nutrition program with a WASH (water, sanitation & hygiene) program, builds capacity of health infrastructure, including community health workers and builds livelihoods through: 1) village nutrition schools, 2) farmer field schools, 3) savings and lending communities, and 4) environmental health promotion program.

Table 2. Review of SSN impacts on women's economic standing and productivity in Africa

No	Authors	Program details				Evaluation details		Program impacts				
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1	Ghana LEAP 1000 Evaluation Team (2018)†	Ghana: Livelihoods Empowerment Against Poverty 1000 (Govt)	UCT plus	Bi-monthly variable transfer based on HH size, plus health insurance waiver for all HH members	Pregnant women or mothers w/ child <12 months in poor HHs	RDD [2,213 women & HH]	2015, 2017	Spent time on HH farming activity (female 15-49 years, last rainy season)	NR	OLS: 0.044 (2.12)**		Increases in farming & wage labor among females appear to be larger or offset in some cases by males of the same age group. Authors also analyze time use for household chores (e.g. water & firewood collection, taking care of children, cooking & cleaning) and find no significant impact on these related factors.
								Days spend on HH farming activity (female 15-49 years, last rainy season)	NR	OLS: -1.858 (-1.21)		
								Spent time on HH non-farm enterprise (female 15-49 years, last 7 days)	NR	OLS: 0.015 (1.23)		
								Hours spent on HH non-farm enterprise (female 15-49, last 7 days)	NR	OLS: 1.359 (0.060)		
								Spent time on HH livestock activity (female 15-49, last 7 days)	NR	OLS: 0.016 (1.03)		
								Hours spent on HH livestock activity (female 15-49, last 7 days)	NR	OLS: -1.254 (-1.40)		
								Spent time collecting nuts or fruits (female 15-49, last 7 days)	NR	OLS: -0.007 (-0.36)		
								Hours spent collecting nuts or fruits (females 15-49, last 7 days)	NR	OLS: -1.120 (-1.12)		
								Spent time on casual labor (females 15-49, last 7 days)	NR	OLS: 0.014 (0.82)		
								Hours spent on casual labor (females 15-49, last 7 days)	NR	OLS: -0.375 (-0.23)		
								Spent time on wage labor (females 15-49, last 7 days)	NR	OLS: 0.007 (0.38)		
								Hours spent on wage labor (females 15-49, last 7 days)	NR	OLS: 3.518 (2.27)**		
								Spent time on HH farming activity (female 60+ years, last rainy season)	NR	OLS: 0.065 (1.12)		
								Days spend on HH farming activity (female 60+ years, last rainy season)	NR	OLS: -1.172 (-0.28)		
								Spent time on HH non-farm enterprise (female 60+ years, last 7 days)	NR	OLS: 0.035 (1.75)*		
								Hours spent on HH non-farm enterprise (female 60+, last 7 days)	NR	OLS: 0.000 (NR)***		
								Spent time on HH livestock activity (female 60+, last 7 days)	NR	OLS: -0.37 (-1.79)*		
								Hours spent on HH livestock activity (female 60+, last 7 days)	NR	OLS: 1.521 (1.54)		
								Spent time collecting nuts or fruits (female 60+, last 7 days)	NR	OLS: 0.014 (0.38)		
								Hours spent collecting nuts or fruits (females 60+, last 7 days)	NR	OLS: -3.386 (-0.74)		
								Spent time on casual labor (females 60+, last 7 days)	NR	OLS: 0.020 (1.39)		
								Hours spent on casual labor (females 60+, last 7 days)	NR	OLS: 0.000 (NR)***		

Increases in farming & wage labor among females appear to be larger or offset in some cases by males of the same age group. Authors also analyze time use for household chores (e.g. water & firewood collection, taking care of children, cooking & cleaning) and find no significant impact on these related factors.

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
								Spent time on wage labor (females 60+, last 7 days)	NR	OLS: 0.005 (0.51)	
								Hours spent on wage labor (females 60+, last 7 days)	NR	OLS: 0.000 (NR)***	
								Saving any money (last month)	0.271	OLS: 0.120 (0.02)***	
								Amount of money saved (last month,)	6.181	OLS: 5.958 (1.56)***	
2	Gilligan et al. (2009)*	Ethiopia: Productive Safety Net Program (Govt)	PW plus	PW: 6 birr per day; Plus: OFSP, access to improved seeds, irrigation, water harvesting schemes, credit, livestock transfer & extension services	PW: Chronically insecure HHs; OFSP: HHs able to participate in agricultural income generating activities	PSM [women age 18+ in 1,758 HHs]	2006	Any wage employment (PW, last year)	0.079	OLS: -0.001 (0.042)	
								Any entry into wage employment (PW, past 2 years)	0.024	OLS: -0.006 (0.913)	
								Any wage employment (PW > 90 birr per capita, last year)	0.221	OLS: -0.053 (0.549)	
								Any entry into wage employment (PW > 90 birr per capita, past 2 years)	0.018	OLS: 0.002 (0.175)	
								Any wage employment (PW + OFSP, last year)	0.076	OLS: 0.013 (0.587)	
								Any entry into wage employment (PW + OFSP, past 2 years)	0.015	OLS: 0.009 (0.883)	
3	Asfaw et al. (2014)*	Kenya: Cash Transfer for Orphans & Vulnerable Children (Govt)	UCT	Bi-monthly transfers of 3000 KES (~\$40 USD). Approx. 20% of BL HH expenditure	Caregivers of orphans or vulnerable children in poor HHs	RCT [1,743 women aged 18+]	2007, 2011	Wage labor participation	NR	OLS: 0.017 (NR)	
								Days per year in wage labor (last month)	NR	OLS: -13.912 (NR)	
								Works in own agriculture	0.56 [#]	OLS: 0.007 (NR)	
								Days per year in own agriculture (last month)	7.29 [#]	OLS: 0.406 (NR)	
4	Clark et al. (2019)*	Kenya: Daycare Voucher Program (NGO)	Voucher plus	Monthly vouchers covering daycare costs. Plus: Daycare center quality improvements, including training for caregivers & materials.	Mothers of children aged 1-3 not using eligible daycare facilities	RCT [738 women]	2015, 2016	Employed (engaged in at least one income-generating activity, last 3 months)	0.58	OLS: 0.085 (0.040)**	
								Number of hours worked per week (average)	41.64	OLS: 1.28 (2.20)	
								Monthly income (KES)	4823.23	OLS: 619 (271)**	
5	Daidone et al. (2014)†	Lesotho: Child Grant Program (Govt)	UCT	Monthly transfer of LSL 120 (USD 12).	Poor & vulnerable HHs with children <18	RCT [3,063 women obs aged	2011, 2013	Any labor activity (women 18-59, last 12 months)	0.618 [#]	OLS: 0.079 (1.76)*	
								Any labor activity (women 60+, last 12 months)	0.697 [#]	OLS: 0.004 (0.07)	
										Estimates reported from ITT unadjusted modes. TOT estimates also analyzed, showing larger impacts. Heterogeneity analysis by marital status shows unmarried women reduced number of hours worked per week in response to treatment.	
										Whereas impacts overall tended to be positive for adult women, paid work	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
				Approx. 16.7% of BL expenditure.	years old	18-59; 838 women obs aged 60+]		Work on own non-farm business (women 18-59, last 12 months)	0.116 [#]	OLS: -0.015 (-0.49)	outside the household & hours worked decreased. Impacts also varied by whether or not HHs were labor constrained--with larger (more significant) impacts among labor constrained.
							Work on own non-farm business (women 60+, last 12 months)	0.142[#]	OLS: -0.103 (-2.20)**		
							Work in own agricultural activities (women 18-59, last 12 months)	0.479 [#]	OLS: 0.067 (1.43)		
							Work in own agricultural activities (women 60+, last 12 months)	0.649[#]	OLS: 0.107 (1.65)*		
							Paid work outside the HH (women 18-59, last 12 months)	0.327 [#]	OLS: -0.03 (-0.72)		
							Paid work outside the HH (women 60+, last 12 months)	0.235 [#]	OLS: -0.004 (-0.06)		
							Any labor activity (women 18-59, last week)	0.454 [#]	OLS: -0.027 (-0.56)		
							Any labor activity (women 60+, last week)	0.469 [#]	OLS: 0.032 (0.41)		
							Work on own non-farm business (women 18-59, last week)	0.054 [#]	OLS: 0.003 (0.20)		
							Work on own non-farm business (women 60+, last week)	0.066 [#]	OLS: -0.034 (-0.85)		
							Work in own agricultural activities (women 18-59, last week)	0.195 [#]	OLS: -0.036 (-0.86)		
							Work in own agricultural activities (women 60+, last week)	0.314[#]	OLS: 0.141 (1.72)*		
							Paid work outside the HH (women 18-59, last week)	0.317 [#]	OLS: -0.32 (-0.94)		
							Paid work outside the HH (women 60+, last week)	0.233 [#]	OLS: -0.066 (-1.06)		
							Hours worked any labor activity (women 18-59, last week)	0.092 [#]	OLS: -2.1 (-1.33)		
							Hours worked any labor activity (women 60+, last week)	0.100 [#]	OLS: -0.70 (-0.24)		
							Hours worked in own non-farm business (women 18-59, last week)	0.016 [#]	OLS: -0.40 (-0.60)		
							Hours worked on own non-farm business (women 60+, last week)	0.020[#]	OLS: -2.5 (-1.70)*		
							Hours worked in own agricultural activities (women 18-59, last week)	0.039 [#]	OLS: -0.5 (-0.46)		
							Hours worked in own agricultural activities (women 60+, last week)	0.052[#]	OLS: 3.6 (1.98)**		
							Hours worked in paid work outside the HH (women 18-59, last week)	0.038 [#]	OLS: -1.2 (-1.07)		
							Hours worked in paid work outside the HH (women 60+, last week)	0.029 [#]	OLS: -1.9 (-0.93)		
6	Baird, McIntosh	Malawi: Zomba cash	UCT vs. CCT	Young women: USD	Never married	RCT [2,049	2007, 2012	Typical wage (CCT, BL dropouts, last 3 months)	0.375	OLS: -0.140 (0.068)**	Authors examine impacts 2 years post

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
	and Ozler (2019)*	transfer program (NGO)		1, 2, 3, 4 or 5 (lottery) Guardians: USD 4, 6, 7, or 10 (RS) Approx. 10% of BL HH expenditure; conditional on school attendance	young women age 13-22 & guardians	young women 18-27]		Typical wage (CCT, BL schoolgirl, last 3 months)	0.212	OLS: -0.011 (0.058)	intervention. Overall wage work in the sample is low. Authors also analyze 'opportunity cost of time' which is the hypothetical minimum daily wage the respondent would take for one year of work in her village (no effects). There are similar null effects on HH accumulation of savings, HH & productive assets.
							Typical wage (UCT, BL schoolgirl, last 3 months)	0.212	OLS: 0.036 (0.104)		
							Proportion hours spent in self-employment or paid work (CCT, BL dropouts, last week)	0.061	OLS: -0.011 (0.009)		
							Proportion hours spent in self-employment or paid work (CCT, BL schoolgirl, last week)	0.029	OLS: 0.003 (0.005)		
							Proportion hours spent in self-employment or paid work (UCT, BL schoolgirls, last week)	0.029	OLS: 0.002 (0.008)		
							Effective daily wage (CCT, BL dropout, past 7 days)	0.753	OLS: -0.228 (0.148)		
							Effective daily wage (CCT, BL schoolgirl, past 7 days)	0.902	OLS: 0.121 (0.424)		
							Effective daily wage (UCT, BL schoolgirl, past 7 days)	0.902	OLS: -0.549 (0.285)*		
							Labor income (CCT, BL dropout, past 5 seasons)	52.840	OLS: 4.129 (8.620)		
							Labor income (CCT, BL schoolgirl, past 5 seasons)	33.302	OLS: 7.476 (7.466)		
							Labor income (UCT, BL schoolgirl, past 5 seasons)	33.302	OLS: 10.688 (12.721)		
							Any wage work (CCT, BL dropout, past 3 months)	0.366	OLS: -0.020 (0.037)		
							Any wage work (CCT, BL schoolgirl, past 3 months)	0.250	OLS: -0.010 (0.030)		
							Any wage work (UCT, BL schoolgirl, past 3 months)	0.250	OLS: 0.001 (0.055)		
7	Malawi Cash Transfer Evaluation Team (2016b)†	Malawi: Malawi Social Cash Transfer Program (Govt)	UCT	Bi-monthly variable transfer based on HH size. Approx. 18% of BL HH expenditure	HH heads in labor-constrained poor HHs	RCT [3,531 HHs]	2013, 2015	Own farm activities (adult females, days in past season) ¹	NR	OLS: 4.555 (1.05)	Analysis for males show similar patters with decreases in casual/ganyu labor, however are accompanied by increases in other work outside the HH. HHs also showed impacts on hired farm labor, suggesting the elderly demographic was able to substitute out of own labor.
							Fishing (adult females, days in last 7 days)	NR	OLS: -0.002 (-0.12)		
							Non-farm enterprise (adult females, hours in last 7 days)	NR	OLS: 0.236 (0.29)		
							Livestock activities (adult females, hours in last 7 days)	NR	OLS: 0.245 (1.04)		
							Casual, part time activities (adult females, hours in last 7 days)	NR	OLS: -1.206 (-1.54)		
							Ganyu work (adult females, months in last 12 months)	NR	OLS: -1.324 (-1.94)*		
							Work outside HH excluding ganyu (adult females, hours in last 7 days)	NR	OLS: 0.300 (0.99)		
8	Bastian et al. (2019)†	Nigeria: Feed the Future	UCT	75,000 Nigerian Naira	Women in ultra-poor	RCT [2,539	2015, 2016,	No work in income generating activity (during, monthly, past 30 days)	0.330	OLS: -0.0895 (0.0241)***	Authors examine impacts "during"

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
	Nigeria Livelihoods Project (NGO)			(~USD 693) randomized to 15 monthly or 5 quarterly payments	HHs	HH]	2017, 2018	No work in income generating activity (during, quarterly, past 30 days)	0.330	OLS: -0.0861 (0.0359)***	intervention, "immediately" after & in the "short-term" (just over one year after transfers end). There are no significant differences in impacts by baseline female decision-making power or household headship (female vs. male).
								No work in income generating activity (immediate, monthly, past 30 days)	0.542	OLS: -0.156 (0.0377)***	
								No work in income generating activity (immediate, quarterly, past 30 days)	0.542	OLS: -0.137 (0.0283)***	
								No work in income generating activity (short-term, monthly, past 30 days)	0.326	OLS: -0.0696 (0.0258)***	
								No work in income generating activity (short-term, quarterly, past 30 days)	0.326	OLS: -0.0402 (0.0251)	
								Participated in farming activity (during, monthly, past 30 days)	0.493	OLS: -0.00354 (0.0321)	
								Participated in farming activity (during, quarterly, past 30 days)	0.493	OLS: -0.00210 (0.0319)	
								Participated in farming activity (immediate, monthly, past 30 days)	0.293	OLS: 0.0707 (0.0347)**	
								Participated in farming activity (immediate, quarterly, past 30 days)	0.293	OLS: 0.0474 (0.0267)*	
								Participated in farming activity (short-term, monthly, past 30 days)	0.369	OLS: -0.00348 (0.0202)	
								Participated in farming activity (short-term, quarterly, past 30 days)	0.369	OLS: -0.008664 (0.0284)	
								Participated in non-farm enterprise activity (during, monthly, past 30 days)	0.205	OLS: 0.0986 (0.0283)***	
								Participated in non-farm enterprise activity (during, quarterly, past 30 days)	0.205	OLS: 0.0479 (0.0288)	
								Participated in non-farm enterprise activity (immediate, monthly, past 30 days)	0.201	OLS: 0.102 (0.0290)***	
								Participated in non-farm enterprise activity (immediate, quarterly, past 30 days)	0.201	OLS: 0.124 (0.0282)***	
								Participated in non-farm enterprise activity (short-term, monthly, past 30 days)	0.359	OLS: 0.0693 (0.0298)**	
								Participated in non-farm enterprise activity (short-term, quarterly, past 30 days)	0.359	OLS: 0.0560 (0.0326)*	
								Average monthly profit from non-farm business (immediate, monthly, Naira)	334.2	OLS: 190.0 (98.42)*	
								Average monthly profit from non-farm business (immediate, quarterly, Naira)	334.2	OLS: 345.5 (114.3)***	
								Average monthly profit from non-farm business (short-term, monthly, Naira)	910	OLS: 280.2 (170.8)	
								Average monthly profit from non-farm business (short-term, quarterly, Naira)	910	OLS: -87.92 (147.0)	
								Raw material purchased for non-farm business (immediate, monthly, past 30 days, Naira)	746.8	OLS: 677.4 (255.7)***	

No	Authors	Program details				Evaluation details		Program impacts				
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
9	Carneiro et al. (2019)†	Nigeria: Child Development Grant Program (NGO)	UCT plus	Monthly transfer of 3,500 Naira & low intensity vs. high intensity nutrition BCC	Pregnant woman & women with a child < 2 years	RCT [4,239 HHs]	2014, 2016, 2018	Raw material purchased for non-farm business (immediate, quarterly, past 30 days, Naira)	746.8	OLS: 1088.2 (307.1)***		
								Raw material purchased for non-farm business (short-term, monthly, past 30 days, Naira)	1567.0	OLS: 51.63 (192.1)		
								Raw material purchased for non-farm business (short-term, quarterly, past 30 days, Naira)	1567.0	OLS: -28.67 (233.1)		
								Percent with any paid or unpaid work (midline, 12 months)	76.6	OLS: 6.19 (1.88)***		
								Percent with any paid or unpaid work (endline, 12 months)	80.7	OLS: 10.76 (1.57)***		
								Total monthly earnings from paid labor (Naira, endline)	826.3	OLS: 140.22 (237.79)		
								Monthly revenue from business activities (Naira, endline)	8094.8	OLS: 2958.65 (961.61)***		
								Monthly expenditure for business inputs (Naira, endline)	7723.9	OLS: 3606.57 (912.88)***		
								Monthly business profit (Naira, endline)	268.3	OLS: -154.93 (140.22)		
								Percent worked for someone outside household (midline)	3.9	OLS: -0.86 (0.81)		
								Percent worked for someone outside household (endline)	4.6	OLS: -1.68 (0.89)*		
								Number of occupations (midline)	1.2	OLS: 0.08 (0.05)*		
								Number of occupations (endline)	1.2	OLS: 0.24 (0.04)***		
								Percent have more than one occupation (midline)	34.6	OLS: 3.02 (2.91)		
								Percent have more than one occupation (endline)	36.4	OLS: 11.81 (2.59)***		
								Days per week worked at highest paying activity (midline)	4.4	OLS: -0.10 (0.16)		
								Days per week worked at highest paying activity (endline)	3.9	OLS: -0.27 (0.43)		
								Weeks per year worked at highest paying activity (midline)	36.9	OLS: -0.26 (0.87)		
								Weeks per year worked at highest paying activity (endline)	32.8	OLS: 0.62 (3.08)		
								Days per week worked at activity worked most often (midline)	5.7	OLS: 0.02 (0.14)		
								Days per week worked at activity worked most often (endline)	5.7	OLS: 0.10 (0.12)		
								Weeks per year worked at activity worked most often (midline)	42.2	OLS: 0.40 (0.84)		

Impacts reported for combined treatment (low & high intensity BCC combined), however earlier midline findings show few differences on labor force indicators between arms (livestock ownership not analyzed by BCC intensity). Analysis shows women increasing work in petty trade, artisan, production of products from own livestock & own farm work. Analysis for males shows few significant effects, limited to positive impacts on monthly business profit at endline & reduction in weeks per year worked in highest paying activity at midline. Male livestock ownership not analyzed.

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		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
								Weeks per year worked at activity worked most often (endline)	43.3	OLS: 0.85 (0.64)	
								Percent cultivating any land (midline, past 12 months)	5.0	OLS: 0.51 (1.09)	
								Percent cultivating any land (endline, past 12 months)	1.7	OLS: 1.37 (0.73)*	
								Crop sales (naira, midline, past 12 months)	154.6	OLS: 302.55 (126.81)**	
								Crop sales (naira, endline, past 12 months)	106.2	OLS: 806.03 (461.59)*	
								Percent owning any animal (midline)	78.3	OLS: 5.94 (2.00)***	
								Percent owning any animal (endline)	78.2	OLS: 11.60 (2.15)***	
								Percent owning any cow or bull (midline)	4.4	OLS: -0.04 (0.90)	
								Percent owning any cow or bull (endline)	6.4	OLS: 1.21 (1.32)	
								Percent owning any calf (midline)	3.1	OLS: 0.93 (0.81)	
								Percent owning any calf (endline)	4.4	OLS: 1.66 (1.04)	
								Percent owning any sheep (midline)	33.1	OLS: 1.16 (2.29)	
								Percent owning any sheep (endline)	33.9	OLS: 7.16 (2.30)***	
								Percent owning any goat (midline)	56.9	OLS: 6.42 (2.64)**	
								Percent owning any goat (endline)	54.5	OLS: 13.99 (2.68)***	
								Percent owning any camel (midline)	0.0	OLS: 0.09 (0.07)	
								Percent owning any camel (endline)	0.2	OLS: 0.45 (0.24)*	
								Percent owning any donkey, mule or horse (midline)	38.8	OLS: 6.55 (2.43)***	
								Percent owning any donkey, mule or horse (endline)	49.2	OLS: 8.83 (2.75)***	
								Percent owning any chicken (midline)	4.9	OLS: -0.12 (0.82)	
								Percent owning any chicken (endline)	5.6	OLS: 1.09 (1.16)	
								Percent owning any guinea fowl (midline)	0.3	OLS: -0.26 (0.17)	
								Percent owning any guinea fowl (endline)	0.1	OLS: 0.43 (0.21)**	
								Number of cows or bulls owned (midline)	0.1	OLS: -0.01 (0.03)	
								Number of cows or bulls owned (endline)	0.2	OLS: 0.02 (0.04)	
								Number of calves owned (midline)	0.1	OLS: -0.03 (0.04)	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
								Number of calves owned (endline)	0.1	OLS: 0.04 (0.02)*	
								Number of sheep owned (midline)	0.8	OLS: -0.00 (0.07)	
								Number of sheep owned (endline)	0.8	OLS 0.19 (0.07)***	
								Number of goats owned (midline)	1.5	OLS: 0.12 (0.09)	
								Number of goats owned (endline)	1.4	OLS: 0.43 (0.10)***	
								Number of camels owned (midline)	0.0	OLS: 0.00 (0.00)	
								Number of camels owned (endline)	0.0	OLS: 0.01 (0.01)	
								Number of donkeys, mules or horses owned (midline)	0.0	OLS: -0.00 (0.00)	
								Number of donkeys, mules or horses owned (endline)	0.0	OLS: 0.01 (0.01)	
10	Rosas and Sabarwal (2016)†	Sierra Leone: Youth Employment Support Project with CfW (Govt)	CfW plus	Employment for 50-75 days at a daily wage of Le 7,500 [2012 USD 1.80]	Individuals 15-35 years in poor and vulnerable communities	RT [5,506 T HHs]	2012	Labor force participation (women HH members with paid work in previous 12 months)	0.35	OLS: 0.110 (0.014)**	Program had & met a 30% quota for women beneficiaries; the average share of women beneficiaries was 33%
								Paid work (Non-program participating women in previous 12 months)	0.28	OLS: 0.040 (0.014)**	
11	Kilburn et al. (2018)*	South Africa: HIV Prevention Trials Network 068 (NGO)	CCT	Monthly: Young women ZAR100 (~US\$ 10), Parents: ZAR 200 (~US\$ 20). Approx. 15.7% of BL HH expenditure	Never married or pregnant young women aged 13-20 attending grades 8-11	RCT [2,533 young women]	2012, 2015	Overall economic wellbeing index (four indicators)	NR	OLS: 0.03 (0.01)***	CCT also increased HH per capita total & food expenditures. Impacts on economic outcomes varied by baseline poverty: For poorer women at baseline, impacts on paid work were smaller & on never borrowing were larger.
								Engaged in paid work	17.1	OLS: 0.15 (0.03)***	
								Had any savings	25.2	OLS: 0.07 (0.02)***	
								Always had spending money (last 12 months)	11.0	OLS: 0.04 (0.01)***	
								Never borrowed outside the household 'to get by' (last 12 months)	21.5	OLS: 0.03 (0.01)**	
12	PSSN Youth Evaluation Team (2018) †	Tanzania: Productive Social Safety Net (PSSN, Govt)	UCT + CCT + PWP plus	Monthly fixed UCT of 10,000 TZS (~USD 5) + variable transfer by HH composition + PWP wage of TZS 2,300 per day (~USD 1)	Primarily female heads in poor HHs	RCT [885 young women aged 14-28 years]	2015, 2017	Any economic activities (last 12 months)	0.652	OLS: 0.037 (1.097)	PSSN increased ownership of livestock in the HH, thus associated increase in youth engagement. Analysis of male youth labor outcomes showed similar impacts to females.
								Farm work for the HH (excluding livestock, last 12 months)	0.559	OLS: 0.038 (1.126)	
								Livestock herding for the HH (last 12 months)	0.282	OLS: 0.087 (2.648)***	
								Fishing for the HH (last 12 months)	0.003	OLS: 0.038 (2.816)***	
								HH business (last 12 months)	0.107	OLS: -0.021 (-1.070)	
								Paid work outside the HH (last 12 months)	0.263	OLS: -0.0230 (-1.165)	

No	Authors	Program details				Evaluation details		Program impacts					
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms		
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
13	Merttens et al. (2016) †	Uganda: Social Assistance Grants for Empowerment, Vulnerable Family Support Grant (Govt)	UCT	Bi-monthly UGX 25,000	transferred bi-monthly ²	Primarily female heads in poor households, selected via demographic vulnerability index	PSM [1,863 working age females 18-64 years]	2012, 2014	PSSN public works program (last 12 months)	0.003	OLS: 0.088 (4.584)***		
									Personal expenditure (total, last 4 weeks, TZS)	10,018	OLS: 3,088 (1.719)*		
									Personal expenditure (clothing, last 4 weeks, TZS)	5,309	OLS: 1,514 (1.125)		
									Personal expenditure (communication, last 4 weeks, TZS)	573	OLS: 364 (1.758)*		
									Personal expenditure (personal goods/hygiene, last 4 weeks, TZS)	2,596	OLS: 268 (0.587)		
									Personal expenditure (transport, last 4 weeks, TZS)	1,433	OLS: 561 (1.197)		
									Personal expenditure (entertainment, last 4 weeks, TZS)	106	OLS: 380 (2.184)**		
		Uganda: Social Assistance Grants for Empowerment, Senior Citizens Grant (Govt)	UCT	Bi-monthly UGX 25,000	Elderly over 65 years (60 years in Karamoja)	PSM [1,950 working age females 18-64 years]	2012, 2014	Engaged in economically productive activities (last week)	83.2 [#]	SD: -0.27 (NR)		Identical outcomes analyzed for working age males, with similar findings (largely no impacts, with the exception of a weakly significant increase in hours worked in last week). Despite this, authors do find increases in hired labor based on qualitative work.	
								Mean number of hours spent working per week	20.4 [#]	SD: -1.7 (NR)			
								Mean number of months spent working in main occupations (last year)	9.6 [#]	SD: -0.48 (NR)			
								Engaged in subsidiary occupations in addition main occupation (among economically active)	21.4 [#]	SD: -0.35 (NR)			
								Engaged in casual labor as a primary or secondary activity (among economically active)	11.2 [#]	SD: -2.5 (NR)			
								Engaged in economically productive activities (last week)	76.3 [#]	SD: 1.6 (NR)			
								Mean number of hours spent working per week	17.6 [#]	SD: 0.98 (NR)			
								Mean number of months spent working in main occupations (last year)	7.8 [#]	SD: 0.40 (NR)			
		Zambia: Child Grant Program (Govt)	UCT	Bi-monthly transfers equal to USD 24. Approx. 27% of BL HH expenditure	Women with child <5 years	RCT [2,124 women]	2010, 2012, 2013	Engaged in subsidiary occupations in addition main occupation (among economically active)	22.6 [#]	SD: -2.5 (NR)		Impacts also analyzed on non-farm enterprises, where women's contribution to labor is high.	
								Engaged in casual labor as a primary or secondary activity (among economically active)	13.6 [#]	SD: 0.02 (NR)			
								Any cash savings (last month, at 2 years)	0.216	OLS: 0.299 (0.0459)**			
								Any cash savings (last month, at 3 years)	0.227	OLS: 0.101 (0.0452)**			
14	Natali et al. (2016) †							Amount saved (last month, logged ZMW, at 2 years)	16.8	OLS: 1.077 (0.172)***			
								Amount saved (last month, logged ZMW, at 3 years)	20.0	OLS: 0.509 (0.174)***			
15	AIR (2015)†	Zambia: Multiple	UCT	Bi-monthly transfers equal	Vulnerable HHs (female	RCT [2,897	2011, 2013,	Any cash savings (last 3 months, at 2 years)	0.13 [#]	OLS: 0.12 (2.87)***		Differences between 2 and 3 year impacts	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Category Grant Program (Govt)			to USD 24. Approx. 21% of BL HH expenditure	headed, elderly, orphans, disabled)	women]	2014	Any cash savings (last 3 months, at 3 years) Amount saved (last month, logged ZMW, at 2 years) Amount saved (last month, logged ZMW, at 3 years)	0.10 1.26[#] 0.42	OLS: 0.18 (4.23)*** OLS: 0.62 (2.98)** OLS: 0.70 (3.15)***	are not statistically significant.

Notes: * refers to peer-reviewed journal article; † refers to working paper or technical report; # denotes baseline full sample (rather than control mean); OLS is coefficient from ordinary least squares regression, SD is a single difference. Significance levels bolded if significant at the conventional level: * p<0.1, where additional levels being ** p<0.05; *** p<0.01 (reported as in the original article).

Abbreviations: BCC = behavior change communication; BL = baseline; C = control or comparison group; CCT = conditional cash transfer; CfW = Cash for Work; HH = household; LSL: Lesotho Loti; ITT = intent-to-treat; OFSP = Other food security program; PWP = public works program; RDD = regression discontinuity design; RS = randomly selected; T = treatment or program group; TOT = treatment on the treated; TZS = Tanzanian Shilling; UCT = unconditional cash transfer; UGX = Ugandan Shilling; ZAR = South African rand.

- 1 Adult females are those 'fit to work.' A person is considered fit to work if they are aged between 19 and 64 years, and has no chronic illness or disability, or is otherwise unable to work. Ganyu is the terminology for manual or casual labor, typically the most undesirable labor option for individuals in rural settings.
- 2 The UCT of 10,000 TZS is provided to all enrolled households, with an additional transfer (4,000 TZS) to households with children under 18, per month. The CCTs offer: 1) a grant (4,000 TZS) to households with pregnant women or children under five who are in compliance with pre- and post-natal exams and regular child health check-ups; 2) a grant (2,000 TZS) to households with children demonstrating an 80% primary school attendance rate; 3) an individual grant (4,000 TZS) for children demonstrating an 80% lower secondary school attendance rate; and 4) an individual grant (6,000 TZS) for children demonstrating an 80% upper secondary school attendance rate where such services are available, all on a monthly basis. The maximum total benefit per household excluding the PWP component is set at 38,000 TZS on a monthly basis, but payments are made bimonthly. Additionally, workshops are planned on topics related to beneficiaries' co-responsibilities and those related to good childcare practices, sanitation and hygiene, and education.

Table 3. Review of SSN impacts on women's empowerment and intra-household bargaining in Africa

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	Aker (2017)*	DRC: Concern Worldwide transfer lean season transfer (NGO)	UCT vs voucher	UCT of US\$130 made in 3 installments vs. food vouchers of equivalent value (redeemable at pre-organized voucher fairs)	Females in internally displaced HHs living in informal camps	RT [178 women]	2011, 2012	Responsible for spending all or part of transfer Husband responsible for spending part of transfer Discussed how to use transfer in advance w/other HH members Husbands makes education decisions alone Husband decides whether to share transfer w/other HHs alone Husband decides whether/how to save alone	0.95 0.44 0.80 0.36 0.33 0.36	OLS: -0.06 (0.04) OLS: -0.04 (0.08) OLS: -0.12 (0.07)* OLS: 0.07 (0.010) OLS: -0.01 (0.100) OLS: -0.06 (0.09)	C mean represent voucher arm. Significant reduction in need to discuss with HH members could represent greater coordination/communication needs before attending voucher fairs, rather than autonomy in spending.
2	Breisinger et al. (2018)†	Egypt: Takaful (Govt)	UCT ¹	Monthly: EGP 325 w/ additional by number of children & education level	Primarily women in poor HHs w/children <18 years	RDD [6,001 women]	2017	Makes own decisions to a great extent (agriculture) Makes own decisions to a great extent (wage employment) Makes own decisions to a great extent (major HH expenditures) Makes own decisions to a great extent (minor HH expenditures) Makes own decisions to a great extent (how to use UCT) Makes own decisions to a great extent (what food can be cooked) Makes own decisions to a great extent (getting medical treatment) Makes own decisions to a great extents (taking a child to doctor) Makes own decisions to a great extent (children's schooling)	0.134 0.142 0.198 0.491 0.340 0.675 0.383 0.395 0.325	OLS: -0.015 (0.052) OLS: -0.049 (0.031) OLS: -0.043 (0.034) OLS: -0.007 (0.044) OLS: -0.054 (0.044) OLS: 0.017 (0.042) OLS: -0.011 (0.044) OLS: -0.075 (0.042)* OLS: -0.073 (0.041)*	Negative impacts on DM are driven by women in the region of Lower Egypt. One hypothesis is that men respond to women's new source of income by asserting control. However, qualitative evidence suggests positive effects on women's status.
3	Peterman et al. (2018)†	Ghana: Livelihoods Empowerment Against Poverty (LEAP) 1000 (Govt)	UCT plus	Bi-monthly variable transfer based on HH size, plus health insurance waiver for all HH members	Pregnant women or mothers w/ child <12 months in poor HHs	RDD [2,083 women]	2015, 2017	Agency (z-score, based on 6 domains) Locus of control (ladder, 0-10) HH DM ability (ladder, 0-10)	0.00 5.577 5.409	OLS: 0.05 (0.06) OLS: 0.27 (0.18) OLS: 0.16 (0.20)	Analyzed as a pathway for IPV impacts, despite lack of impact, there were impacts on IPV & women's financial standing.

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4	Clark et al. (2019)*	Kenya: Daycare Voucher Program (NGO)	Voucher plus	Monthly vouchers covering daycare costs. Plus: Daycare center quality improvements, including training for caregivers & materials.	Mothers of children aged 1-3 not using eligible daycare facilities	RCT [738 women]	2015, 2016	Autonomy index (sole or joint DM across 5 domains)	3.76	OLS: 0.030 (0.118)	Estimates reported from ITT unadjusted modes. TOT estimates also analyzed, showing larger impacts for health care decisions. Detailed results for NS decision domains not reported.
								Sole or joint DM (children's health care)	0.93	OLS: 0.068 (0.024)***	
								Sole or joint DM (household finances)	NR	OLS: NS (NR)	
								Sole or joint DM (major HH finances)	NR	OLS: NS (NR)	
								Sole or joint DM (children's schooling)	NR	OLS: NS (NR)	
								Sole or joint DM (childcare)	NR	OLS: NS (NR)	
5	Haushofer and Shapiro (2016)*	Kenya: Give Directly (NGO)	UCT	404 US\$ (PPP) vs. 1,525 US\$ (PPP) & monthly vs. lump sum (RS): Average transfer 709 US\$ (PPP) equal to twice annual per capita expenditure	Women & men (RS) in poor HHs in Rarieda district	RCT [1,456 women & men]	2011, 2012	Locus of control (Rotter's & World Value Survey, z-score)	0.00	OLS: 0.03 (0.05)	Variations by female, monthly or large transfer show no heterogenous effects. Authors also analyze a 'female empowerment' index, however is comprised of violence-related measures (reported elsewhere).
6	Merttens et al. (2013) †	Kenya: Hunger Safety Net Program (Govt)	UCT	2,700 KES (27 US\$) per month, transferred bi-monthly	Poor & vulnerable HHs in northern drought-affected areas (75% female primary beneficiary)	PS/RDD [2,436 HH]	2009, 2012	Main budget decision-maker is female	0.52	SD: -1.7 (NR)	Variation by male vs. female HH shows similar results, however sensitivity analysis presented in the Appendix shows significant improvements for female headed HHs only.
7	Ambler et al. (2019)†	Malawi: National Smallholders Farmers Association (Civil Society)	UCT plus vs. in-kind plus	3 transfers of USD 28 on average vs. agricultural inputs ² (equivalent to approx. 15% of BL crop production, both arms)	Farmer club member (64% female)	RCT [1,017 HH]	2014, 2016	Participates in DM (day-to-day HH needs, midline, cash)	0.641	OLS: 0.102 (0.004)***	Authors also find evidence of increased total number of decision-makers in the HH at midline (aligned with evidence for females specifically). In the input only treatment
								Participates in DM (day-to-day HH needs, endline, cash)	0.578	OLS: -0.086 (0.021)**	
								Participates in DM (large, unusual purchases, midline, cash)	0.603	OLS: 0.053 (0.119)	
								Participates in DM (large, unusual purchases, endline, cash)	0.497	OLS: -0.059 (0.104)	
								Participates in DM (where/if children go to school, midline, cash)	0.710	OLS: 0.017 (0.659)	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
				received extension services)				Participates in DM (where/if children go to school, endline, cash)	0.635	OLS: -0.039 (0.263)	arm, there were similar (if not larger) impacts on female DM. There is also evidence that transfers + extension produced larger impacts on female DM, than either intervention alone.
							Participates in DM (who is allowed to live/be part of HH, midline, cash)	0.692	OLS: 0.027 (0.444)		
							Participates in DM (who is allowed to live/be part of HH, endline, cash)	0.684	OLS: 0.007 (0.822)		
							Participates in DM (HH investment in agriculture & livestock, midline, cash)	0.670	OLS: 0.051 (0.142)		
							Participates in DM (HH investment in agriculture & livestock, endline, cash)	0.622	OLS: 0.037 (0.190)		
							Participates in DM (any category, midline, cash)	0.814	OLS: 0.049 (0.064)*		
							Participates in DM (any category, endline, cash)	0.816	OLS: 0.007 (0.825)		
							Participates in DM (proportion of categories, midline, cash)	0.659	OLS: 0.050 (0.099)*		
							Participates in DM (proportion of categories, endline, cash)	0.600	OLS: -0.029 (0.222)		
							Female DM for any crop (midline, cash)	0.846	OLS: 0.038 (0.153)		
							Female DM for any crop (endline, cash)	0.788	OLS: 0.028 (0.301)		
							Proportion of crops with any female DM (midline, cash)	0.788	OLS: 0.053 (0.058)*		
							Proportion of crops with any female DM (endline, cash)	0.712	OLS: -0.026 (0.357)		
							Female DM for any livestock (midline, cash)	0.724	OLS: 0.061 (0.325)		
							Female DM for any livestock (endline, cash)	0.734	OLS: 0.070 (0.029)**		
							Proportion of livestock with any female DM (midline, cash)	0.782	OLS: 0.031 (0.325)		
							Proportion of livestock with any female DM (endline, cash)	0.704	OLS: 0.007 (0.845)		
							Female DM for any agricultural input (midline, cash)	0.786	OLS: 0.052 (0.067)*		
							Female DM for any agricultural input (endline, cash)	0.819	OLS: 0.008 (0.795)		
							Proportion of agricultural inputs with any female DM (midline, cash)	0.705	OLS: 0.037 (0.227)		
							Proportion of agricultural inputs with any female DM (endline, cash)	0.719	OLS: 0.004 (0.904)		
							Female DM for any agricultural practice (midline, cash)	0.776	OLS: 0.070 (0.035)**		
							Female DM for any agricultural practice (endline, cash)	0.806	OLS: 0.011 (0.711)		

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
								Proportion of agricultural practice with any female DM (midline, cash)	0.747	OLS: 0.055 (0.132)	
								Proportion of agricultural practice with any female DM (endline, cash)	0.717	OLS: -0.001 (0.966)	
								Has most/equal say in DM (day-to-day HH needs, midline, cash)	0.378	OLS: 0.110 (0.001)***	
								Has most/equal say in DM (day-to-day HH needs, endline, cash)	0.363	OLS: -0.030 (0.442)	
								Has most/equal say in DM (large, unusual purchases, midline, cash)	0.362	OLS: 0.077 (0.032)**	
								Has most/equal say in DM (large, unusual purchases, endline, cash)	0.294	OLS: 0.035 (0.373)	
								Has most/equal say in DM (where/if children go to school, midline, cash)	0.490	OLS: 0.022 (0.618)	
								Has most/equal say in DM (where/if children go to school, endline, cash)	0.446	OLS: 0.005 (0.915)	
								Has most/equal say in DM (who is allowed to live/be part of HH, midline, cash)	0.446	OLS: 0.061 (0.128)	
								Has most/equal say in DM (who is allowed to live/be part of HH, endline, cash)	0.484	OLS: 0.018 (0.658)	
								Has most/equal say in DM (HH investment in agriculture & livestock, midline, cash)	0.424	OLS: 0.071 (0.049)**	
								Has most/equal say in DM (HH investment in agriculture & livestock, endline, cash)	0.444	OLS: 0.057 (0.175)	
								Has most/equal say in DM (any activity, midline, cash)	0.557	OLS: 0.067 (0.078)*	
								Has most/equal say in DM (any activity, endline, cash)	0.641	OLS: 0.019 (0.629)	
								Has most/equal say in DM (proportion of activities, midline, cash)	0.417	OLS: 0.070 (0.040)**	
								Has most/equal say in DM (proportion of activities, endline, cash)	0.404	OLS: 0.017 (0.629)	
								Proportion with female DM (activities, midline, transfers)	0.681	OLS: 0.003 (0.984)	
								Proportion with female DM (activities, endline, transfers)	0.584	OLS: 0.034 (0.286)	
								Proportion with female DM (activities, midline, transfers + extension)	0.681	OLS: 0.065 (0.082)*	
								Proportion with female DM (activities, endline, transfers + extension)	0.584	OLS: 0.011 (0.678)	
								Proportion with female DM (crops, midline, transfers)	0.788	OLS: 0.009 (0.814)	
								Proportion with female DM (crops, endline, transfers)	0.016	OLS: -0.010 (0.558)	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
								Proportion with female DM (crops, midline, transfers + extension)	0.788	OLS: 0.084 (0.008)***	
								Proportion with female DM (crops, endline, transfers + extension)	0.016	OLS: -0.005 (0.659)	
								Proportion with female DM (livestock, midline, transfers)	0.786	OLS: 0.014 (0.750)	
								Proportion with female DM (livestock, endline, transfers)	0.653	OLS: 0.114 (0.012)**	
								Proportion with female DM (livestock, midline, transfers + extension)	0.786	OLS: 0.072 (0.036)**	
								Proportion with female DM (livestock, endline, transfers + extension)	0.653	OLS: 0.077 (0.032)**	
								Proportion with female DM (agricultural inputs, midline, transfers)	0.704	OLS: -0.016 (0.684)	
								Proportion with female DM (agricultural inputs, endline, transfers)	0.013	OLS: -0.004 (0.744)	
								Proportion with female DM (agricultural inputs, midline, transfers + extension)	0.704	OLS: 0.066 (0.074)*	
								Proportion with female DM (agricultural inputs, endline, transfers + extension)	0.013	OLS: -0.001 (0.960)	
								Proportion with female DM (agricultural practices, midline, transfers)	0.750	OLS: -0.045 (0.368)	
								Proportion with female DM (agricultural practices, endline, transfers)	0.711	OLS: 0.059 (0.230)	
								Proportion with female DM (agricultural practices, midline, transfers + extension)	0.750	OLS: 0.088 (0.032)**	
								Proportion with female DM (agricultural practices, endline, transfers + extension)	0.711	OLS: 0.023 (0.527)	
8	Baird, McIntosh and Ozler (2019)*	Malawi: Zomba cash transfer program (NGO)	UCT vs. CCT	Young women: USD 1, 2, 3, 4 or 5 (lottery) Guardians: USD 4, 6, 7, or 10 (RS) Approx. 10% of BL HH expenditure; conditional on school attendance	Never married young women age 13-22 & guardians	RCT [2,049 young women 18-27]	2007, 2012	Self-efficacy (CCT, BL dropouts, 2-years post, index)	0.00	OLS: -0.041 (0.076)	Authors examine impacts 2 years post intervention. While there are no impacts a negative impact on an aggregate (including self efficacy, preferences for child education, social participation & aspirations) for the UCT arm.
								Self-efficacy (CCT, BL schoolgirls, 2-years post, index)	0.00	OLS: 0.059 (0.079)	
								Self-efficacy (UCT, BL schoolgirls, 2-years post, index)	0.00	OLS: -0.149 (0.100)	
9	Aker et al. (2016)*	Niger: Concern Worldwide lean	UCT plus	Monthly UCT (CFA 22,000,	Women in poor rural	RT [1,152	2010, 2011	Responsible for spending part of transfer (zap-cash)	0.53	SD: -0.01 (0.03)	Comparison is between transferring

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
10	Ambler et al. (2019)†	season transfer (NGO)		~US\$ 45) + RS mobile phone & training on use, or m-money account (zap)	HHs		women]	Responsible for spending part of transfer (mobile-cash)	0.53	SD: -0.03 (0.04)	cash manually vs. mobile money (zap) with comparison arm netting out technology (mobile phone). Women's reporting of DM power is nearly universal, which may account for lack of impact.
								Responsible for spending part of transfer (zap-mobile)	0.53	SD: 0.02 (0.04)	
								Involved in DM for transfer spending (zap-cash)	0.99	SD: 0.01 (0.01)	
								Involved in DM for transfer spending (mobile-cash)	0.99	SD: 0.01 (0.01)	
								Involved in DM for transfer spending (zap-mobile)	0.99	SD: -0.00 (0.01)	
		Senegal: Fédération des Organisations Non-Gouvernementales du Sénégal (FONGS) (Civil Society)	UCT plus vs. UCT & in-kind plus	Farm management plan (FMP) alone versus with one-time transfer of USD 200 (UCT equivalent to approx. 15% of BL crop production; both arms received extension services)	Farmer association members (HH heads, primarily male)	RCT [598 HHs]	2014, 2016	Participates in DM (day-to-day HH needs, midline, cash + FMP)	0.215	OLS: -0.090 (0.167)	Authors also find evidence of reduced total number of decision-makers in the HH at midline (aligned with evidence for females specifically)--however these impacts fade at endline. In the FMP only treatment arm, there were no impacts on female decision making.
								Participates in DM (day-to-day HH needs, endline, cash + FMP)	0.241	OLS: -0.011 (0.802)	
								Participates in DM (large, unusual purchases, midline, cash + FMP)	0.190	OLS: -0.065 (0.296)	
								Participates in DM (large, unusual purchases, endline, cash + FMP)	0.206	OLS: -0.209 (0.441)	
								Participates in DM (where/if children go to school, midline, cash + FMP)	0.195	OLS: -0.032 (0.542)	
								Participates in DM (where/if children go to school, endline, cash + FMP)	0.203	OLS: -0.040 (0.246)	
								Participates in DM (who is allowed to live/be part of HH, midline, cash + FMP)	0.190	OLS: -0.077 (0.163)	
								Participates in DM (who is allowed to live/be part of HH, endline, cash + FMP)	0.196	OLS: 0.009 (0.810)	
								Participates in DM (HH investment in agriculture & livestock, midline, cash + FMP)	0.165	OLS: -0.052 (0.281)	
								Participates in DM (HH investment in agriculture & livestock, endline, cash + FMP)	0.171	OLS: 0.010 (0.788)	
								Participates in DM (any category, midline, cash + FMP)	0.291	OLS: -0.115 (0.120)	
								Participates in DM (any category, endline, cash + FMP)	0.307	OLS: -0.037 (0.431)	
								Participates in DM (proportion of categories, midline, cash + FMP)	0.192	OLS: -0.062 (0.237)	
								Participates in DM (proportion of categories, endline, cash + FMP)	0.204	OLS: -0.012 (0.739)	
								Female DM for any crop (midline, cash + FMP)	0.430	OLS: -0.218 (0.005)***	
								Female DM for any crop (endline, cash + FMP)	0.079	OLS: -0.025 (0.692)	

No	Authors	Program details				Evaluation details		Program impacts				
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
								Proportion of crops with any female DM (midline, cash + FPM)	0.249	OLS: -0.122 (0.009)***		
								Proportion of crops with any female DM (endline, cash + FMP)	0.243	OLS: -0.008 (0.805)		
								Female DM for any livestock (endline, cash + FMP)	0.613	OLS: -0.038 (0.461)		
								Proportion of livestock with any female DM (endline, cash + FMP)	0.271	OLS: -0.005 (0.891)		
11	Kilburn et al. (2018)*	South Africa: HIV Prevention Trials Network 068 (NGO)	CCT	Monthly: Young women ZAR100 (~US\$ 10), Parents: ZAR 200 (~US\$ 20). Approx. 15.7% of BL HH expenditure	Never married or pregnant young women aged 13-20 attending grades 8-11	RCT [2,533 young women]	2012, 2015	Sexual relationship power scale (12 items, 0-24)	15.6	OLS: 0.00 (0.05)		Measured only among women who have had sex (n=693). No average impacts, however increases in power among female youth with higher poverty measures, indicating the poverty mechanism is stronger among those initially worst off financially.
12	Ambler (2016)*	South Africa: Old Age Pension (Govt)	UCT	Monthly variable benefits with maximum at ZAR 870 (200% monthly median per-capita income of noneligible older men)	Poor elderly men (aged over 65) & women (aged over 60)	RDD ³ [1,794 women aged 50-75 years]	2008	Primary DM (day-to-day purchases)	0.642	OLS: 0.155 (0.0447)***		Impacts analyzed for male pensioners (not significant). Suggests increase in DM for women is realized through reduction in DM for older men and HH disagreement about who is the decision-maker. In addition, personal income share increases for women, but not for men.
								Primary DM (all four categories: day-to-day purchases, large purchases, who can live in HH, where HH lives)	0.572	OLS: 0.127 (0.0417)***		
13	PSSN Youth Evaluation Team (2018) †	Tanzania: Productive Social Safety Net (PSSN, Govt)	UCT + CCT + PWP plus	Monthly fixed UCT of 10,000 TZS (~USD 5) + variable transfer by	Primarily female heads in poor HHs	RCT [1,003 young women aged 14-28 years]	2015, 2017	HH DM ability (ladder, 0-10)	3.870	OLS: 0.783 (3.771)***		Impacts also analyzed for males of the same age range, with no significant impacts. Youth in HHs were

Measured only among women who have had sex (n=693). No average impacts, however increases in power among female youth with higher poverty measures, indicating the poverty mechanism is stronger among those initially worst off financially.

Impacts analyzed for male pensioners (not significant). Suggests increase in DM for women is realized through reduction in DM for older men and HH disagreement about who is the decision-maker. In addition, personal income share increases for women, but not for men.

Impacts also analyzed for males of the same age range, with no significant impacts. Youth in HHs were

No	Authors	Program details				Evaluation details		Program impacts									
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms						
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)					
				HH composition + PW wage of TZS 2,300 per day (~USD 1) transferred bi-monthly ⁴				Autonomy (has control over life, ladder, 0-10)	4.005	OLS: 0.670 (2.960)***	not typically primary beneficiaries, however some overlap.						
14	Merttens et al. (2016) †	Uganda: Social Assistance Grants for Empowerment, Vulnerable Family Support Grant (Govt)	UCT	Bi-monthly UGX 25,000	Primarily female heads in poor households, selected via demographic vulnerability index	PSM [1,863 working age females 18-64 years]	2012, 2014	Main DM (children's education)	46.8 [#]	SD: 1.9 (NR)	Lack of impacts on DM confirmed among sample of non-female heads. Qualitative evidence confirms transfers did little to transform gender relations, however suggest increase women's ability to control assets & greater autonomy via decreased reliance on other family members.						
								Main DM (serious health problems)	52.8 [#]	SD: 2.0 (NR)							
								Main DM (how to invest money)	52.6 [#]	SD: 3.3 (NR)							
								Shared DM (children's education)	61.0 [#]	SD: 3.3 (NR)							
								Shared DM (serious health problems)	64.9 [#]	SD: -0.99 (NR)							
								Shared DM (how to invest money)	58.8 [#]	SD: 3.5 (NR)							
		Uganda: Social Assistance Grants for Empowerment, Senior Citizens Grant (Govt)	UCT	Bi-monthly UGX 25,000	Elderly over 65 years (60 years in Karamoja)	PSM [1,950 working age females 18-64 years]	2012, 2014	Main DM (children's education)	41.8 [#]	SD: 0.16 (NR)							
								Main DM (serious health problems)	45.1 [#]	SD: 1.0 (NR)							
								Main DM (how to invest money)	47.9 [#]	SD: 0.35 (NR)							
								Shared DM (children's education)	71.6 [#]	SD: -1.5 (NR)							
								Shared DM (serious health problems)	71.8 [#]	SD: -2.6 (NR)							
								Shared DM (how to invest money)	68.3 [#]	SD: -3.0 (NR)							
								Uganda: World Food Programme Cash & Food transfers (UN)	Cash vs in-kind, plus	Cash or food (micronutrient fortified) of US\$ 10.25 equivalent transferred every 6-8 weeks		HHs with child aged 3-5 attending UNICEF ECD centers	RCT [1,860 women]	2010, 2012	Sole DM (6 domains, pooled treatment)	2.49 [#]	OLS: -0.16 (0.12)
															Sole DM (6 domains, food transfer)	2.49 [#]	OLS: -0.10 (0.15)
Sole DM (6 domains, cash transfer)	2.49 [#]	OLS: -0.21 (0.15)															
Sole or joint DM (6 domains, pooled treatment)	4.13 [#]	OLS: 0.30 (0.17)*															
Sole or joint DM (6 domains, food transfer)	4.13 [#]	OLS: 0.10 (0.18)															
Sole or joint DM (6 domains, cash transfer)	4.13 [#]	OLS: 0.50 (0.20)**															
16	Bonilla et al. (2017)*	Zambia: Child Grant Program (Govt)	UCT	Bi-monthly transfers equal to USD 24.	Women with child <5 years	RCT [2,031 women]	2010, 2012, 2013,	Sole DM (children's health)	0.557	OLS: 0.010 (0.016)	Impacts on both sole & combined DM aggregates,						
								Sole DM (children's schooling)	0.433	OLS: 0.016 (0.015)							

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
				Approx. 27% of BL HH expenditure			2014	Sole DM (own income)	0.400	OLS: -0.006 (0.019)	however magnitude in real terms is small (aggregate sole or joint DM increases over BL means by 6%). Few heterogenous impacts by woman's age, education or household consumption. Qualitatively, authors find changes in intrahousehold relationships were limited by entrenched gender norms, which indicate men as heads of HH & primary decision makers. However, narratives showed cash transfers increased financial empowerment as women retained control over cash for HH investments
								Sole DM (partner's income)	0.366	OLS: 0.016 (0.011)	
								Sole DM (major HH purchases)	0.408	OLS: 0.005 (0.015)	
								Sole DM (daily HH purchases)	0.481	OLS: -0.004 (0.015)	
								Sole DM (children's clothes or shoes)	0.443	OLS: 0.021 (0.018)	
								Sole DM (family visits)	0.405	OLS: 0.027 (0.018)	
								Sole DM (own health)	0.530	OLS: 0.042 (0.015)**	
								Sole DM (aggregate sum 0-9)	3.785	OLS: 0.189 (0.096)*	
								Sole or joint DM (children's health)	0.709	OLS: 0.016 (0.015)	
								Sole or joint DM (children's schooling)	0.604	OLS: 0.039 (0.018)**	
								Sole or joint DM (own income)	0.589	OLS: 0.036 (0.013)***	
								Sole or joint DM (partner's income)	0.557	OLS: 0.058 (0.021)***	
								Sole or joint DM (major HH purchases)	0.602	OLS: 0.010 (0.017)	
								Sole or joint DM (daily HH purchases)	0.650	OLS: 0.009 (0.011)	
								Sole or joint DM (children's clothes or shoes)	0.628	OLS: 0.020 (0.011)*	
								Sole or joint DM (family visits)	0.581	OLS: 0.035 (0.020)*	
								Sole or joint DM (own health)	0.642	OLS: 0.014 (0.015)	
								Sole or joint DM (aggregate sum 0-9)	5.415	OLS: 0.343 (0.115)***	

Notes: * refers to peer-reviewed journal article; † refers to working paper or technical report; # denotes baseline full sample (rather than control mean); OLS is coefficient from ordinary least squares regression, SD is a single difference. All papers report standard errors, with the exception of Ambler et al. 2019, which reports p-values. Significance levels bolded if significant at the conventional level: * p<0.1, where additional levels being ** p<0.05; *** p<0.05 (reported as in the original article).

Abbreviations: BL = baseline; C = control or comparison group; CCT = conditional cash transfer; DM = decision making; DRC = Democratic Republic of Congo; EGP = Egyptian pound; FMP = farm management plan; HH = household; KES = Kenyan shillings; ITT = intent-to-treat; PPP = purchasing power parity; PWP = public works program; RDD = regression discontinuity design; RS = randomly selected; T = treatment or program group; TOT = treatment on the treated; TZS = Tanzanian shilling; UCT = unconditional cash transfer; UGX = Ugandan shilling; ZAR = South African rand.

- 1 Takaful designed as a CCT, conditional on school attendance and health care utilization, however during the evaluation period (approximately two years of implementation), conditions had yet to be implemented. Impacts taken from RDD models, however authors present instrumental variable estimates which are largely consistent. Means are full sample, rather than control only.
- 2 Inputs were given at the same time as the cash transfers: The first disbursement consisted of seed, inoculant and hoes; the second was cash to pay for ganyu (day labor); the third consisted of improved storage sacks, strings and cash for harvest-related activities.
- 3 Study uses the National Income Dynamics Survey (NIDS, 2008) and age eligibility cut offs to identify effects of receiving the pension. Impact estimates come from the linear polynomial specification in Table 2, which represent a conservative estimate; Mean value represents full sample, rather than control sample, as reported in Table 2.

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

- 4 The UCT of 10,000 TZS is provided to all enrolled households, with an additional transfer (4,000 TZS) to households with children under 18, per month. The CCTs offer: 1) a grant (4,000 TZS) to households with pregnant women or children under five who are in compliance with pre- and post-natal exams and regular child health check-ups; 2) a grant (2,000 TZS) to households with children demonstrating an 80% primary school attendance rate; 3) an individual grant (4,000 TZS) for children demonstrating an 80% lower secondary school attendance rate; and 4) an individual grant (6,000 TZS) for children demonstrating an 80% upper secondary school attendance rate where such services are available, all on a monthly basis. The maximum total benefit per household excluding the PWP component is set at 38,000 TZS on a monthly basis, but payments are made bimonthly. Additionally, workshops are planned on topics related to beneficiaries' co-responsibilities and those related to good childcare practices, sanitation and hygiene, and education.

Table 4. Review of SSN impacts on women's psychological wellbeing in Africa

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	Ghana LEAP 1000 Evaluation Team (2018)†	Ghana: Livelihoods Empowerment Against Poverty (LEAP) 1000 (Govt)	UCT plus	Bi-monthly variable transfer based on HH size, plus health insurance waiver for all HH members	Pregnant women or mothers w/ child <12 months in poor HHs	RDD [2,213 women]	2015, 2017	Stress (Cohen perceived stress scale) Happy with life Satisfied with life (some, most or all the time)	30.825 0.876 0.686	OLS: -2.74 (0.32) OLS: 0.044 (0.02)** OLS: 0.001 (0.03)	Despite impacts on HH consumption & poverty status there were no impacts on women's stress. Authors hypothesize the Cohen scale is ill suited for rural populations in Africa.
2	Haushofer and Shapiro (2016)*	Kenya: Give Directly (NGO)	UCT	404 US\$ (PPP) vs. 1,525 US\$ (PPP) & monthly vs. lump sum (RS): Average transfer 709 US\$ (PPP) equal to twice annual per capita expenditure	Women & men (RS) in poor HHs in Rarieda district	RCT [1,456 women & men] ¹	2011, 2012	Psychological well-being index (total standardized)	0.00	OLS: 0.26 (0.05)***	Large impacts are found on the overall psychological well-being index, leading to the conclusion that poverty alleviation has psychological benefits. Female recipients have a differential impacts of 0.14 (0.08)* on the overall index, driven by cortisol & self esteem, while there are no differential effects by lump-sum vs monthly transfers.
								Cortisol (log, with controls)	-0.04	OLS: 0.01 (0.05)	
								Depression (20-item, CESD, z-score)	26.48	OLS: -1.16 (0.44)***	
								Worries (16-item custom, z-score)	0.00	OLS: -0.13 (0.05)***	
								Stress (Cohen perceived stress scale, z-score)	0.00	OLS: -0.26 (0.05)***	
								Happiness (World Value Survey, z-score)	0.00	OLS: 0.16 (0.05)***	
								Life satisfaction (World Value Survey, z-score)	0.00	OLS: 0.17 (0.05)***	
								Trust (World Value Survey, z-score)	0.00	OLS: 0.04 (0.05)	
								Optimism (6-question Scheier, z-score)	0.00	OLS: 0.10 (0.05)*	
								Self-esteem (10-item Rosenberg, z-score)	0.00	OLS: 0.00 (0.05)	
3	Kilburn et al. (2016)*	Kenya: Cash Transfer for Orphans & Vulnerable Children (Govt)	UCT	Bi-monthly transfers of 3000 KES (~\$40 USD). Approx. 20% of BL HH expenditure	Caregivers of orphans or vulnerable children in poor HHs	RCT [733 young women aged 15-24]	2007, 2011	Depressive symptoms (CESD ≥ 10)	0.33	OR: 1.07 (0.75 - 1.54)	While overall impacts were found for depressive symptoms among all youth, these were driven by males & no impacts were found for females.
								Hope score (above median)	0.50	OR: 0.96 (0.68 - 1.36)	
4	Kilburn et al. (2018)*; Malawi Social Cash Transfer	Malawi: Social Cash Transfer Program (SCTP) (Govt)	UCT	Bi-monthly variable transfer based on HH size. Approx. 18%	HH heads in labor-constrained poor HHs	RCT [3,365 women & men] ²	2013, 2015	Quality of Life Scale (WHO)	18.10	OLS: 3.38 (0.85)***	Quality of life increases among elderly caregivers attributed to poverty channel via daily stressors, however results
								Life will be better in two years	0.47	OLS: 0.20 (0.06)***	
								Same or better off than neighbors	0.48	OLS: 0.12 (0.07)*	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
	Evaluation Team (2016b)†; Angeles et al. (2019)*;			of BL HH expenditure				Stress (Cohen perceived stress scale, 4-20)	14.04	OLS: -1.557 (-3.09)***	are not individually mediated by impacts on consumption, food security, resiliency or hopefulness. Pathways of increased consumption, caregiver stress levels, life satisfaction, social support & reductions in hard labor account for 46-65% of program impacts on female youth mental health.
								Life distress scale (10-50)	26.590	OLS: -3.453 (-4.25)***	
								Social distress sub-scale	5.054	OLS: -0.637 (-3.43)***	
								Life (personal) distress sub-scale	16.803	OLS: -2.111 (-3.71)***	
								Financial distress sub-scale	4.283	OLS: -7.04 (-5.04)***	
								Depressive symptoms (CESD ≥ 10)	0.68	OLS: -0.152 (0.061)**	
								CESD scale (0-30)	12.57	OLS: -2.277(0.841)***	
5	Baird et al. (2013)*	Malawi: Zomba cash transfer program (NGO)	UCT vs. CCT	Young women: USD 1, 2, 3, 4 or 5 (lottery) Guardians: USD 4, 6, 7, or 10 (RS) Approx. 10% of BL HH expenditure; conditional on school attendance	Never married young women age 13-22 & guardians	RCT [3,796 young women]	2007, 2010	Psychological distress (CCT, BL dropouts, during) ³	0.455	OLS: 0.004 (0.038)	Reductions in distress only among schoolgirls (both UCT & CCT) during the intervention, authors hypothesize the lower effect in CCT arm due to distress related to conditions. Mechanisms include improvements in physical health, increased schooling & family support for education, higher consumption & leisure.
								Psychological distress (CCT, BL dropouts, after)	0.323	OLS: 0.021 (0.036)	
								Psychological distress (CCT, BL schoolgirls, during)	0.375	OLS: -0.063 (0.030)**	
								Psychological distress (CCT, BL schoolgirls, after)	0.309	OLS: -0.040 (0.046)	
								Psychological distress (UCT, BL schoolgirls, during)	0.375	OLS: -0.143 (0.034)***	
								Psychological distress (UCT, BL schoolgirls, after)	0.309	OLS: -0.043 (0.048)	
								6	Kilburn et al. (2019)*	South Africa: HIV Prevention Trials Network 068 (NGO)	
Hope (z-score)	31.2	OLS: -0.02 (0.04)									
7	PSSN Youth Evaluation Team (2018) †	Tanzania: Productive Social Safety Net (PSSN, Govt)	UCT + CCT + PWP plus	Monthly fixed UCT of 10,000 TZS (~USD 5) + variable transfer by HH composition + PWP wage of TZS 2,300 per	Primarily female heads in poor HHs	RCT [497 young women aged 14-28 years]	2015, 2017	Depressive symptoms (CESD ≥ 10)	0.521	OLS: -0.013 (-0.151)	Short time frame may be responsible for general lack of impact, as most female youth are not the primary beneficiary; Increases in female stress are offset by equivalent (larger) decreases in male
								CESD scale (0-30)	10.021	OLS: -0.156 (-0.198)	
								Hope scale (Snyder)	19.22	OLS: -0.641 (-0.743)	
								Enhanced Life Distress Scale	10.814	OLS: 0.831 (0.944)	
								Stress (Cohen perceived stress scale)	18.684	OLS: 1.159 (2.320)**	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
8	Hjelm et al. (2017)*; Natali et al. (2018)*	Zambia: Child Grant Program (Govt)	UCT	day (~USD 1) transferred bi-monthly ⁴ Bi-monthly transfers equal to USD 24. Approx. 27% of BL HH expenditure	Women with child <5 years	RCT [2,203 women]	2010, 2013, 2014	Satisfied with leisure time (ladder)	5.121	OLS: 0.069 (0.220)	youth stress. While not fully explained, authors note the Cohen scale shows low reliability (alpha) within sample. Self-assessed relative poverty is a more important mediator of program impacts on happiness than absolute poverty. Authors hypothesize lack of impacts on stress could be the Cohen scale is ill suited for rural populations in Africa.
								Life evaluation ('has a good life', ladder)	3.516	OLS: 0.306 (1.498)	
								Stress (Cohen perceived stress scale)	7.60	OLS: 0.07 (0.21)	
								Happiness (36 months)	0.82	OLS: 0.0752 (0.0249)***	
								Happiness (48 months)	0.78	OLS: 0.103 (0.0224)***	
9	Hjelm et al. (2017)*	Zambia: Multiple Category Grant Program (Govt)	UCT	Bi-monthly transfers equal to USD 24. Approx. 21% of BL HH expenditure	Vulnerable HHs (female headed, elderly, orphans, disabled)	RCT [2,431 women]	2011, 2014	Satisfied with child's life (scale)	19.7	OLS: 0.673 (0.240)***	Although the program reduced poverty, no impacts on stress. Authors hypothesize one explanation could be the Cohen scale is ill suited for rural populations in Africa.
								Stress (Cohen perceived stress scale)	9.92	OLS: -0.42 (-1.17)	

Notes: * refers to peer-reviewed journal article; † refers to working paper or technical report; OLS is coefficient from ordinary least squares regression, OR are odds ratios from logit regressions. Significance levels bolded if significant at the conventional level: * p<0.1, where additional levels being ** p<0.05; *** p<0.05 (reported as in the original article).

Abbreviations: BL = baseline; C = control or comparison group; CESD = Center for Epidemiological Studies Depression Scale; CCT = conditional cash transfer; HH = household; PPP = purchasing power parity; PWP = public works program; RS = randomly selected; T = treatment; TZS = Tanzanian shillings; UCT = unconditional cash transfer; ZAR = South African rand.

- 1 The study design randomized transfers to men & women. We report T effects for the full sample following the author's presentation of results. However, in two cases for individual indicators, women have significantly different T effects, with relative differences of -0.17 (0.07)*** for cortisol, and 0.19 (0.09)** for self esteem.
- 2 The study collected measures from both adult men and women, however women make up 82% of the sample. Regression coefficients reported from fully controlled models (column 3 in Table 4 in Kilburn et al. 2018). Quality of life scale includes concepts of assessment of life relative to ideal, life conditions, satisfaction, positivity, happiness among others. Youth sample estimates come from ANCOVA in Table 3 in Angeles et al. 2019.
- 3 Psychological distress measured via the General Health Questionnaire 12 (GHQ-12) a screening instrument used widely in clinical settings. Coefficients are from fully controlled models.
- 4 The UCT of 10,000 TZS is provided to all enrolled households, with an additional transfer (4,000 TZS) to households with children under 18, per month. The CCTs offer: 1) a grant (4,000 TZS) to households with pregnant women or children under five who are in compliance with pre- and post-natal exams and regular child health check-ups; 2) a grant (2,000 TZS) to households with children demonstrating an 80% primary school attendance rate; 3) an individual grant (4,000 TZS) for children demonstrating an 80% lower secondary school attendance rate; and 4) an individual grant (6,000 TZS) for children demonstrating an 80% upper secondary school attendance rate where such services are available, all on a monthly basis. The maximum total benefit per household excluding the PWP component is set at 38,000 TZS on a monthly basis, but payments are made bimonthly. Additionally, workshops are planned on topics related to beneficiaries' co-responsibilities and those related to good childcare practices, sanitation and hygiene, and education.

Table 5. Review of SSN impacts on women's experience of intimate partner and gender-based violence in Africa

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1	Peterman et al. (2018)†	Ghana: Livelihoods Empowerment Against Poverty (LEAP) 1000 (Govt)	UCT plus	Bi-monthly variable transfer based on HH size, plus health insurance waiver for all HH members	Pregnant women or mothers with a child <12 months in poor HHs in northern districts	RDD [2,083 women]	2015, 2017	Controlling behaviors (12 month)	0.83	OLS: -0.02 (0.02)	Reductions on experience measures are also seen among sample of monogamous HHs (70%) ranging from 5-8 pp. Mechanisms of HH financial wellbeing & women's empowerment are likely responsible for impacts.
								Controlling behaviors (12 month, frequency)	0.00	OLS: -0.04 (0.04)	
								Emotional IPV (12 month)	0.56	OLS: -0.03 (0.02)	
								Emotional IPV (12 month, frequency)	0.00	OLS: -0.11 (0.05)*	
								Physical IPV (12 month)	0.28	OLS: -0.04 (0.03)	
								Physical IPV (12 month, frequency)	0.00	OLS: -0.09 (0.05)*	
								Sexual IPV (12 month)	0.21	OLS: -0.01(0.02)	
								Sexual IPV (12 month, frequency)	0.00	OLS: -0.05 (0.05)	
								Any IPV (12 month)	0.62	OLS: -0.03 (0.03)	
	Any IPV (12 month, frequency)	0.00	OLS: -0.11 (0.05)**								
2	Haushofer et al. (2019)†	Kenya: Give Directly (NGO)	UCT	404 US\$ (PPP) vs. 1,525 US\$ (PPP) & monthly vs. lump sum (RS): Average transfer 709 US\$ (PPP) equal to twice annual per capita expenditure	Women & men (RS) in poor HHs in Rarieda district	RCT [1,010 women] ¹	2011, 2012	Physical IPV index (main effect, 6 month)	0.00	OLS: -0.21 (0.07)***	No significant difference in main impacts between male & female recipients for physical IPV--however impacts on sexual IPV only among female recipients. Authors hypothesize main effects are consistent with use of physical IPV to extract resources, despite it being distasteful.
								Sexual IPV index (main effect, 6 month)	0.00	OLS: -0.16 (0.08)**	
								Physical IPV index (spillover effect, 6 month)	0.00	OLS: -0.16 (0.07)**	
								Sexual IPV index (spillover effect, 6 month)	0.00	OLS: 0.11 (0.08)	
3	Heath, Hidrobo and Roy (2018)†	Mali: Jigisemejiri (Govt)	UCT plus	Quarterly transfers of 3,000 CFA equal to 9% of BL HH expenditure, plus training sessions	HH heads (primarily men) in poor HHs	RCT [1,265 women]	2014, 2016	Controlling behaviors (12 month)	0.52 ²	OLS: -0.060 (0.032)*	Reductions driven by sample of polygamous HHs (40%) who have higher levels of IPV at baseline & significant reductions across every outcomes indicator. Likely mechanism include reductions in men's stress, anxiety & HH disputes.
								Controlling behaviors (12 month, index)	-0.03	OLS: -0.028 (0.080)**	
								Emotional IPV (12 month)	0.24	OLS: -0.064 (0.035)*	
								Emotional IPV (12 month, index)	-0.07	OLS: -0.120 (0.091)	
								Physical IPV (12 month)	0.12	OLS: -0.029 (0.027)	

No	Authors	Program details				Evaluation details		Program impacts			
		Program	Type	Benefit	Recipient & target group	Design [sample]	Years	Indicator(s)	Control mean	Effect size (s)	Additional analysis & hypothesized mechanisms
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

								Physical IPV (12 month, index)	-0.01	OLS: -0.130 (0.075)*		
4	Pettifor et al. (2016)*; Kilburn et al. (2018)*	South Africa: HIV Prevention Trials Network 068 (NGO)	CCT	Monthly: Young women ZAR100 (~US\$ 10), Parents: ZAR 200 (~US\$ 20). Approx. 15.7% of BL HH expenditure; conditional on school attendance	Never married or pregnant young women aged 13-20 attending grades 8-11	RCT [2,533 young women]	2012, 2015	Physical violence from a partner (12 month)	0.28	RR: 0.66 (0.59-0.74)		Suggests CT may enable young women to not engage in violent relationships, as transfers reduced the number of past year sexual partners as well as delayed sexual debut.
								Forced sex by a partner (12 month)	0.022	RR: 1.13 (0.75-1.70)		
5	PSSN Youth Evaluation Team (2018) †	Tanzania: Productive Social Safety Net (PSSN, Govt)	UCT + CCT + PW plus	Monthly fixed UCT of 10,000 TZS (~USD 5) + variable transfer by HH composition + PW wage of TZS 2,300 per day (~USD 1) transferred bi-monthly ³	Primarily female heads in poor HHs	RCT [497 young women aged 14-28 years]	2015, 2017	Emotional abuse (12 month)	0.255	OLS: 0.002 (0.040)		Authors' hypothesis short time frame may be responsible for lack of impact, as most female youth are not the primary beneficiary & face violence from both inside & outside HH.
								Physical violence (12 month)	0.142	OLS: -0.022 (-0.409)		
								Sexual violence (12 month)	0.065	OLS: -0.070 (-1.588)		
								Physical/sexual violence (12 month)	0.186	OLS: -0.061 (-1.045)		
								Emotional/physical/sexual violence (12 month)	0.325	OLS: -0.020 (-0.351)		
								Emotional/physical IPV (12 month)	0.142	OLS: 0.047 (1.205)		

Notes: * refers to peer-reviewed journal article; † refers to working paper or technical report; OLS is coefficient from ordinary least squares regression, RR are risk ratios from logistic regression. Significance levels bolded if significant at the conventional level: * p<0.1, where additional levels being ** p<0.05; *** p<0.01 (reported as in the original article).

Abbreviations: BL = baseline; C = control or comparison group; CFA = Senegalese franc; CCT = conditional cash transfer; HH = household; PPP = purchasing power parity; PW = public works; RS = randomly selected; T = treatment or program group; TZS = Tanzanian Shillings; UCT = unconditional cash transfer; ZAR = South African rand.

- 1 The study design randomized at the village level, creating pure T & C comparisons (what report as "main effects") and a second randomization at the HH level creating T & C within villages (what we report as the "spillover effect"). Authors also analyze disaggregated violence indicators (e.g. pushed or shook, slapped) with all impacts consistent with the overall indices.
- 2 Study reports control mean for polygamous and non-polygamous separately, we report non-polygamous here as it represents a larger percentage of the sample.
- 3 The UCT of 10,000 TZS is provided to all enrolled households, with an additional transfer (4,000 TZS) to households with children under 18, per month. The CCTs offer: 1) a grant (4,000 TZS) to households with pregnant women or children under five who are in compliance with pre- and post-natal exams and regular child health check-ups; 2) a grant (2,000 TZS) to households with children demonstrating an 80% primary school attendance rate; 3) an individual grant (4,000 TZS) for children demonstrating an 80% lower secondary school attendance rate; and 4) an individual grant (6,000 TZS) for children demonstrating an 80% upper secondary school attendance rate where such services are available, all on a monthly basis. The maximum total benefit per household excluding the PWP component is set at 38,000 TZS on a monthly basis, but payments are made bimonthly. Additionally, workshops are planned on topics related to beneficiaries' co-responsibilities and those related to good childcare practices, sanitation and hygiene, and education.

Appendix A: Keywords used in google scholar searches:

Keywords

("Public works" OR "food for work" OR "cash for work" OR "food transfer" OR "school feeding") AND
("food security" OR "nutrition" OR "food coping" OR "dietary diversity" OR "anemia" OR "anaemia" OR "Body Mass Index" OR "BMI")
"economic standing" OR "productivity" OR "Labor Force Participation" OR "employment" OR "asset ownership" OR "agricultural productivity" OR "time use" OR "savings" OR "credit" OR "financial inclusion")
"empowerment" OR "intra-household bargaining" OR "bargaining" OR "autonomy" OR "agency" OR "locus of control" OR "decision making")
"psychological well-being" OR "well-being" OR "well being" OR "wellbeing" OR "mental health" OR "stress" OR "life satisfaction" OR "quality of life" OR "happiness" OR "hope"
"gender based violence" OR "intimate partner violence" OR "violence" OR "intra-household violence"
AND ("impact evaluation" or "evaluation")

Notes: Searches were conducted in January 2019 and were conducted by outcome. We reviewed the first 10 pages of results, the abstracts of relevant titles, and the full articles of relevant abstracts.

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