

Three-Year Impact Results from Malawi's Social Cash Transfer Programme (SCTP)

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Transfer Project Workshop, Addis Ababa



**The Evaluation
Team in Zomba:**

**Excited to
collect endline
data!**



Three years in 25 minutes only... Key questions:

- 1. How is the program doing?*
- 2. Where did the transfer go?*
 - Consumption: food, clothing
 - Investment
 - Loan payments, transfers to/from other HH
- 3. Did the SCTP have effects on human capital?*
 - Education
 - Health and nutrition
- 4. Did the SCTP have effects on other outcomes?:*
 - Food security, perspectives on the future, well-being, adolescents transition to adulthood

The Social Cash Transfer Programme

■ Objectives:

- To reduce poverty and hunger
- To improve children's well-being and human capital through education, nutrition, health and HH productivity

■ Target population: Ultra-poor and Labor-constrained

■ History: Began 2006 in Mchinji district, rapid expansion after 2012

■ Coverage: 163,000 households, in 18 districts, by Dec 2015

■ Payments: **Unconditional** transfer (~18% of baseline consumption) administered by MoGCDSW

The Evaluation Design

- Three-year, mixed methods, experimental study design
- Two districts: Salima and Mangochi
- Quantitative component:
 - Randomization at the village level
 - Longitudinal at the household level
 - Households in Treatment Villages compared to households in Delayed-Treatment (Control) Villages
 - Difference-in-differences impact estimation approach
 - 3 surveys: Baseline (mid-2013), Midline (17 months), Endline (28 months)
 - Balance achieved: Treatment = Control
 - 94% of baseline households in the 3-year panel; no selective attrition
- Qualitative component: In-depth interviews with households and youth at baseline, midline, and endline. Embedded longitudinal.

Study Areas and mix of Treatment and control villages in every District and TA

Quantitative Sample (Households):

Treatment	1,577
Control	<u>1,727</u>
Total:	3,304

Treatment and Control villages in every Traditional Authority area (TA)

SALIMA

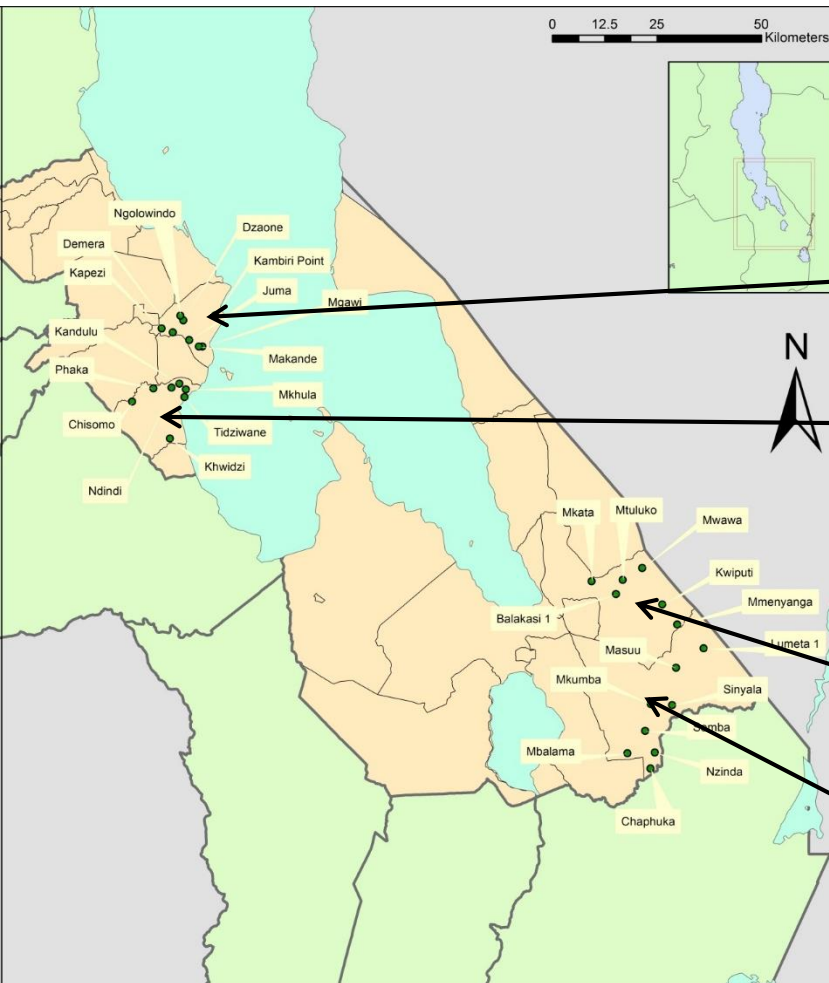
Maganga TA
Treat= 354 HH
Control= 515 HH

Ndindi TA
Treat = 446 HH
Control =460 HH

MANGOCHI

Jalasi TA
Treat = 378 HH
Control =375 HH

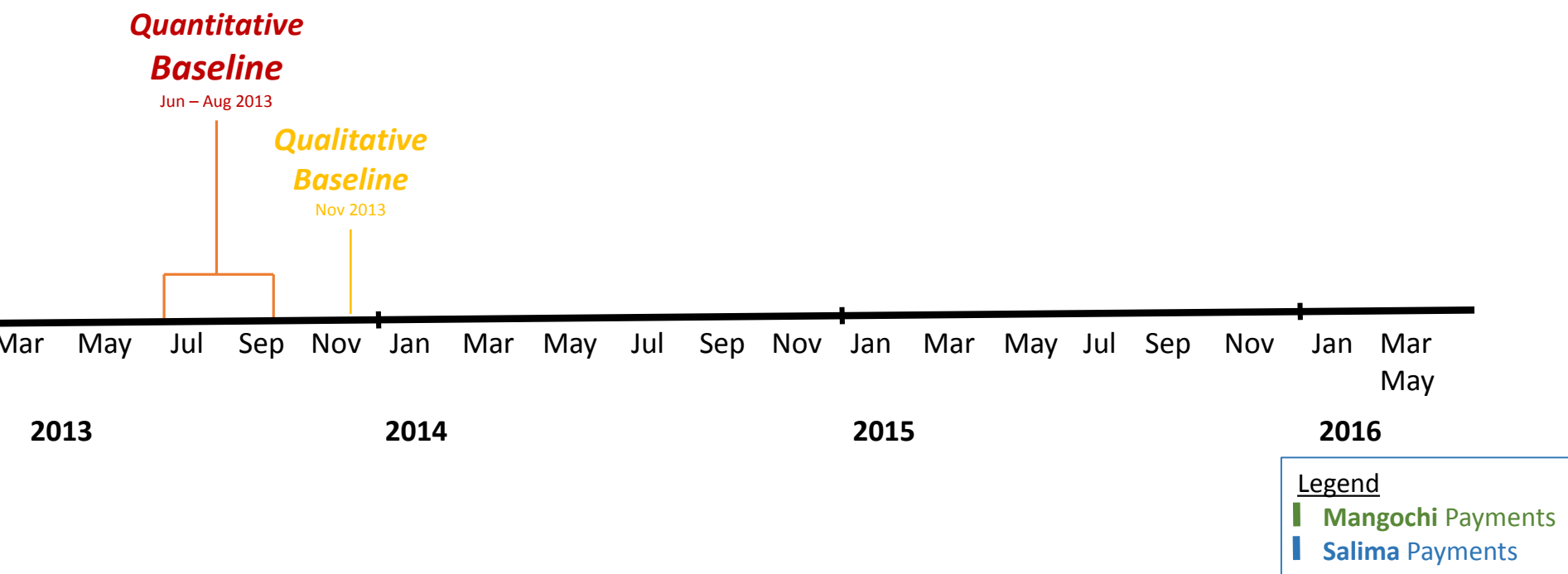
M'bwana Nyambi TA
Treat = 500 HH
Control = 503 HH



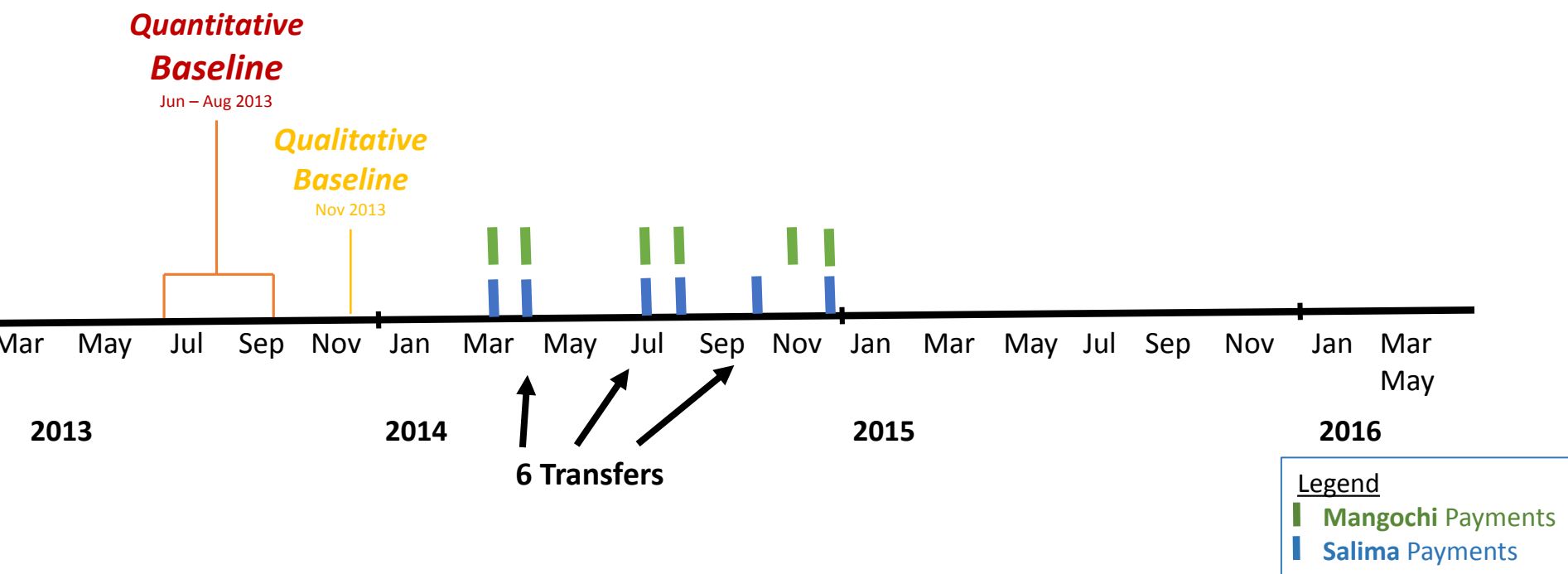
Data Sources: Global Administrative Areas Database (GADM), Global Lakes and Wetlands Database (GLWD), Sudhanshu Handa



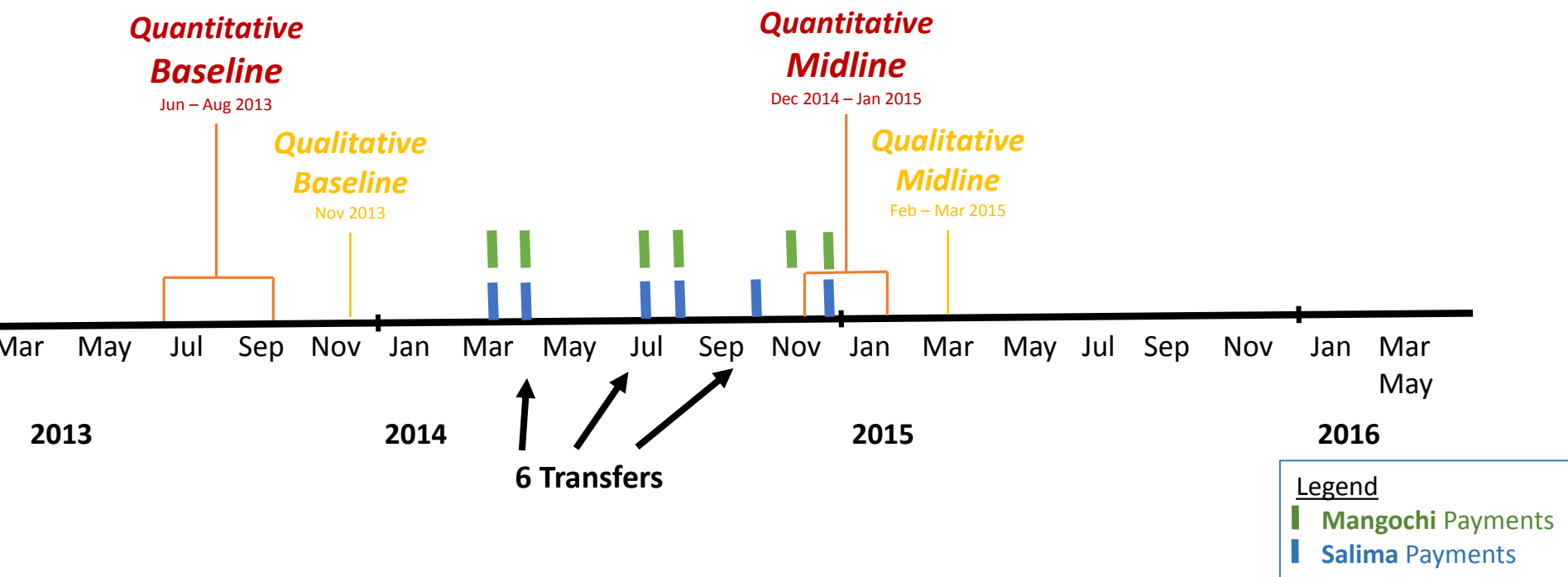
Timeline for Malawi SCTP *Midline* and *Endline* Impact Evaluation and Transfers



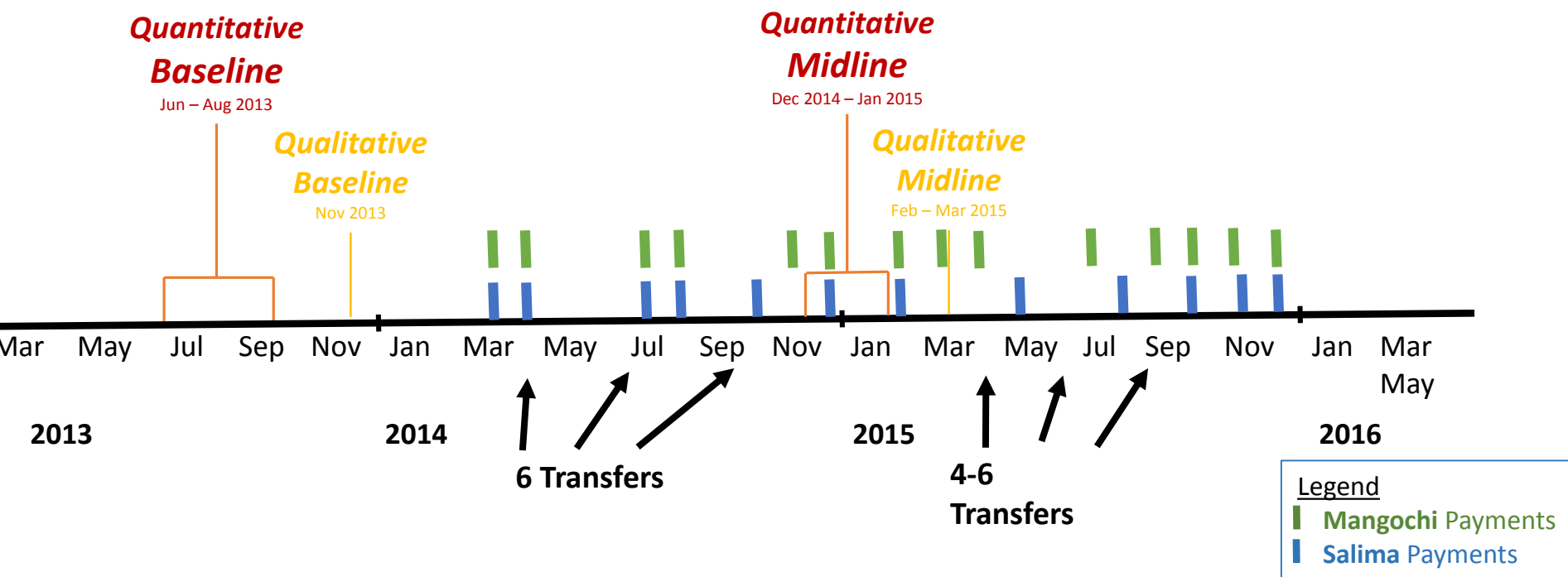
Timeline for Malawi SCTP *Midline* and *Endline* Impact Evaluation and Transfers



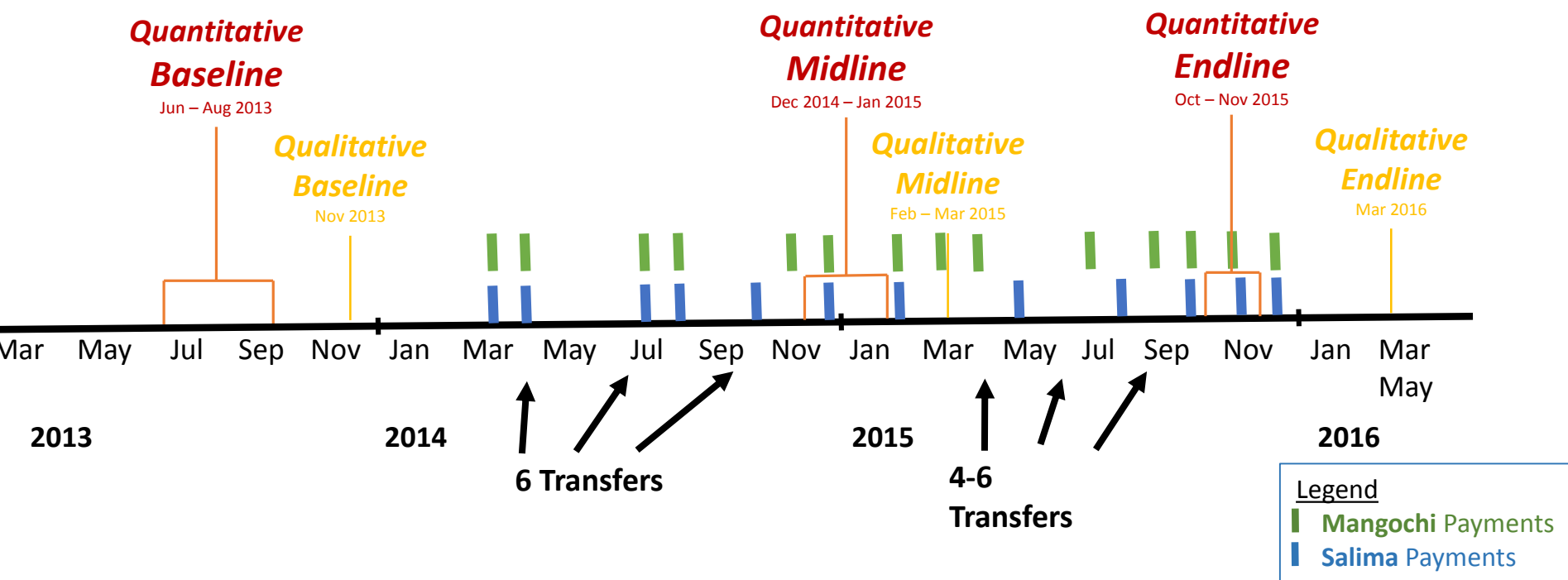
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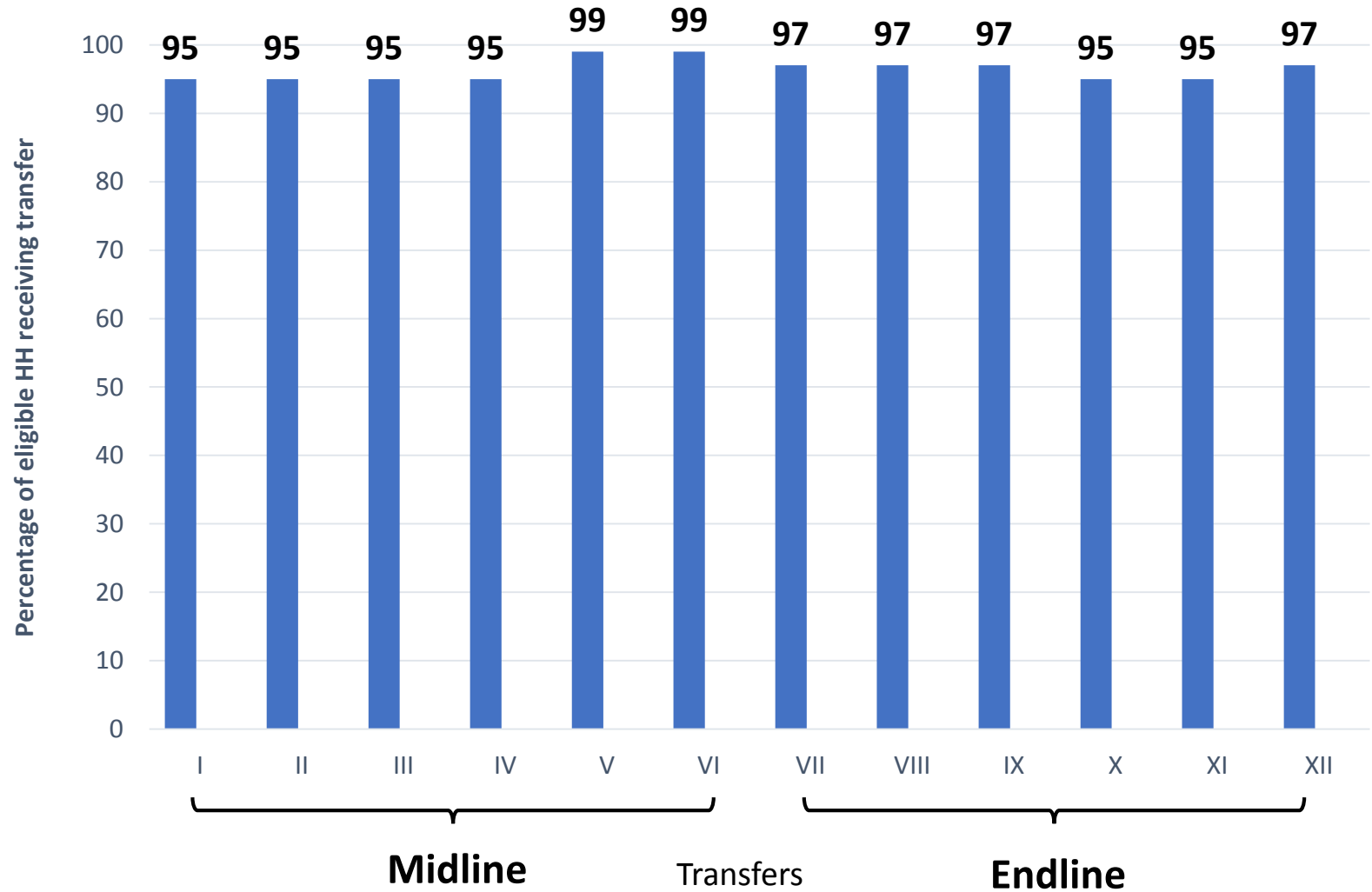
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Timeline for Malawi SCTP *Midline* and *Endline* Impact Evaluation and Transfers

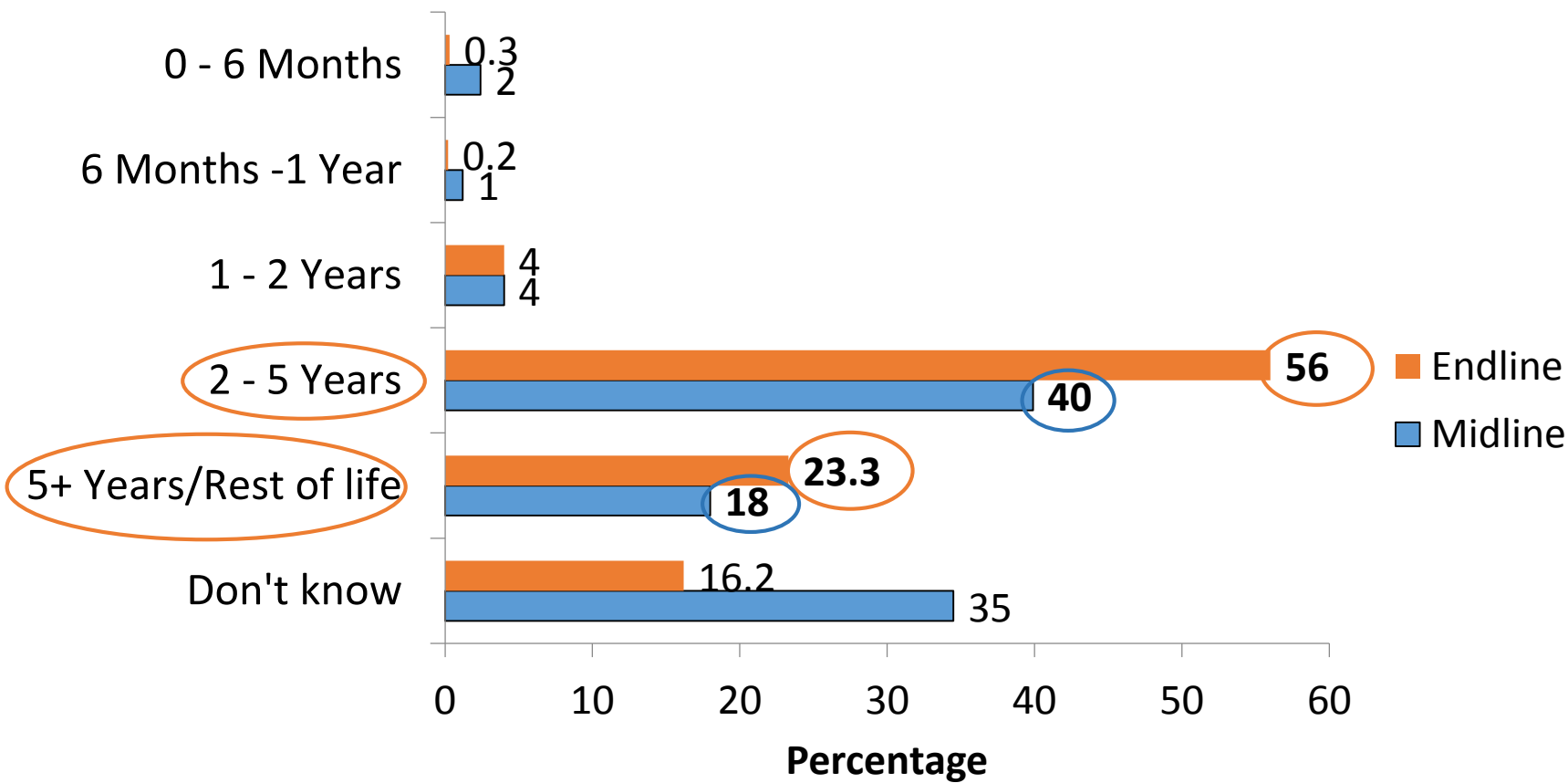


Over 95% of eligible households have received their transfers*

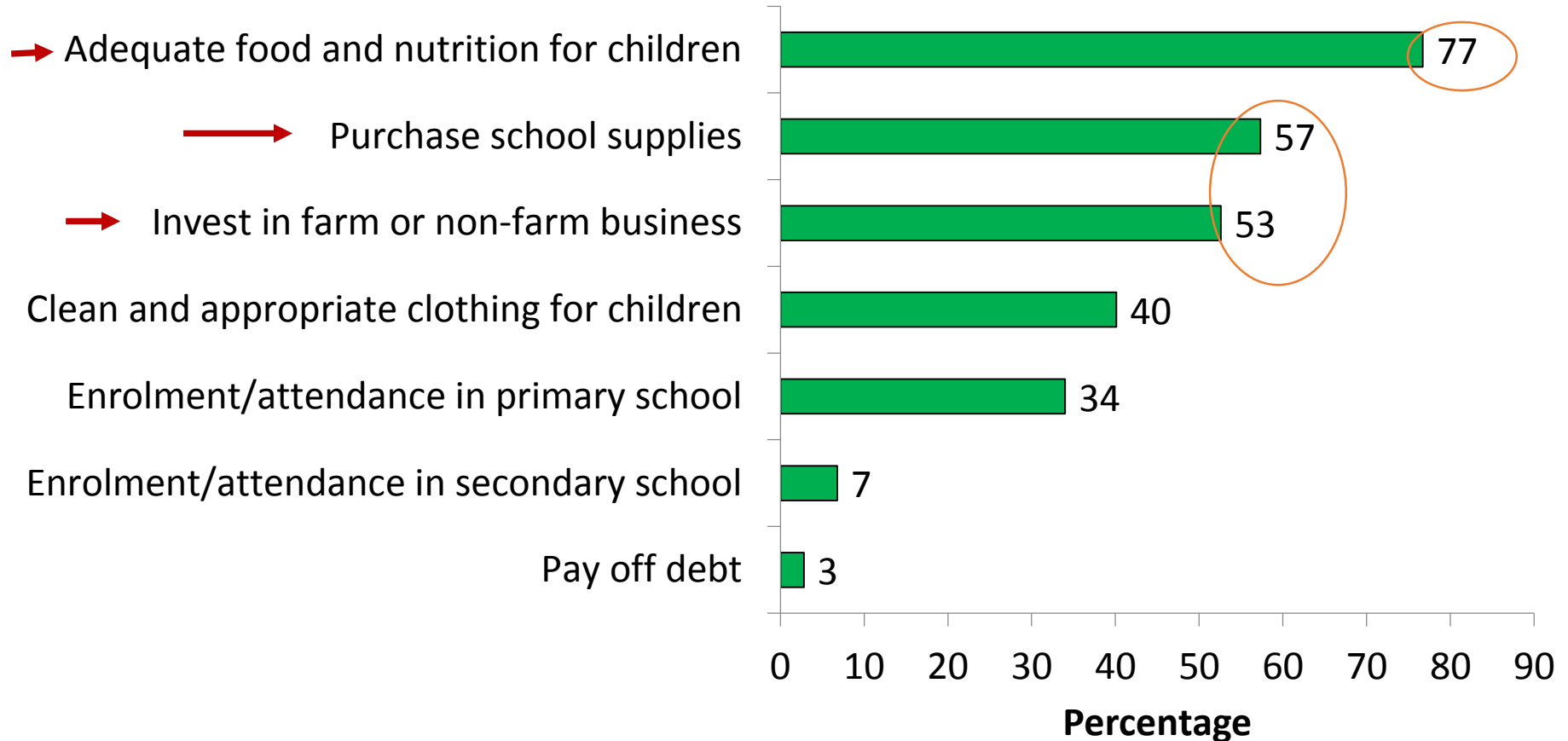


*: According to the transfers payment data.

Expectations about future transfers: How long beneficiaries believe they will receive payments?



Unconditional? 73% of beneficiaries believe that they must follow rules to keep eligibility, endline



Note: Multiple responses allowed

- **Who informed household of program rules?** 52 % SCTP rep.; 33 % payment staff
- **Consequences for not following rules:** 65 % kicked out of program
- **26 % think adherence to SCTP rules is monitored.**

SCT actual transfer data, at midline (Dec2014-Jan 2015)

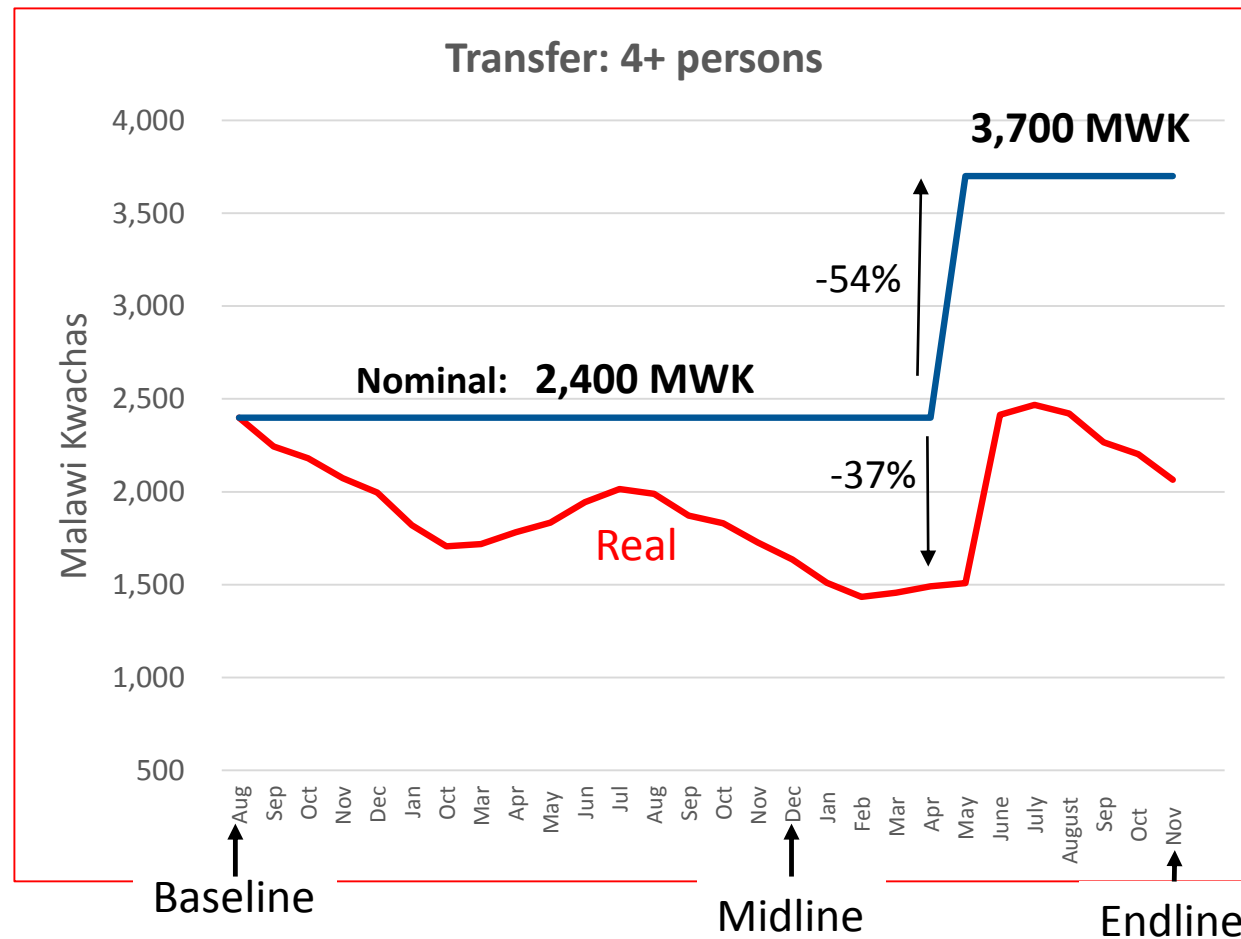
	Household size	PC total annual Transfer (Mk)	Annual PC Consump. (Mk)	Transfer Share (%)	% HH with Transfer Share <u>below 20%</u>
Total	4.5	9,187	49,080	18	68%
Poorest 50%	5.5	7,229	24,522	25	45%
Upper 50%	3.7	10,849	70,641	15	91%

Most households have a Transfer Share <20%



Real value of transfers affected by inflation

- Transfer amount varies by household size, with cap at 4 members, and education bonus
- Amounts increased in May 2015 by about 55%
- However, about 60% inflation between Aug 2013 and May 2015



Summary:

Program is operating well, providing regular and predictable transfers, but must protect real value of transfer.



Payday in Salima:

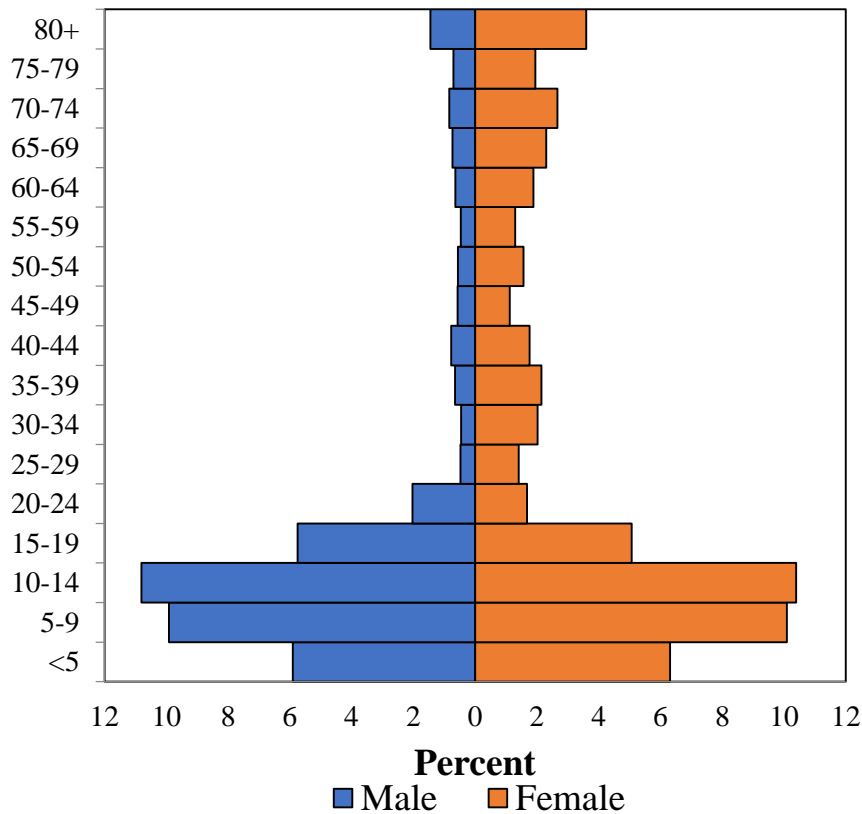
Photo credit, Jacob de Hoop

SCTP households significantly more vulnerable: More orphans, older heads, poorer

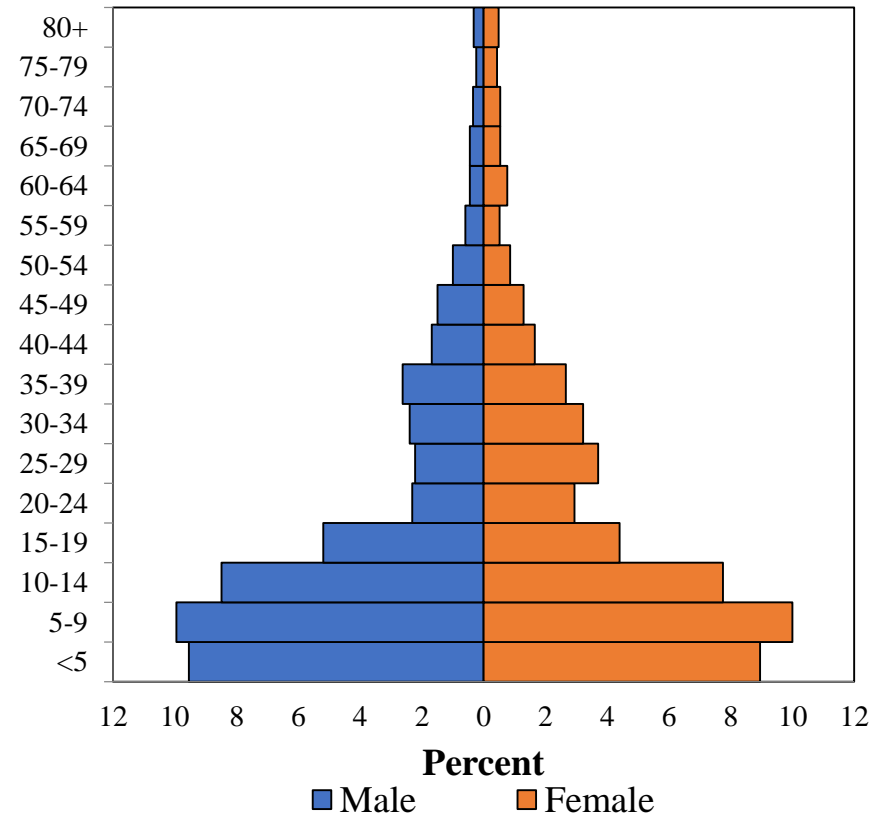
	SCTP	IHS3 Rural
Poor (individuals) (%)	93	38
Children 0-17 orphans (%)	35	11
Age of household head (Years)	58	43
Household head is female (%)	84	25
Household head has no schooling(%)	72	26

SCTP households missing prime-age members

SCTP Eligible Population

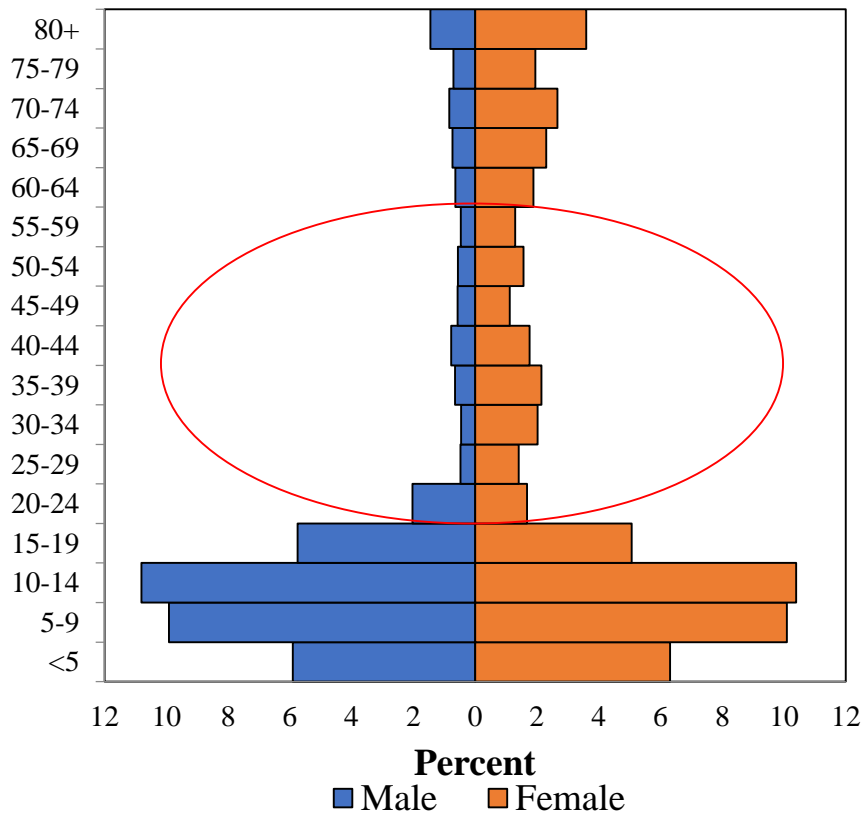


IHS3 Rural Ultra-Poor Population

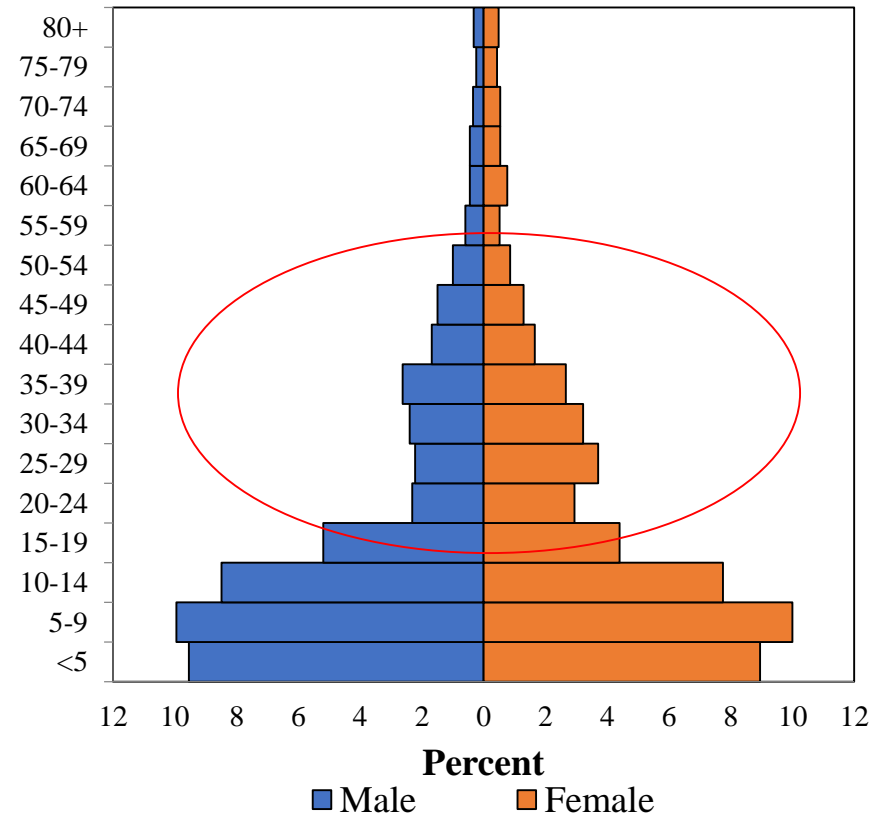


SCTP households missing prime-age members

SCTP Eligible Population



IHS3 Rural Ultra-Poor Population

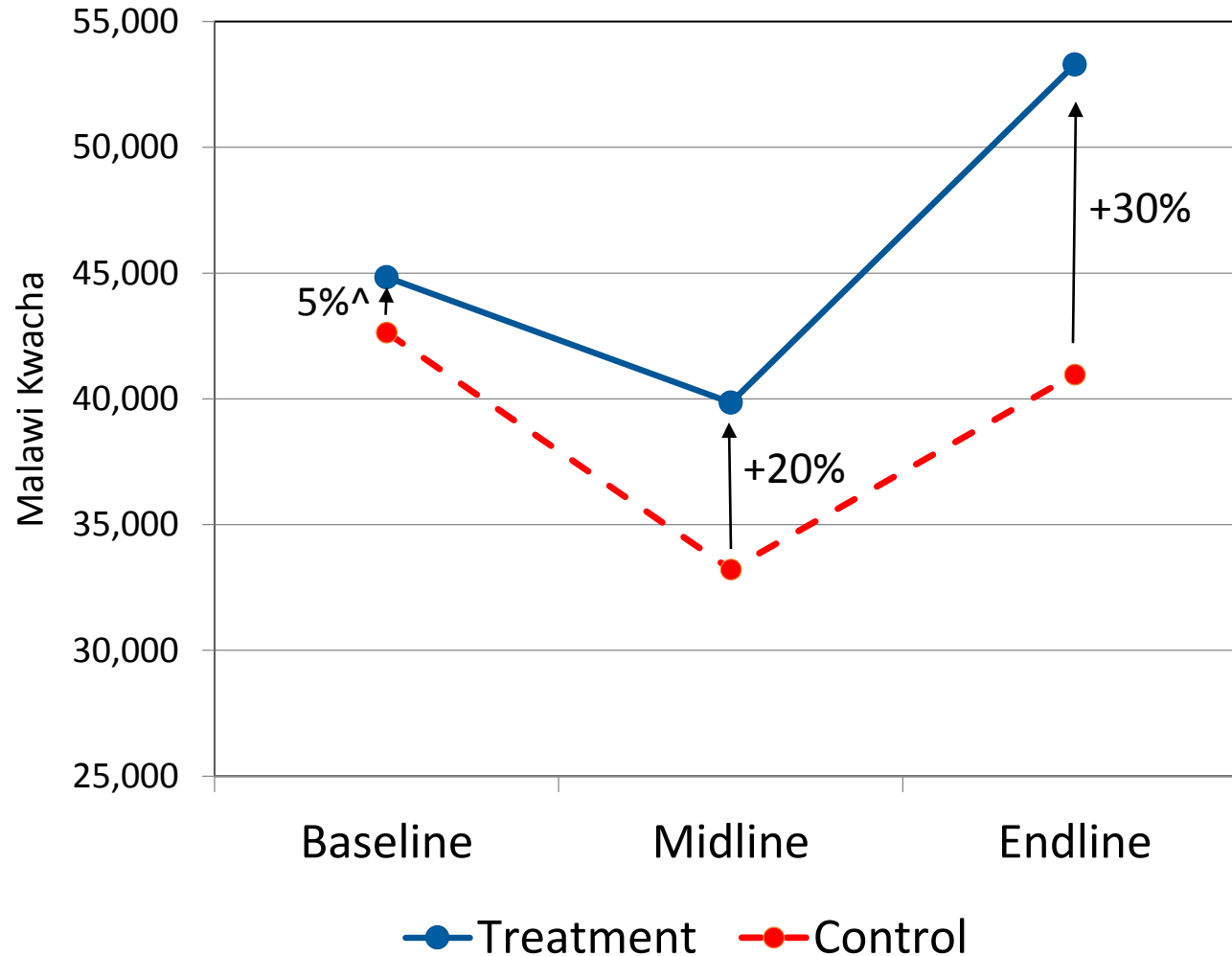


**Results:
Where did the
transfer go?**



Elderly beneficiary completes endline survey: Photo credit, Jacob de Hoop

Most of the transfer is going to consumption: All Households



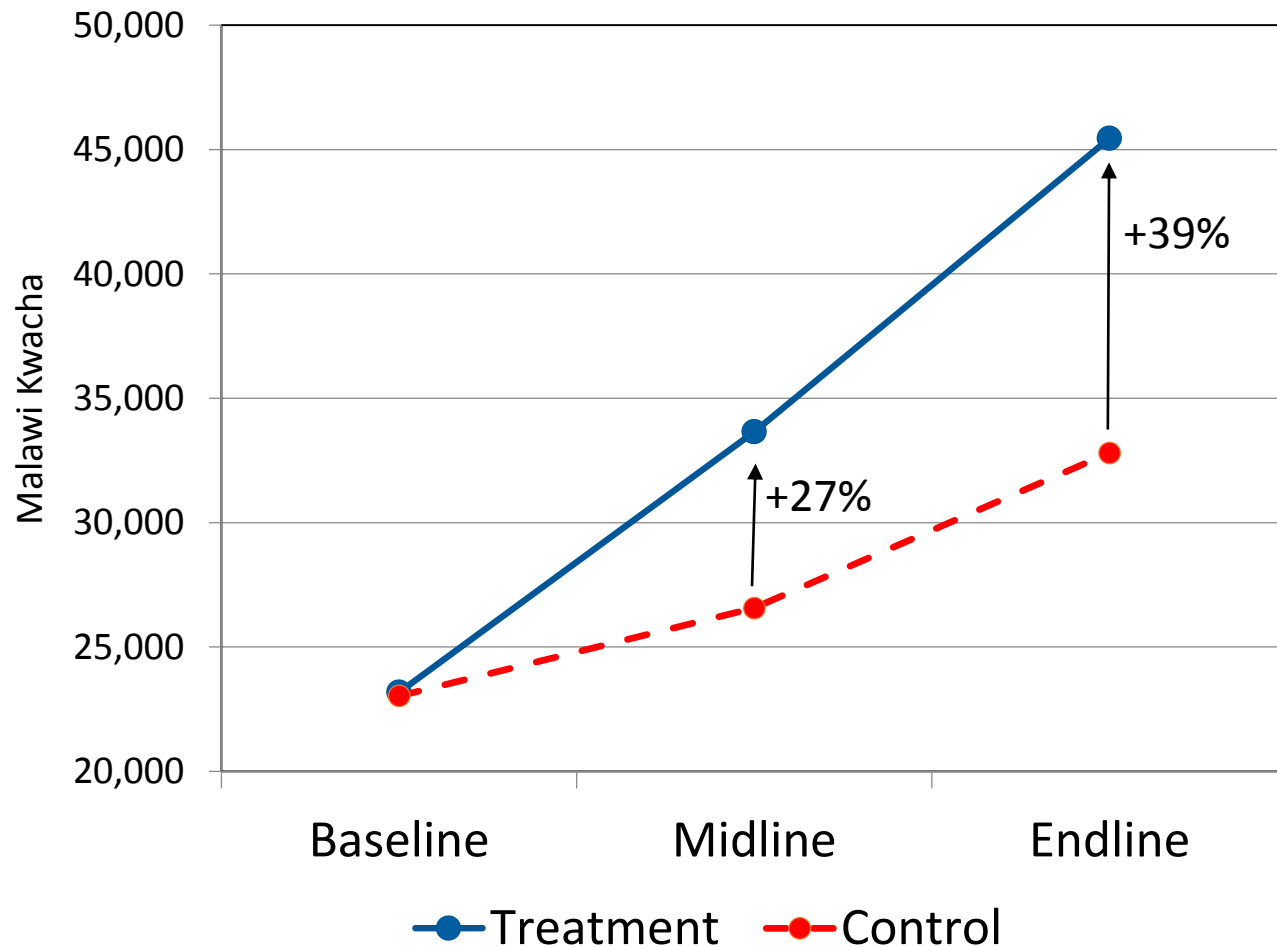
Impacts at:

- **Midline: 7,741 MWK*****
 - **Endline: 13,022 MWK*****
- Consumption in Treatment 30% higher than in Control**

80% of the transfer to Consumption, at midline

^: Difference at baseline not statistically significant.

Stronger Impacts on Consumption per Capita in Poorest 50% of Households



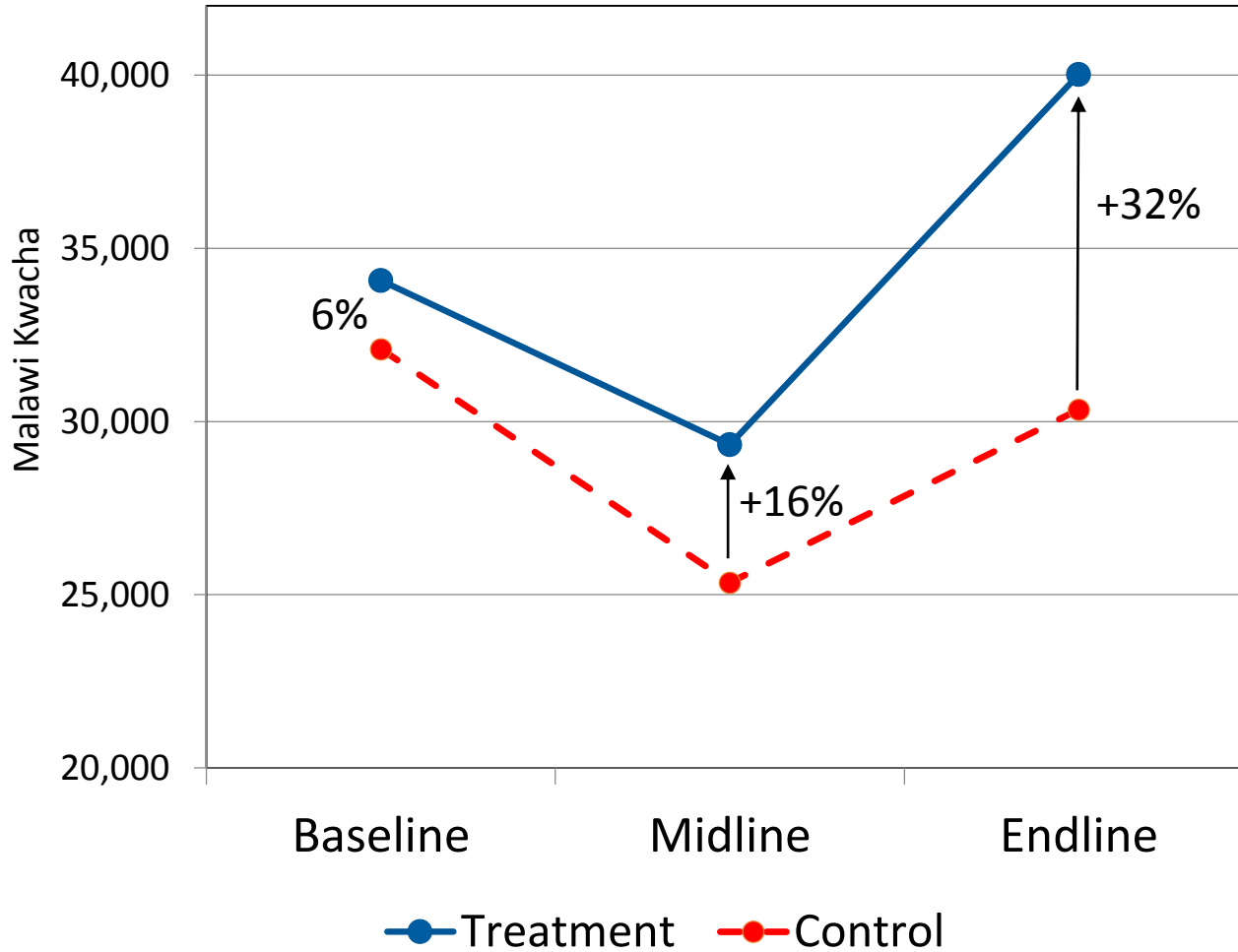
Impacts at:

- Midline: **6,200 MWK *****
- Endline: **12,128 MWK *****

Consumption in Treatment 39% higher than in Control.



Consistent impacts on food consumption per capita: All Households

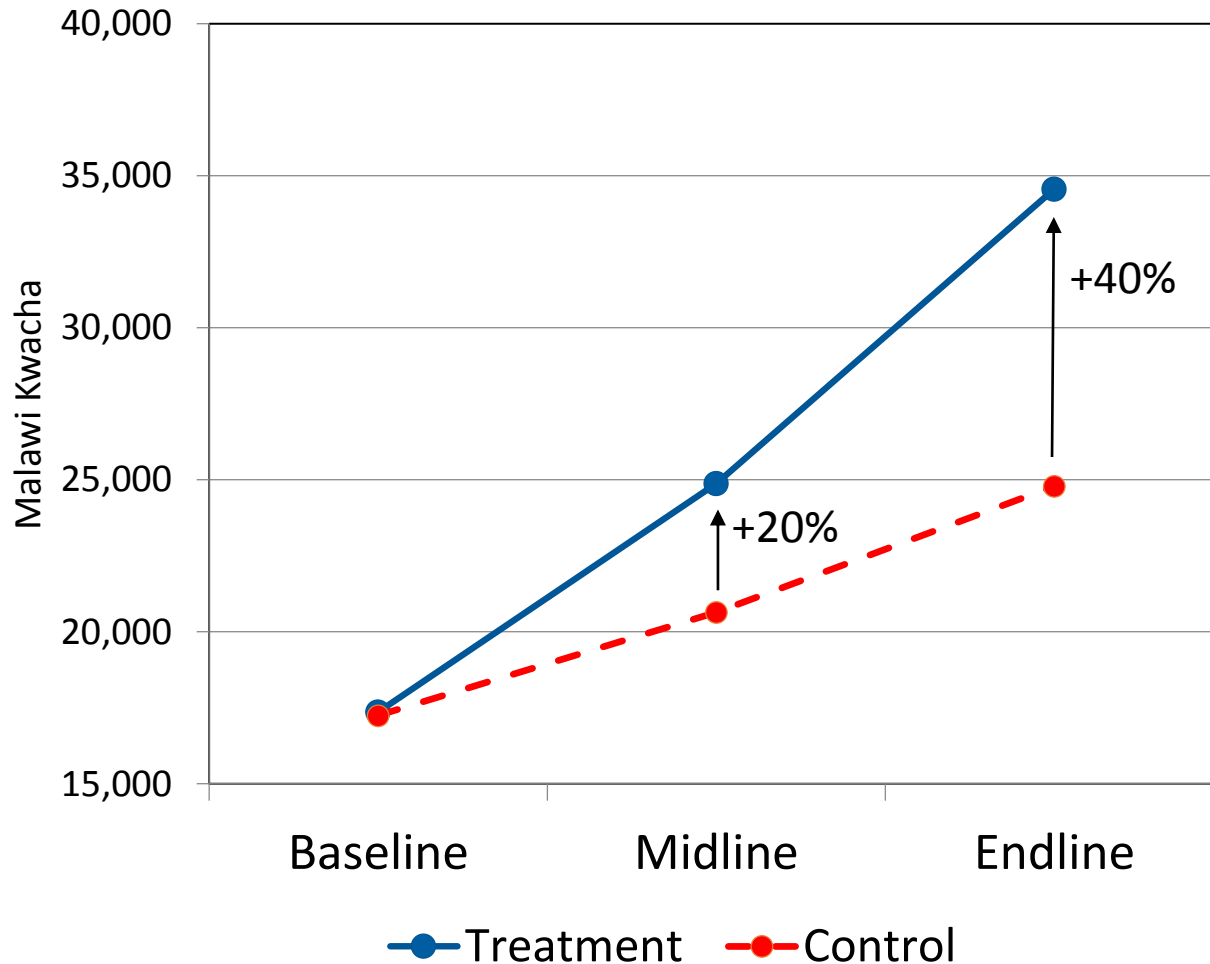


Impacts at:

- Midline: **4,657 MWK*****
- Endline: **9,700 MWK*****

Baseline: **Food is 78% of total Consumption.**

Stronger Impacts on Food Consumption per capita in Poorest 50% of Households



Impacts at:

- Midline: **3,652 MWK*****
- Endline: **8,790 MWK*****

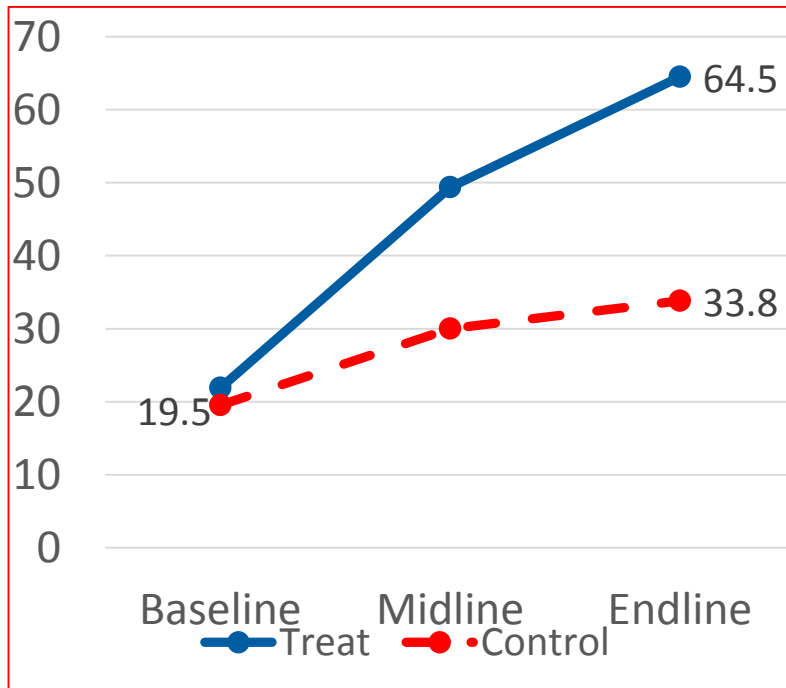
Children's Material Well-Being (Ages 5-19 years)

Shoes

Impacts at:

-Midline: **20 pp*****

-Endline: **31 pp*****

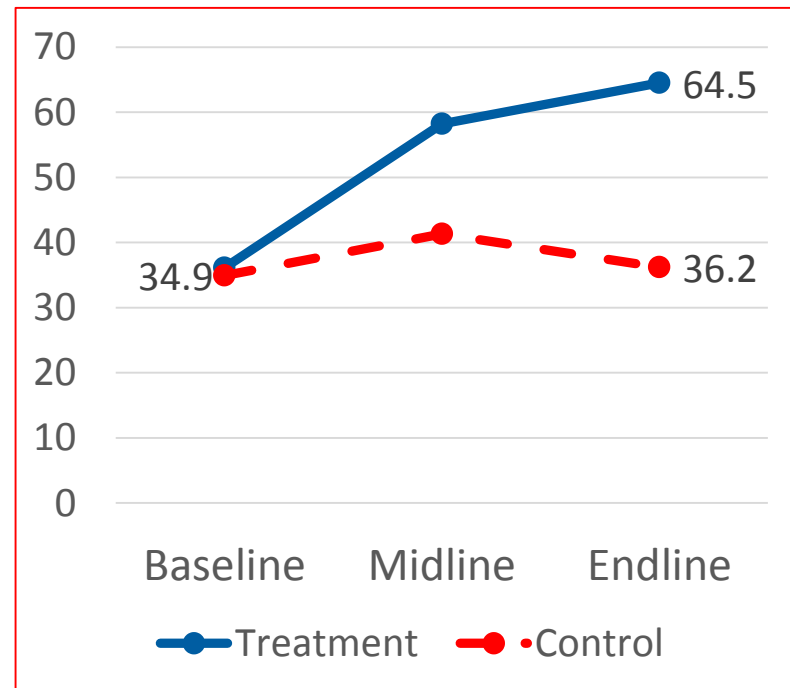


Blankets

Impacts at:

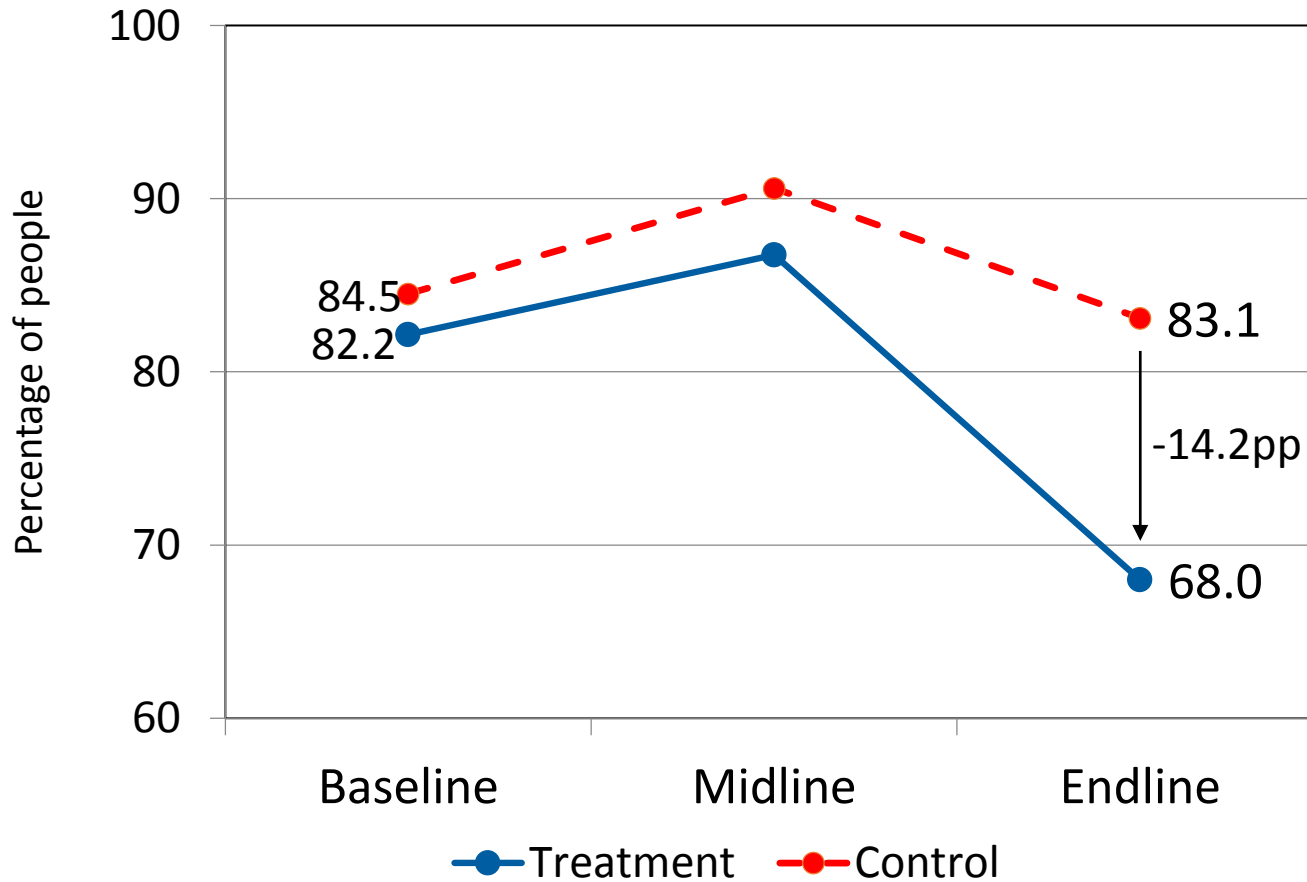
-Midline: **17 pp*****

-Endline: **29 pp*****



+ Similar impacts for 50% Poorest households

Large (14.2 percentage point) reduction in Ultra-poverty



Impacts at:

- Midline: -7.7 pp **
- Endline: -14.2 pp ***

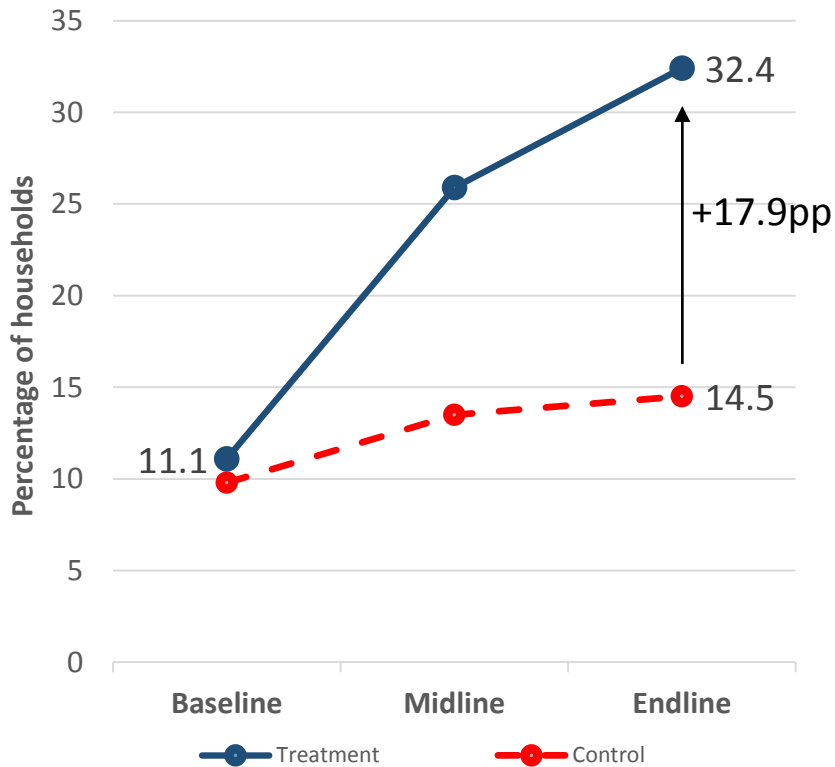
Where did the rest of the transfer go?

To Livestock: Goats and sheep ...

Raised Goats/Sheep:

-Midline: 10.0 pp***

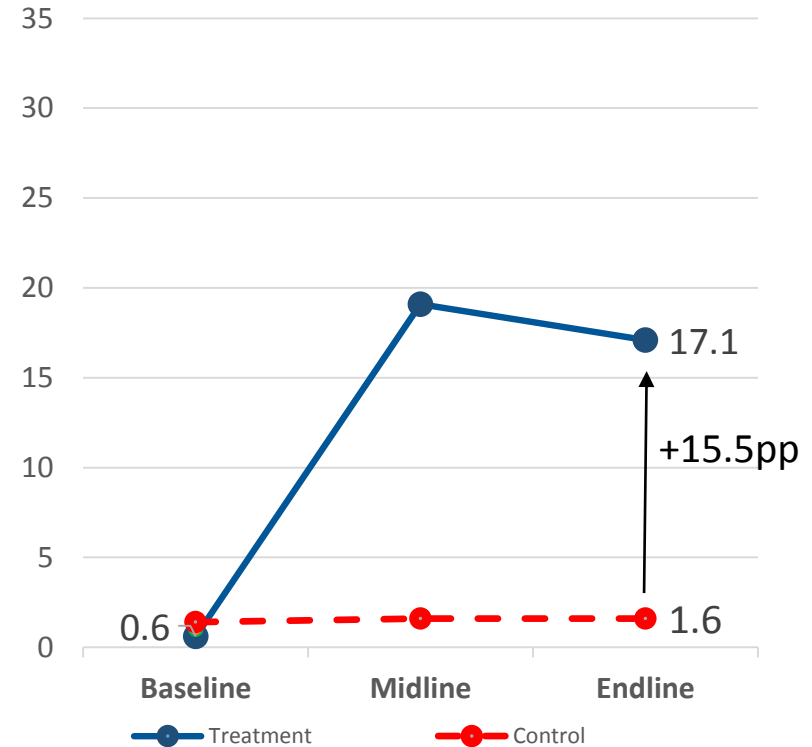
-Endline: 18.2 pp***



Bought Goats/Sheep (last 12 mths):

-Midline: 13.3 pp***

-Endline: 12.5 pp***

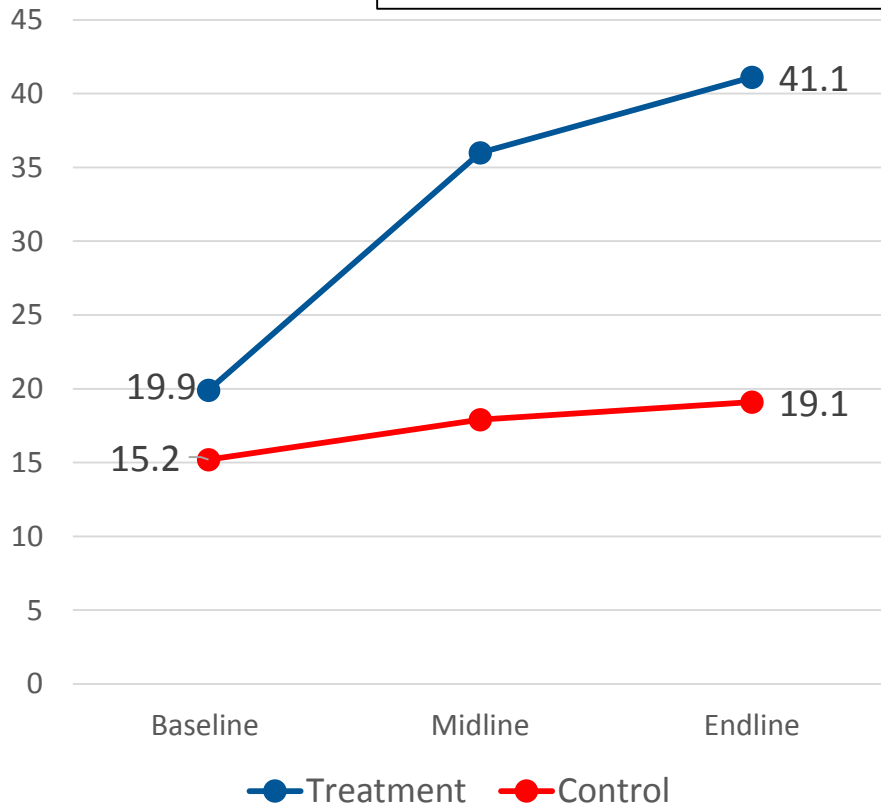


Where did the rest of the transfer go? To Livestock: ... and Chickens

Raised Chickens:

-Midline: 11.3 pp***

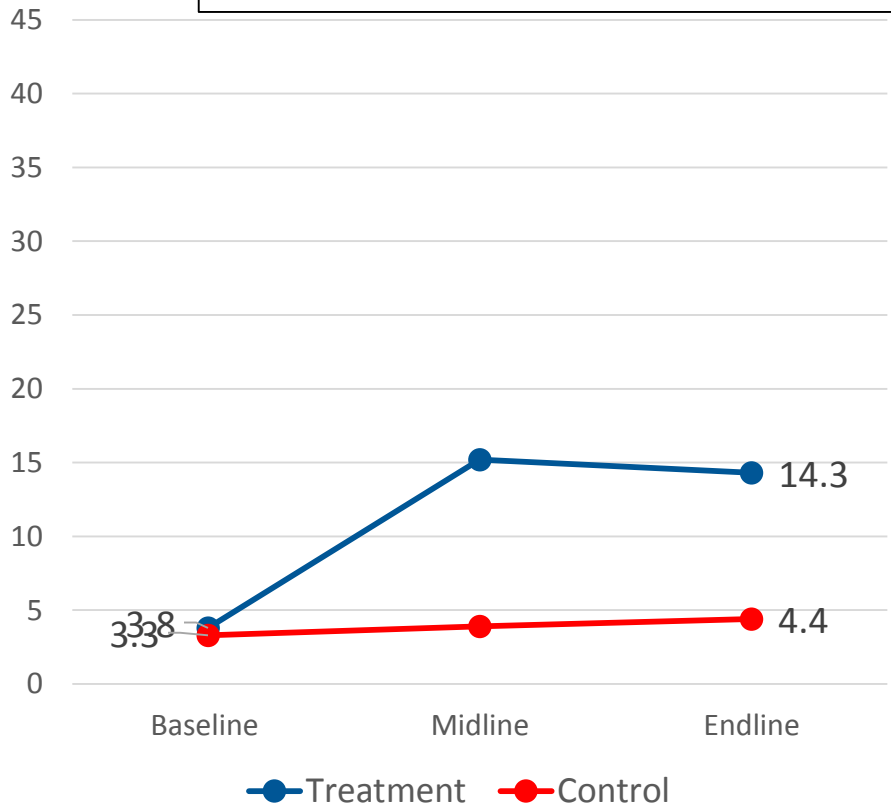
-Endline: 18.5 pp***



Bought Chickens (last 12 mths):

-Midline: 15 pp***

-Endline: 9.4 pp***



Where did the rest of the transfer go?

Also to agricultural inputs, paying loans, transfers

- Bought agricultural tools: hoe, axe, panga knife, sickle.
- Credit/Loans:
 - Paid loans
 - Reduced purchases on credit
- Transfers to/from households
 - Provided cash and food, particularly in poorest 50% households at endline

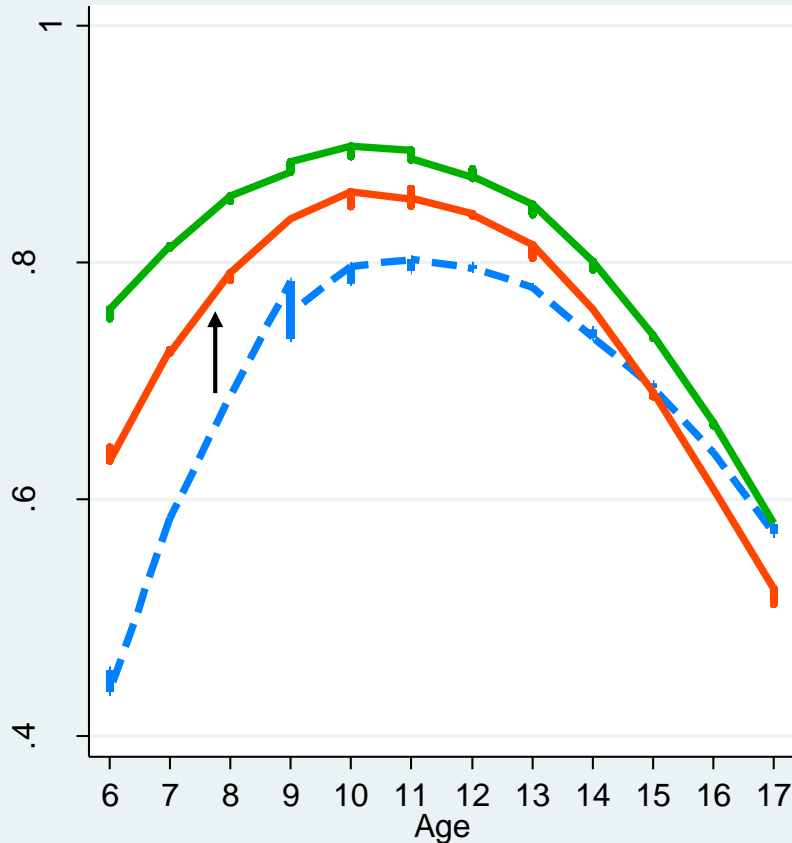
Did the SCTP have impacts on human capital outcomes?



Salima youth: Photo credit, Angeli Kirk

School Enrolment Impacts (6-17 year olds)

Control



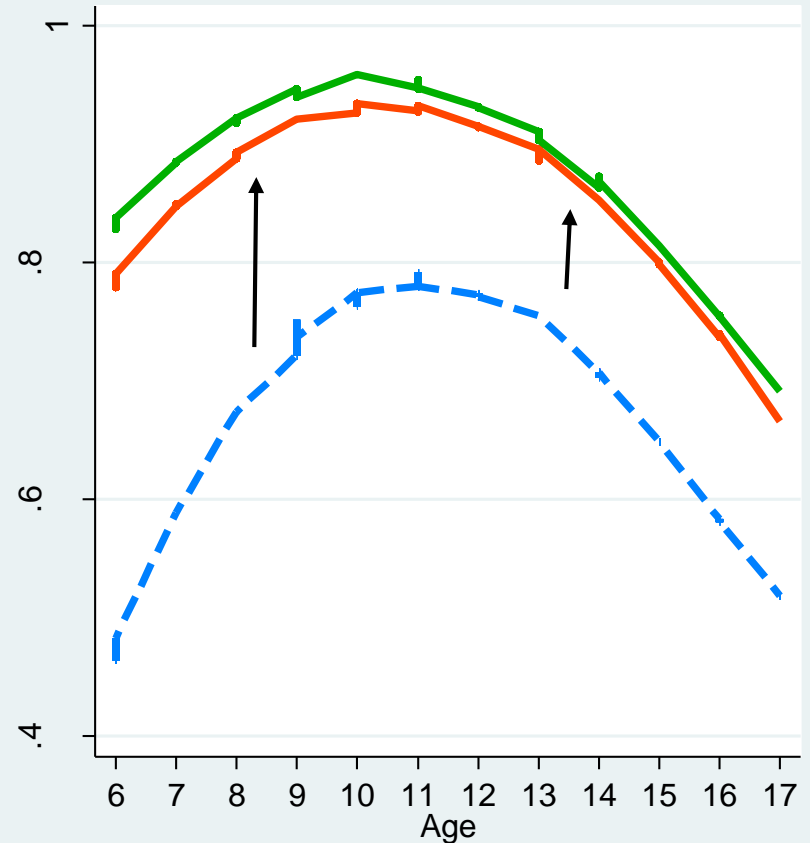
- - - Baseline — Midline
— Endline

Impacts at:

-Midline: **11.7 pp*****

-Endline: **7.0 pp****

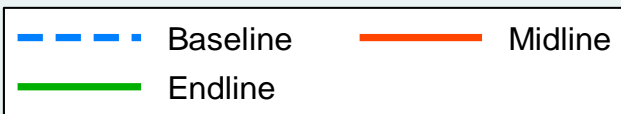
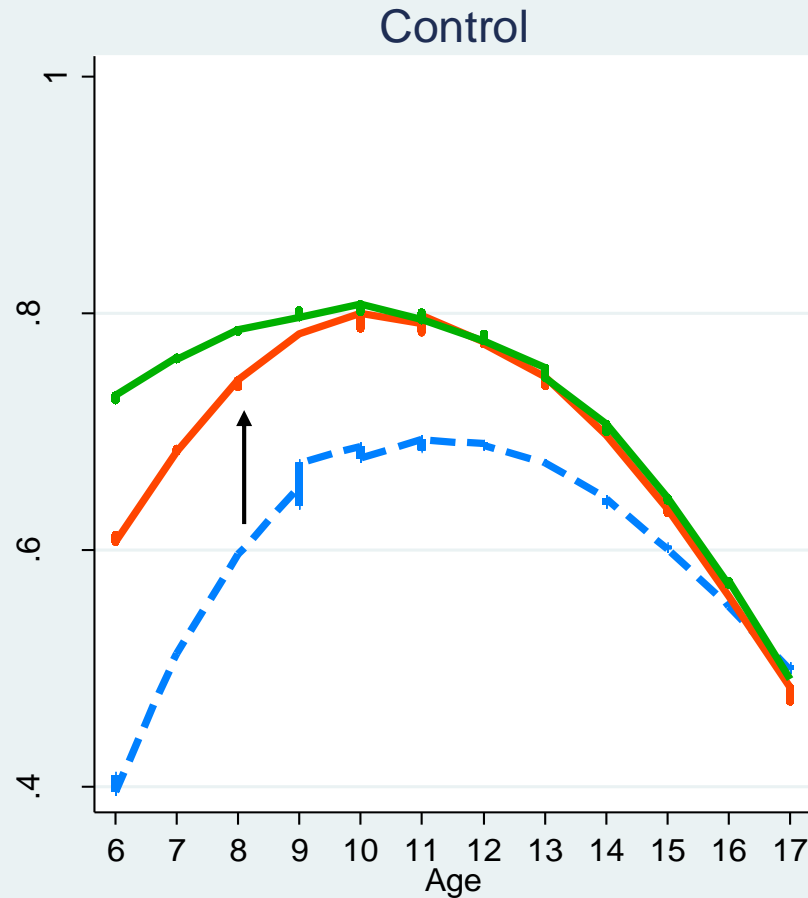
Treatment



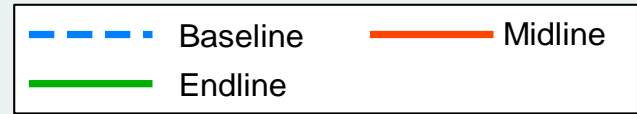
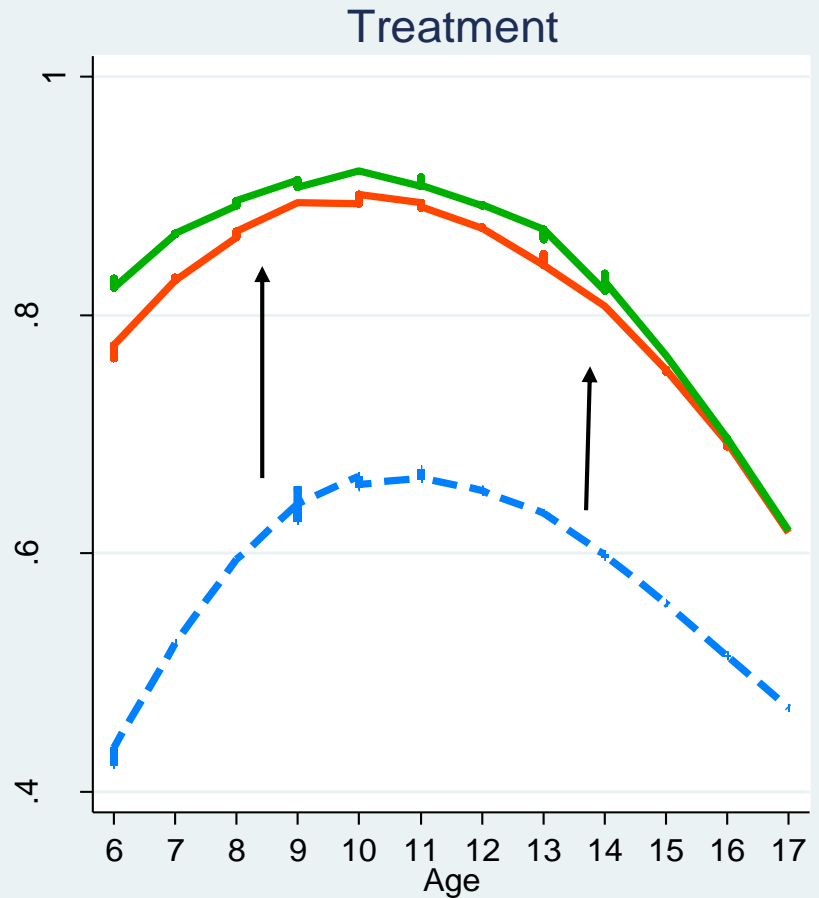
- - - Baseline — Midline
— Endline

Stronger impacts on Primary school age
Stronger effects on boys than girls

Regular school attendance Impacts (6-17 year olds)



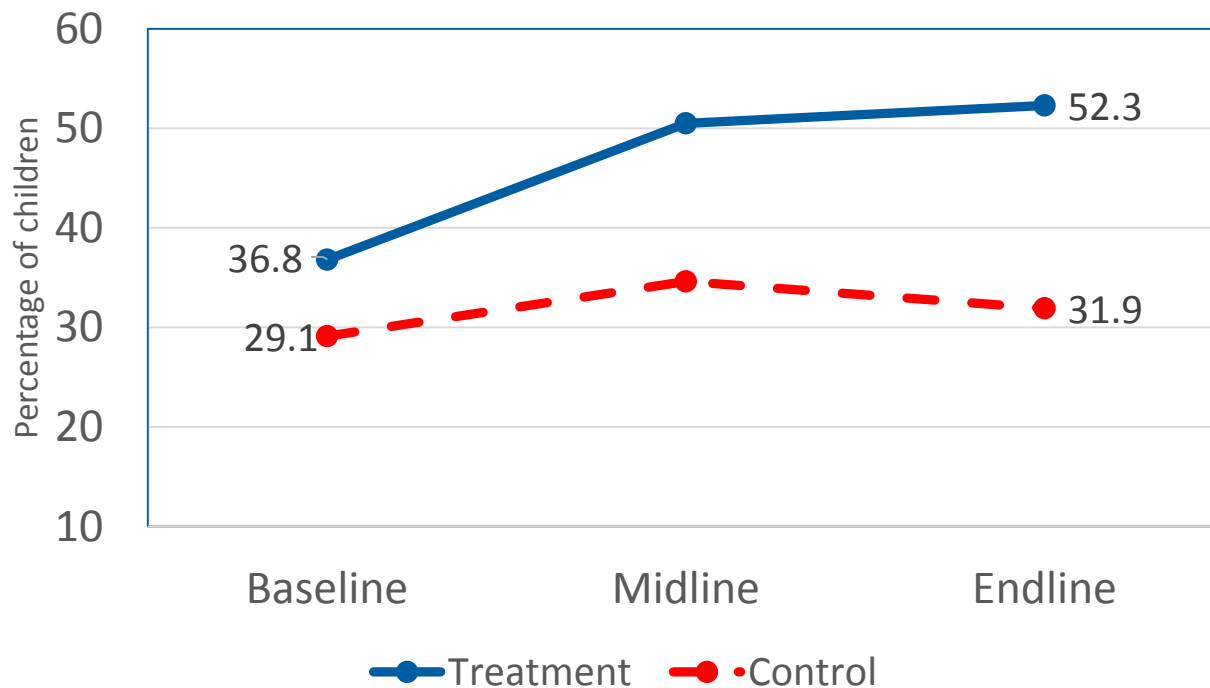
Impacts at:
 -Midline: **13.4 pp*****
 -Endline: **11.1 pp*****



- Stronger impacts on Primary school age
 - Stronger effects on boys than girls

Note: Regular attendance = No withdrawal from school for more than 2 consecutive weeks.

Impacts on Young Children Having Solid Food 3+ Times per Day: All Households



Impacts at:

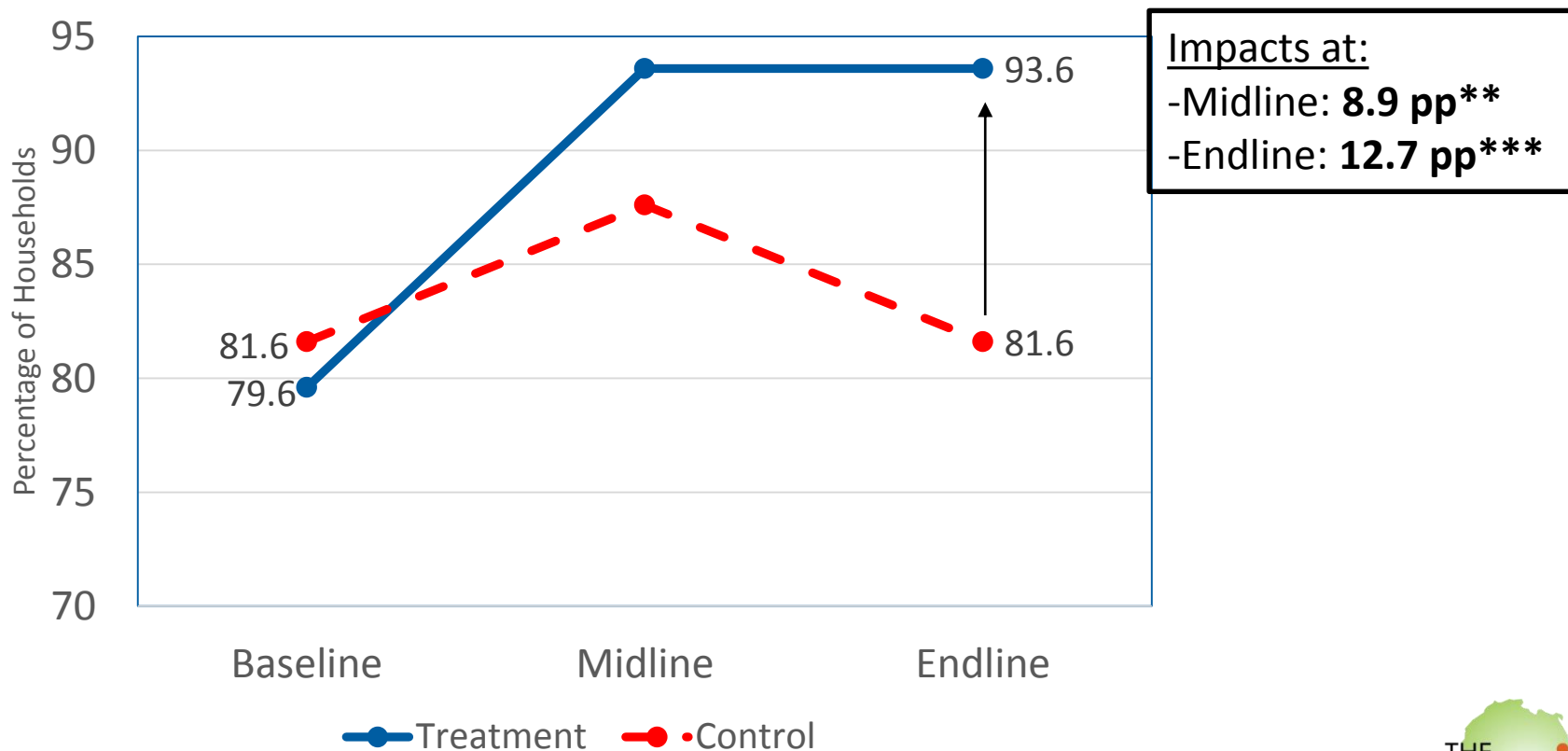
-Midline: **17.3 pp*****

-Endline: **20.3 pp*****

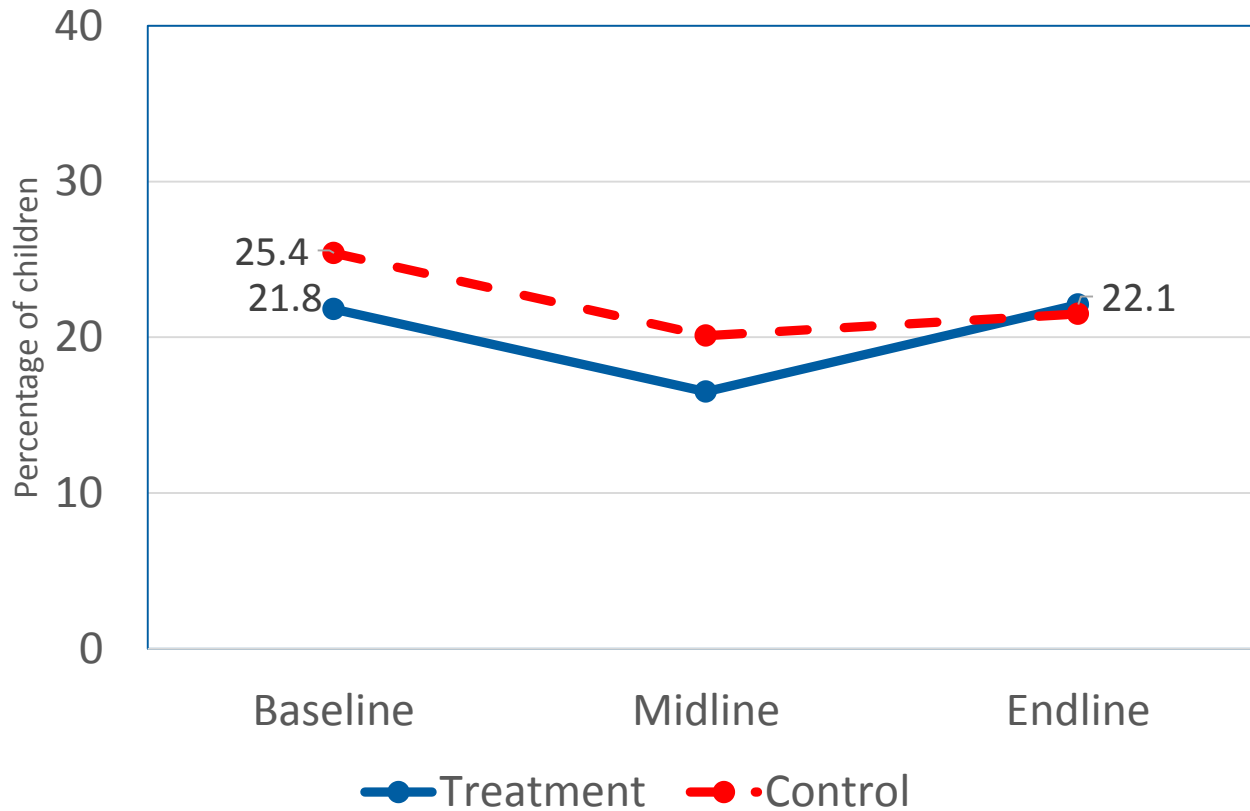
+ Similar impacts for 50% Poorest households



12.7 percentage points increase on Eating 2+ Meals per Day: All Households



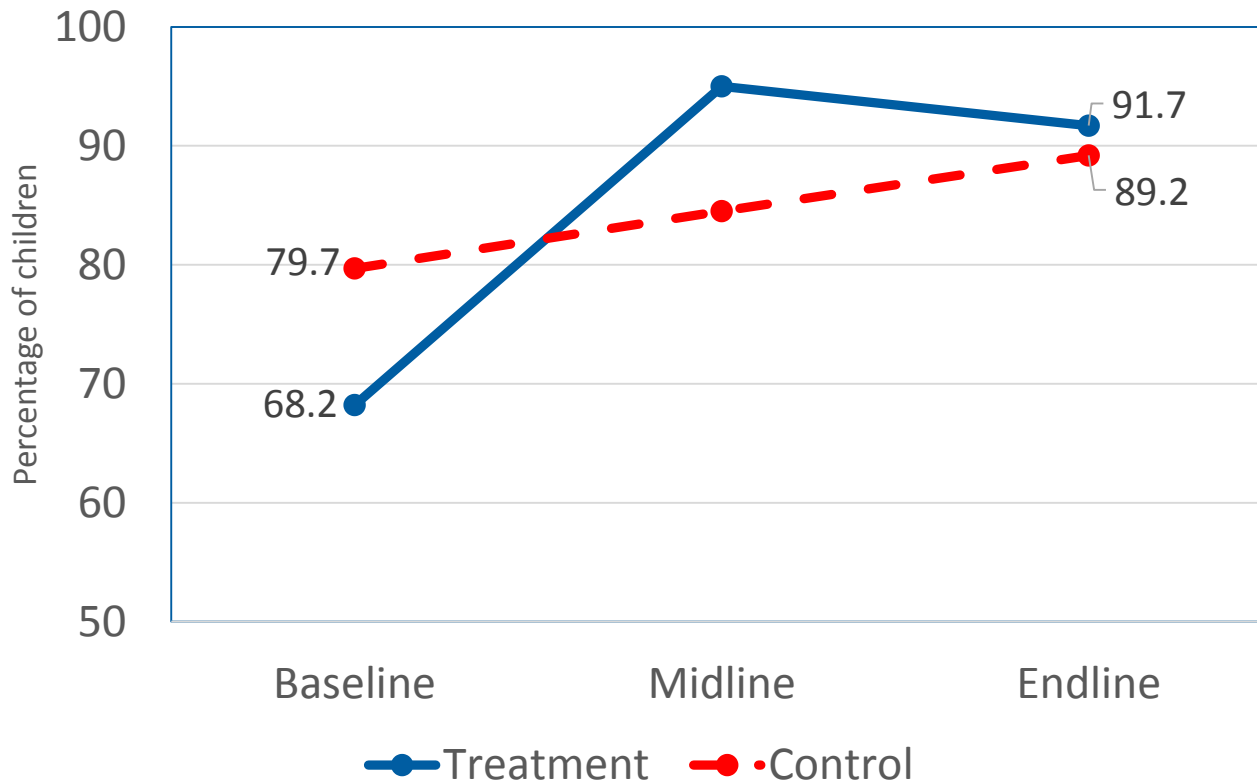
Impacts on Fever Incidence among Young Children: All Households



Impacts at:
-Midline: **-1.3 pp**
-Endline: **3.3 pp**



Impacts on Seeking Treatment for Fever for Young Children: All Households



Impacts at:
-Midline: **24.0 pp*****
-Endline: **21.3 pp*****



Additional impacts on health

	Midline	Endline	Baseline T mean
Any illness or injury	-6 pp**	-5 pp***	30%
Sought treatment at health facility	11 pp***	11 pp***	51%

- No effects on:
 - stunting or underweight
 - Birth delivery at health facility
 - Use of health services for diarrhea or cough
 - Participation in other health programs

Impacts on Child Labor (children 6-17):

- Reduction in *ganyu* work for boys, but not significant
- Reduction in *ganyu* work for girls, significant at midline (-7.9 pp*)
- Increase in household chores (+10.5 pp***)
- Increase in child labor, hazardous activities (+10 pp***), exposure to dust, fumes, exposure to heat, cold.

Did the SCTP have impacts on other outcomes?



Village meeting in Salima: Photo credit, Amber Peterman

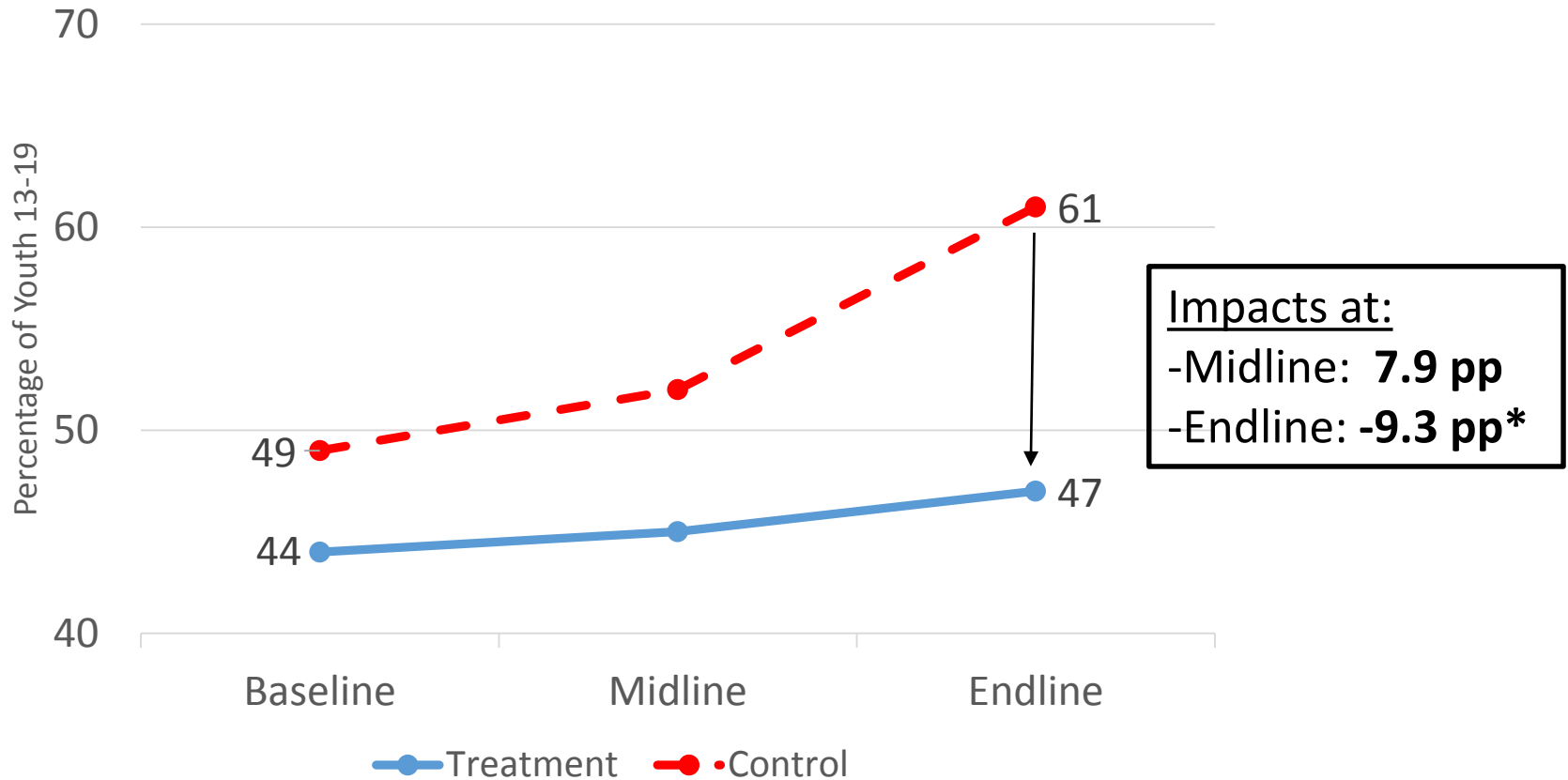
Impacts on subjective welfare: Summary

- Impacts on expectations about the future and caregiver stress:

	Midline	Endline	Baseline T mean
Life will be better in a year	20 pp***	25 pp***	52%
Life will be better in 2 years	18 pp**	19 pp***	43%
Will likely have food shortages	-13 pp**	-14 pp**	76%
Caregiver stress scale (points)	-1.0	-1.6***	

- And, negative impacts on indexes of distress: Social, Life, and Financial.

Decreases in mental health (% with depressive symptoms) among youth age 13-19 at baseline



As measured by ≥ 20 on the CES-D scale. Impacts driven by females and ultra-poor households.

Summary of (select) risk behaviors over time among youth age 13-19 at baseline

Indicator	Midline impact	Endline impact*
Sexual debut	❖	❖
Age at sexual debut		
Recent transactional sex (last 12-months)	❖	
Lifetime transactional sex		
Recently used condom (last 12-months)		
Number of sexual partners (last 12-months)		
Concurrent partners (last 12-months)		
First sex forced		❖
Ever forced to have sex		❖
Self assessed HIV risk (moderate or high)	❖	❖
Ever smoked (tobacco etc.)	❖	❖
Ever drank alcohol (more than a few sips)	❖	

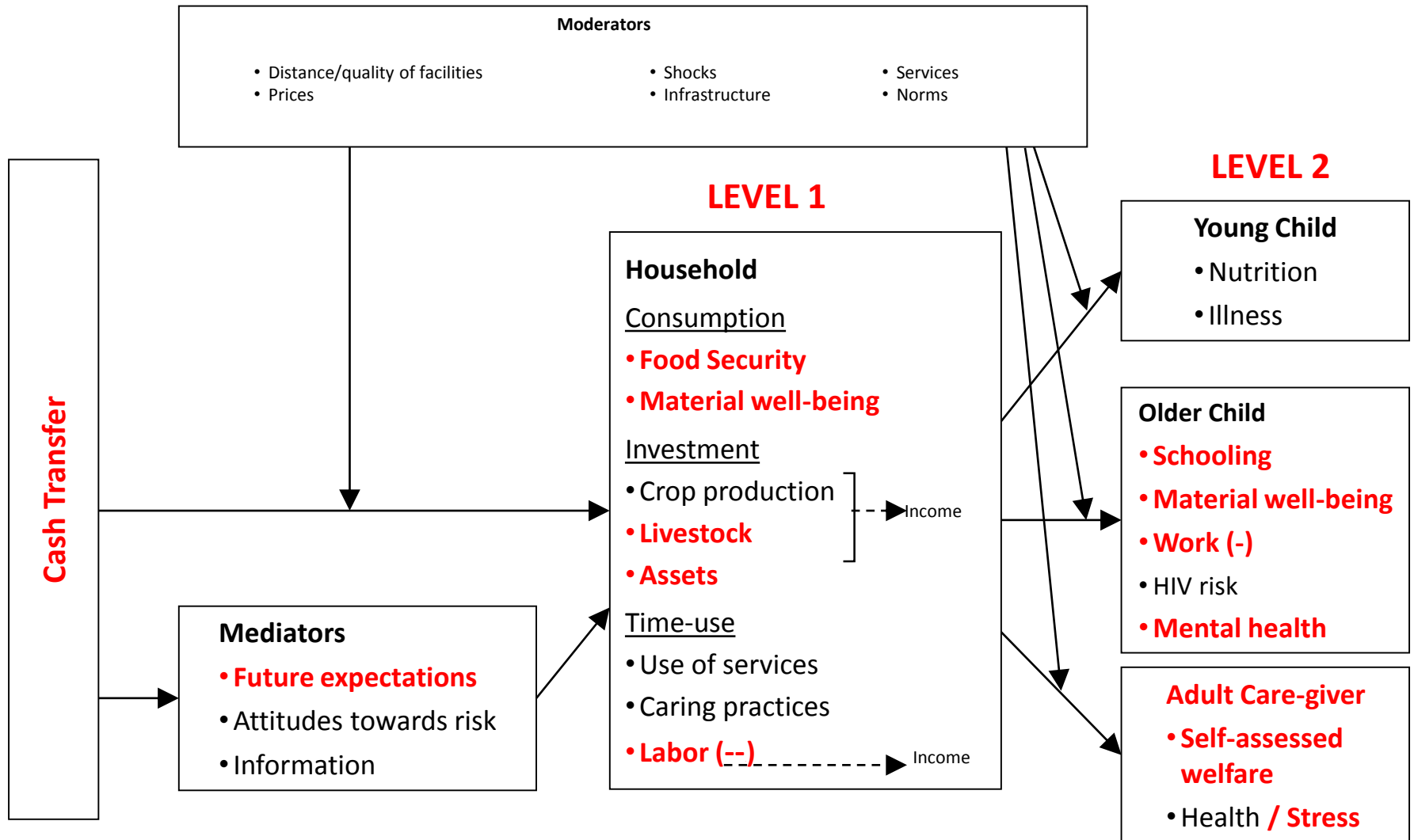
❖ Red is protective impact

❖ Blue is protective in subgroups

Summary

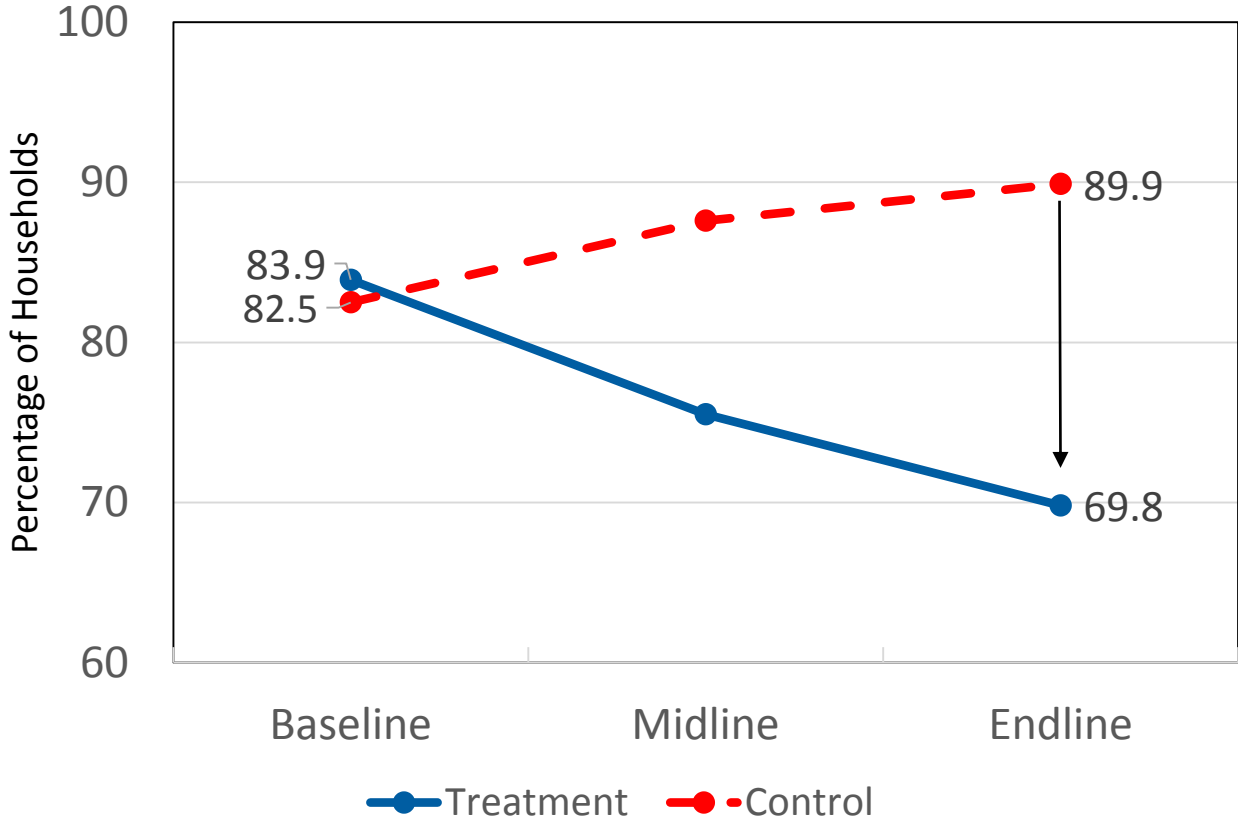
- Program operating well: steady and predictable transfers, but real value affected by inflation; self-regulation
- Transfers used mainly for:
 - food consumption, food and clothing/footwear
 - Productive means: goats, chickens, agricultural tools and inputs;
 - Repay loans and avoid further debt
 - Some in-kind transfers to other households
- Positive impacts on food security, mental health, education, expectations about the future
- No impacts on adult health, use of services, delivery at health facilities
- Negative impacts on child labor, perhaps due to increased productive activities of household

Summary: Conceptual framework



Additional slides

17.6 percentage points reduction in Worrying Having Enough Food (Past 7 Days): All Households



Impacts at:
-Midline: -9.2 pp*
-Endline: -17.6 pp***

