

Projects Financed in the 2012 Cycle



Projects

Listed by Research Cluster

Early Childhood Nutrition, Development, and Health Projects

Building Parental Capacity to Help Child Nutrition and Health: A Randomized Controlled Trial

Location: Bangladesh

Principal investigator: Julia Lane, American Institutes for Research

Timeline: March 2013 to March 2015

Evaluation: In **Bangladesh**, malnutrition among children in poor rural areas leads to high incidents of stunting and poor health, delaying development. Supporting mothers to help their children has shown some positive results, but less is known about how to engage fathers. Researchers will evaluate low-cost integrated interventions, which will target pregnant women and parents with children under age three with programs for nutrition and child stimulation.

The Medium Term Effects of a Home-based Early Childhood Development Intervention in Colombia

Location: Colombia

Principal investigator: Orazio Attanasio, University College London, Institute for Fiscal Studies

Timeline: June 2013 to December 2014

Evaluation: In **Colombia**, researchers will evaluate the medium term effects of a home-based early childhood development intervention. The program seeks to improve nutrition and development in the first two years of life through home visits to encourage children's psycho-social development and use of micronutrient supplements. The findings will be used to help policymakers and others understand the extent to which nutrition and parental involvement at an early age carry lasting effects into the medium term and how such programs can be scaled up effectively.

Piloting the First Integrated Nutrition/Workfare Social Safety Net in Djibouti

Location: Djibouti

Principal investigators: Stefanie Brodmann, World Bank; Florencia Devoto, Abdul Latif Jameel Poverty Action Lab; Emanuela Galasso, World Bank

Timeline: December 2011 to June 2015

Evaluation: In **Djibouti**, malnutrition, unemployment, and extreme poverty are key human development challenges. To address malnutrition among children younger than 24 months old, the Government of Djibouti piloted a safety net intervention that combines temporary employment (one beneficiary per household) with a component to promote better nutrition through informational classes. Researchers will examine the effectiveness of linking child nutrition and workfare as a means of reducing malnutrition in young children.

Making Integration the Operative Concept in the Indian Integrated Child Development Strategy

Location: India

Principal investigators: Harold Alderman, World Bank; Jed Friedman, World Bank

Timeline: November 2013 to July 2017

Evaluation: In **India**, researchers will measure the cost and impact of nutrition services and child stimulation in low-income settings by evaluating a package of services currently being offered to the youngest children in a nationwide child development program.

Early Childhood Nutrition, Availability of Health Service Providers and Life Outcomes as Young Adults: Evidence from Indonesia

Location: Indonesia

Principal investigator: John Strauss, University of Southern California

Timeline: November 2012 to June 2016

Evaluation: In 1989, **Indonesia** began a program to expand access to midwives in villages. By the time the program reached scale in 1998, 54,000 nurses had been trained in midwifery and placed in communities. Researchers will evaluate the effects of the midwife program on the educational decisions and outcomes, cognitive abilities, employment, and life satisfaction of the children (who are now young adults) of mothers who had access to midwives.

Addressing Chronic Malnutrition in Madagascar

Location: Madagascar

Principal investigators: Lia Fernald, University of California, Berkeley; Emanuela Galasso, World Bank; Christine Stewart, University of California, Davis; Ann Weber, University of California, Berkeley

Timeline: July 2012 to December 2015

Evaluation: **Madagascar** has the world's sixth highest rate of stunting in children. Some 53 percent of all children in the country are chronically malnourished and more than one-fourth are severely malnourished. Researchers will conduct a multi-arm randomized controlled trial to evaluate the cost-effectiveness of combined interventions designed to tackle chronic malnutrition. The trial will help the Government of Madagascar test innovative interventions that would enhance the quality and impact of the current national community-based nutrition program.

Randomized Impact Evaluation of Integrated ECD (Early Childhood Development) and Intensive Early Nutrition Activities among Vulnerable Communities in Mozambique

Location: Mozambique

Principal investigators: Sophie Naudeau, World Bank; Marie-Helene Cloutier, World Bank

Timeline: June 2012 to December 2016

Evaluation: In **Mozambique**, researchers will measure the effectiveness of two related programs that provide nutrition, early child stimulation, and parenting information sessions to children, pregnant women, and parents of young children. The project builds on a successful small-scale pilot intervention and will help experts in this field determine the scalability, cost-effectiveness, and sustainability of such projects, as well as the usefulness of integrating early childhood development and nutrition programs rather than pursuing them separately.

Evaluating the Impact of Information and "Framed" Unconditional Cash Transfer on Nutritional Outcomes

Location: Nepal

Principal investigators: Gayatri Acharya, World Bank; Prashant Bharadwaj, University of California, San Diego

Timeline: October 2012 to October 2015

Evaluation: Children under the age of five in **Nepal** suffer from one of the highest rates of malnutrition and stunting in the world. Moreover, pregnant women tend to have sub-optimal weight gain during pregnancy. The Government of Nepal seeks to rectify these problems by removing two barriers to good nutrition: lack of knowledge about nutrition and lack of income needed to make better nutritional choices. Researchers will evaluate the effectiveness of providing information alone, or information and cash, on improved nutrition for pregnant women and young children.

Cash Transfers, Parenting Training and Holistic Early Childhood Development in Niger

Location: Niger

Principal investigator: Patrick Premand, World Bank

Timeline: January 2012 to June 2015

Evaluation: In Niger, a large share of the population suffers from chronic food insecurity and 45 percent of children under age five are stunted. The Office of the Prime Minister of the Government of Niger is implementing a large-scale safety nets project. As part of the project, poor rural women receive a regular cash transfer, while also participating in accompanying measures that aim to improve a range of parenting practices. A team of researchers is working with project implementers to evaluate the effectiveness of the cash transfers and the value-added of the parenting training on nutrition, health and cognitive development of children under the age of five.

Basic Education Service Delivery

Performance-Based Incentives for Teachers in Guinea

Location: Guinea

Principal investigators: Felipe Barrera-Osorio, Graduate School of Education, Harvard University; Deon Filmer, World Bank

Timeline: November 2011 to April 2015

Evaluation: As in many developing countries, educating the poorest students in Guinea remains a challenge. Often, providing additional funding to schools is not enough to improve learning. The Government of Guinea aims to improve student learning by enhancing teacher performance through an incentive pilot scheme that includes a financial reward, social recognition, and teacher training. Third and fourth-grade teachers from 420 schools participated in the pilot. Researchers will evaluate the impact of these incentives on student achievement.

Effects of Quality Improvement Strategies on Early Childhood Development in Community-Based Childcare Centers in Malawi: A Randomized Trial

Location: Malawi

Principal investigators: Lia Fernald, University of California, Berkeley; Berk Ozler, World Bank

Timeline: October 2011 to August 2014

Evaluation: Children's social and cognitive readiness for school is crucial for later success. In Malawi, the government seeks to improve child development outcomes through better preschools. Researchers will study the effects of teacher incentives and training, parental education, and learning materials for children on their physical, emotional and cognitive development, and their readiness for primary school.

Impact Evaluation of a Low Cost Private School Model

Location: Mexico

Principal investigator: Lucrecia Santibanez, RAND Corporation

Timeline: September 2012 to June 2015

Evaluation: Many traditional public schools in Mexico are failing to educate students, particularly those from poorer families. Recent PISA testing shows that most 15-year-olds did not possess basic levels of competency in math and almost 20 percent did not have basic reading skills. Reforms to improve education quality in Mexico take a long time to materialize and parents rarely have a voice. Research will evaluate the impact of Christel House, a low-cost private school for poor children with a rigorous curriculum delivered by highly-trained teachers and an active parental involvement component. The results of the evaluation will give policymakers in Mexico and other countries evidence on the impact of public-private partnerships on educational achievement.

Randomized Impact Evaluation of Various Early Literacy Interventions in Mozambique

Location: Mozambique

Principal investigators: Marie-Helene Cloutier, World Bank; Sophie Naudeau, World Bank

Timeline: June 2012 to August 2015

Evaluation: Studies have shown that teacher training combined with accountability strategies can result in improved student learning outcomes in early grades. More research is needed to disentangle the effect of the public information and training. The Government of **Mozambique** has implemented a pilot program to raise student achievement through teacher training and by providing families with information about reading test results. Researchers will evaluate the effectiveness of these strategies on educational outcomes.

Investing in the Education Market: Strengthening Private Schools for the Rural Poor

Location: Pakistan

Principal investigators: Tahir Andrabi, Pomona College; Asim Khwaja, Harvard University

Timeline: January 2012 to June 2016

Evaluation: In developing countries, low-cost private schools often offer better education than public schools. But in **Pakistan**, several external conditions are constraining low-cost private school growth and effectiveness, including access to credit and technical resources. Researchers will seek to overcome these constraints by implementing a project that offers three models of financial support to schools: grants, loans, and equity financing.

Closing the Early Learning Gap between Roma and Non-Roma Children in Bulgaria through Pre-School Participation: Inclusive Outreach and (Un)conditional Support Approaches

Location: Bulgaria

Principal investigator: Elise Huillery, Sciences Po

Timeline: June 2013 to June 2015

Evaluation: In **Bulgaria**, the early learning gap between Roma and non-Roma children is a challenge for parents and policymakers. While more than 75 percent of all children aged three to six nationally are enrolled in school, the majority of Roma children are not. To address this challenge, the Trust for Social Achievement, a Bulgarian NGO supported by the America for Bulgaria Foundation, will implement a program in more than 150 poor communities that seeks to address preschool participation in a variety of ways: encouraging active outreach to parents by local NGOs and authorities, offering free preschool for selected beneficiaries, and providing a conditional financial grant for some selected communities. Researchers will measure the effectiveness of the components - jointly and independently - in order to help policymakers understand how they can boost the number of Roma children attending preschool and improve children's cognitive and socio-emotional development.

Testing Information-for-Accountability and Teacher Incentive Interventions for Improving Education Service Delivery

Location: Tanzania

Principal investigators: Shwetlena Sabarwal, World Bank; Deon Filmer, World Bank; James Habyarimana, Georgetown University

Timeline: September 2012 to July 2015

Evaluation: In **Tanzania**, student learning has been hampered by high rates of teacher absenteeism. The Government of Tanzania seeks to address these problems through non-financial performance-based incentives for teachers and improved information to community members and families on student and school performance. Researchers will evaluate the effectiveness of these approaches.

Does Class Size Mediate the Effectiveness of Teacher Quality Interventions?

Location: Uganda

Principal investigators: Shwetlena Sabarwal, World Bank; Felipe Barrera-Osorio, Harvard University; James Habyarimana, Georgetown University

Timeline: September 2012 to July 2015

Evaluation: In **Uganda**, enrollment in primary and secondary schools is increasing rapidly without corresponding increases in the number of teachers. Researchers will study the impact of class size on teaching quality and learning through pilot programs that reduce the number of students in classes by running separate and shorter teaching shifts and give performance-based incentives, teaching tips and feedback to teachers.

Health Systems and Service Delivery

Impact Evaluation of a Health Insurance Pilot in Nepal

Location: Nepal

Principal investigators: Tekabe Belay, World Bank; Santadarshan Sadhu, Institute of Financial Management and Research (India)

Timeline: December 2012 to February 2016

Evaluation: **Nepal's** out-of-pocket health costs are rising and inequalities in access to health care are increasing. To combat this, the Ministry of Health and Population has been working to develop a strategy for universal health coverage. A proposed pilot project aims to determine the best insurance policy and overall financing strategy. Researchers hope to identify effective financing methods for the provision of comprehensive and equitable health services in low-income settings.

Healthy Mothers and Healthy Babies: Testing Demand and Supply-Side Approaches to Maternal and Child Health in Nigeria

Location: Nigeria

Principal investigators: Pedro Rosa Dias, University of Sussex; Marcos Vera-Hernandez, University College London; Marcus Holmlund, World Bank

Timeline: July 2012 to June 2016

Evaluation: In **Nigeria**, approximately one million mothers and children die every year from preventable diseases. Three-quarters of these deaths wouldn't have happened if existing healthcare services were used. Nigeria seeks to reduce deaths from preventable diseases by improving use and quality of healthcare services available for women and children through its Subsidy Reinvestment and Empowerment Programme (SURE-P) Maternal and Child Health Program. Researchers will evaluate the following interventions: the use of monetary and non-monetary incentives to reduce midwife attrition; a community monitoring scheme to reduce stockouts of drugs and other key commodities at primary healthcare facilities; a conditional cash transfer program to encourage pregnant women to get care before and after birth and give birth with a skilled health worker; and the impact of the Maternal and Child Health Program as a whole. This evaluation is part of the strategic collaboration between Nigeria's Federal Ministry of Health, the Gates Foundation, and the World Bank to use impact evaluation to improve maternal and child health, and contribute to Saving One Million Lives.

Impact of Incentives and Information on Quality and Utilization in Primary Care (i3QUIP)

Location: Philippines

Principal investigators: Junko Onishi, World Bank; Taejong Kim, Korean Development Institute School of Public Policy and Management; Liezel Lagrada, Philippines Health Insurance Corporation

Timeline: October 2013 - June 2016

Evaluation: In the **Philippines**, the government has sought to improve the effectiveness of primary health care by expanding coverage of PhilHealth's social health insurance benefit package. Researchers will examine the impact of three measures being implemented: (i) direct payments to providers with increased autonomy on the distribution of the amount, (ii) increased disclosure of information, and (iii) a combination of direct payments and increased disclosure of information.

Improving Health Service Delivery through Community Monitoring and Non-Financial Awards

Location: Sierra Leone

Principal investigators: Oeindrila Dube, New York University; Johannes Haushofer, The Abdul Latif Jameel Poverty Action Lab; Bilal Siddiqi, Stanford University

Timeline: May 2011 to July 2014

Evaluation: In **Sierra Leone**, basic health services are plagued by worker absenteeism, low utilization of health clinics, and a lack of basic care, including vaccinating children under five. The government sought to rectify these problems in 2010 by instituting free healthcare for pregnant women, new mothers, and children under five, abolishing user fees, and raising workers' salaries. However, the system continues to face problems related to use of services and quality. Researchers will evaluate the relative effectiveness and potential for scale-up of two social-accountability interventions: competitions among clinics for non-financial awards, and community monitoring using health scorecards and community clinic meetings.

Water Supply, Sanitation, and Hygiene

Impact of Low-Cost In-Line Chlorination Systems in Urban Dhaka on Water Quality and Child Health

Location: Bangladesh

Principal investigator: Stephen Luby, Stanford University

Timeline: January 2013 to January 2016

Evaluation: In **Bangladesh**, limited water supply and poor sanitation infrastructure in dense slums is associated with high rates of child diarrhea and stunting. Central treatment and delivery of water supply is prohibitively expensive for municipal governments to implement in low-income areas. A new in-line chlorination system has been developed to deliver the right dose to dispensed water at existing handpumps in Dhaka. Researchers seek to determine the effectiveness of using automated chlorination at public water dispensing stations to improve water quality and child health outcomes.

Incentivizing Sanitation Uptake and Sustainable Usage through Micro Health Insurance

Location: India

Principal investigator: Orazio Attanasio, University College London

Timeline: June 2012 to March 2016

Evaluation: **India** accounts for 33 percent of the global population without access to safe water and adequate sanitation. At the same time, the number of Indians with health insurance coverage is low, and out-of-pocket expenditures pay for most health care costs. Researchers will examine the links between a sanitation intervention, health insurance claims and health status in poor areas of rural India. The sanitation intervention creates awareness and provides access to credit to construct safe sanitation systems. The research team will also explore and test whether a health care program can be provided as an incentive for communities to sustain their safe sanitation over time.

Turning Pipe Dreams into Reality: Improving access to water and sanitation services in a Nairobi Slum

Location: Kenya

Principal investigators: Paul Gertler, University of California, Berkeley; Sabastian Galiani, University of Maryland

Timeline: May 2012 to December 2015

Evaluation: In **Kenya**, researchers will study the effects of hygiene promotion campaigns and providing subsidies on people's decision to connect to a sewage system. The results will help development experts in Kenya and elsewhere determine how to encourage behavioral changes that can lead to improved hygiene, health and living standards for poor residents.

Where SIEF is funding impact evaluations

Bangladesh (IDA country)

Brazil

Colombia

Djibouti (IDA country)

Gambia (IDA country)

Georgia

Guinea (IDA country)

India

Indonesia

Kenya (IDA country)

Lesotho (IDA country)

Madagascar (IDA country)

Malawi (IDA country)

Mexico

Mozambique (IDA country)

Nepal (IDA country)

Niger (IDA country)

Nigeria (IDA country)

Pakistan (IDA country)

Philippines

Romania

Sierra Leone (IDA country)

Tanzania (IDA country)

Uganda (IDA country)

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