# **ALIGN** Advancing Learning and Innovation on Gender Norms

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# BRIEFING

# Social protection and adolescent capabilities

What does a gender norms lens add to the debate?

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# **Abbreviations and Acronyms**

AGI-K	Adolescent Girls Initiative-Kenya
BCC	Behaviour change communication
BMGF	Bill & Melinda Gates Foundation
BF	Bolsa Familia (Brazil)
СТ	Cash transfer
CT-OVC	Cash Transfer for Orphans and Vulnerable Children (Kenya)
CGP	Child Grant Program (Zambia)
CTT	Conditional cash transfer
DFID	Department for International Development (UK bilateral agency)
ELA	Empowerment and Livelihood for Adolescents (Uganda)
CCTE	Conditional Cash Transfer Education (Turkey)
ESSP	Education Sector Support Project (Cambodia)
FGM/C	Female genital mutilation/cutting
FFSP	Female Secondary Stipend Programme (Bangladesh)
FSSP	Female School Stipend Programme (Pakistan)
GAGE	Gender and Adolescence: Global Evidence (UK)
GBV	Gender-based violence
HIV	Human immunodeficiency viruses
IPV	Intimate partner violence
IRC	International Rescue Committee
JSY	Janani Suraksha Yojana (India)
LIC	Low-income country
LEAP	Livelihood Empowerment Against Poverty (Ghana)
MIC	Middle-income country
MGNREGS	Mahatma Gandhi National Rural Employment Guarantee Act 2005 (India)
NGO	Non-government organisation
PNCTP	Palestine National Cash Transfer Program (Palestine)
PSSN	Productive Social Safety Net (Tanzania)
PTSD	Post-traumatic stress disorder
RSH	Reproductive and sexual health
RPS	Red de Protección Social (Nicaragua)
RTC	Randomised control trial
SCTP	Social Cash Transfer Programme (Malawi)
STI	Sexually transmitted infection
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UTC	Unconditional cash transfer

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# Introduction

Social protection programmes (ranging from cash and in-kind transfers to public works to social health insurance) ultimately seek to reduce vulnerability and promote individual, household and community resilience to shocks and stresses through improved household income and access to basic and social services. Such interventions have spread rapidly across low- and middle-income countries (LICs and MICs) since the mid-1990s (ILO, 2017), with cash-transfer (CT) programmes being the most popular form of social protection in such countries-- in some cases reaching millions of households (Molyneux et al., 2016; Barrientos et al., 2010). Feminist analysts, however, including Molyneux (2006) and Holmes and Jones (2013) have highlighted that because social protection has paid inadequate attention to the gendered patterning of risks and vulnerabilities across people's lives, it is 'yet to fully realise its potential to address the underlying causes of vulnerability and the drivers of inequality to achieve social justice and socially equitable outcomes' (p. 2). Holmes and Jones (2013) argue that for social protection to evolve beyond a simple safety net, it must go beyond a narrow focus on women in their capacity as mothers, and children as empty vessels in which to store human capital, and support women's and girls' empowerment and gender-equity aims more strategically across the life cycle. Economic opportunities for women can lead to changes in gender norms in terms of re-valuing girls' and women's time use and the value that is placed on the education and skills they need to acquire in order to take advantage of such opportunities (e.g. Kabeer, 2018). However, based on findings from a multi country-study on different types of social protection Holmes and Jones (2013) argue that more transformational outcomes require that social protection directly address social norms--including in relation to domestic and care work within the household, access to income and asset-generation opportunities, and agency and voice within and beyond the household (see also UN Women, 2016).

Arguably, applying a gender lens is especially important for the adolescent cohort since gendered social norms become increasingly salient during adolescence, as girls and boys are propelled along feminine and masculine pathways to adulthoodand as a result face distinctly gendered opportunities and threats (GAGE Consortium, 2017; Harper et al., 2018). Cash transfers (CTs) and other programmes concerned with adolescent wellbeing therefore need to be aware of adolescents' gendered needs and the ways in which these may intersect with other forms of social marginalisation (e.g. disability, ethnic minority or refugee status). They must also be sensitive to implications for promoting young people's multi-dimensional rights, including the right to enjoy a decent standard of living and to benefit directly from adequately provisioned social protection programmes.

This briefing paper, which is based on a rapid evidence review, and focuses primarily on cash transfers, which account for the bulk of the evidence on adolescence and social protection, concentrates on adolescents aged 10-19. It takes a capabilities approach, which not only acknowledges adolescents' multidimensional rights but--as Nussbaum (1997) notes-- enables us to assess the ways in which public policies and services enable young people to really function in ways they value and 'not just to have the right on paper' (p. 295). Following the GAGE conceptual framework, we focus on six capabilities: education and learning, health and nutrition, bodily integrity and freedom from violence, psychosocial wellbeing, voice and agency, and economic empowerment (GAGE Consortium, 2017). For each, we begin by considering how gender norms shape child and adolescent development before then discussing the ways in which cash transfers and other social protection instruments may improve outcomes and what space there may be for social protection to shift not only outcomes but the social norms underpinning constraints. In the case of cash transfers, while it would be important from a programme design perspective to be able to distinguish between the effects of conditional, unconditional and labelled CT programmes in each domain, the evidence base is not sufficient to be able to systematically tease out these differences.

# How adolescent- and genderresponsive are CT programmes?

We focus on six key capability domains (see above) that are critical to adolescent wellbeing and discuss the ways in which discriminatory gender norms and risks specific to the life cycle-shape capability outcomes. We then explore the extent to which social protection programming, especially cash transfers, is addressing these risks and vulnerabilities and how

programmes might be leveraged to shift discriminatory norms. It is worth noting from the outset that the reason for the limited impacts of cash in shifting gender norms could be in part linked to the relatively small amounts of cash transferred in many existing programmes, and that more sizeable transfers could be more effective. This is an empirical question for which there is not adequate evidence, but one that should be considered as evaluation investments in this field grow. However, given that the rationale for cash is also to create demand for services to support an individual or household-level multi-dimensional wellbeing, it is critical to also consider the availability of appropriate and quality services.

# **Education and learning**

- Gender norms shape adolescents' experiences of schooling, with boys generally prioritised over girls in terms of educational spending and time for study and girls at risk of dropping out of school due to marriage while boys are at risk due to demand for their labour.
- Cash transfers and educational stipends improve adolescent enrolment and attendance especially when their age-related higher opportunity costs are specifically addressed.
- Cash transfers can be designed to address gender disparities in educational access, but appear to have limited if any effects on learning outcomes, which depend more on the quality of available schools.
- Unless combined with messages or programmes directly addressing gender inequalities, cash and in-kind transfers may change educational behaviour without shifting the underlying gender norms.

### How gender norms shape adolescent education and learning

Gender norms shape not only adolescents' access to education, but also their aspirations and their learning outcomes. In many contexts in LICs and MICs, especially in South Asia and sub-Saharan Africa (UNESCO, 2018), families prioritise boys' education because sons are expected to become breadwinners while daughters are expected to become wives and mothers (Harper et al., 2018; Marcus, 2018; Kågesten et al. 2016). In such contexts, boys are more likely than girls to be provided with material resources such as school uniforms and supplies, to be sent to private schools where government schools are weak (e.g. in Nepal), and to be allowed the time to focus on their studies (Harper et al., 2018; Marcus, 2018; Jones et al., 2018). Girls, on the other hand, are often left with the lion's share of domestic and care-related work – which leaves them less likely ever to be enrolled and more likely to be late and absent from school. It also means that their homework is often incomplete and their exam scores lag. Girls are also removed from school in early adolescence to marry and to remain chaste so that they will be desirable marriage partners. Over time, girls internalise these norms and limit their horizons to match their possibilities. Young Lives research in Ethiopia, for example, found that while younger girls and boys have similar educational aspirations, by adolescence, girls' aspirations have dropped and more closely match those of their parents (Dercon and Singh, 2013).

In other contexts, especially in parts of Latin America and the Middle East, gender norms limit boys' education (UNESCO, 2018; Barker et al., 2012). Compared to girls, boys perform less well on educational assessments and are more likely to have to repeat a grade or to drop out (UNESCO, 2018). Gaps grow over the course of adolescence – in large part because the norms that position them as providers mean that they are increasingly likely to prioritise paid employment over education. UNESCO (2018) reports that in Honduras, for every 100 girls who complete secondary school, only 65 boys do so. Where employment options do not require education, such as seasonal agricultural work and the construction industry, boys experience little tension between providing now (via employment) and providing later (via schooling) (ibid.). Indeed, in some parts of Ethiopia, where girls remain disadvantaged on a national basis, adolescent boys are now increasingly pulled out of education by a cash economy that allows them to assume adult status (Jones et al., 2018; Favara et al., 2017). In other contexts, the relationship between gender norms and adolescent boys' education is even more direct. Research has found, for example, that as boys try to prove to their peers that they are 'real men', they distance themselves from education to demonstrate that they are not weak like girls (Pattman, 2007) or homosexual (Plummer, 2010).

# The role of cash in supporting adolescent education

Given the cascading impacts of education on a wide range of development outcomes, especially poverty alleviation given the goal of social protection, it is not surprising that the evidence on the effect of CTs on education is both large and detailed. The bulk of that evidence<sup>1</sup> suggests that both conditional and unconditional cash transfers (CCTs and UCTs) improve school enrolment and attendance for adolescents – sometimes remarkably so – though not typically students' learning outcomes, which depend far more heavily on the quality of education available (Bastagli et al., 2016; Baird et al., 2014; Araujo et al., 2016; Baez and Camacho, 2011; Barham et al., 2013; Behrman et al., 2011; Filmer and Schady, 2014). Evidence regarding the importance of conditionality is mixed. On the one hand, research from Latin American and African countries has found that conditioning CTs on attendance leads to greater impact, by reducing drop-out and encouraging dropped-out adolescents to return to school (Baird et al., 2011), by improving attendance, especially for the most marginalised (Akresh et al., 2013), and by supporting young people's transition to secondary school (de Brauw and Hoddinott, 2011). On the other hand, systematic reviews of the impacts of CCTs and UCTs on education have concluded that the scale of the effects are generally similar (Handa et al., 2014c; Baird et al., 2013) and, as the Transfer Project (2014) notes, conditioning cash on school attendance is simply not feasible in contexts with supply constraints and limited monitoring capacity. In those contexts, strong labelling (e.g. raising awareness among parents that cash is to help them pay for their children's education) may be just as effective as conditioning (Bastagli et al., 2016), because of the way labelling increases the value that parents ascribe to education (Benhassine et al., 2013).

The impacts of CTs on adolescent education are variable and depend on both context and programme specifics. In Latin America, Brazil's CCT scheme, Bolsa Familia (BF), which provides larger stipends to older adolescents in order to support them to prioritise education over employment, has been found to have a variety of positive impacts on the enrolment of different groups of adolescents, including urban 16-year-old boys (15% improvement) (Reynolds, 2015) and older rural girls (22.5% improvement) (de Brauw et al., 2015). In Nicaragua, Maluccio and Flores (2005) found that at 11 years of age, beneficiaries of Red de Protección Social (RPS) were 16% more likely to be enrolled and to have missed three or fewer days in the last month than non-beneficiaries, and by the age of 13, they were 32% more likely. In Africa, Malawi's Social Cash Transfer Programme (SCTP), which is an unconditional transfer that provides households with an additional stipend for every child enrolled in school, with secondary enrolment worth twice as much as primary enrolment, has been found to improve the enrolment of children in secondary school by 16% (de Hoop, 2018; CPC, 2016). In Kenya, the Cash Transfer for Orphans and Vulnerable Children (CT-OVC), which does not provide extra cash for students, has nonetheless has been found to improve secondary enrolment by 8% (de Hoop, 2018).

In addition to government-run CTs aimed at broader poverty alleviation, there are also various educational stipends targeted at vulnerable adolescents. Unsurprisingly, these programmes – some providing cash and others in-kind support – have often been found to have even larger impacts on schooling. In Cambodia, the Education Sector Support Project (CESSP), which provides scholarships to children in lower-secondary school conditional upon attendance and promotion, was found to increase enrolment by 25% (Filmer and Schady, 2011). In Nepal, an intervention which aimed to reduce child labour and improve education uptake for poor adolescents between the ages of 10 and 16 found that both scholarships that covered the cost of schooling and cash stipends improved attendance and reduced exam failure – especially for girls (for whom it reduced the rate of failure by 66%) (Edmonds and Shrestha, 2014). In-kind educational stipends have also demonstrated success. For example, in Kenya, the Education Subsidy Programme, which provided students finishing primary school with two free uniforms, reduced the drop-out rate after three years from 19% percent to 16% for girls and from 13% to 10% for boys (Duflo et al., 2015).

Some cash and in-kind transfers have design elements aimed at addressing gender inequalities. The majority of such programmes are aimed exclusively at girls. In Bangladesh, for example, the Female Secondary Stipend Programme (FSSP), which was introduced in 1994 with the explicit aim of improving girls' access to education, reached 2 million girls a year at its high point, and included not only direct payment of secondary fees for enrolled girls contingent on attendance and exam scores, but also bi-annual deposits into savings accounts for girls, was found by one study to increase girls' eventual educational attainment by at least 0.4 years (Sayeed, 2016), by another study to increase attainment up to 1.2 years (Hahn et al., 2018), and by a third to have potentially contributed to shifting norms about the value of girls' education (Schuler, 2007). see also Heath and Mobarak, 2015 for a dissenting view). In Tanzania, an evaluation of a programme aimed at helping families

1 In Bastagli et al.'s (2016) review of cash-transfer programmes, of the 20 studies that reported impacts on school attendance, 13 reported positive results.

prioritise education over girls' early marriage found that providing adolescent girls with school supplies or a conditional asset increased their odds of enrolment by a third (Erulkar et al., 2017).

A few national CT programmes are also designed to address gender disparities between adolescent girls and boys. Mexico's Prospera<sup>2</sup>, for example, which has just been cancelled in early 2019<sup>3</sup>, has not only increased in value with every year of secondary education but provided at each level more cash for girls than for boys in order to help girls and their families prioritise education over marriage and motherhood (Lárraga, 2016). Turkey's Conditional Cash Transfer Education (CCTE) also takes this approach (Turk Kizilay, 2018). In Jamaica, where girls are significantly more likely to complete secondary school than boys, PATH provides boys with higher stipends to help them balance their need to earn with their need to learn. (Stampini et al., 2016). Recent research has found impacts not only on boys' enrolment but on their test scores (Stampini et al., 2018). The impact of failing to account for gender norms in programme details is clear in Brazil, where de Brauw et al. (2015) observe that Bolsa Familia is inadvertently widening a gap already in favour of girls and may need to consider how to better attract boys to education.

### Implications for gender-norm change

Although CTs are improving adolescents' access to education, and in some cases even have scope to shift gender norms through explicit payments, cash alone is likely not enough in most circumstances to bring about sustainable shifts in underlying norms related to the value of investing in girls' education. Indeed, in some contexts where girls' education is increasingly valued, and it is now the norm for girls to attend school, research suggests that is often because it is seen as a way to help girls become better wives and mothers – not as a way to support them to prepare for independent futures (Harper et al., 2018; Nanda et al., 2016). In Mexico, Antonopoulos (2013) observes that Progresa may have even reinforced traditional gender norms as it demonstrated to children that women are rewarded with cash payments for fulfilling 'traditional' female roles. Shifting gender norms, rather than gendered outcomes, will almost certainly require a longer-term cash-plus approach (see Box 1) that focuses on adolescents and caregivers and encourages them to rethink and challenge discriminatory norms – and provides young people with role models and opportunities to practise more gender-equitable behaviour as well as economic opportunities that capitalise on education (Plank, 2018; Hallfors, 2011).

#### Box 1: The promise of cash plus approaches

Although the evidence is nascent, and currently still confined to experimental programmes aimed at ascertaining what sorts of programmes can help to support adolescents' transitions to adulthood, rather than meeting broader social protection objectives, there is some evidence that programmes that take a cash-plus approach have scope to not only improve the uptake of education, but to begin to shift the norms that limit girls' lives more generally. For example, AGI-Kenya is a randomised control trial (RCT) involving 6,000 girls between 11 and 15 years of age. The programme compares the effects of multisectoral intervention packages across four domains (Austrian et al., 2018): (1) violence prevention (community dialogues with adult stakeholders aimed at exploring the challenges local girls face and developing action plans to address them); (2) violence prevention plus education and health (weekly safe-space meetings covering health and life skills); and (4) violence prevention, plus education, health and wealth (financial education and savings opportunities).

Mid-term results, which captured impacts immediately after the intervention ended, were positive. In urban communities, various aspects of the programme improved household wealth, reduced girls' exposure to violence and improved secondary school transitions, knowledge about sexual and reproductive health (SRH), help-seeking and self-efficacy, financial literacy and savings. Girls' participation in safe-space programming also positively affected schooling outcomes. In rural communities, where 25% of girls were out of school at the programme baseline, AGI-Kenya supported girls' retention in primary school and financial literacy and savings – but, owing to community resistance, had minimal impacts on health and life skills. Although it is still too early to tell, there is reason, especially given impacts on self-efficacy, to believe that the AGI-K may over time contribute to some of the building blocks of norm change.

<sup>2</sup> Prospera was formerly called Opportunidades then Progresa.

**<sup>3</sup>** Prospera is being replaced, in part, with a universal grant to all adolescents enrolled in public upper-secondary schools (https://www. developmentpathways.co.uk/blog/the-demise-of-mexicos-prospera-programme-a-tragedy-foretold/).

# Health, nutrition, and sexual and reproductive health

- Adolescent health is shaped by gender norms that expose girls and boys to different risks from their earliest years and, as they grow up, leave girls at especially high risk of poor sexual and reproductive health outcomes and boys at especially high risk of accidental injuries.
- Because adolescents are developmentally more likely to engage in risk-taking and be influenced by peer pressure cash alone is unlikely to significantly improve adolescent health, and for boys it may introduce new risks.
- Cash transfers, especially if they are large enough, can reduce adolescent girls' exposure to risky sex by offsetting some of the material disadvantage that leads them to trade their bodies for cash and gifts, but not necessarily address the underlying gender norms.
- While there is emerging attention on the important role that gender norms play in shaping adolescent nutrition, the impact of cash transfers on adolescent nutrition and broader health remains almost completely unexplored.

# How gender norms shape adolescent health and nutrition

Adolescent health and nutrition are shaped by gender norms, as highlighted by a wide body of research on the social determinants of health (Philips, 2005; Patton et al., 2018). Where sons and not daughters are expected to provide care for parents in their old age, or are seen as the lynchpin of family continuity, son preference can lead parents to give less priority to girls' food and health care (Christian and Smith, 2018). In other contexts, gender norms drive health and nutrition risks for boys.

In India, for example, Aurino (2016) found that at the age of 15 girls have a less diverse diet than boys. In Ethiopia's Afar region, on the other hand, Jones et al. (2018) found that young adolescent boys were more likely to be malnourished than their female peers because boys are sent out herding by themselves for weeks at a time.

In many developing countries, girls are more likely than boys to fall ill, in part because their household chores, such as cooking and caring for the sick, expose them to more risks. For example, the World Health Organization (WHO, 2017) observes that the pneumonia that is the leading cause of death in girls aged 10–14 is related to their constant exposure to the smoke of dirty indoor cooking fires. Gender norms leave boys, however, more at risk of not illness, but substance abuse and injury. This increased risk is due to violence and accidents--as boys attempt to demonstrate their masculinity by proving their strength and courage (Patton et al., 2018; Blum, 2017; WHO, 2015; Bernales et al., 2015).

Gender norms are fundamental to adolescents' sexual and reproductive health (SRH). In many countries, menstruation remains deeply stigmatised and girls approach puberty with little accurate information and a great deal of fear. In some, menstruation keeps girls off school because of shame that results from teasing by boys, and in others menstrual taboos leave menstruating girls facing a host of restrictions on what they may eat and do because they are considered 'impure'. Those restrictions sometimes result in death (Robinson, 2015). Gender norms also leave adolescent girls vulnerable to age-disparate and transactional sex, as girls trade the only currency they believe they have, at high risk of sexually transmitted infections (STIs) including HIV, in part because they have little voice with which to advocate for condom use, and are exposed to adolescent pregnancy, which remains the leading cause of death for girls aged 15–19 and is, in LICs and MICs overwhelmingly associated (90%) with child marriage (WHO, 2015). While the bulk of research on adolescent SRH has focused on girls, gender norms also leave adolescent boys vulnerable to poor SRH outcomes (Amin et al., 2018; Patton et al., 2018). Basterfield et al. (2014) found that boys with the most traditional gender norms are the most likely to engage in risky sex and Sommer et al. (2014, 2015) found that boys' need to demonstrate their sexual prowess led them have multiple partners and to eschew the use of condoms.

# The role of cash in supporting adolescent health and nutrition

There is a large body of evidence on how cash transfers affect adolescent health (Owusu-Addo et al., 2018; Taaffe and Longosz, 2017; Lagarde et al., 2009). However, due to the ways in which risks to girls' RSH multiply over the course of adolescence,

the bulk of that evidence is tightly focused on SRH outcomes. Attention to nutrition and broader health remains almost exclusively limited to younger children (Bastagli et al., 2016) and boys' health needs are scarcely considered at all (see Box 2). Indeed, while there is a great deal of research on cash transfers and household food security, we found only one study that specifically addressed the role of cash in supporting adolescent nutrition. Namely, Baird et al. (2015) found that Zomba cash transfer improved adolescent girls' nutrition, specifically their consumption of protein, while the programme was operational, but that effects disappeared after the programme ended.

Notably, while CTs often demonstrate positive effects on girls' SRH, replicability is an issue. Some authors have suggested that this is due to the amount of the transfer, as the material benefits of cash transfers 'cannot begin to compete' with other options (such as transactional sex) for acquiring the 'symbolic and consumptive capital' (e.g. fashionable clothes and accessories) that adolescents desire (Adato et al., 2016: 1142). In some countries it appears that the impacts of CTs on adolescent girls' SRH was indirect and almost exclusively accrued through keeping them in school (Pettifor et al., 2016; Baird et al., 2016).

In many countries, cash transfers have been found to reduce adolescent girls' exposure to risky sex and STIs, largely by reducing their engagement in "sexual exchange relationships" (Adato et al., 2016: 1142). Specific findings vary by country and by study. In some countries, CTs delay girls' sexual debut – by 31% in the case of Kenya's CT-OVC (Handa et al., 2014b; see also Baird et al., 2010 in Malawi; Heinrich et al., 2017 and Kilburn et al, 2018 in South Africa; Population Council, 2019 in Liberia). In other countries, CTs reduce the number of sexual partners that girls have (Baird et al., 2010 in Malawi; Kilburn et al., 2017, Pettifor et al., 2016 in South Africa; Population Council, 2019 in Liberia), their odds of transactional sex (Cluver et al., 2013 and Khoza et al., 2018 in South Africa), their odds of age-disparate sex (Cluver et al., 2013 in South Africa; CPC, 2016 in Malawi), and their exposure to unprotected sex (Pettifor et al., 2016 in South Africa; Population Council, 2019 in Liberia). In other council, 2019 in Liberia). In other countries, however, cash does not reduce risky sexual behaviours. Zambia's Child Grant Program (CGP) (AIR, 2014) and Tanzania's Productive Social Safety Net (PSSN) (TASAF et al., 2018) do not appear to delay girls' sexual debut and Malawi's SCT (CPC, 2016), Tanzania's PSSN (TASAF et al., 2018) and Kenya's CT-OVC (Handa et al., 2014b, 2017) did not reduce transactional sex. In South Africa, a rigorous trial found no impacts of CTs on HIV incidence (Pettifor et al., 2016; see also Kilburn, 2018).

The impacts of CTs on adolescent pregnancy are similarly mixed. CTs have been found to reduce the probability of adolescent pregnancy in Mexico (Darney et al., 2013; Gulemetova-Swan, 2009), Malawi (Baird et al., 2011, 2012), Kenya (Handa et al., 2015; Duflo<sup>4</sup> et al., 2015), Zimbabwe<sup>5</sup> (Hallfors, 2011), South Africa (Heinrich et al., 2017) and Bangladesh<sup>6</sup> (Field et al., 2018; Buchmann et al., 2018), often through keeping girls in school. They have not been found to do so in Zambia (AIR,

### Box 2: Boys and health outcomes - what do we know about the role of cash transfers?

While the role of cash in supporting girls' SRH is relatively well explored, little research has focused on whether and how CTs improve adolescent boys' health outcomes. Indeed, the only age-specific evidence we could locate about boys is from sub-Saharan Africa. In terms of SRH, Handa et al. (2014b) report that that Kenya's CT-OVC reduced the odds of first sexual experience for girls significantly more than for boys (42% versus 26%). In Malawi, on the other hand, the Carolina Population Centre (2016) found that impacts of the SCTP on sexual first sexual experience were larger for boys than for girls. In South Africa, Cluver et al. (2013) found that while CTs reduced adolescent girls' odds of engaging in risky sex by more than 50%, there were no significant impacts on boys, while Heinrich et al. (2017) found that while cash did not delay boys' sexual debut, it did reduce the number of their sexual partners.

Two other studies have looked at the role of CTs on boys' use of substances (e.g. drugs). In South Africa, research on an experiential CT aimed at urban adolescents found that it may have inadvertently encouraged substance use because boys saw the money as 'free' (Khoza et al., 2018). Henrich et al. (2017), on the other hand, found no impact of the CT on adolescents' use of substances, but significant impacts on whether boys had ever sold drugs.

<sup>4</sup> Duflo et al. (2015) evaluate the impact of an educational subsidy in the form of school uniforms, not cash.

<sup>5</sup> The intervention in Zimbabwe was a very small RCT aimed at exploring whether a comprehensive package of services could help orphaned girls stay in school and reduce their risk of HIV. The package included: tuition fee payments, a daily feeding programme, a school-based helper to monitor attendance and resolve problems and, in some cases, in-kind support in the form of school and sanitation supplies and/or formal or informal boarding.

2014), Tanzania (TASAF et al., 2018), Malawi (CPC, 2016) or Brazil (Olson et al., 2019). In Tanzania, research suggests that the lack of effect on adolescent and youth pregnancy rates is due to the fact that contraceptive uptake is unchanged by participation in PSSN, despite beneficiaries having greater knowledge about contraception (TASAF et al., 2018). Lack of effect for Malawi's SCTP has been attributed to the small size of the transfer (Kohler and Thornton, 2012).

# Implications for gender norm change

Although CTs can improve household food security and expenditure on health care, which may have some impact on intrahousehold distribution by mitigating shortfalls, there is no evidence that cash alone shifts the gender norms that leave girls at a disadvantage compared to boys in terms of nutrition and health. Indeed, it is possible, in the absence of more focused work on gender norms, that cash may exacerbate existing inequalities. Similarly, while cash (and incentives) alone has been shown to mitigate some of the risks to adolescents' SRH that result from gender norms, there is no evidence that it is shifting underlying norms, merely outcomes.

As noted by Baird et al. (2015), the inability of CTs to create more fundamental change is evident in the way that its effects on girls' nutrition and health disappear when it is withdrawn. More comprehensive interventions, such as Uganda's Empowerment and Livelihood for Adolescents (ELA), suggest that longer-lasting impacts may be derived from combining life and vocational skills that enable girls to learn about SRH while they grow their incomes in a sustainable way. Four years after that programme ended, adolescent pregnancy was down one-third (Bandiera et al., 2018). The first at-scale cash-plus intervention aimed at improving adolescents' health by adding 'plus' (in this case SRH-HIV life-skills training which includes components on gender equity and violence prevention as well as links to adolescent-friendly health services) to a national CT programme (in this case Tanzania's PSSN) is underway aims to explore both scope and pathways (UNICEF et al., nd). There is also scope for using complementary access to health insurance or health care to improve adolescents' access to health care services (see Box 3).

# Box 3: Health insurance and health care

One promising way to improve the health outcomes of CT beneficiaries is to provide them with free or subsidised health insurance or health care. While this approach is unlikely to shift the gender norms that undermine adolescent girls' or boys' health it may offset the impacts of those norms by relieving cost constraints, and for increasing demand for adolescent-responsive health services.

Ghana's Livelihood Empowerment Against Poverty (LEAP) is perhaps the best known of the cash transfers that provide access to health insurance. All beneficiaries are encouraged to join the National Health Insurance Scheme at no cost. While results on care uptake are not age-disaggregated, and thus the impacts on adolescents specifically are not known, an evaluation found that adding insurance to cash improved overall healthcare uptake by 17 percentage points (Handa and Park, 2013).

Palestine's National Cash Transfer Program (PNCTP) also provides beneficiaries with access to free health insurance. A recent assessment found that this has been especially important in terms of improving the lives of adolescents with disabilities (Jones et al., 2016). Because people often incur higher costs as a result of their disabilities, access to health insurance can free cash for other purposes.

Recognising the importance of prenatal and delivery care, some CCTs – including both those aimed at broader poverty reduction as well as those aimed at improving maternal and neonatal outcomes more specifically – explicitly condition provision of skilled care before and during delivery. Other programmes provide pregnant girls and women with vouchers to cover the cost of care. While reported impacts are rarely age-disaggregated, they generally suggest that such interventions improve uptake (Carvalho and Rokicki, 2019; Hunter et al., 2017; Jehan et al., 2012; MoHP, 2015; Nguyen et al., 2012). Indeed, in India, Lim et al. (2010) found that adolescent girls between the ages of 15 and 19 were the most likely to benefit from that country's maternity focused Janani Suraksha Yojana (JSY) cash transfer. As such it may be helping to change norms regarding maternity care and institutional delivery.

# Bodily integrity and freedom from violence

- Gender norms shape threats to adolescents' bodily integrity, with girls at higher risk of sexual violence and child marriage and boys at higher risk of physical, especially peer violence.
- Cash can reduce girls' risk of sexual violence by reducing their engagement with risky sex.
- Cash can help reduce the likelihood of child marriage, but needs to be combined with complementary programming for transformative impact, since otherwise it may backfire.
- How to leverage cash transfers and broader social protection programming to reduce boys' risk of violence remains unexplored.

# How gender norms shape adolescent bodily integrity

Threats to adolescent girls' and boys' bodily integrity are deeply shaped by gender norms. For girls, the bulk of research has focused on child marriage and female genital mutilation/cutting (FGM/C), both of which have been linked to norms that value girls primarily for their reproductive capacities and seek to limit their sexuality and ensure their fertility (Harper et al., 2018; Vaitla et al., 2017). The same research has found that although girls from poorer households are most at risk, in most cases the drivers of child marriage are *primarily* cultural and normative. In Ethiopia's Afar region, for example, girls are married to maternal cousins in order to consolidate family ties, in the Amhara region, they are married to ensure that a premarital pregnancy does not damage family reputation, the Oromia region, girls themselves increasingly choose to marry in order to stake claim to adulthood (Jones et al., 2018). Among Viet Nam's Hmong population, adolescent boys can be pushed by their families into marrying in order to bring labour into the household, as young wives are responsible for the bulk of household tasks and effectively live in servitude (Jones et al., 2014, 2015).

There has been increasing focus over the last decade on masculinities (see Box 5) and the ways in which they underpin not only to sexual violence and intimate partner violence (IPV), especially towards girls and women, but also to the peer violence that primarily affects boys (Amin et al., 2018; Heilman, 2018; Kato-Wallace et al., 2016). Gender norms around the world encourage boys to be courageous and strong (ibid.). This not only pushes them to demonstrate that they are man enough 'to handle a woman' (Sommer et al., 2014: 2293), but also to engage in violence with one another in order to demonstrate their masculinity. Indeed, Barker (2005) noted over a decade ago that adolescent boys and young men are literally 'dying to prove that they are "real" men' (p.2), and WHO (2017) reports that for boys aged 10–19, interpersonal violence was the second leading cause of death in 2015.

# The role of cash in supporting adolescent bodily integrity

Although there is a growing body of evidence exploring the impacts of CTs on women's experiences of gender-based violence (GBV) (Buller et al., 2018; Cross et al., 2018), the evidence on whether cash protects adolescents' bodily integrity and freedom from violence is thin apart from impacts on child marriage. A review of the impacts of CTs on violence against children in LICs and MICs found only 11 rigorous studies (Peterman et al., 2017). It concluded that CTs can reduce violence against children, largely by reducing household stress and eliminating adolescents' risky (sexual) behaviours. More specifically in terms of adolescents, the authors found that cash reduces sexual exploitation, sexual violence, and IPV –particularly for girls – in large part via the same pathways that improve girls' sexual and reproductive health, by reducing their engagement with transactional and age-disparate sex (ibid.; see also CPC, 2016; Kilburn et al., 2018).

A growing body of research has evaluated the impacts of cash and in-kind transfers on child marriage. Although most interventions take a cash-plus approach, which makes it difficult to ascertain the impacts of cash alone, there is some evidence that CTs can play a role in reducing child marriage. Pakistan's Female School Stipend Programme, for example, was found to delay marriage by an average of 1.5 years (Alam et al., 2011). Bangladesh's FSSP not only delayed girls' marriages, but also reduced the age disparity between girls and their husbands (Hahn et al., 2018). In addition, Field et al. (2017) and Buchmann et al. (2018) report that an incentive cooking oil, which they noted is less susceptible to theft and graft than cash, not only reduced the likelihood of girls marrying before the age of 18 by 24%, but they also suggest that the incentive has shifted norms regarding the desirability of early marriage, perhaps directly by indicating the value of adult marriage to parents, perhaps by encouraging girls to negotiate to stay in school, or perhaps by inspiring parents to wait for a better marital match. In Tanzania

and Ethiopia, Erulkar et al. (2017) report that the provision of conditional assets (goats or chickens) roughly halved the risk of marriage for girls between the ages of 15 and 17.

On the whole, however, evidence about the impacts of CTs on child marriage suggests that effects are often mediated through improvements in girls' access to education – which in many contexts then translate into better opportunities for employment – and that aside from that the indirect impact cash alone is probably the least effective intervention strategy in terms of altering the value that families place on girls marrying young (Chao and Ngo, 2017; Kalamar et al., 2016; Amin et al., 2016). The strongest evidence to date comes from an evaluation of *Apni Beti Apni Dhan*, an Indian CCT that paid USD 380 to unmarried girls at the age of 18, found that it inadvertently encouraged early marriage by effectively financing girls' weddings soon after their 18th birthday (Nanda et al., 2016). While 41% of non-beneficiary girls married at the age of 19 or older, only 28% of beneficiary girls delayed marriage until 19. Noting, like Jones et al. (2016), that while poverty can influence child marriage depending on context-specific marriage practices, social and cultural factors are generally more important and better-off girls can be at even higher risk of child marriage in some communities, an evaluation of Ethiopia's Finote Hiwott/End Child Marriage Programme also judged economic incentives to be unsustainable and potentially ineffective (GYA and B &M Development Consultants, 2017; Chow and Vivalt, 2015).

### Implications for gender norm change

Most research suggests that cash (and incentives) alone has little scope in terms of shifting the norms that underlie the threats to bodily integrity faced by adolescents. While it can shift behaviour, encouraging parents to refrain from marrying their daughters in childhood and encouraging adolescent girls to avoid sexual relationships that often lead to violence, the bulk of evidence is that CTs have little direct impact on underlying gender norms – and considerable evidence that they do not. Not only did Nanda et al. (2016) conclude that CTs must be paired with complementary interventions to shift gender norms if the aim is to reduce child marriage, but an evaluation of a large-scale South African cash transfer aimed at HIV prevention specifically noted that reduced intimate partner physical violence was not achieved through 'changing power dynamics' (Kilburn et al., 2018: 53). In addition, a small experimental cash transfer paid directly to adolescents in South Africa found that cash allowed some boys to demonstrate their social status—by gambling and purchasing alcohol and drugs-- thus potentially reinforcing the gender norms that increase the risk of boys perpetrating violence (Khoza et al., 2018). As Peterman et al. (2017) conclude, for larger impacts on violence prevention cash must likely be paired with "intensive or specialised complementary interventions" (p.1067) such as parenting programme or case management focused system linkages.

#### Box 4: Protection as a focus in NGO-led cash-plus programmes

Recognising that in addressing GBV, CTs alone cannot overcome gender-based norms (Cross et al., 2018: 22), in Jordan the IRC is taking a cash-plus approach. It is combining an unconditional cash transfer with a variety of women- and girl-centred services – including psychosocial support and life-skills sessions, economic development activities, awareness-raising, parenting classes, and health services – in order to mitigate GBV risks and holistically meet the needs of GBV survivors (Yoshikawa, 2015). The authors note that cash is in very high demand and has helped attract more people to access the psychosocial services that more directly address the root causes of GBV. Specifically, they note that it attracts men to parenting classes and gender discussion groups, both of which are aimed at shifting gender norms. Unfortunately, although the programme includes adolescent girls as a target group, the evaluation focused only on adult women, which means that although interviews with staff suggested positive effects on reducing girls' transactional sex risks – especially from landlords and aid workers – learning from this programme about adolescent-specific impacts is limited.

# **Psychosocial wellbeing**

- Gender norms increasingly shape girls' and boys' psychosocial wellbeing over the course of adolescence, with most boys pushed to be stoic and independent and many girls over-protected and socially isolated.
- Cash transfers can help improve adolescent psychosocial outcomes, primarily by improving household financial security and reducing stress, but also by supporting adolescents to fit in with peers and to socialise.
- A cash-plus approach directly aimed at gender is required in order to shift the social norms that shape psychosocial wellbeing.
- Programming needs to be carefully designed and implemented so as to avoid potentially stigmatising effects, especially if programmes are not universal but aimed at particular groups due to poverty and vulnerability.

# How gender norms shape adolescent psychosocial wellbeing

Adolescent psychosocial wellbeing is also shaped by gender norms. For boys, the pressure to conform to traditional masculinities can leave them emotionally isolated and with few sources of psychosocial support. The need to hide their emotions from their peers, so that they will not be seen as weak, combined with far more limited emotional support from parents, who expect them to be independent, and a disengagement from health care that grows over the course of adolescence, means that many boys have no one to whom to turn (Amin et al., 2018; Rice et al., 2018; Kato-Wallace et al., 2016; Ricardo and Barker, 2008; Langa, 2016; Bhatasara et al., 2013). For girls, whose parents often expect to be subservient even when they are significant contributors to household income, the risks are different. Granted less time to play from childhood, given their heavier burden of domestic and care work, many see their worlds shrink as they approach puberty and their parents try to keep them 'safe' to ensure that they are chaste and pure (Harper et al., 2018). Some are removed from school and many have their mobility sharply restricted – meaning that access to friends can evaporate just as hormonal impacts are leaving them more susceptible to anxiety and depression (Albert, 2015) and the psychosocial stressors they face grow (Harper et al., 2018; Petroni et al., 2015). Married girls, and girls who are about to be married, are among the most disadvantaged in terms of psychosocial wellbeing (ibid.). In Ethiopia, for example, their risk of self-harm is significantly higher than that of their unmarried peers (Gage, 2013). LGBT adolescents also have especially poor mental health outcomes, given the stigma that surrounds alternative sexualities in many LMICs (Browne, 2019).

# The role of cash in supporting adolescent psychosocial wellbeing

In-school adolescents appear to have larger and stronger support networks than their out-of-school counterparts, suggesting that poverty-alleviation programmes that facilitate school attendance hold 'promise for improving youth's social wellbeing and mental and physical health' (Rock et al., 2016: p.55). Cross-country qualitative research that looked at the impact of social protection on the quality of children's care also offers insights into how cash might affect adolescents' psychosocial wellbeing (Roelen et al., 2017; Samuels and Stavropoulou, 2016). This literature concludes that social protection can help keep families together, reduce intrahousehold stress, and improve relationships – all of which increase the quality of care children receive and improve their wellbeing. Specific evidence, however, on the effects of CTs on adolescent psychosocial wellbeing is mainly limited to African countries and difficult to generalise beyond noting that impacts appear to be driven by improvements in household-level financial security.

For example, in Kenya, one study of the CT-OVC found that among adolescents aged 10–18, receipt of cash significantly reduced the odds of anxiety and post-traumatic stress disorder (PTSD) and improved their outlook (Shangani et al., 2017). Another study of the CT-OVC found that it reduced the odds of depressive symptoms by 24% for people aged 15–24, though further disaggregation found impacts significant only for males and primarily for those aged 20–24 (Kilburn et al., 2016). An evaluation of Tanzania's PSSN found no quantitative impacts on young people's depressive symptoms, hope or stress, but did find increased subjective wellbeing – largely due to improved material wellbeing (TASAF et al., 2018). In Malawi, one study of the SCTP found that it improved the quality of adolescent social networks, which has implications for psychosocial wellbeing, and potentially provided some protection against depressive symptoms for the poorest (CPC, 2016). Another

study of the SCTP (Angeles et al., 2019) found that it reduces depressive symptoms among all youth, but that effects are especially high for girls, for whom it reduces symptoms by 15 percentage points, primarily by improving access to education and increasing caregiver wellbeing and social support (by improving household economic security). Interestingly, Zietz et al. (2018) found that the SCTP may have positive impacts on adolescents' psychosocial wellbeing by increasing their involvement in household work as adolescents reported feeling pride in their ability to contribute. In South Africa, Kilburn et al. (2018) found that a cash transfer aimed at reducing exposure to HIV improved the psychosocial wellbeing of adolescent girls and young women and Eyal (2016) found that receipt of the Child Support Grant (CSG) halved the intergenerational transmission of depression, with the largest impacts for girls and those living with depressed fathers. Finally, Baird et al.'s (2013) evaluation of the experimental ZCTP in Malawi found positive impacts on girls' mental health outcomes, mediated through better physical health, increased access to and support for schooling, and higher levels of consumption and leisure. Later research, however, found that impacts disappeared when the programme ended, leading researchers to conclude that even small reliable sources of income reduce psychological distress but do not generate longer-term improvements (Baird et al., 2015).

In humanitarian settings the evidence is extremely limited. However, in a mixed-methods panel study with UNICEF and UNHCR with Syrian refugees in Jordanian host communities Abu Hamad et al. (2017) found that adolescents reported more engagement with peers due to cash assistance, primarily the result of their having pocket money to spend with friends. Nevertheless, linkages with complementary programme interventions emerged as having a greater effect on their psychosocial wellbeing overall. UNICEF Jordan's integrated child and adolescent Makani centres were seen as critical to improving adolescents' lives, and especially adolescent girls' lives. Respondents reported that they not only provide a safe space where they can be with friends, and make new Jordanian friends, they also provide the opportunity to learn life skills and practise speaking up for themselves.

It is important to highlight that there are, however, risks that social protection programming can be a source of stigma and shame, especially if allocated on the basis of poverty and vulnerability and that sets young people apart from their peers. In Lesotho and Malawi, Ansell et al. (2019) found that young people expressed distress associated with receiving CTs as 'free money', even if the money was a real source of help and sorely needed, because of the shameful association that CTs are perceived to have with an inability or unwillingness to work. Roelen (2017), in her work on shame, poverty and social protection, suggests the broader evidence is more complex, and that shame and stigma typically result as a matter of implementation rather than design.

# Implications for gender norm change

Cash alone appears to improve adolescents' psychosocial wellbeing and a cash-plus approach offers scope to shift the gender norms that affect adolescent psychosocial wellbeing, especially when the 'plus' component is directly aimed at empowering girls and expanding boys' and men's notions of masculinity. However, there is limited evidence that cash alone can shift the gender norms that shape psychosocial wellbeing, beyond shifting beliefs about the importance of education (which is shown to improve social networks) or by offering different payment schedules for girls versus boys (to shift norms where schooling uptake varies by gender). Indeed, in the absence of attention to social norms, and especially links between cash and parenting education programmes that include fathers and other male caregivers (see Box 5), it is also possible that access to cash, paid to mothers and female caregivers, may further disempower men as caregivers, with implications especially for boys' psychosocial wellbeing.

# **Box 5: Progressive masculinities**

Programmes aimed at encouraging kinder, gentler forms of masculinity are increasingly common in LICs and MICs and a small number have been linked to cash transfers in Latin America and sub-Saharan Africa. The Bolsa Familia Companion Programme, run by the NGO Promundo, which was among the first to directly tackle masculinities, has been found to make men's beliefs about their responsibilities for childcare, cooking, and domestic chores more equitable (Promundo, 2016). In Ethiopia, the BMGF-funded Act with Her programme is following a multi-faceted design and in partnership with the DFID-funded GAGE longitudinal research programme will be able to tease out the effects of cash in combination with classes on progressive masculinities for boys and life skills for girls in comparison to an intervention without cash in both the short and longer term<sup>1</sup>.

# Voice and agency

- Discriminatory gender norms leave adolescent girls with fewer opportunities to express voice and agency than their male peers.
- Evidence regarding the ability of cash to improve adolescents' influence over decisions -even those relevant to their own lives—is extremely thin.
- A cash-plus approach directly aimed at gender relations is required in order to shift the social norms that determine access to voice and agency.
- Feedback loops aimed at ensuring that social protection beneficiaries have input into programming, including social audits and the right to express grievances, appear to make no efforts to involve young people.

# How gender norms shape adolescent voice and agency

While children and young adolescents of either sex tend to have few opportunities to make decisions in many Southern countries, due to age-related hierarchies, opportunities to express voice and agency tends to become more sharply gendered over the course of adolescence. In most contexts, adolescent girls become increasingly disadvantaged related to boys. They typically have less access to decision-making over their own lives, including day-to-day decisions such how to spend their time and whether to use contraception (and even whether to have sex), as well as longer-term decisions, such as how long they will stay in school and when and whom they will marry (Harper et al., 2018; World Bank, 2014; Muñoz Boudet et al., 2013). In addition, compared to their male peers, girls also tend to have less input in household decision-making and fewer options for participating and leading in classrooms and communities. Indeed, even in Rwanda, where women have more national-level political representation than in any other country, Isimbi et al. (2017) report that adolescent girls are more likely to be classroom deputies than classroom captains and that boys are more likely to speak up in public, and from an earlier age.

# The role of cash in supporting adolescent voice and agency

Although evidence on the impacts of CTs on women's voice and agency suggests these are small but positive (see Box 6) (Bastagli et al., 2016; Peterman and Natali, 2016), we know little about the impacts on adolescent voice and agency. Given that cash improves adolescents' access to education – which has knock-on implications for their longer-term economic opportunities and financial independence – and reduces risky sexual behaviour, it is likely that it increases adolescents' access to some forms of decision-making. We find only three specific examples that directly address the issue of adolescent autonomy in the literature, however. First, the evaluation of Tanzania's PSSN, while noting that it does not quantitatively improve adolescent mental health outcomes, observes that subjective improvements are mediated through increases in autonomy and – for girls – self-assessed household decision-making (TASAF et al., 2018). Second, in South Africa, MacPhail et al. (2017) report that small transfers paid directly to adolescent girls (aged 13–20), to assess the impact of cash on HIV exposure, helped them to feel independent. Finally, also in South Africa, Khoza et al.'s (2018: 1) evaluation of an experimental CT that offered urban adolescents their own cash transfer (as opposed to merely providing cash to the household) concluded that it fostered 'a sense of agency, which is vital for their transition to adulthood'. Cash helped young people feel independent and

### Box 6: Pairing transfers and behaviour change communication improves women's bargaining power

Roy et al. (2017) evaluated the medium-term impacts of a programme aimed at improving household food security and child nutrition in rural Bangladesh. They found that pairing cash and in-kind (food) transfers with behaviour change communication (BCC) resulted in a 26% decline in intimate partner violence six to ten months after the intervention ended. The authors note that because communication efforts were aimed at nutrition, not gender equality or violence, they believe results were driven by improved opportunities for women to come together (through weekly meetings) and increased social status in the household (through improved information). The importance of BCC was underscored by the fact households receiving cash alone showed no decline in violence after the programme ended.

promoted adult identity. However, this may have had unintended consequences (particularly for boys), facilitating drinking, drug use and gambling as a way of attaining 'adult' social status. Notably, the final evaluation included in DFID's Girls' Education Challenge suggests that beyond impacts mediated through uptake of education, cash itself had few impacts on girls' voice and agency. Where improvements in decision-making, mobility, and aspirations were noted, they appear to have almost exclusively been the result of add-on programming that provided girls with safe spaces, life-skills training, and opportunities for participation and leadership (Coffey, 2017).

Increasingly in line with a framing of social protection as a right, programme designers have sought to embed mechanisms for beneficiary feedback, including social and gender audits (aimed at assessing the social impacts of programmes, e.g. public works, on different community members) and grievance mechanisms (where beneficiaries can voice complaints about fairness of targeting and implementation irregularities) (Bergh, in Jawad et al., 2019 forthcoming). While there is increasing attention to the accessibility and uptake of these mechanisms by both women and men (Jones et al., 2016), there is no existing evidence that these mechanisms are being designed to encourage the participation of young people or solicit their views on programme implementation and effectiveness.

# Implications for gender norm change

Cash transfers offer limited scope for shifting the social norms that restrict adolescent girls' access to voice and agency. Indeed, while the consensus is that they improve access to some forms of decision-making for some groups of adult women, not least because transfers are often provided to female caregivers as the primary beneficiary on the assumption that if women have their own incomes it will result in greater empowerment, there is little evidence that cash provided to adolescent girls affects their voice and agency beyond supporting them to avoid the riskiest sexual relationships (Kilburn et al., 2016). Indeed, there is some evidence that cash may reinforce existing gender norms, as boys use their more privileged positions inside the household to stake claim to new resources (as cited in Roelen et al., 2017) and to demonstrate independence to their peers in ways that are unhealthy (Khoza et al., 2018). Moreover, in terms of programme governance and social accountability mechanisms, there is no evidence that spaces are being provided to encourage feedback from adolescent beneficiaries.

# **Economic empowerment**

- Although highly age- and context-dependent, in general gender norms put adolescent boys at risk of child labour, and girls either at risk of exclusion from education, skills-building opportunities, and paid employment (due to domestic and care work burdens) or vulnerable to exploitive forms of employment (such as domestic work).
- There is some evidence that public works programmes leave adolescents at risk of child labour as young people substitute their own labour for that of their parents.
- There is very limited evidence on how cash or in-kind transfers might be leveraged to increase adolescents' economic empowerment and tackle the underlying gender norms that act as barriers to that empowerment.

# How gender norms shape adolescent economic empowerment

Adolescents' economic empowerment, which GAGE defines as whether adolescents "are able to choose decent employment and access and maintain, in an age-appropriate manner, credit and control over their own incomes" (GAGE, 2017), is shaped by the same gender norms that shape their access to education. Boys are often seen as future providers and girls are seen as future wives and mothers, and – despite some evidence that norms are shifting in light of emerging work opportunities which favour girls (e.g. Jones et al., 2018; Heath and Mobarak, 2015) – parental investments in education are typically mediated accordingly (Harper et al., 2018; Ahaibwe et al., 2017). However, in the case of economic empowerment, the gender norms that disadvantage boys in terms of child labour and access to education (e.g. the norm that expects them to be breadwinners) generally work to favour them. In most contexts, boys have better access to training opportunities, paid employment, assets, and financial institutions. Girls, on the other hand, are almost universally disadvantaged. For example, globally they make up 75% of all economically inactive non-student youth and they represent only 44% of youth enrolled on TVET courses (Elder and Kring, 2016). Where they have access to training programmes, these tend to be deeply gendered and prepare them for 'women's work' (e.g. hairdressing or childcare) and where they have paid work it tends to be confined to the lowest-paid sectors and 'feminine' occupations (e.g. domestic work) (Pereznieto et al., 2018). Adolescent girls also have access to fewer assets, with even their own wages more likely than boys' to be seen as communal property (Jones et al., 2014), which limits their ability to engage in self-employment, more limited access to financial institutions and credit, and less decision-making over their own cash income (Quisumbing et al., 2013). While unmarried girls' access to economic empowerment is often limited by parents and older brothers, married girls' access is typically even more constrained – in part because married girls are often too busy for paid work and in part because their husbands are the final arbiters and often impose tight mobility restrictions on their new brides (Ahaibwe et al., 2017).

### The role of cash in supporting adolescent economic empowerment

While CTs reduce household poverty and improve consumption (Bastagli et al., 2016; Davis et al., 2016), support human capital investments that pay off over time, and have been found to help young adults develop new skills and generate higher incomes (Blattman et al., 2014<sup>7</sup>), research has not addressed whether at scale CTs affect adolescents' own shorter-term economic empowerment. The evidence that does exist suggests that impacts are probably complex. Indeed, while most CT programmes provide payments too small to offset gains from child – and especially adolescent – labour, where they do keep children out of the workforce it is possible that they reduce adolescent control over cash by reducing their access to it (Bastagli et al., 2016; Dammert et al., 2018; Porreca and Rosati, 2018). Public works programmes have also sometimes been found to improve household economic wellbeing at some cost to adolescents (see Box 7).

In Bangladesh, the FSSP has not been assessed in terms of impacts on adolescent girls' economic empowerment; whether girls had access to – let alone control of – the money paid into their accounts is unknown. However, evidence points to some possible impact pathways: receipt of the FSSP during adolescence is associated with greater likelihood that women will have a bank account as adults (Hahn et al., 2018). Moreover, while the programme does not affect the likelihood of employment, it affects the types of employment, with more women who were recipients going into formal employment and away from agriculture and informal employment.

Two experimental CTs in South Africa improved adolescents' economic empowerment—at least in terms of control over expenditures and with the caveat, as noted above, that cash given directly to adolescent boys in some cases extracts other costs given how they spend their money (Khoza et al., 2018). Mac Phail et al. (2017) report that cash given directly to adolescent girls helped them feel financially empowered. Khoza et al. (2018) observed that cash allowed young people to buy 'luxury' items such as toiletries and mobile phone credit, but that gendered patterns emerged. Boys tended to make financial decisions on their own, and to spend money in ways that 'reflected a concern with maintaining a social identity' (ibid.: 9), whereas girls discussed purchases with family members and tended to spend cash to benefit the household.

### Implications for gender norm change

By increasing household liquidity, cash transfers offer some scope for improving adolescents' more immediate access to economic empowerment – though it appears that cash (or incentives) is very rarely used to do so. The overwhelming majority of programmes that focus on girls' economic empowerment provide them not with cash or an incentive, but with

#### Box 7: Public works programmes and adolescents

Public works programmes such as India's Mahatma Gandhi National Rural Employment Guarantee Act 2005 (MGNREGS) and Ethiopia's Productive Safety Net Programme (PNSP) smooth household consumption and reduce reliance on negative coping strategies such as distress sale of assets and debt. There is, however, also some evidence that they increase the likelihood of adolescents' involvement in child labour (Roelen et al., 2017; Jones et al., forthcoming; Cookson, 2018; Shah and Steinberg, 2015; Tafere and Woldehanna, 2012). Though programmes bar the participation of children under the age of 18, in some cases adolescents take their parents' places on public works activities in order to free their parents for more lucrative paid employment. In other cases, adolescents – especially girls – assume their parents' domestic and caregiving roles so that their caregivers can engage in public works.

<sup>7</sup> In Uganda, a government programme offered older adolescents and young adults (average age 25) a large, one-off cash transfer (nearly USD 385) aimed at helping them start their own businesses. The programme was found to increase work hours, earnings, and business assets.

opportunities to acquire new skills and to save their own money, which are potential building blocks for women engaging in entrepreneurship and employment and may lead to norm change over time. Furthermore, while cash could be used to help girls establish their own businesses and become more financially independent, evidence suggests that for some girls, more access to money not only does not shift gender norms but also leaves them at greater risk. In Kenya, Uganda and Zimbabwe, programmes that improve adolescent girls' finances without offering them access to empowerment programmes have been found to potentially increase their risk of sexual harassment and violence (Dunbar, 2010; Austrian and Muthegi, 2013), while where programmes pair livelihoods training with broader empowerment programming – as well as attention to girls' needs for transport and childcare – the impacts on girls can be very positive (Bandiera et al, 2018).

# Conclusions

While CT programmes that focus on alleviating household poverty more broadly may have positive spill-over effects on some dimensions of adolescent wellbeing, especially education and in particular when education is explicitly conditioned or rewarded, evaluation evidence (which is admittedly not at this point able to capture longer-term impacts) suggests that cash alone is unlikely to empower adolescents and support them to reach their full capabilities - much less contribute to changing the social norms that underpin many constraints. This is unsurprising for two reasons. First, large-scale CT programmes take little account of adolescents' age- and gender-related vulnerabilities and risks. For example, where they condition the uptake of health services, conditions are almost exclusively aimed at maternity care and well-child visits for younger children. The same is true for the provision of complementary services. In addition, where cash transfer programmes - especially so-called labelled cash transfers - use the social and behaviour change communication that research increasingly suggests is necessarily in order to bring about longer-term change, there appear to be few if any attempts to craft messages that highlight adolescents' specific needs. Second, at scale CTs and other social protection programmes remain tightly focused on the education and health outcomes around which human capital arguments are centred. Impacts on broader adolescent wellbeing, including freedom from violence, psychosocial wellbeing, voice and agency, and economic empowerment, are scarcely considered. Our review of the evidence suggests that given the ways in which social norms increasingly affect girls' and boys' lives over the course of adolescence, transformative change will require an integrated cash-plus approach which works in tandem with other interventions and focuses directly on young people's age- and gender-related needs – such as safe-space empowerment programming for girls, masculinities programming for boys, and broader norms interventions aimed at communities and parents<sup>8</sup>.

<sup>8</sup> See Jones and Presler-Marshall (2019) and Jones et al. (2019) for a more detailed discussion on policy and programmes actions to advance adolescentand gender-responsive social protection, and Jones (2019 forthcoming) for implications for policy and programming in humanitarian contexts.

# Table 1: Promising practice: cash plus programming examples

Programme name	Aims	Programme modalities	Context	Scale	Funder
Act with Her	<ul> <li>Reduce discriminatory gender norms held by communities and boys/ young men</li> <li>Improve SRH knowledge and service uptake</li> <li>Enhance adolescent voice and agency within the family and community</li> </ul>	<ul> <li>Safe spaces</li> <li>Gender-synchronised curricula with adolescent girls and boys</li> <li>In-kind social transfer (tailored to school and out-of-school girls' needs)</li> <li>Community engagement</li> </ul>	Ethiopia	50,000 adolescents (40,00 girls, 10,000 boys)	BMGF
Adolescent Girls Initiative	<ul> <li>Build girl-level social, educational, health and economic assets</li> <li>Improve household- level economic assets</li> <li>Delay childbearing</li> </ul>	<ul> <li>RCT comparing four dimensions:</li> <li>Violence prevention only</li> <li>Violence prevention+ education</li> <li>Violence prevention+ education+ health</li> <li>Violence prevention+ education+ health+ wealth creation</li> </ul>	Kenya	6,000 girls age 11-15	Pop Council/ DFID (Austrian 2018)
Study nested within the CHANGE study, a pilot RCT assessing the feasibility and acceptability of CTs in a low-resourced urban setting (Khoza 2018)	Improve ART adherence among adolescents	Compared effects of diverse social protection programmes (including cash, food, stipends, etc.) with diverse care interventions (including sports, HIV support, parenting interventions) RCT with three dimensions – all paid to adolescents directly: • UCT • CT conditioned on school attendance • CT conditioned on health visits	South Africa	1059 HIV+ adolescents 120 adolescents 16–18 years	Nuffield Foundation, John Fell Fund, CIPHER Janssen Educational Grant Programme and Evidence for HIV Prevention in Southern Africa, UK aid, USAID (Cluver, 2016)

Schooling, Income, and Health Risks	<ul> <li>Ascertain the importance of conditionality on outcomes</li> <li>Explore differential impacts of transfer size</li> </ul>	<ul> <li>Payment of school fees</li> <li>RCT of cash transfer of varying amounts and conditions – including direct payment to girls</li> </ul>	Zomba, Malawi	3,796 girls 13-22 years	Multiple, including BMGF and World Bank (Baird et al., 2013b)
Programme name	Aims	Programme modalities	Context	Scale	Funder
Integrated child and adolescent programme	<ul> <li>Enhance child and adolescent wellbeing</li> <li>Promote education for all</li> <li>Tackle psychosocial distress stemming from displacement</li> <li>Promote social cohesion between host and refugee communities</li> </ul>	Labelled cash for education programme (Hajati) plus Makani programme (combining safe spaces, life skills curricula child protection referrals, social innovation labs, psychosocial support)	Vulnerable Jordanians and refugee children and adolescents	40,000 girls and boys 6-16 years (estimate only)	UNICEF Jordan with support from multiple donors
Empowerment and Livelihood for Adolescents (Bandiera et al.)	<ul> <li>Economically and socially empower girls</li> <li>Reduce adolescent pregnancy</li> </ul>	Safe space programming that combines life skills (including SRH) and livelihood skills taught by mentor.	Uganda	5,966 adolescents girls aged 14 and 20	UNFPA, Oak, World Bank, Ministry of Gender, Labor and Social Development
Kishoree Kontha (Buchmann 2018)	<ul> <li>Reduce child marriage and adolescent pregnancy</li> <li>Increase girls' education</li> </ul>	RCT comparing safe-space adolescent empowerment training program (including education, social competency, health, and mentoring) and a conditional incentive program	Bangladesh	15,464 adolescent girls	3IE, US National Institutes of Health, Nike Foundation, International Development Research Center, and GrOW
Duflo et al., 2015	<ul> <li>Keep adolescents in school</li> <li>Reduce HIV infection</li> </ul>	RCT comparing education subsidy consisting of free uniforms for upper primary students, HIV education, and combination	Kenya	Nearly 20,000 adolescents aged 13 to 20	Govt of Kenya

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# **ALIGN** Advancing Learning and Innovation on Gender Norms

#### About ALIGN

ALIGN is a four-year project aimed at establishing a digital platform for the Community of Practice (CoP) centred on gendered norms affecting adolescents and young adults. Project ALIGN seeks to advance understanding and challenge and change harmful gender norms by connecting a global community of researchers and thought leaders committed to gender justice and equality for adolescents and young adults. Through the sharing of information and the facilitation of mutual learning, ALIGN aims to ensure knowledge on norm change contributes to sustainable gender justice.

#### **ALIGN's Research Fund**

ALIGN's Research Fund supports small-scale action research or research translation projects which advance knowledge and evidence on gender norms across a wide range of contexts.

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Gender and Adolescence: Global Evidence (GAGE) is a nine-year (2015-2024) mixed-methods longitudinal research programme exploring the gendered experiences of young people aged 10-19 years. We are following the lives of 18,000 adolescents in six focal countries, two each in Africa (Ethiopia, Rwanda), Asia (Bangladesh, Nepal) and the Middle East (Jordan, Lebanon). GAGE is funded by UK Aid from the UK government.

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