Bihar Child Support Programme

Midline Impact Evaluation Report – Annexes

Oxford Policy Management

FINAL

June 2016

Introduction

This document contains all annexes to the *Midline Impact Evaluation Report* of the Bihar Child Support Programme (BCSP). It is structured in the following manner:

Annexe A presents the original terms of reference under which this pilot and its evaluation were undertaken, as well as the departures from this terms of reference. This is followed by Annexe B with a discussion on how the evaluation was done in alignment with the OECD-DAC evaluation criteria and with DFID's policy cross-cutting issues to be assessed in evaluations. It also contains the evaluation framework, a list of consultees, and the communications plan.

Annexe C explains the methods and data collection approaches used for both quantitative and qualitative parts of this evaluation, and relates to *Chapter 3* of the main report.

Annexe D contains tables with information on general sample characteristics. These include demographics, infrastructure, and disease outbreaks or natural calamities that took place in the past year.

Annexe E contains information on implementation status of the programme, including awareness and enrolment rates. It corresponds to *Chapter 4* of the main report. Annexe F contains data related to self-reported use of the cash transfer, changes in weekly household food consumption expenditure, calorie consumption, and maternal and child diversity in line with the topics covered in *Chapter 5* of the main report. Annexe G relates to *Chapter 6* of the report, and presents tables on how the BCSP affected uptake of services, nutrition-sensitive behaviours and equity considerations around which sections of population did the programme help the most. Annexe H corresponds to *Chapter 7* in the main report, and contains tables on women's empowerment, specifically on women's mobility. Annexe I presents data that relates to how the BCSP has added value to services provided under the Integrated Child Development Services (ICDS), and forms the basis of *Chapter 8* of the main report. Annexe J presents child anthropometric outcomes, and includes prevalence rates of children who were stunted, wasted or underweight. Maternal biomedical outcomes are also presented.

Annexe A Original Terms of Reference

A.1 Departures from the ToR

There have been two departures from the ToR:

- The ToR expected an “unconditional” treatment arm and a “conditional” treatment arm; during the implementation design phase, the Government of Bihar requested that this evolve to the soft conditions and hard conditions treatment arms that were implemented and described in the main report

- The ToR expected a baseline and endline; as the implementation was delayed, it was agreed with DFID that a midline would be undertaken for the generation of timely evidece

A.2 Original ToR

Sector Wise Approach to Strengthening Health (SWASTH)
Bihar Technical Assistance Support Team (BTAST)

Terms of reference
BTAST Support to Social Welfare Department – GoB
For design, implementation and evaluation of direct cash transfers
"Bihar Child Support Programme" (BCSP)

1. Introduction

The Government of Bihar (GoB) has launched "Sector Wide Approach to Strengthening Health" (SWASTH) programme with the aim of bringing significant improvements in health and nutrition status of people in Bihar. SWASTH, is funded by the Department of International Development (DFID), Government of the United Kingdom and has been designed for convergent actions primarily from three service delivery departments of the government - the Department for Health and Family Welfare (DoHFW); Social Welfare Department (SWD); and Public Health Engineering Department (PHED). SWASTH will be implemented for a six year period beginning from 2010.

DFID support includes provision of technical assistance and a Technical Assistance Support Team (B-TAST) has been set up; BTAST is managed by a consortium of CARE (UK), Options consulting and IPE Global and consists of national and international consultants to provide technical and managerial support to the state government. The Technical Assistance support team is placed in the state headquarter, districts and at 6 cluster headquarters.

SWASTH's **goal** is *"to improve the health and nutritional status of people in Bihar, particularly the poorest of the poor, and thereby accelerate the state's progress towards the Millennium Development Goals (MDGs)"*. Its **purpose** is *"increased use of quality, essential health, nutrition, water and sanitation services especially by poorest people and excluded groups"*.

SWASTH intends to achieve its purpose through the following outputs:

- Increased scale and functionality of nutrition, health and water and sanitation services;
- Community level initiatives to manage, demand and monitor, services;
- Strengthening systems for improved efficiency and effectiveness;
- Enhancing GoB's capacity to work with non-government actors enhanced;
- Improving the quality and use of monitoring and evaluation systems.

2. Background

Bihar is the third most populous state in India. Malnutrition among women and children is widespread with more than half of the children reportedly underweight and stunted. In order to address the problem of large scale anaemia and malnutrition among pregnant and lactating

women and children, a number of interventions varying from cooked meals, food rations, nutritional supplements (Folic acid, vitamins) and even clinical treatment of severely malnourished children have been put in place. However, the efficacy of these schemes in reaching the intended beneficiaries or in reducing malnutrition has continued to be questioned.

Owing to poverty, illness and poor caring practices, large numbers of mothers and children in Bihar are malnourished. This increases their risk of dying and diminishes their quality of life. Evidence from other parts of the world indicates that giving cash (with conditions) provides greater options for the poor to buy more food or give greater flexibility to improve nutritional status of mothers and their children.

The Government of India has over the years launched a range of schemes to improve the situation. One of the most important programmes is the "Integrated Child Development Scheme" (ICDS). More recently the government also introduced several poverty alleviation programmes including cash transfer schemes targeting the poor and to improve maternal and child health including the Indira Gandhi Matritava Sahyog Yojana (IGMSY) – a conditional maternity scheme details of the scheme are available at http://wcd.nic.in/schemes/sabla/IGMSYImpGuidelinesApr11.pdf and in Annex 2. IGMSY is designed to provide cash to women primarily to compensate them for lost earnings when they stop working during pregnancy and for 6 months post-partum. IGMSY will be piloted in two districts in Bihar and is due to be launched in 2011.

After detailed deliberations on possible methods to improve the nutritional status of mothers and infants in the state of Bihar, the Social Welfare Department (SWD), Government of Bihar is proposing to pilot a Cash Transfer (CT) scheme, called Bihar Child Support Programme (BCSP). Under this scheme, eligible women will receive a fixed sum of cash every month to buy food and nutritional items required during her pregnancy up until the infant is 36 months old. The scheme is in addition to the existing Integrated Child Development Scheme (ICDS) of the central government. The SW Department wishes to assess whether providing extra money along with the existing nutrition programme (ICDS) will improve the nutritional status of the children and their mothers. The key features of BCSP concept are attached at annex 1. The cash transfer scheme is to be piloted in the SWASTH priority districts[1] in two blocks- one block with conditions attached to receiving cash and the other block without any conditions. A third block with ICDS programme is to be compared as a control block for impact assessment purposes (it is possible that additional blocks could be included to strengthen the research power of the pilot); BTAST seeks the services of a Technical assistance agency / Consortium to design, support implementation, monitor and evaluate a cash transfer programme on a pilot basis in two select geographical areas/blocks in Bihar, over a period of four years. The Technical Assistance agency (TAA)/consortium contracted by BTAST will advise the SWD/ Nutrition Monitoring Unit (NMU)/ WDC on all aspects to do with the design and implementation of the BCSP. The TAA/ consortium will also be responsible for an impact evaluation, together with a number of

[1] Madhepura , Supaul, Araria, Sheohar, Madhubani, Kishanganj, Purnia, Jamui and Banka

additional ad-hoc studies, which will assess programme performance, outcomes and impact of the scheme.

3. Purpose of the assignment

The purpose of the assignment is to Support Social Welfare Department – GoB, for BCSP to

- Carry out the final design of the BCSP (3 months)
- Design the Impact Evaluation of the Scheme (3 months);
- Agree the final designs with SWD (1 month); and
- Support SWD, NMU/ WDC to implement the scheme (4 years).
- Implement the evaluation plan (4 years)

4. Tasks for the Technical Assistance Agency (TAA)/Consortium partners

The TAA would be having two main tasks –the first one would be designing, support for implementation and management of the BCSP including the 4-month detailed design phase of the programme. The second task of TA Agency would be an impact evaluation, together with a number of additional ad-hoc studies, which will assess programme performance, outcomes and impact of the scheme.

5. Activities to be undertaken by the Technical Assistance Agency

A. Design Stage

There will be a 4-month detailed Design Phase during which the programme approach will be refined and pre-tested. At the end of this 4–month design phase, based on field testing in two blocks (Hisua and Sadar) of Nawadah district[2], the TA Agency in close consultation with BTAST, SWD and WDC, will develop a detailed and costed implementation plan which will include selecting the blocks for the pilot, guidelines for enrolment of beneficiaries, design of effective payment mechanisms, a comprehensive M&E system with indicators which can monitor payments as well as track beneficiaries through the programme, develop MOUs with appropriate agencies (such as the Post Office and other organizations such as NGOs which may
play a role in monitoring), and produce an overall budget for the programme. The agency will also be responsible for designing an Impact Evaluation (Section - D). The following key activities are to be undertaken during the design stage and the pilot stage:

i. Define the methods of accurately identifying and registering the beneficiaries, including preliminary pregnancy examination, identification/ enrolment and final registration (for example, a woman may be diagnosed as pregnant by AWW or ANM/ASHA and can be identified as a target beneficiary);

ii. Develop forms and define formalities that allow enrolled beneficiaries to formally register, receive her registration number and proceed to access her cash entitlement;

iii. Define other identification papers or proofs needed for enrolment/ registration. Define formalities of verification by any other village level authorities;

[2] Availability of health and AWW services in the blocks are being reviewed to assess their availability

iv. Define what procedures are to be completed for enrolment, such as visit to Anganwadi centres (on a fixed day such as the village health and nutrition day/ Immunisation day or any day), primary health centre, sub health centre, or gram Panchayat. All procedures should be simple and without cumbersome paperwork;

v. Design an MIS system that allow, inter alia, central registration of all the identified and registered beneficiaries, creation of a unique identification number against each beneficiary, and generation of automatic invoices for amounts to be transferred to the cash transfer agency on a monthly basis;

vi. Develop the cash delivery system: this will include reviewing whether Rs 250/- is the appropriate level of payment, identifying potential cash transfer agencies (such as the Post Office), define contract features including service fee, service deficiency conditions, settlement of disputes, and draw-up MOU for approval and signature developing protocols for the cash transfer system (to include such factors as verification, time limits, absence or non-availability of beneficiary, discontinuation of beneficiaries due to deliveries in alternate location, travel, death of child, and so on); and identification of cash delivery method (i.e. is cash to be delivered directly to the beneficiaries at home, through a local postman, or to be delivered on a designated day - VHND day or Immunisation day - at the Anganwadi Centre or other designated place?). Alternative options should be explored and made available if for instance the service delivery points (such as AWW) cannot deliver the required service such as immunisation. It is important to explore alternative, reliable methods of transferring the cash where post offices are not available in a particular area. It is also important that women can access the cash without spending too much time or incurring high transport costs ;

vii. Identify and develop systems to monitor compliance with 'hard' conditions established for conditional cash transfer beneficiaries. Develop certifying protocols from ANMs/ AWWs to include regular attendance of the beneficiary using the registration card (attendance will be recorded in all 3 areas to assess utilisation of services). A course of action should also be developed for those beneficiaries who do not comply with conditions. Detailed descriptions of the conditions need to be agreed and mechanisms to stop payments set out for repeated non-compliance.

viii. Design a system to identify when – how many months - a women becomes pregnant after the index birth, up to a period of 36 months after this birth. This should also be capable of assessing whether she qualifies for the birth spacing bonus payments at 24 and 36 months, and of identifying those women who fall pregnant between 24 and 36 months and become eligible for a second cash payment;

ix. Identify a system of community based monitoring of the programme using either a community based agency or an independent agency. Identify the scope for operational research and interim evaluation studies to be conducted periodically to monitor the progress of the scheme and also address any managerial issues in the implementation of the scheme.

x. Define institutional structures, management systems, reporting procedures, supervision and monitoring protocols, dispute resolution, payment delays, etc. The institutional structures should include constitution and functioning of oversight body (steering committee), coordination committee, and the management agency (Cash Transfer Cell under NMU /WDC). This should include a system of co-ordination with agency responsible for makingthe cash transfers (e.g. post office or bank). The management agency at the district / block level also need to be defined along with required resources required.

xi. Develop strategies to disseminate the programme, including publicity, community mobilisation, IEC activities, in the pilot blocks. Develop a community mobilisation strategy for the control block separately. Such mobilisation strategy must ensure any differences between the cash transfer groups and the control are due to the cash and not to mobilisation. Identify the agency that could undertake such activity.

xii. Develop detailed guidelines (manuals and instructions) on the following:

a. Instructions on system to register, required eligibility documents, empanelment, scheme card, delayed or defaulted payments, exit options, grievance procedures, payment modalities, etc.

b. Instructions related to compliance to conditions, such as submission of birth certificate, post natal care (along with immunisation/FP advice), nutrition counselling, growth monitoring, feeding practices, hygiene, etc;

B. Submission and agreement of Final Design

The agency will be required to submit a final design of the programme, including impact evaluation plan, at the end of 4 months the programme with respective budgets to the Government (SWD) and DFID for final approval. Once agreed the pilot programme will be implemented in 2 areas/ blocks (from SWASTH priority districts)

C. Implementation of the Bihar Child Support Programme

Once the final design has been accepted and the budget for the programme and for the Impact Evaluation and the technical support has been agreed the programme will be implemented as agreed. During the implementation stage, the agency will be responsible for all aspects of programme management, including enrolment of beneficiaries, monitoring of cash transfer system, supervision and monitoring and day-to-day management of the programme. Cash for the transfers to beneficiaries will be held by SWD and transferred directly to post-office/bank or the mechanism agreed in design phase.

D. The Evaluation

The objective of the impact evaluation is to compare the existing approach to improving maternal and child nutrition in Bihar (ICDS) with the approach of cash transfers (both conditional transfers and unconditional or universal transfers). Specifically, the evaluation

study will compare the effects of three programmatic interventions for mothers and children on the following four key outcomes:

i. **Outcome indicators**

a. Child's height for age (HFA)
b. Child's weight for age (WFA)
c. Mother's Body Mass Index (BMI)
d. Mother's haemoglobin (Hb)

ii. **Output indicators**

The technical agency will also provide a set of output indicators to be included in the impact evaluation.

iii. **The three programmes to be compared**

a. **Existing Integrated Child Development Scheme ICDS scheme** (control group)
b. **Universal cash transfer** to all pregnant women from the first ANC visit (third trimester of pregnancy) until the child is 36 months old;
c. **Conditional cash transfer** to all pregnant women from the second ANC visit until the child is 36 months old;

iv. The Key Question To Be Answered Through The Impact Evaluation Study Is:

1. Which of the three approaches (ICDS alone, ICDS + universal cash transfers, and ICDS + conditional cash transfers) is more effective and cost-effective in improving maternal and child nutrition?[3]

The evaluation will run throughout the programme with a baseline at the beginning of the programme and an endline study at 36 months after the birth of the child.
In addition to the main impact study, it is likely that the TA Agency will need to conduct periodic operational research (OR) and interim evaluation studies to monitor the progress of the scheme and also to address any managerial issues in the implementation of the scheme.
Some additional questions which should be addressed through supplementary studies include:

- Are the mothers able to actually use the cash themselves or is it controlled by their husband or mother-in-law?
- Do mothers know what they can buy locally with the cash to improve their own and their children's nutritional status? Is the right food available to buy close to their homes?
- Does utilisation of health and related services by women and their families increase in areas with cash transfers (both conditional and universal cash transfers)? This would include, for instance, services provided by Anganwadi workers and village-based health

[3] It will be for the TA Agency candidates to suggest appropriate measure of effectiveness and efficiency.

workers; ANC and PNC; and AW Centre attendance. Is there an increase in institutional delivery rates and in birth registration? Does EPI uptake improve?

- What do beneficiaries (and their families) think of the scheme?
- Are there other elements to be assessed which are not currently being addressed?

The TA Agency should also be aware as to whether the implementation of the schemes progressing as planned and provide information and advice to WDC and the implementation support agency.

It will be for the TA Agency to propose additional questions that could be addressed through OR and ad-hoc studies during the implementation of the Scheme and to propose a robust methodology that will allow the questions to be answered and to measure differences between the 3 approaches.
It is expected that the TA Agency, including its research team, work very closely with SWD and BTAST in planning, designing and implementing the programme and its associated research in order to build capacity and skills for research management.
The proposed design will be presented to SWD and DFID at the end of the design phase for approval.

v. Selection of Study Sites and Targeting

For reasons related to the administration of the Scheme, the allocation of programmes will need to be at the level of the block. In order to reduce the risk of bias it is proposed that the control and intervention blocks would be randomly assigned, although the districts may either be purposively selected or selected on a stratified basis to reflecting standards of service delivery, socio-economic variables, etc. If the intervention proves to be successful in improving nutritional status of mothers and children, the control blocks will be included in the roll-out of the Scheme.
Targeting will be a combination of both geographical (designation of specific areas as poor for inclusion in the Scheme) and universal targeting (all pregnant women within a designated area).

6. Deliverables

The Agency will prepare:

- A draft final design within three months of beginning the contract for approval covering the aspects described in the scope of work
- Monthly monitoring reports will be prepared and be available within 10 days of the end of each month;
- Quarterly progress and financial reports within 10 days of the end of the Quarter;
- Final report at the end of the contract (date to be agreed after 6 months of contract implementation.

7. Payment terms

The payments would be linked to the deliverables.

For design phase

- On submitting inception report
- On submitting the draft report
- On approval of the final design

For implementation stage

- Initiation of the work
- On submitting the quarterly reports
- On submitting the half yearly reports
- On submitting the yearly report

8. Duration of the Contract

The initial contract for the TA Agency will be for 4 months until the final design of the programme and the impact evaluation have been agreed with SWD and DFID; once agreed the contract will be extended to 3 years on an annually renew basis with possibility for an extension on one year to cover the implementation period.
The contract will include a progress review after two years of programme implementation. This review will be able to recommend continuation of the programme or its termination if it is not considered to be making a significant difference.

9. Criteria for selection of agency

The lead technical agency/Consortium partners with specific technical competence in designing and implementing demand side financing programmes especially cash transfers, but voucher schemes and health insurance experience will also be considered positively, and conducting appropriate and impact evaluation studies will be contracted for the purpose. The lead agency must have credible global presence, possess top quality research expertise and must show the capacity to work and deliver in specific state settings such as in Bihar. It is highly desirable that the TAA forms consortium with research institutions or universities of high repute for impact assessment of the scheme.

10. Project Reporting

Final reporting is to the Principle Secretary, Department of Social Welfare and the implementing agency within SWD NMU or WDC.

Process reporting will be to the Deputy Team Leader, B-TAST-Nutrition for quality assurance or any other person appointed or designated by Deputy Team Leader, B- TAST.

11. Proposals

TA Agency/ Consortium partners are required to submit a proposal of no longer than 15 pages setting out how they would go about designing and implementing the above study.

The proposal should set out in detail the following elements of the impact evaluation:

a. experimental design including justification and methodology for selecting sites
b. study size and statistical power
c. data analysis plan and methods
d. dissemination plan
e. research team, including CVs
f. ethics
g. budget

NOTES:

1. **Proposals will be reviewed and evaluated according to the following criteria:**

a. overall methodology and adherence to the TOR
b. adequacy of measures to minimise bias
c. statistical power to detect changes in HFA, WFA,BMI and Hb
d. appropriateness of analysis
e. appropriateness of planned dissemination
f. expertise and experience of research team
g. ethics
h. value for money
i. consortium with research institute or universities of repute would have distinct advantage

2. **Proposals will also be reviewed by a team identified by SWD& B-TAST**

BTAST and SWD will have sole ownership of all final data and any findings shall only be shared or reproduced with the permission of BTAST

Annexe B Alignment with principles, standards and criteria

B.1 OECD-DAC Criteria

The evaluation has tested the theory of change (used in development of the programme) around the following criteria, which are in line with the OECD-DAC evaluation criteria and with DFID's policy on evaluation – namely impact, effectiveness and sustainability.

OECD – DAC Evaluation Criteria		
Criteria	**DAC specification of the criteria**	**Explanation**
Relevance	• To what extent are the objectives of the programme still valid? • Are the activities and outputs of the programme consistent with the overall goal and the attainment of its objectives? • Are the activities and outputs of the programme consistent with the intended impacts and effects?	• The programme design was tested against national and international evidence in the main report. • Data analysis and subsequent findings were mapped against the programme's pathways of impact. Through this process, the relevance of the intended impacts and effects of the programme were tested.
Effectiveness	• To what extent were the objectives achieved / are likely to be achieved? • What were the major factors influencing the achievement or non-achievement of the objectives?	• A mixed methods evaluation, adopting rigorous econometric methods as well as triangulation through the first round of a qualitative assessment, has led to testing the effectiveness of the BCSP programme design and its components. Further implications for the programme design have also been discussed. • Due to the limited scope of quantitative methods in this regard, qualitative data has been able to investigate factors that influenced the non-achievement of objectives.
Impact	• What has happened as a result of the programme or project? • What real difference has the activity made to the beneficiaries? • How many people have been affected?	• Connected to testing effectiveness is analysing the intended impact of the programme. This has been explored in great detail through quantitative and qualitative methods. Coverage of the programme has been discussed at length with special emphasis on equity of access across various categories of people. • The qualitative work was open-ended to allow for exploratory

		lines of enquiry, not simply confirmatory testing of existing hypotheses. It explored direct and unintended impact of the cash transfer on healthworkers as well as recipients and their families. The inquiry found no increase in tension in the household or increased violence due to the cash – this has been mentioned in the report (Chapter 7). AWWs did report increased time spent on using the cell phone for reporting, (discussed in Chapter 8). No other unintended or indirect consequences were found.
Efficiency	• Were activities cost-efficient? • Were objectives achieved on time? • Was the programme or project implemented in the most efficient way compared to alternatives?	• Data on costs was not collected at the baseline or midline of the programme, however, a separate cost effectiveness study at the endline will explore the questions around efficiency.
Sustainability	• To what extent did the benefits of a programme or project continue after donor funding ceased? • What were the major factors which influenced the achievement or non-achievement of sustainability of the programme or project?	• The programme will continue until at least April 2016. Thus questions around sustainability of the programme will be best answered at the time of the endline.

B.2 Cross-cutting issues

Appropriateness of methodology for assessing cross cutting-issues	
Issues	**Features of appropriate methodology**
Gender	The key respondents of both the quantitative and qualitative modules of the study were women (the intended beneficiaries), and care was taken to employ female enumerators to collect data and conduct interviews. Issues of their mobility, empowerment as well as intra-household allocation were considered. The impact of the conditions has been disaggregated by gender. Child anthropometric outcomes, even though not included in the main report, were also disaggregated by sex in the tables presented in the annexures.
Poverty	Quantitative data was collected on household assets and household food consumption expenditure to create indices of household poverty status. To analyse issues of equity, the wealth index was calculated using the NFHS guidelines and both coverage and impact of conditions were looked at using this lens.
Human rights	The issue of human rights did not feature in the evaluation methodology as it was not applicable to the current programme design or context.

HIV/ AIDS	The population where the study was undertaken has not been affected by an outbreak of HIV/ AIDS on any sizeable scale. However, since women's Hb readings were part of the data collection to analyse anaemia status, strict care was taken with respect to clinical procedures about taking blood samples and disposal of used equipment to ensure that there was absolutely no danger of infection of any kind.
Environment	While there was no deliberate assessment of the environment because of the nature of the programme, appropriate care was taken to ensure that the methodology itself did not involve any practices detrimental to the environment. Appropriate methods were used to ensure safe disposal during blood sample collection.
Anti-corruption	The qualitative inquiry explored if beneficiaries were participating in or subject to corruption in order to participate in the programme. In addition, qualitative and quantitative field teams were independent of programme staff to ensure independence and veracity in data collection.
Capacity building	The capacity building of the AWWs are of relevance to the success of the programme and a detailed quantitative module was administered to them. While only the key AWC level indicators have been presented in the report, further analysis is possible. This may also be more suited to be explored in the second round of qualitative evaluation. The evaluation methodology has been described and explained to the Government of Bihar and other key stakeholders.
Power relations	The exploratory method of the qualitative interviews was suitable for inquiring about power relations and decision-making within the household. The report presents a detailed section on the same in Chapter 7 when the effects of the cash transfer on empowerment have been discussed. Through quantitative and qualitative research methods, power relations in the community have also been explored. This has been possible because of the sub-group analysis within caste and wealth groups.
Country Ownership	This assignment – the design and evaluation of a nutrition CCT pilot – was formally requested to DFID by the Government of Bihar

B.3 Evaluation framework

To satisfy all of the key evaluation questions and needs, a mixed-methods impact evaluation, covering both quantitative and qualitative methods, was conducted. The following table presents an overall framework for the midline evaluation with key evaluation questions, and how the report answers them.

Evaluation question	Sub-question(s)	How it is covered in the evaluation
What is the implementation status of the programme?	What are the awareness levels and enrolment rates of the programme? Do they differ across social groups?	To answer these questions, the quantitative survey will present data on the awareness levels of the programme amongst eligible beneficiaries, and the enrolment rates under the programme. This will be disaggregated by various socio-economic indicators to examine whether the programme saw an equitable uptake across different social strata. This will be supplemented by qualitative data investigating women's' experience of opening a personal bank account – a prerequisite for enrolling under the programme. **Data sources:** Woman questionnaire (Quantitative survey); Woman IDI (Qualitative survey)

	How is the payment mechanism of the programme working?	The quantitative study will present information on how frequently the cash transfer is credited to the accounts of beneficiaries, and how frequently they withdraw it. The qualitative study sheds light on issues faced by the beneficiary whilst withdrawing the money. **Data sources:** Woman questionnaire (Quantitative survey); Woman IDI (Qualitative survey)
Resource effect: Does the BCSP benefit the health and nutrition of the mother and child as a result of the extra money?	To what extent did the cash transfer result in increased household expenditure on food consumption? To what extent did the cash transfer result in increased expenditure on foods and services that improve nutrition outcomes (e.g. health services, improved sanitation, etc.)?	To answer this question, the quantitative component of the impact evaluation will look at several key indicators – such as the main items on which beneficiaries spend the cash transfer, and food consumption and expenditure patterns (for both the mother and child). Food expenditure and consumption indicators will be compared between the treatment and control blocks across the baseline and midline (using the difference-in-differences estimation technique) to determine whether the BCSP impacted expenditure on health and nutrition. The qualitative study will supplement this by further investigating spending preferences, and beneficiaries' views on how the cash transfer impacted their lives. **Data sources:** Household questionnaire (Quantitative survey); Woman IDI (Qualitative survey)
Conditions effect: Does the BCSP improve the uptake of nutrition sensitive services and behaviour?	To what extent did the conditions imposed under the BCSP result in improved uptake of services and behaviour? Does the uptake of services vary for different social groups? If yes, what are the reasons behind this?	Data related to the uptake of services (such as VHSND attendance, weight monitoring during pregnancy, child growth monitoring, etc.) which are conditions under the BCSP were captured during the baseline and the midline surveys. This midline report impact evaluation will analyse the change in these indicators between baseline and midline, and between treatment and control blocks (using difference-in-differences estimation technique) to determine whether the BCSP had any impact on the uptake of services. These indicators will also be disaggregated by various socio-economic indicators to test for equity. The qualitative study will support this by investigating the factors driving the supply of services, reasons behind low uptake of certain services, and whether women understood the nutritional benefits of meeting conditions. **Data sources:** Household questionnaire (Quantitative survey); Woman IDI (Qualitative survey)
Empowerment effect: By providing a cash transfer, has the programme increased the recipient's agency (i.e. decision making power and mobility)?		This is a key question answered by both the quantitative and qualitative components of the impact evaluation. The qualitative study will address this question by looking at the beneficiaries' decision-making powers, social mobility of both newly married and older women, and intra-household dynamics. The

		quantitative component will supplement this with more data on decision-making and mobility, as well as the proportion of women with bank accounts. **Data sources:** Woman questionnaire (Quantitative survey); Woman IDI, Mother-in-Law IDI (Qualitative survey)
Social accountability effect: Can the programme hold the public service delivery mechanism accountable to deliver health services?	Can the BCSP can have an effect on the quality and coverage of health services?	Both the quantitative and qualitative components of the study will assess this question through questionnaires designed specifically for the front line worker responsible for provision of the health services under the cash transfer programme. This questionnaire will investigate the front line worker's awareness of the programme, and her attendance at the VHSND (and that of other service providers such as the ASHA and ANM). Additionally, using the difference-in-differences estimation technique, the quantitative analysis will compare the availability of stocks and services across the treatment and control blocks between the baseline and midline, to shed light on whether the BCSP had any impact on the supply side. **Data sources**: AWW questionnaire, Woman and child questionnaire (Quantitative survey); AWW KII, ASHA KII (Qualitative survey).
	Does the BCSP increase the demand for quality services to be delivered on time, and therefore make the front line worker more accountable?	To test whether the BCSP leads to an increase in demand for services, the quantitative analysis will compare awareness levels of the programme with impacts. The qualitative analysis will supplement this by probing the beneficiaries about which health services they required. **Data sources**: AWW questionnaire, Woman and child questionnaire (Quantitative survey); AWW KII, ASHA KII (Qualitative survey).
Impact on nutrition outcomes: Has the BCSP helped improve anthropometric and biomedical outcomes for mothers and children below the age of two years?		This is a key question, and the midline report attempts to answer this question through analysis of the anthropometric data collected as part of the quantitative component of the evaluation. For both the baseline and midline surveys, weight and height of mothers and children were measured, and blood samples from mothers were collected (to determined Haemoglobin levels). In this report, the analysis will use these measurements to calculate key anthropometric and biomedical outcomes such as stunting, wasting and underweight for children, and underweight and anaemia for mothers. These indicators will be compared between the treatment and control blocks across the baseline and midline survey, to determine the impact of the programme. **Data sources**: Anthropometry questionnaire (Quantitative survey).

B.4 Consultees engaged to conduct Quality Assurance

List of consultees	
Organization	**Name**
DFID	Nel Druce
BTAST	Santanu Das, Rabi Narayan, Prakash Kumar
OPM	Paul Jasper
OPM	Michel Binci
OPM	Marta Marzi

In addition, the report findings have been shared with the Government of Bihar and Ministry of Women and Child Development, Government of India. Qualitative key informants included the programme implementation team, local Government officials, front line workers, beneficiaries and non-beneficiaries. **Due to the nature of the assignment, the report findings will only be shared more broadly after the report has been approved by SEQAS.**

B.5 Communication Plan

The report will be made available on the OPM website for public use. Policy briefs and presentations summarising the main findings and recommendations from the evaluation will be prepared for dissemination to government officials, research institutions, and other stakeholders. Special attention will be paid to sharing the findings with bureaucrats from the Ministry of Woman and Child Development, and the Government of Bihar to advise them on the best practices of implementing a Conditional Cash Transfer. This is particularly relevant given the increasing attention and shift towards Direct Beneficiary Transfers for a number of social welfare schemes in India. A journal manuscript will be prepared and submitted to the Economic and Political Weekly.

Annexe C Methodology and data collection

C.1 Impact estimation model

Formally, the identification strategy for our ITT analysis can be summarized as follows:

$$y_t^{kB} = \alpha + \theta T^B + \emptyset Z_t^k + \omega T^B Z_t^k + \beta \boldsymbol{X}_t^{kB} + v_t^{kB}$$

Where y_t^{kB} is outcome y for household k in block B at time t. T is the treatment dummy that will be equal to one if the household is in a treatment block, irrespective of whether it actually was treated. Z is a time dummy that is equal to one if the observation is from follow-up. Finally, α is a constant, $\boldsymbol{X}$ is a vector of control variables, and $v_t^{kB}$is an error term.

The coefficient on the interaction of treatment with time (ω) can then be interpreted as difference-in-differences impact estimator of the treatment effect.

C.2 Robustness checks

It is important to test the robustness of impact estimates while employing the difference-in-differences method. This estimation methodology chiefly relies on the parallel trends assumption, which posits that the average change in the control group represents the counterfactual change in the treatment group if there were no treatment. This identifying assumption is however, untestable by construction.

A number of exogenous time-varying community-level factors can affect treatment and control areas to differing extents, thus calling into question the parallel trends hypothesis. These include: road access; severity of drought; and supply of education and health facilities. We found no evidence to indicate that this was the case in our present study.

The following steps were taken to ensure that estimates in the present report are robust:

First, since the growth rate of certain indicators may vary by household and village characteristics, we progressively augment our basic regression equation with controls for

- household demographics (caste and religion),
- socio-economic status (parental education, poverty status, and ownership of assets), and
- Village characteristics (including population and proximity to various facilities).

In addition to accounting for differential growth rates, if any (thus strengthening the parallel trends assumption), including the controls increases the precision on our estimates of interest by reducing the residual variation to be explained, allowing for the further isolation of the direct impact attributable to the programme. The results of these checks reveal that the findings are generally robust across different specifications. Only the results of models controlling for household and community-level covariates are presented in this report.

Second, given that treatment and control blocks were matched in a pairwise manner at the baseline stage, we only reports estimates that compare pairs of blocks which were the closest matches.

Our analysis is further strengthened by the fact that our data contains a panel of PSUs, which ensures that variations in unobservable characteristics (unvarying over time) are minimized. Moreover, the baseline and midline studies were done only two years apart. Thus, exogenous time-varying community-level factors are small as well.

C.3 Detailed field movement plan

The table below presents the timeline followed by the survey:

Detailed fieldwork timeline			
	ROUND 1		ROUND 2 (Revisits)
Block	Start date	End Date	Dates
Mohra	7th August, 2015	18th August, 2015	7th , 8th, 25th, 26th, 27th, 28th, 29th and 30th October,2015
Khizarsarai	19th August, 2015	31st August, 2015	14th, 15th, 16th, 17th, 18th, 19th and 30th October,2015
Wazirganj	1st September, 2015	13th September	9th, 10th, 11th, 12th, 13th and 29th October,2015
Atri	11th September	22nd September	20th, 21st, 22nd, 23rd, 24th, 25th, 26th, 27th, and 30th October,2015
Source: BCSP Midline Survey 2015			

The tables below presents block wise distribution of data points of households, anthropometry and maternal haemoglobin, AWWs and PSUs.

Detailed Sample Distribution									
	ROUND 1			ROUND 2 (Revisits)			TOTAL		
Block Name	Household Cases	Anthro Cases	Hb Cases	Household Cases	Anthro Cases	Hb Cases	Household Cases	Anthro Cases	Hb Cases
Atri	1375	1357	1338	131	129	129	1506	1486	1467
Wazirganj	1433	1425	1412	147	143	143	1580	1568	1555
Mohra	1197	1179	1161	198	191	190	1395	1370	1351
Khizarsarai	1396	1381	1360	147	132	131	1543	1513	1491
Total	**5401**	**5342**	**5271**	**623**	**595**	**593**	**6024**	**5937**	**5864**
Source: BCSP Midline Survey 2015									

Detailed Sample Distribution						
	ROUND 1		**ROUND 2 (Revisits)**		**TOTAL**	
Block Name	**AWW Cases**	**PSU Cases**	**AWW Cases**	**PSU Cases**	**AWW Cases**	**PSU Cases**
Atri	51	54	1	0	52	54
Wazirganj	53	55	0	0	53	55
Mohra	52	52	0	0	52	52
Khizarsarai	53	54	0	0	53	54
Total	**207**	**215**	**1**	**0**	**210**	**215**
Source: BCSP Midline Survey 2015						

C.4 Data collection management

C.4.1 Field teams

A total of 11 teams were deployed for this survey. Each team had 7 members: 4 female enumerators, a pair of health investigators (one female, and one male) and one supervisor.

A team tracked the required number of households in each PSU over two days. From each team:

- Four female investigators undertook household surveys and each covered a maximum of 3-4 household interviews per day.
- One female and one male health investigator undertook Anthropometry measurements for each household.
- The supervisors were responsible for conducting the AWW and PSU interviews.
- The supervisors were also responsible for performing the primary role of field management, and quality supervision.

The team deployment arrangement is explained in the table below:

Field Work Team – Composition, Size and Responsibilities			
Team composition	**Study Component**	**No. of Persons per component**	**Notes**
4 female household investigators + 1 female health investigator + 1 male health investigator + 1 supervisor (Each team of 6 investigators and 1 supervisor)	Mother (Primary Caregiver)	4 Female Investigators	
	Anganwadi Worker (AWW)	1 Supervisor (per team)	
	Anthropometry	1 Female & 1 Male Health Investigator (per team)	Health investigators with previous experience in measuring height and weight of young children were recruited. They were trained in the class room and also in the field by a senior anthropometry expert. Their care and concern towards the beneficiary and hygiene practice while performing the task was monitored thoroughly. For anthropometry measurements, OPM used high quality weight and height scales by the reputed brands Omron and Leicester respectively, and length boards by the brand Seca. Blood haemoglobin levels were measured using machines from HemoCue. One length board (for measuring heights of infants), one height stadiometer (for adults), one digital weighing machine, and one machine to measure blood haemoglobin levels (of the mother) were provided per team.
	PSU and overall quality supervision	1 Supervisor (Per Team)	
Source: BCSP Midline Survey 2015			

During the revisits, only two dedicated teams with the aforesaid composition were employed for targeted revisits.

Overall, investigators were responsible for data collection, data transfer and any other specific tasks agreed to during the training and with the supervisor. Each supervisor was responsible for their field teams, field monitoring and any other task that was specified and agreed to during training. Additionally, Fieldwork Coordinators monitored field work movement, managed day-to-day field logistics and reported to the Survey Manager.

C.4.2 Monitoring, data quality and validity checks

To ensure that data collection was of the highest possible quality, we instituted the following procedures:

- Team supervisors were in daily contact with the Survey Manager through the Fieldwork Coordinators. Each supervisor served as the first level of quality assurance, providing mentoring, oversight and assistance to their respective team members. Along with monitoring the data collected by the investigators.
- The two Fieldwork Coordinators were responsible for planning field work activities, handling logistics, and providing support to team supervisors
- Team meetings were held on a daily basis, where the day's experiences were discussed and corrections made.
- Daily field reports (e.g. number of interviews conducted etc.) were sent by team supervisors to the Survey Manager.
- Data was compiled by the Data Manager, and further transferred to HQ for the data processing team to check for inconsistent or unlikely data points.
- Time was allocated for re-visiting interviewees in case of issues with the data.

Field Coordinators and the Survey Manager tried to ensure that around 10% of interviews were spot-checked. Throughout the period of data entry, enumerators and supervisors were expected to be available to answer any queries related to the data collected.

OPM staff members focussed more on the overall data collection process and giving regular feedback to ensure data quality, while also paying special attention to the weaker investigators.

C.4.3 Anthropometric data collection and quality control

Anthropometric data collection is much more challenging than normal data collection. Seemingly negligible errors in weight and height measurements can skew results, and therefore, it is crucial to have precise estimates. Our evaluation team possesses extensive experience of instituting quality controls required to achieve robust and accurate anthropometric data collection.

For this assignment, height and weight of all children aged 2 years and below in the sampled household was measured as a part of the household survey by trained investigators. The sampled mothers' height and weight was also measured, along with her blood haemoglobin level. We understand that it is the "length" as opposed to the height of the child that shall be measured for children below 2 years of age. A length board or mat was used for this purpose on which the child was placed lying down.

Specialised anthropometric investigators were employed for better anthropometric data quality and lesser transaction time in the field. On average, it took 15-20 minutes for the anthropometric investigators, per household, to complete their measurements. Anthropometric measurements required two investigators in order to ensure precise measurements (e.g. one investigator to measure, and one investigator to maintain the child in the correct position). Measurements were done twice for each individual, and a third time if the first 2 readings were far apart i.e. if the weight readings differed by 0.1 kg or more, or if height readings differed by 0.5 cm or more. For children, the CSPro program calculated the height-for-age, weight-for-age and weight-for-height Z-scores and flagged any cases that appeared to be more than three standard deviations from the reference standards. The child's age was recorded again if the Z-scores indicated an issue.

There were repeated visits for anthropometry data in case the child was being fed or was asleep. In cases where the child was not at home (e.g. was visiting relatives, etc.) and was not expected to be back in a day, the household was not done and another household from the available sample was done. In cases where the child was not available and the household could not be replaced, only the household interview was conducted, and anthropometric measurements were not.

Some of the quality control mechanisms used by the evaluation team included:

- Using the best possible equipment and calibrating it carefully. We used Omron weighing scales, Leicester stadiometers and Seca length boards as we find they are more reliable and accurate than cheaper instruments. Blood tests for haemoglobin levels were done using machines from HemoCue.
- Selection of specialist investigators, having previous experience of collecting anthropometric data
- Rigorous and prolonged training for at least 10 days, including field visits, for the anthropometric investigators. This included standardisation and training more enumerators than required so the weakest could be let go after the training.
- Intensive field monitoring and dedicated supervision.
- The CAPI software automatically calculated weight-for-height and height-for-age z-scores for the respondents, using WHO guidelines. In cases where the child was malnourished, the software generated an informational message which the enumerator could read out to the concerned guardian. The message advised the guardian that the respondent was malnourished, and that he/she should be referred to a Nutrition Rehabilitation Centre or a hospital. This feature in the software also served as a data check to detect errors.

C.4.4 CAPI quality control

Whilst CAPI is demonstrated to have clear benefits in terms of data quality, its success depends substantially on the effort spent on programming, piloting and testing the application, as well as on careful consideration to the underlying data management and transfer systems. To ensure quality, we implemented the following:

- Strict checks in the software to prevent errors such as outlier values, inconsistencies between different questions, etc.
- Detailed and extensive piloting of the questionnaire in CAPI format.
- Rigorous training for field supervisors to ensure that they are able to support, advice and monitor the enumerators.
- Setup systems to ensure regular uploading of data, in order to provide instant feedback and improve data quality.

C.4.5 Data entry process

Listing was carried out on tablets, while the main data collection (including that of anthropometric data) was done on laptops. As we used in-field data entry, collected data could be transferred electronically to the OPM staff in Delhi every 2-3 days, who undertook additional consistency checks. While the data entry programme had in-built checks for unlikely data points, and dynamically adjusted drop down menu options to reduce the scope for errors, feedback from the OPM staff was also given to enumerators about erroneous entries.

C.4.6 Initial data checks

The electronic data collection system allowed initial data checking to be carried out alongside the data collection process, thus increasing efficiency and ensuring quality.

Team supervisors complied PSU data collection reports every evening after completion of fieldwork before transferring the data to the data manager, who compiled data points, ensured interviews were complete, and uploaded this compiled data to a central server. Thereafter, OPM staff employed more sophisticated statistical software (STATA) to identify outlier data points, and employ other consistency checks. Error reports were compiled, and sent to the fieldwork supervisors. These reports had details of the type of errors, as well as the names of the enumerators who had been committing such errors. This helped the fieldwork supervisors give personalised feedback to these enumerators, in order to prevent similar errors from cropping up again.

A data tracking sheet was filled for every block and shared with the entire team on a weekly basis. Incomplete data points, if any, were identified and return visits were made wherever possible.

C.5 Sample size considerations for midline survey

Firstly, the minimum detectable effect (MDE) calculated for the study was based on the assumption that the pilot will run for 30-36 months before the end line data would be collected.

Based on our international experience of similar surveys, we had suggested that an appropriate MDE would be 5 percentage points for all four headline indicators. This means that if we observed a 5 percentage point decrease in the value of one of the indicators amongst our sample, we would be confident enough (in terms of formal statistics, 95% confident) that the indicator value had decreased for the whole population. As is evident from the table below, a sample size of 6000 households is enough to detect a 5 percentage point change in the core indicators.

Minimum Detectable Effects for various sampling scenarios at the baseline stage[1]

Sample Size with a pure control block	6400		8800		6000 (Revised contract)	
Indicator	Stratified	Un-stratified	Stratified	Un-stratified	Stratified	Un-stratified
% children Height for Age <-2SD	7.0%	4.8%	6%	4%	7.2%	5%
% children Weight-for-Age <-2SD	6.8%	4.6%	5.6%	3.8%	7%	4.8%
BMI % Women 15-49 <18.5	6.8%	4.6%	5.6%	3.8%	7%	4.8%

For the sake of the midline survey, it was decided to keep the MDE the same but there was no expectation to see any statistically significant change in the impact indicators.

Secondly, the maximum age of children who had been exposed to the programme was going to be 12 months at the time of the survey. This had a bearing on whether the sampling should be based on households with at least one woman with at least one child under two years of age (as done at the baseline stage) or at least one child under one year of age. If the latter was done, then the comparison with baseline data would have been compromised as we would have had to drop the children aged 1-2 years from the sample. In this case, it was decided that the possibility of sampling many more of the under-ones to compensate for the loss in power, should be looked at.

[1] The Design Effect for these calculations was taken from the NFHS-3. Even though the Intra-Cluster Correlation (ICC) that would generate a Design Effect of 1.38 for the indicator % children Height for Age <-2SD with cluster sizes of approximately 30 units appears to be too low (around 0.01), it is the one reported by NFHS-3.

The decision of listing either households with children under-one or households with children under-two had important consequences on the sample size as well as the type of quantitative impact estimation that could be performed. This decision was based on (a) the descriptive statistics on the proportion of children under-one and children under-two in the sampled baseline households and within the same households, (b) on sample size and power considerations (i.e. results derived from calculations carried out on the two key sub-sets of matched blocks), and finally, (c) on issues related to evaluation design and questions, as the conditional transfers are likely to produce direct and indirect impacts on all children belonging to the household, with no real distinction between under-ones and under-twos.

At the baseline stage, the total sample was equally distributed across the four matched blocks but due to the varying sizes of the AWC coverage area populations across the blocks, there had to be a full census in some of the PSUs. A consideration, therefore, was also to confirm whether replicating the same sampling strategy was better or sampling proportional to size.

The table below presents the descriptive statistics on MDE for the indicator: % children Height for Age <-2SD for the scenarios Atri .vs. Khizarsarai (*Hard conditions* vs. *Only technology*) and Atri vs. Wazirganj (*Hard conditions* vs. *Soft conditions*) where we have included the baseline sample size of under-one children in the respective blocks (found to be around 40 percent in each block at the baseline stage) and compared with possible scenarios of under-ones in the midline sample.

Minimum Detectable Effects for various sampling scenarios at the midline stage with intertemporal correlation 0.6 and 0.5[2]

Indicator: % children Height for Age <-2SD		Temp. Corr. 0.6	Temp. Corr. 0.5
		Detectable change (80% power)	Detectable change (80% power)
Atri vs. Khizarsarai	Equally distributed; total sample size 3000+	-6.7%	-7.4%
	Proportionally distributed; total sample size 3000+	-7.4%	-8.1%
	Proportionally distributed; total sample size 6000+	**-6.4%**	**-6.9%**
	Equally distributed; total sample size 6000+	**-6.6%**	**-6.9%**
Atri vs. Wazirganj	Equally distributed; total sample size 3000+	-6.7%	-7.4%
	Proportionally distributed; total sample size 3000+	**-7.3%**	**-8.1%**
	Proportionally distributed; total sample size 6000+	**-6.5%**	**-6.9%**

[2] The Inter-Temporal Correlation (ITC) assumed for the initial calculations was for a panel (0.6 ITC). It is a panel of sampling units (blocks and clusters) but not a panel of units of observation (either household or individual), therefore 0.6 seems too high. Calculations with 0.5 ITC have also been presented.

	Equally distributed; total sample size 6000+	**-6.6%**	**-7.0%**

As is evident, while going with a total sample size of 6000+ (6160) of only under-ones proportionally distributed was the best option, the marginal benefit inerms of a lower MDE was very low when compared to going with the same total sample size of 6000+ but only use half the sample of under-ones and the rest of 1-2 years old.

At the midline it was, therefore, decided to stick to the baseline sampling strategy of sampling on the basis of households with under-two children.

C.6 Quantitative sampling protocol

Household Listing

Household listing was done approximately 2 weeks in advance of the enumeration. All households with at least one woman with a child under the age of two years were listed. In case there were more than one such eligible woman, one woman was chosen at random at the time of sampling. For each eligible woman, the name, date of birth and information on whether registered under BCSP was collected on all of her children under two years of age.

Final Sample Lists

Once a list of all eligible households in a PSU was received, random sampling was done using STATA. The sampling principle used was as follows:

- 35 unique households (variable ***idi***) were randomly selected. Oversampling was done to (i) account for the small PSU population sizes in the blocks Atri and Mohra where a near-census had to be carried out in some of the PSUs during the baseline survey, and to (ii) account for a non-response rate of approximately 15 percent.

- Within a selected household that had more than one eligible woman, a preference order was randomly generated. For example, if there were three eligible women in a selected household, a random assignment of 1, 2 and 3 was done against these women. The selected woman from this household was the one against whom 1 was assigned. In case she was not available, then the woman against whom 2 is assigned was selected for the interview, and so on.

When the target of 30 households was met, data collection in the PSU was considered complete. It should, however, be noted that there was a shortfall discovered in which case additional households were included during revisits.

C.7 Sample completion

The Primary Sampling Unit (PSU) for the survey was the Anganwadi Centre (AWC). These AWCs were randomly sampled from within each of the 4 blocks from the list of AWCs compiled at the baseline stage. Within each AWC catchment area, households were randomly sampled based on the relevant household list (based on the existence of at least one woman with an eligible child) drawn within each cluster. The target households were households with children below two years of age.

In total, 220 PSUs (55 PSUs from each of the 4 blocks) were expected to be covered by the midline survey. From each PSU, 30 households (with oversampling to account for non-response) were aimed to be surveyed, resulting in a total sample size of 6600 households. However, to achieve the desired Minimum Detectable Effect, a total sample size of 6000 was required. As a thumb rule in the first round, when the target of 30 households in a PSU was met, data collection for that PSU was considered complete. However, since the first round of visits to all PSUs yielded less than 6000 households due to (i) small number of eligible households in the PSU, and (ii) a very high non-response rate in some PSUs, this ceiling of 30 households was relaxed in the second round to achieve the overall sample target.

If there were multiple mothers with target children (under the age of 2 years) in a household, then a mother was selected at random. All children of this selected mother who were below 2 years of age were included in the sample. However, anthropometric measurements was conducted for all children in the target age group for that household – regardless of whether the mother was selected for the survey.

Overall, 220 PSUs were covered. Within these, **6023 households** and **210 AWWs** were surveyed.

Revisits were conducted in some PSUs after the first round of the survey failed to meet the target of 6000 households. This was due to lesser number of eligible households available at the listing stage, and the high non-response rate in some PSUs. Revisits were conducted from the initially drawn sample, with an additional random sample being drawn in some cases. However, in 9 PSUs, households were not surveyed from a randomly drawn sample, but selected as per convenience to meet the sample target. Household data from theses PSUs were included in the present study after conducting sensitivity analysis, and ensuring that these data points did not alter estimates to any significant extent.

The shortfall in household questionnaire data points can be attributed to the lesser number of eligible households available per PSU as identified during the listing stage, and the high non-response rate in some PSUs. A total of 208 out of 220 AWWs were interviewed. The reasons for this shortfall include vacant AWW posts, the AWW not being available or on leave (even after three follow up visits), and a strike of AWWs during our survey in Mohra. A total of 215 PSU questionnaires were administered; the shortfall of 5 occurred because there were two PSUs belonging to the same area, or, because key respondents were not available.

The summary on sample balance is presented in below.

Overall sample completion

Overall Sample Completion			
	Total Expected	**Total Actual**	**Remarks**
Blocks covered	4	4	
Total number of PSUs covered	220	220	
Total number of PSU questionnaires administered	220	215	Reasons for shortfall: - Key respondents not available in some PSUs - Two PSUs covering the same area
Total number of AWW questionnaires administered	220	210	Reasons for shortfall: - AWW posts were vacant - AWW not available/ on leave - AWW strikes in Mohra
Total number of Household questionnaires administered	6000	6023	Reasons for shortfall within some PSUs (not overall): - Shortage of eligible households in certain PSUs - High non-response rate (due to reasons such as women being away at their parents' home (*maika*), etc.)
Total number of households where child anthropometric measurements completed	6000	5937	Reasons for shortfall within some PSUs (not overall): - Shortage of eligible households in certain PSUs - Unavailability of children at the time of anthropometric measurements - Difficulty in measuring certain children - Refusal of some women to give blood for haemoglobin test
Total number of maternal haemoglobin measurements completed	6000	5864	
Source: BCSP Midline Survey 2015			

Note that due to data limitations and data cleaning, the final sample size at the midline was as follows:

Sample size achieved					
	MIDLINE				
	Atri	Wazirganj	Khizarsarai	Mohra	Overall
PSUs	55	55	55	55	220
AWWs	51	54	53	52	210
Households	1506	1579	1545	1393	6023
Women's anthropometry	1488	1566	1516	1368	5939
Women's Hb	1487	1565	1515	1367	5934
Children's anthropometry	1447	1532	1475	1326	5790

Given the small percentage, this is not expected to have a noticeably negative effect on the representativeness of the sample or on the robustness of our overall analyses.

C.8 Weights

In order to obtain estimates of key indicators that are representative at the block level, data was analysed using sampling weights that were equal to the inverse of the probability of an observation to be selected into the sample. This consisted of calculating the probabilities of selection of a HH over the two stages of sampling; selecting a PSU within a block, and selecting a HH within a PSU.

- **First stage sampling units: PSU level weights**

  As mentioned before, the coverage area under an AWC was taken as the primary sampling units (PSU) from which the HHs were selected.

  At the Block level i.e. the first sampling stage, the probability of selection of a PSU is as follows:

$$p_p^B = \frac{N_P^B}{N^B}$$

  N_p^B is the total number of PSUs sampled from block B. This was fixed at 55 for each block in our study, with the same PSUs being selected both at the baseline and the midline stage. N^B is the total number of PSUs in block B. Therefore, p_p^B is the probability of selecting the pth PSU in block B.

- **Second stage sampling unit : HH level weights**

$$p_k^p = \frac{N_C^p}{N_E^p}$$

N_C^p is the total number of HHs which were successfully surveyed in PSU p. This was fixed at 55 for each block in our study, with the same PSUs being selected both at the baseline and the midline stage. N_E^p is the total number of eligible HHs in PSU p. Therefore, p_k^p is the probability of selecting the kth HH in PSU p.

Both probabilities of selection were multiplied, and the sample weight for household k in PSU p was calculated as:

$$W_k^p = \frac{1}{P_p^B \times P_k^p}$$

Analyses at the HH and PSU levels were implemented using appropriately normalised values of weights derived from these probabilities.

C.9 Qualitative data collection

A total of four tools were administered during the survey. Two tools, to the pregnant woman/mother-in-law and her mother-in-law, were administered by the surveyors. Interviews of the ASHA and AWW were administered by OPM staff. Paper-and-pencil interviews (PAPI) were administered and interviews were recorded on MP3 recorders. Details are as follows:

Interviewer training

- The training for the qualitative survey was conducted on 17-23 August, 2015 in Gaya, Bihar. The training included field practice, mock sessions and transcription practice.
- Trainings were residential, largely following a 9:00 am–5:00 pm schedule.
- A training guide was prepared prior to the training, with presentations that were used to facilitate the training.
- The questionnaires were discussed in detail – during training in a more formal ‘classroom’ environment to convey the meaning and purpose of each question, but also in an informal setting in smaller breakaway groups to enable interviewers to familiarise themselves with the formats.
- All doubts were addressed personally, with an emphasis on peer learning.
- Field-testing of all questionnaires took place in one PSU in Gaya, for interviewers to understand the complexities of the environment within which they would have to administer the formats.

- Special attention was paid to training interviewers to enable them to understand the ethical considerations underpinning a qualitative research exercise, and the need for anonymity and neutrality during research.
- Training was also conducted on how to use the recorders and how to record notes during the interview.
- Interviewers were tested during the course of the training and feedback provided to all the enumerators during the course of the training.

Fieldwork teams

Three fieldwork teams were employed for the survey. Each team was led by OPM staff, and comprised of three interviewers and three note-takers. In addition, each OPM staff had a note-taker for their interviews. One survey manager was responsible for coordinating survey logistics. Interviewers were divided into pairs, with one key interviewer and one note taker. Extensive interview notes were taken, in addition to recording each interview on an audio recorder.

Fieldwork

A total of ten PSUs were covered in Atri, Wazirganj and Khizarsarai. Four in Atri and Wazirganj each and two in Khizarsarai. Fieldwork in each PSU lasted for a day. Fieldwork spanned four days in August.

Translations

Hindi translations were transcribed and translated to English by an agency based in Delhi. To ensure quality of the translations, OPM staff checked ten per cent of the transcripts from the original audio files. In case of errors, transcripts were retranslated. Two interviews were dropped since the audio was of poor quality, or the translation was of poor quality. OPM staff corrected the grammar of the translations wherever necessary.

Monitoring and quality control

Field monitoring

- Survey supervisors accompanied the interviewers to ensure physical verifications of the surveys and provide immediate feedback to reduce errors in the data.
- As far as possible, interviewers ensured that respondent questionnaires, which contained sensitive questions about power structures within the family and attitudes towards gender roles, were administered in a separate room, with only the concerned respondent present. Since a majority of the interviewees were with young, newly married women, most of the interviews were conducted within the household. Every effort was taken to ensure that these meetings were conducted only with the respondent, and her child, in the room. Others who tried to engage in the interview were politely ushered out by the supervisor or the note taker.

- Interviews in each PSU were extensively monitored. There was at least one OPM staff who was present in each PSU, sitting in on interviews and monitoring interviewers while they administered a questionnaire, and giving concurrent feedback.
- All recordings were checked on a daily basis and feedback given to interviewers before the audio was transcribed. All transcripts were checked by the supervisors.
- Field-team size and movement were tracked daily. Any problems being faced in the team were discussed in the daily debriefing sessions with the interviewers.

Electronic data monitoring

- Backup of audio files were taken on a daily basis.
- All handwritten notes and observations taken during the interviews have been retained by Oxford Policy Management.

Challenges faced during data collection

- Potential respondents were purposively identified using the BCSP beneficiary list and input from the AWW. Age, family structure and association with the programme were used to identify these respondents. However, this information did not always align with what we found. Sometimes, it was difficult to locate respondents as they were travelling or working.

- Securing a place to conduct interviews with young women proved to be difficult. While almost all interviews took place within the household, it took concerted effort to ensure that other members of the household did not intrude. While the team did try to impress the importance of privacy and ensure that the respondent was alone, this was not always possible.

- AWWs had been on strike for an increase in their salary before the fieldwork began. A few AWWs hesitated to participate in the interviews. Care was taken to explain to them that the interviews were not about their pay or the strike.

C.10 Qualitative framework analysis

Familiarisation with the data

Semi-structured questionnaires were designed, piloted and tested by qualitative researchers at OPM. The same researchers were also present during training and fieldwork. Through this process, the researchers were able to not only draw on emerging themes during data collection, but also account for biases in the fieldwork and possible predispositions in respondents' answers.

To ensure uniform quality, a standardised data organisation system was used. All audio files and transcripts were labelled to clearly indicate the date of interview and type of respondent. This code was consistent for each interview. All transcriptions were checked in order to 'clean' the data and confirm the accuracy of transcription. The transcripts were checked for accuracy by comparing them with the audio files. Personal names and other identifier information were removed from the transcripts, indexed, and stored separately for purposes of anonymity as the very first step of the data

analysis process.

The primary aid to organise, index, chart and map the interview data was the computer software NVivo (Version 10). Once transcription was complete, the transcripts were imported into NVivo, labelled, and organised into folders. Basic demographic and profile attributes (for example, type of respondent, age) were assigned to each case.

Identifying a thematic framework

A deductive framework defined the overarching conceptual framework for the study. Two node trees were created – one for the supply side (AWWs and ASHAs) and the other for the demand side (Beneficiaries, their mothers-in-law and their counterparts in the control block) according to the programme's theory of change. An inductive approach to this framework was then developed as the researchers familiarised themselves with the data. Both the node trees were modified based on the emerging themes and incorporated into a codebook.

The node tree was developed as follows:

- The first-level nodes (termed 'grandparent nodes' in the project) were identified based on the overarching conceptual framework. Grandparent nodes for the supply side and demand side were distinct.
- Organising and defining second-level nodes (termed 'parent' nodes) and third-level nodes ('children' nodes) involved work with a sample of transcripts. Each researcher coded a sample set of transcripts and they then used charting techniques and discussions to organise and define the nodes. Modifications were made accordingly to best suit the data.
- The node tree was then used to index a sample of transcripts *(see next section)*. After piloting, minor modifications were made to the node tree to improve indexing.
- Finally, the node tree was entered in NVivo.

The final codebook with the nodes is detailed below in A.12.

Indexing

Indexing is the labelling (or coding) of data into themes identified in the node trees. Indexing allowed for a comprehensive retrieval of data when analysing a theme.

The node tree and the definition of the nodes used in the research were discussed in detail by the qualitative research team to ensure that the nodes were understood clearly by each member. For the interview data, indexing occurred as follows:

- The trial round included three researchers coding a sample set of interviews using the pre-agreed node tree, noting potential areas of improvements that needed discussion.
- Three researchers compared and discussed their coding and reached agreement on any differences.
- Once an agreement was reached upon the implementation of the codebook, the node tree was tested again and differences corroborated.

- This process was repeated for subsequent transcripts for the supply side and demand side.
- One researcher reviewed nodes at periodic intervals to ensure uniform coding was being maintained.

Charting

This refers to NVivo's ability to retrieve data tagged with the same code across different transcripts to help summarise data. The process for running queries in NVivo was as follows:

- The researchers identified which nodes and attributes were applicable to the research question or line of enquiry addressed.
- The researcher decided the type of search (text; simple; advanced; matrix) and how the search was defined (use of Boolean terms such as AND, OR, NOT).
- The query was written in NVivo, and run.
- The results of the query were read and revised. Potential explanations or ideas for further queries were noted. Outliers were extracted and patterns noted for analysis.
- All interviews were triangulated and evidence corroborated with supply side interviews in the PSU and interviews with the mother-in-law or daughter-in-law, where available.

Note: NVivo queries have only been used to manage, sort, filter and search the data in the transcripts. The analysis of data from this and the other methods and construction of findings drew on the researchers' knowledge, reflections and thoughts. After all the interviews were coded, searches were run on NVivo across the transcripts in each case study for the grandparent nodes. The researchers corroborated codes with the transcripts to understand in depth the context of a particular point.

Mapping and interpretation

Mapping and interpretation of the data had been continual, from the moment of data collection to the final writing. Some of the types of relationships that the researchers looked for were:

- Similarities between themes
- Contrasts between themes
- Explanation of cases
- Juxtaposition of cases

Quotations

Quotations have been used to highlight broad trends, and care has been taken to ensure that they are representative of the data and not outliers to the broad analysis. A check has been made to ensure that quotations from all types of actors have been represented equitably in this report. Respondent identifiers have been removed to maintain the anonymity of respondents.

C.11 Demand- and supply-side respondents

Demand-side respondent list and data-collection method

Respondents	Criteria for sampling	Total respondents	Data-collection method
Pregnant Women / Young Mothers	Age, number of children, association with BCSP, family structure (i.e. living in a nuclear or joint family)	42	In-depth interview
Mother-in-law of pregnant women or new mother	Age, family structure	26	In-depth interview

Supply-side respondent list and data-collection method

Respondents	Criteria for sampling	Total respondents	Data-collection method
AWW	An equal number of PSUs which were labelled as good and bad, by the project staff, were sampled in the qualitative survey	18	Key-informant interview
ASHA	PSUs which were labelled as good and bad, by the project staff, were sampled in the qualitative survey	8	Key-informant interview

During the survey, respondents who were not available or refused to respond were replaced. In a couple of cases, transcripts were dropped due to poor audio quality and inability to translate certain parts in Magahi (the local dialect of the region), the details of which are provided in the table below.

Demand-side respondent replacement and exclusion list		
Type of interview	**Number of observations**	**Action taken**
Female respondent IDI	1	Interview with a female respondent was dropped due to poor audio quality
Female respondent IDI	1	Interview with a female respondent was dropped due to inability translate large bits of it which were in a local dialect (Magahi)

C.12 Demand- and supply-side node trees

Supply side and demand side node trees try to capture similar information to triangulate the responses received from different respondents. This also helps build a PSU profile and interpret the responses through the lens of each respondent's incentives.

Supply-side node tree

The node tree for all supply side interviews are the same. A 'node tree' was developed so that the data from interviews could be organised to allow an analysis of the factors that could reflect the needs of the respondents and their experience with the programme. The tree consists of 'grandparent', 'parent' and 'child' nodes. Grandparent nodes comprise of the broad factors influencing the programme design. Aggregated under each grandparent node are sub-topics within these factors, referred to as parent nodes, which allow the researchers to analyse emerging trends. Within each parent node there are some child nodes that allow for a more specific analysis and provide support for conclusions reached in the form of quotes and also juxtaposition of information. Thus, in the supply-side node tree detailed in the table below, '**knowledge**' is the grandparent node that aggregates parent nodes such as 'ASHA/AWW' and 'Female Respondent'. This documents the person whose knowledge it refer to. Child nodes further segregate the type of knowledge into '**correct knowledge**', **'misconceptions**' or '**lack of knowledge**' that respondents may have. This allows an analysis of trends.

The nodes in the tree are comprehensive in order to understand different transmission mechanisms. The information content of each node is, however, not mutually exclusive, and there are many findings from the data that are common to more than one node in the list.

Supply Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
General Tasks	Ration	
	Education	
	Health	
	VHSND	
	Others	
	Ease	
	Challenges	
	Support	GPM
		Sahayka
		ANM
		ASHA
		AWW
BCSP	Conditions	
	Technical Support (Eg: Training, Mobile, App)	
	Support	Facilities support - WM, IFA tablets, etc.
		Task support - ASHA/ANM/Sahayka/GPM
	Impact	
	Payments	Account Opening
		Regular/Irregular
		Withdrawal
	Challenges	
	Targeting	Accurate
		Inaccurate
	Perception	
Knowledge	Female Respondent	Correct
		Lack of
		Misconceptions
	AWW/ASHA	Correct

Supply Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
		Lack of
		Misconceptions
Attitude and Practice	Female Respondent	Favourable Change
		Unfavourable Change
	AWW/ASHA	Favourable Change
		Unfavourable Change
Finances	Expenditure	Regular
		Programme
	Income	
	Poverty	
Agency	Decision making	MIL
		FR
		Others
		Husband
	Responsibility	MIL
		FR
		Others
		Husband
	Autonomy	
Social inclusion / Exclusion	Beneficiary	Caste
		Class
		Gender
		Age
		Religion
	AWW/ASHA	Caste
		Class
		Gender
		Age

Supply Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
		Religion
Service delivery	AWC/AWW	Corruption
		Accountability
		Access
	Public	Corruption
		Accountability
		Access
	Informal Private	Corruption
		Accountability
		Access
	ANM	Corruption
		Accountability
		Access
	ASHA	Corruption
		Accountability
		Access
	Private	Corruption
		Accountability
		Access
Health and nutrition	Maternal and Child care	VHSND Attendance
		IFA
		Pregnant Woman Weight
		Birth Registration
		Breastfeeding
		ORS/zinc tablets
		Child Weight
		Measles
		Vaccinations

Supply Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
		Home Remedies
		Other Health Issues
	Nutrition	Malnutrition/ undernutrition
	Challenges (W)	
	Cash vs. Ration	
Miscellaneous		
Time Use		
Challenges		

The grandparent nodes detailed in the demand-side node tree are as follows:

- **General Tasks:** This grandparent node aims to understand the tasks that the AWW/ASHA has to perform on a regular basis and the challenges faced in performing these. Additionally, this node also gauges the support, if any, that she receives in carrying out these tasks.

- **BCSP:** This grandparent node captures all programme related information. This includes the support that the respondent received on the programme, the tasks that she received training on and the challenges faced in her association with the programme. In addition, this captures the respondent's perception of the impact of the programme and her opinion on the payment system within it.

- **Knowledge:** This grandparent node is a short corollary to the one in the supply-side node tree. This tries to capture the perceived knowledge of the women in the village and the knowledge of the AWW/ASHA herself. The child node captures the veracity of this knowledge and any misconceptions that the respondent may have.

- **Attitude and Practice:** This focusses on capturing any changes in the attitude and practice of the respondent and her perception of attitude and practice within the village. This looks at practices around health and feeding practices and tries to capture changes, if any, since the beginning of the programme. This is further coded as favourable or unfavourable change under the child node, to track the direction of this change.

- **Finances:** This grandparent node looks at the supply-side perception of finances within the village. The child nodes specifically capture information on expenditure of programme cash transfers and regular expenditure of beneficiaries'. This node also tries to track any mention of poverty within the PSU.

- **Agency:** This node captures power relations and decision making responsibilities within the household. Agency is divided into three distinct parent nodes of responsibility, decision making and autonomy. While the programme is targeted at young mothers, this node captures decision making and responsibilities around child and maternal health. Primarily, the child node identifies, potentially, more powerful members within the family who may have a say in these decisions.

- **Social Inclusion/Exclusion:** Any information around differential behaviour or treatment of a certain class within the village is captured under this node. The parent nodes capture any exclusion that the supply-side worker herself might face and any perceived differentiation of others in the village. The lens of such differentiation is captured under the child nodes of class, caste, gender, age and religion.

- **Service Delivery:** This node looks at different health service delivery providers within the village and the frequency with which they are accessed. The child nodes capture any information on corruption, accountability or access within each of these service providers.

- **Health and Nutrition:** All information around maternal/ child health is coded under this grandparent node. The parent nodes of maternal and child care, nutrition and challenges capture a gamut of information around health behaviour within the village. Specific information on each of the health behaviours targeted by the programme is coded under the child nodes here. Additionally, the parent node of cash v. ration captures preference of the form in which benefits are received.

- **Time Use:** The programme design hypothesises that increase in cash flow within the household would free up time for care of children. Information around this hypothesis has been coded here.

- **Challenges**: Overall challenges that have not been captured under specific grandparent/parent nodes above are housed here.

- **Miscellaneous:** This node captures any information that has not been captured under any other grandparent node.

Demand-side node tree

The demand-side node tree mirrors the supply side tree closely and is aimed at getting a holistic understanding of the respondents' understanding of health care and their experience with the programme and health services. The demand-side node tree is tabulated in the table below by means of an explanation of the project as segregated broadly and captured under the grandparent nodes. Similar to the supply-side tree, parent and child nodes enable a nuanced study of the project design.

Demand Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
BCSP	Conditions	
	Payments	Account Opening
		Regular/irregular
		Withdrawal
	Challenges	
	Targeting	Accurate
		Inaccurate
	Impact	
Knowledge	Correct	
	Lack of	
	Misconceptions	
	Sources	ASHA
		AWW
		MIL
		Husband
		Doctor
		Others
Attitude and Practice	Change	Favourable
		Unfavourable
	No Change	Favourable
		Unfavourable
Finances	Expenditure	Regular
		Programme
	Income	
	Poverty	
Agency	Decision making	MIL

Demand Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
		FR
		Others
		Husband
	Responsibility	MIL
		FR
		Others
		Husband
	Autonomy	
Social Inclusion / Exclusion	Caste	
	Class	
	Gender	
	Age	
	Religion	
Service delivery	AWC/AWW	Corruption
		Accountability
		Access
		Ration
		Education
		VHSND
	Public	Corruption
		Accountability
		Access
	Informal Private	Corruption
		Accountability
		Access
	ANM	Corruption
		Accountability
		Access
	ASHA	Corruption
		Accountability
		Access
	Private	Corruption
		Accountability
		Access

Demand Side Node Tree		
Grandparent Node	**Parent Node**	**Child Node**
Health and nutrition	Maternal and Child care	VHSND Attendance
		IFA
		Pregnant Woman Weight
		BRC
		Breastfeeding
		Diarrhoea/ORS/zinc
		Child Weight
		Measles Vaccination
		Vaccinations
		Home Remedies
		Other Health Issues
	Nutrition	Malnutrition/ undernutrition
	Challenges	
	Cash v. Ration	
Miscellaneous		
Time Use		

The grandparent nodes detailed in the demand-side node tree, capturing the main focus factors with regard to the demand side, are as follows:

- **BCSP:** This grandparent node captures all programme related information. This includes the respondent's knowledge of the conditions under the programme and the challenges she faced in it. In addition, this captures the respondent's perception of the impact of the programme and her opinion on the payment system within it. The parent node of payments is further divided into child nodes that identify specific information under opening of accounts, payments and withdrawal.

- **Knowledge:** This grandparent node aggregates the respondents' knowledge around the programme and health care services. Parent nodes classify this knowledge as correct, lack of and misconceptions. Additionally, the sources parent node tries to identify if the respondent has traced such knowledge to traditional, familial sources or to health service providers such as the ASHA and AWW.

- **Attitude and Practice:** This grandparent node captures the attitude and practices of the respondent and within the household. This could revolve around healthcare and decision making. The parent nodes capture the presence or absence of change in these attitudes, while the child nodes value these as favourable or unfavourable changes.

- **Finances:** All information relating to income and expenditure within the household is looked at here. The parent node of Expenditure is further classified into child nodes of programme related expenditure and other expenditure. This works in conjunction with the other parent nodes of income and poverty. The latter captures any information that relates to paucity of financial resources within the household. This helps draw a picture of the monetary realities of the household.

- **Agency:** This node captures power relations and decision making responsibilities within the household. Agency is divided into three distinct parent nodes of responsibility, decision making and autonomy. While the programme is targeted at young mothers, this node captures decision making and responsibilities around child and maternal health within the household. The child node identifies, potentially, more powerful members within the family who may have a say in these decisions. This node tries to paint an accurate picture of healthcare decisions in the household and the respondent's ability to influence them.

- **Social Inclusion/Exclusion:** Any information around differential behaviour or treatment of a within the village is captured under this node. The lens of such differentiation is captured under the parent nodes of class, caste, gender, age and religion.

- **Service Delivery:** This node looks at different health service delivery providers within the village and preference amongst these service providers. Under the parent node of AWC are child nodes which capture service delivery on ration, education and VHSNDs. This looks at access of these services at the AWC. The child nodes for the parent nodes of all service providers capture any information on corruption, accountability or access.

- **Health and Nutrition:** All information around maternal/ child health is coded under this grandparent node. The parent nodes of maternal and child care, nutrition and challenges capture a gamut of information around health behaviour within the village. Specific information on each of the health behaviours targeted by the programme is coded under the child nodes here. It captures the respondents' responses on each of these health behaviours. Additionally, the parent node of cash v. ration captures the respondents' preference of the form in which benefits are received.

- **Miscellaneous:** This node captures different elements that are not covered by the other grandparent nodes.

- **Time Use:** The programme design hypothesizes that increase in cash flow within the household would free up time for care of children. Information around this hypothesis has been coded here

Annexe D General sample characteristics

D.1 General population characteristics

D.1.1 ML vs BL: Population characteristics

ML vs BL : General population characteristics										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Population characterises										
Average population	1175.04	1233.48	1282.19	1331.38	1260.13	1254.28	1069.46	1140.39	1220.44	1259.487*
	[41.386]	[47.601]	[43.340]	[49.105]	[43.083]	[46.920]	[26.833]	[46.843]	[22.585]	[26.046]
	54	54	54	55	53	54	54	52	215	215
Average number of HHs	168.72	165.65	160.98	181.964**	175.17	199.09	135.82	172.615***	161.49	183.435***
	[20.942]	[8.278]	[6.944]	[8.009]	[8.974]	[13.906]	[5.136]	[12.175]	[4.815]	[5.832]
	54	54	53	55	53	54	54	52	214	215
Average number of members in a HH	7.2	7.5***	6.8	7.0	6.4	6.9***	6.8	7.3**	6.7	7.1***
	[0.103]	[0.126]	[0.114]	[0.078]	[0.087]	[0.127]	[0.088]	[0.162]	[0.057]	[0.060]
	54	54	54	55	53	54	54	52	215	215
Proportion : male residents	53.0%	52.2%	51.3%	51.9%	52.2%	52.8%	53.1%	52.6%	52.2%	52.4%
	[0.006]	[0.005]	[0.004]	[0.004]	[0.005]	[0.006]	[0.006]	[0.005]	[0.003]	[0.003]
	52	54	53	55	53	54	53	52	211	215
Proportion : female residents	47.1%	47.8%	48.7%	48.1%	47.5%	47.2%	47.1%	47.4%	47.8%	47.6%
	[0.006]	[0.005]	[0.004]	[0.004]	[0.005]	[0.006]	[0.006]	[0.005]	[0.003]	[0.003]
	52	54	53	55	53	54	53	52	211	215
Proportion : ST population	3.0%	0%*	0.0%	1.0%	0.2%	1.2%	0.0%	2.5%	0.4%	1.2%
	[0.017]	[0.000]	[0.000]	[0.010]	[0.001]	[0.010]	[0.000]	[0.015]	[0.002]	[0.006]
	40	54	37	55	41	54	45	52	163	215

ML vs BL : General population characteristics										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Proportion : SC population	30.5%	37.1%**	37.3%	41.2%	36.8%	38.2%	38.1%	38.1%	36.5%	39.2%*
	[0.031]	[0.037]	[0.039]	[0.041]	[0.039]	[0.038]	[0.035]	[0.037]	[0.020]	[0.021]
	51	54	54	55	52	54	53	52	210	215
Proportion : Muslim population	7.3%**	4.8%**	7.1%	7.0%	4.4%	3.9%	4.0%	3.6%	5.7%	5.1%
	[0.025]	[0.018]	[0.022]	[0.023]	[0.014]	[0.011]	[0.014]	[0.013]	[0.010]	[0.010]
	44	54	45	55	47	54	47	52	183	215
Proportion : landless population	29.6%	24.0%	26.8%	35.2%*	31.9%	35.9%	30.4%	33.3%	29.4%	33.6%
	[0.043]	[0.032]	[0.037]	[0.039]	[0.036]	[0.039]	[0.036]	[0.033]	[0.020]	[0.020]
	48	53	50	54	50	53	51	49	199	209
Proportion : homeless population	10.5%	5.8%	7.9%	6.6%	5.5%	7.1%	10.9%	14.5%	8.0%	8.1%
	[0.028]	[0.018]	[0.022]	[0.024]	[0.021]	[0.019]	[0.025]	[0.037]	[0.012]	[0.013]
	47	52	50	49	51	51	53	49	201	201
Occupational structure										
Proportion practicing agriculture on own/shared land	68.5%	55.6%	70.4%	47.3%***	71.7%	48.1%**	66.7%	50%*	69.8%	49.1%***
	[0.064]	[0.068]	[0.063]	[0.068]	[0.062]	[0.069]	[0.065]	[0.070]	[0.033]	[0.037]
	54	54	54	55	53	54	54	52	215	215
Proportion employed as agricultural labour	13.0%	31.5%**	11.1%	30.9%**	18.9%	35.2%*	18.5%	36.5%*	15.2%	33.3%**
	[0.046]	[0.064]	[0.043]	[0.063]	[0.054]	[0.066]	[0.053]	[0.067]	[0.026]	[0.034]
	54	54	54	55	53	54	54	52	215	215
Proportion employed as non-agricultural labour	9.3%	9.3%	9.3%	16.4%	3.8%	11.1%	7.4%	11.5%	7.2%	12.9%*
	[0.040]	[0.040]	[0.040]	[0.050]	[0.026]	[0.043]	[0.036]	[0.045]	[0.019]	[0.025]
	54	54	54	55	53	54	54	52	215	215

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

D.1.2 At midline: Population characteristics

At midline : General population characteristics					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Population characterises					
Average population	1233.48	1331.38	1254.278*	1140.39	1259.49
	[47.384]	[48.882]	[46.712]	[46.636]	[26.047]
	54	55	54	52	215
Average number of HHs	165.65	181.96	199.09	172.62	183.44
	[8.241]	[7.972]	[13.844]	[12.121]	[5.832]
	54	55	54	52	215
Average number of members in a HH	7.46***	7.0	7.0	7.3	7.1
	[0.126]	[0.078]	[0.126]	[0.162]	[0.060]
	54	55	54	52	215
Proportion : male residents	0.52	0.52	0.53	0.53	0.52
	[0.005]	[0.004]	[0.006]	[0.005]	[0.003]
	54	55	54	52	215
Proportion : female residents	0.48	0.48	0.47	0.47	0.48
	[0.005]	[0.004]	[0.006]	[0.005]	[0.003]
	54	55	54	52	215
Proportion : ST population	0.00	0.01	0.01	0.03	0.01
	[0.000]	[0.010]	[0.010]	[0.015]	[0.006]
	54	55	54	52	215
Proportion : SC population	0.37	0.41	0.38	0.38	0.39
	[0.037]	[0.041]	[0.038]	[0.037]	[0.021]
	54	55	54	52	215
Proportion : Muslim population	0.05	0.07	0.04	0.04	0.05
	[0.018]	[0.023]	[0.011]	[0.013]	[0.010]

At midline : General population characteristics					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	54	55	54	52	215
Proportion : landless population	0.24**	0.35	0.36	0.33	0.34
	[0.031]	[0.039]	[0.038]	[0.033]	[0.020]
	53	54	53	49	209
Proportion : homeless population	0.06	0.07	0.07	0.15	0.08
	[0.018]	[0.024]	[0.019]	[0.037]	[0.013]
	52	49	51	49	201
Occupational structure					
Proportion practicing agriculture on own/shared land	0.56	0.47	0.48	0.50	0.49
	[0.068]	[0.068]	[0.068]	[0.070]	[0.037]
	54	55	54	52	215
Proportion employed as agricultural labour	0.32	0.31	0.35	0.37	0.33
	[0.063]	[0.063]	[0.065]	[0.067]	[0.034]
	54	55	54	52	215
Proportion employed as non-agricultural labour	0.09	0.16	0.11	0.12	0.13
	[0.040]	[0.050]	[0.043]	[0.045]	[0.025]
	54	55	54	52	215

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

D.2 Infrastructure

D.2.1 ML vs BL: Infrastructure

ML vs BL : Infrastructure										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Proportion : HHs with hand pumps	38.9%	46.1%	36.9%	46.4%**	46.9%	55.2%*	36.5%	35.5%	40.1%	47.1%***
	[0.042]	[0.035]	[0.036]	[0.038]	[0.035]	[0.041]	[0.035]	[0.036]	[0.019]	[0.021]
	52	54	53	55	50	54	53	52	208	215
Proportion : HHs with a toilet	9.9%	16.5%**	18.4%	22.8%	12.5%	14.9%	8.9%	9.8%	13.6%	17.1%**
	[0.023]	[0.030]	[0.033]	[0.034]	[0.023]	[0.022]	[0.018]	[0.020]	[0.015]	[0.016]
	54	54	51	55	50	54	54	52	209	215
Proportion : PSUs with a sewerage system	47.2%	55.6%	57.4%	54.5%	67.9%	59.3%	54.7%	42.3%	58.8%	53.9%
	[0.069]	[0.068]	[0.068]	[0.068]	[0.065]	[0.067]	[0.069]	[0.069]	[0.036]	[0.036]
	53	54	54	55	53	54	53	52	213	215
Proportion : PSUs with electricity	87.0%	85.2%	90.7%	92.7%	75.5%	81.5%	63.0%	67.3%	80.2%	83.6%
	[0.046]	[0.049]	[0.040]	[0.035]	[0.060]	[0.053]	[0.066]	[0.066]	[0.028]	[0.026]
	54	54	54	55	53	54	54	52	215	215
Facilities within 5 Kms from PSU										
Nearest town	64.8%	68.5%	46.3%	70.9%***	56.6%	68.5%	33.3%	67.3%***	49.4%	69.2%***
	[0.066]	[0.064]	[0.068]	[0.062]	[0.069]	[0.064]	[0.065]	[0.066]	[0.037]	[0.034]
	54	54	54	55	53	54	54	52	215	215
Nearest ATM	20.8%	55.6%***	31.5%	45.5%**	26.4%	61.1%***	5.6%	9.6%	23.5%	45%***
	[0.056]	[0.068]	[0.064]	[0.068]	[0.061]	[0.067]	[0.031]	[0.041]	[0.032]	[0.036]
	53	54	54	55	53	54	54	52	214	215
Nearest PHC	37.0%	55.6%**	37.0%	45.5%	26.9%	48.1%***	27.8%	55.8%***	32.2%	49.5%***
	[0.066]	[0.068]	[0.066]	[0.068]	[0.062]	[0.069]	[0.062]	[0.070]	[0.034]	[0.037]

ML vs BL : Infrastructure										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	54	54	54	55	52	54	54	52	214	215
Nearest district hospital	11.8%	7.4%	9.3%	5.5%	3.8%	1.9%	5.6%	0%*	7.2%	3.6%
	[0.046]	[0.036]	[0.040]	[0.031]	[0.026]	[0.019]	[0.031]	[0.000]	[0.019]	[0.014]
	51	54	54	55	53	54	54	52	212	215
Nearest NRC	30.8%	3.7%***	26.3%	7.7%*	33.3%	9.3%**	30.0%	28.0%	29.7%	11.4%***
	[0.091]	[0.026]	[0.102]	[0.037]	[0.112]	[0.040]	[0.146]	[0.064]	[0.058]	[0.023]
	26	54	19	52	18	54	10	50	73	210
Nearest railway station	1.9%	1.9%	48.1%	49.1%	1.9%	1.9%	42.6%	42.3%	26.9%	27.1%
	[0.019]	[0.019]	[0.069]	[0.068]	[0.019]	[0.019]	[0.068]	[0.069]	[0.033]	[0.033]
	54	54	54	55	53	54	54	52	215	215
Nearest bus station	50.0%	74.1%***	51.9%	67.3%*	54.7%	77.8%***	63.0%	73.1%	54.6%	72.5%***
	[0.069]	[0.060]	[0.069]	[0.064]	[0.069]	[0.057]	[0.066]	[0.062]	[0.036]	[0.033]
	54	54	54	55	53	54	54	52	215	215
Nearest primary school	98.1%	100.0%	100.0%	100.0%	100.0%	100.0%	98.1%	100.0%	99.4%	100.0%
	[0.019]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.019]	[0.000]	[0.004]	[0.000]
	53	54	54	55	53	54	54	52	214	215
Nearest middle school	94.3%	94.4%	94.4%	100%*	100.0%	100.0%	90.7%	96.2%	95.4%	98.6%**
	[0.032]	[0.031]	[0.031]	[0.000]	[0.000]	[0.000]	[0.040]	[0.027]	[0.015]	[0.007]
	53	54	54	55	53	54	54	52	214	215
Nearest secondary school	80.8%	85.2%	74.1%	81.8%	79.2%	83.3%	70.4%	71.2%	75.8%	80.8%
	[0.055]	[0.049]	[0.060]	[0.052]	[0.056]	[0.051]	[0.063]	[0.063]	[0.031]	[0.029]
	52	54	54	55	53	54	54	52	213	215
Nearest higher secondary school	66.0%	81.5%**	48.1%	67.3%***	39.6%	70.4%***	38.9%	46.2%	46.0%	66.2%***
	[0.066]	[0.053]	[0.069]	[0.064]	[0.068]	[0.063]	[0.067]	[0.070]	[0.036]	[0.034]

ML vs BL : Infrastructure										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	53	54	54	55	53	54	54	52	214	215
Nearest college	13.5%	16.7%	22.2%	27.3%	11.3%	18.5%	3.7%	7.7%	14.2%	19.6%**
	[0.048]	[0.051]	[0.057]	[0.061]	[0.044]	[0.053]	[0.026]	[0.037]	[0.027]	[0.030]
	52	54	54	55	53	54	54	52	213	215
Nearest madrasa	46.8%	49.1%	46.2%	55.6%	26.5%	33.3%	23.4%	26.9%	36.1%	42.4%
	[0.073]	[0.069]	[0.070]	[0.068]	[0.064]	[0.065]	[0.062]	[0.062]	[0.037]	[0.036]
	47	53	52	54	49	54	47	52	195	213
Nearest gram panchayat	87.0%	92.6%	75.9%	89.1%*	88.7%	92.6%	63.0%	86.5%***	78.8%	90.2%***
	[0.046]	[0.036]	[0.059]	[0.042]	[0.044]	[0.036]	[0.066]	[0.048]	[0.030]	[0.022]
	54	54	54	55	53	54	54	52	215	215
Nearest district headquarters	0.0%	0.0%	3.7%	3.6%	0.0%	0.0%	3.7%	0.0%	2.1%	1.4%
	[0.000]	[0.000]	[0.026]	[0.025]	[0.000]	[0.000]	[0.026]	[0.000]	[0.011]	[0.010]
	54	54	54	55	53	54	54	52	215	215

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

D.2.2 At midline: Infrastructure

At midline : Infrastructure					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Proportion : HHs with hand pumps	46.1%	46.4%	55.2%***	35.5%	47.1%
	[0.034]	[0.038]	[0.041]	[0.036]	[0.021]
	54	55	54	52	215
Proportion : HHs with a toilet	16.5%	22.8%*	14.9%*	9.8%	17.1%

At midline : Infrastructure					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.030]	[0.033]	[0.022]	[0.019]	[0.016]
	54	55	54	52	215
Proportion : PSUs with a sewerage system	55.6%	54.5%	59.3%*	42.3%	53.9%
	[0.068]	[0.067]	[0.067]	[0.069]	[0.036]
	54	55	54	52	215
Proportion : PSUs with electricity	85.2%	92.7%*	81.5%*	67.3%	83.6%
	[0.049]	[0.035]	[0.053]	[0.065]	[0.026]
	54	55	54	52	215
Facilities within 5 Kms from PSU					
Nearest town	68.5%	70.9%	68.5%	67.3%	69.2%
	[0.063]	[0.062]	[0.064]	[0.065]	[0.034]
	54	55	54	52	215
Nearest ATM	55.6%	45.5%	61.1%***	9.6%	45.0%
	[0.068]	[0.067]	[0.067]	[0.041]	[0.036]
	54	55	54	52	215
Nearest PHC	55.6%	45.5%	48.1%	55.8%	49.5%
	[0.068]	[0.067]	[0.068]	[0.069]	[0.037]
	54	55	54	52	215
Nearest district hospital	7.4%	5.5%	1.9%	0.0%	3.6%
	[0.036]	[0.031]	[0.018]	[0.000]	[0.014]
	54	55	54	52	215
Nearest NRC	3.7%	7.7%	9.3%**	28.0%	11.4%
	[0.026]	[0.037]	[0.040]	[0.064]	[0.023]
	54	52	54	50	210
Nearest railway station	1.9%***	49.1%***	1.9%***	42.3%	27.1%
	[0.018]	[0.068]	[0.018]	[0.069]	[0.033]

At midline : Infrastructure					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	54	55	54	52	215
Nearest bus station	74.1%	67.3%	77.8%	73.1%	72.5%
	[0.060]	[0.064]	[0.057]	[0.062]	[0.033]
	54	55	54	52	215
Nearest primary school	100.0%	100.0%	100.0%	100.0%	100.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	54	55	54	52	215
Nearest middle school	94.4%*	100.0%	100.0%	96.2%	98.6%
	[0.031]	[0.000]	[0.000]	[0.027]	[0.007]
	54	55	54	52	215
Nearest secondary school	85.2%	81.8%	83.3%	71.2%	80.8%
	[0.049]	[0.052]	[0.051]	[0.063]	[0.029]
	54	55	54	52	215
Nearest higher secondary school	81.5%*	67.3%	70.4%**	46.2%	66.2%
	[0.053]	[0.064]	[0.062]	[0.069]	[0.034]
	54	55	54	52	215
Nearest college	16.7%	27.3%	18.5%*	7.7%	19.6%
	[0.051]	[0.060]	[0.053]	[0.037]	[0.030]
	54	55	54	52	215
Nearest madrasa	49.1%	55.6%**	33.3%	26.9%	42.4%
	[0.069]	[0.068]	[0.064]	[0.062]	[0.036]
	53	54	54	52	213
Nearest gram panchayat	92.6%	89.1%	92.6%	86.5%	90.2%
	[0.036]	[0.042]	[0.036]	[0.048]	[0.022]
	54	55	54	52	215
Nearest district headquarters	0.0%	3.6%	0.0%	0.0%	1.4%

At midline : Infrastructure					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.000]	[0.025]	[0.000]	[0.000]	[0.010]
	54	55	54	52	215

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

D.3 Diseases and natural calamities

D.3.1 ML vs BL: Disease outbreaks and natural calamities

ML vs BL : Disease outbreaks and natural calamities					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Percent of PSUs which faced disease outbreak in the past year					
Cholera	1.9%	7.3%	7.4%	15.4%	8.1%
	[0.018]	[0.035]	[0.036]	[0.050]	[0.020]
	54	55	54	52	215
Malaria	13.0%	18.2%	20.4%	19.2%	18.4%
	[0.046]	[0.052]	[0.055]	[0.055]	[0.029]
	54	55	54	52	215
Kala-azar	3.7%	1.8%	5.6%	1.9%	3.2%
	[0.026]	[0.018]	[0.031]	[0.019]	[0.013]
	54	55	54	52	215
Dengue	1.9%	3.6%	1.9%	1.9%	2.5%
	[0.018]	[0.025]	[0.018]	[0.019]	[0.012]
	54	55	54	52	215
Chickenpox	24.1%	21.8%	27.8%	17.3%	23.1%

ML vs BL : Disease outbreaks and natural calamities					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.058]	[0.056]	[0.061]	[0.053]	[0.031]
	54	55	54	52	215
Percent of PSUs which faced the following natural calamities in the previous year					
Earthquake	72.2%	70.9%	70.4%	71.2%	71.0%
	[0.061]	[0.062]	[0.062]	[0.063]	[0.033]
	54	55	54	52	215
Flood	7.4%	7.3%	9.3%***	30.8%	12.2%
	[0.036]	[0.035]	[0.040]	[0.064]	[0.023]
	54	55	54	52	215
Cyclone	3.7%	3.6%	9.3%*	21.2%	8.6%
	[0.026]	[0.025]	[0.040]	[0.057]	[0.019]
	54	55	54	52	215
Drought	44.4%	38.2%**	18.5%	30.8%	31.5%
	[0.068]	[0.066]	[0.053]	[0.064]	[0.034]
	54	55	54	52	215
Landslide	1.9%	0.0%	0.0%	0.0%	0.2%
	[0.018]	[0.000]	[0.000]	[0.000]	[0.002]
	54	55	54	52	215
Hailstorm	5.6%	10.9%	13.0%	17.3%	12.0%
	[0.031]	[0.042]	[0.046]	[0.053]	[0.024]
	54	55	54	52	215
Extreme cold	16.7%	25.5%	29.6%	30.8%	26.6%
	[0.051]	[0.059]	[0.062]	[0.064]	[0.032]
	54	55	54	52	215

ML vs BL : Disease outbreaks and natural calamities					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

D.3.2 At midline: Disease outbreaks and natural calamities

At midline : Disease outbreaks and natural calamities										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Percent of PSUs which faced disease outbreak in the past year										
Cholera	3.8%	1.9%	1.9%	7.3%	5.7%	7.4%	1.9%	15.4%**	3.3%	8.1%**
	[0.026]	[0.019]	[0.019]	[0.035]	[0.032]	[0.036]	[0.019]	[0.050]	[0.013]	[0.020]
	53	54	54	55	53	54	54	52	214	215
Malaria	11.3%	13.0%	3.7%	18.2%**	3.8%	20.4%***	5.6%	19.2%**	5.1%	18.4%***
	[0.044]	[0.046]	[0.026]	[0.052]	[0.026]	[0.055]	[0.031]	[0.055]	[0.015]	[0.029]
	53	54	54	55	53	54	54	52	214	215
Kala-azar	5.7%	3.7%	3.7%	1.8%	1.9%	5.6%	0.0%	1.9%	2.7%	3.2%
	[0.032]	[0.026]	[0.026]	[0.018]	[0.019]	[0.031]	[0.000]	[0.019]	[0.012]	[0.013]
	53	54	54	55	53	54	54	52	214	215
Dengue	5.7%	1.9%	0.0%	3.6%	1.9%	1.9%	0.0%	1.9%	1.3%	2.5%
	[0.032]	[0.019]	[0.000]	[0.025]	[0.019]	[0.019]	[0.000]	[0.019]	[0.007]	[0.012]
	53	54	54	55	53	54	54	52	214	215
Chickenpox	18.5%	24.1%	20.4%	21.8%	11.3%	27.8%**	11.1%	17.3%	15.6%	23.1%**
	[0.053]	[0.059]	[0.055]	[0.056]	[0.044]	[0.062]	[0.043]	[0.053]	[0.027]	[0.031]
	54	54	54	55	53	54	54	52	215	215

At midline : Disease outbreaks and natural calamities

Outcome/ Indicator	Hard conditions		Soft conditions		Only Technology		Pure Control		Overall	
	BL	ML	BL	ML	BL	ML	BL	ML	BL	ML
Percent of PSUs which faced the following natural calamities in the previous year										
Earthquake	11.3%	72.2%***	1.9%	70.9%***	1.9%	70.4%***	0.0%	71.2%***	2.7%	71%***
	[0.044]	[0.062]	[0.019]	[0.062]	[0.019]	[0.063]	[0.000]	[0.063]	[0.011]	[0.033]
	53	54	54	55	53	54	54	52	214	215
Flood	5.7%	7.4%	1.9%	7.3%	0.0%	9.3%**	0.0%	30.8%***	1.4%	12.2%***
	[0.032]	[0.036]	[0.019]	[0.035]	[0.000]	[0.040]	[0.000]	[0.065]	[0.008]	[0.023]
	53	54	54	55	53	54	54	52	214	215
Cyclone	7.5%	3.7%	3.7%	3.6%	0.0%	9.3%**	3.7%	21.2%***	3.1%	8.6%**
	[0.037]	[0.026]	[0.026]	[0.025]	[0.000]	[0.040]	[0.026]	[0.057]	[0.012]	[0.019]
	53	54	54	55	53	54	54	52	214	215
Drought	29.6%	44.4%	31.5%	38.2%	30.2%	18.5%	33.3%	30.8%	31.2%	31.5%
	[0.063]	[0.068]	[0.064]	[0.066]	[0.064]	[0.053]	[0.065]	[0.065]	[0.034]	[0.034]
	54	54	54	55	53	54	54	52	215	215
Landslide	3.8%	1.9%	1.9%	0.0%	0.0%	0.0%	5.6%	0%*	2.2%	0.2%**
	[0.026]	[0.019]	[0.019]	[0.000]	[0.000]	[0.000]	[0.031]	[0.000]	[0.010]	[0.002]
	53	54	54	55	53	54	54	52	214	215
Hailstorm	5.6%	5.6%	7.4%	10.9%	7.5%	13.0%	0.0%	17.3%***	5.8%	12%**
	[0.031]	[0.031]	[0.036]	[0.042]	[0.037]	[0.046]	[0.000]	[0.053]	[0.018]	[0.024]
	54	54	54	55	53	54	54	52	215	215
Extreme cold	20.4%	16.7%	9.3%	25.5%**	3.8%	29.6%***	3.7%	30.8%***	8.0%	26.6%***
	[0.055]	[0.051]	[0.040]	[0.059]	[0.026]	[0.063]	[0.026]	[0.065]	[0.019]	[0.032]
	54	54	54	55	53	54	54	52	215	215

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

Annexe E Implementation status

E.1 Knowledge of the programme and its conditions

E.1.1 At midline: Awareness about the BCSP

At midline : Awareness about BCSP among respondents who have at least one child under 1 year of age			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Women who have heard of the BCSP	79.9%	76.3%	77.3%
	[0.023]	[0.030]	[0.023]
	859	830	1689
Women who are aware that the BCSP involves meeting conditions	69.9%	76.0%	74.4%
	[0.032]	[0.023]	[0.019]
	684	636	1320
Women who have heard about the CMGs for BCSP	7.4%**	12.0%	10.8%
	[0.015]	[0.017]	[0.013]
	684	636	1320

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.1.2 At midline : Awareness about BCSP by caste

At midline: BCSP awareness by caste						
Outcome/ Indicator	**Hard conditions**			**Soft conditions**		
	SC	**Non SC**	**Overall**	**SC**	**Non SC**	**Overall**
Women who were aware of the BCSP, or a of a programme that directly transfer Rs 250 in to beneficiaries' bank accounts	67.7%***	86.4%	75.0%	60.4%***	81.7%	63.9%

	[0.045]	[0.031]	[0.035]	[0.047]	[0.053]	[0.044]
	230	157	387	241	51	292

Source: BCSP Midline Survey (Aug - Nov 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.1.3 At midline : Knowledge about conditions among beneficiaries and AWWs

At midline : Knowledge of conditions among beneficiaries with at least one child under 1 year of age

Outcome/ Indicator	Hard conditions		Soft conditions	
	Beneficiaries[4]	AWW[4]	Beneficiaries	AWW
Per cent of beneficiary/AWW able to recall the following conditions[3]:				
Attend VHSND every month	42.7%	89.0%	49.5%	89.1%
	[0.040]	[0.047]	[0.030]	[0.043]
	484	49	442	52
Weight gain monitoring of woman during pregnancy	24.9%***	70.7%	38.4%	82.2%
	[0.026]	[0.066]	[0.034]	[0.052]
	484	49	442	52
Growth monitoring of children	18%**	45.1%	25.4%	46.6%
	[0.029]	[0.073]	[0.023]	[0.072]
	484	49	442	52
Treatment of child with ORS when he/ she contracts diarrhoea	7.2%*	49.7%	11.9%	49.2%
	[0.015]	[0.073]	[0.023]	[0.072]
	484	49	442	52
Exclusive breastfeeding for the first 6 months of the child's life	6.5%	24.6%*		10.7%
	[0.012]	[0.063]		[0.042]
	484	49		52
Receiving at least 30 IFA tablets during pregnancy	5.6%	46.3%		35.4%

	[0.016]	[0.073]		[0.070]
	484	49		52
Registration of child at birth	4.9%	38.7%		33.0%
	[0.010]	[0.072]		[0.068]
	484	49		52
Weighing of child at birth	13.5%	20.1%		23.3%
	[0.023]	[0.058]		[0.061]
	484	49		52
Measles vaccination for the child when he/ she is between 9-12 months of age	7.7%	42.2%*		24.3%
	[0.017]	[0.072]		[0.063]
	484	49		52
Average number of BCSP conditions that the beneficiaries/AWW are able to recall	0.74	4.262***	0.67	2.7
	[0.085]	[0.257]	[0.068]	[0.147]
	859	49	830	52

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) Certain conditions were present only in the 'hard' condition blocks, and therefore, no figures have been displayed for these conditions in the 'soft' conditions column. (4) Asterisks indicate significant differences in estimates, when compared to the corresponding estimate in the soft conditions block.

E.1.4 At midline : Most common conditions accruing from meeting conditions

At midline : Most common conditions accruing from meeting conditions according to beneficiaries who have at least one child below 1 year of age			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Most common benefits that accrue from meeting conditions, according to the beneficiaries			
Improved health and nutrition status of new born children	63.8%	67.7%	66.7%
	[0.035]	[0.038]	[0.030]
	377	371	748
Improved health and nutrition status of mother	46.5%*	56.3%	53.8%

	[0.041]	[0.036]	[0.029]
	377	371	748

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) Certain conditions were present only in the 'hard' condition blocks, and therefore, no figures have been displayed for these conditions in the 'soft' conditions column.

E.2 Awareness and enrolment

E.2.1 At midline : Enrolment rates

At midline : The BCSP enrolment among respondents with at least one child under one year of age			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Percent of eligible women enrolled under BCSP	56.5%	53.6%	54.4%
	[0.030]	[0.030]	[0.024]
	859	830	1689
Percent of eligible children enrolled under BCSP	56.2%	53.5%	54.2%
	[0.030]	[0.030]	[0.024]
	850	818	1668

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.2.2 At midline : Enrolment rates by socio-economic status

At midline : Enrolment by religion, caste category, wealth quintiles (For all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Enrolled under BCSP**	**Standard errors**	**N**
Religion[3]			

Hindu	54.6%	[0.024]	1594
Muslim	57.2%	[0.073]	100
Caste(4)			
SC	47.5%**	[0.035]	805
OBC	64.6%	[0.022]	710
General	58.2%	[0.044]	175
Wealth quintiles(5)			
Poorest	31.0%***	[0.036]	334
Second	52.3%**	[0.039]	346
Third	57.4%	[0.044]	327
Fourth	68.0%	[0.031]	345
Richest	63.1%	[0.032]	342

Source: BCSP Midline Survey (Aug - Nov 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.(3) A t-test was performed to compare the enrolment rate of each religion with that of Hindus (4) A t-test was performed to compare the enrolment rate of each caste category with that of the General Category. (5) A t-test was performed to compare the enrolment rate of each wealth quintile with that of the richest quintile.

E.2.3 At midline : Awareness and enrolment by caste of AWW

At midline: Awareness and enrolment by caste of AWW						
Outcome/ Indicator	**Hard conditions**			**Soft conditions**		
	same caste as AWW	**not same caste as AWW**	**Overall**	**same caste as AWW**	**not same caste as AWW**	**Overall**
	81.9%	78.0%	79.9%	85.5%***	69.5%	76.3%

At midline: Awareness and enrolment by caste of AWW						
Outcome/ Indicator	**Hard conditions**			**Soft conditions**		
	same caste as AWW	**not same caste as AWW**	**Overall**	**same caste as AWW**	**not same caste as AWW**	**Overall**
Women who were aware of the BCSP, or a of a programme that directly transfer Rs 250 in to beneficiaries' bank accounts	[0.027]	[0.036]	[0.024]	[0.031]	[0.040]	[0.030]
	423	436	859	352	478	830
Women who were enrolled under BCSP	63%**	50.4%	56.5%	62.2%***	47.2%	53.6%
	[0.037]	[0.046]	[0.031]	[0.039]	[0.037]	[0.030]
	423	436	859	352	478	830

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3 Migration status and women's mobility

E.3.1 At midline : Migration status by socio-economic status

At midline : Migration status disaggregated by SC and wealth (For all respondents who have at least one child below 1 year of age)						
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**All four blocks combined**	
	SC	**Non-SC**	**SC**	**Non-SC**	**SC**	**Non-SC**
Women who migrate out of village	13.3%	7.7%	22.2%***	4.1%	18.4%***	6.9%
	[0.028]	[0.024]	[0.029]	[0.013]	[0.017]	[0.010]
	362	495	438	389	1470	1673
	Poorest 40%	**Richest 40%**	**Poorest 40%**	**Richest 40%**	**Poorest 40%**	**Richest 40%**
Women who migrate out of village	14.9%***	4.9%	24.5%***	4.7%	19.1%***	5.9%

	[0.029]	[0.019]	[0.035]	[0.015]	[0.018]	[0.010]
	387	314	292	369	1332	1204

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3.2 At midline : Migration status by caste and wealth for all households

At midline: Migration status by caste category, wealth quintiles for all blocks

Outcome/ Indicator	Migrated in the past year	Standard error	N
Caste			
SC	74.1%	[0.033]	748
Non-SC	25.9%	[0.033]	748
Wealth quintiles			
Poorest quintile	83.9%	[0.032]	329
Richest quintile	16.1%	[0.032]	329

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3.3 At midline : THR enrolment

At midline: Percent of households who have received THR in the past year in treatment blocks(For all respondents who have at least one child below 1 year of age)

Outcome/ Indicator	Proportion	Standard error	N
Percent of households receiving THR in treatment blocks	41.3%	[0.019]	3085

Source: BCSP Midline Survey (Aug - Nov 2015).

E.3.4 At midline : Enrolment by migration status

At midline : BCSP enrolment by migration status (for all respondents with at least one child below 1 year of age)		
Outcome/ Indicator	**Migrate out of their village**	**Do not migrate out of their village**
Enrolled under the BCSP	24.7%***	59.2%
	[0.051]	[0.023]
	192	1503

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3.5 At midline : Enrolment by wealth and receipt of THR

At midline : Enrolment by wealth and receipt of THR (for all respondents with at least one child below 1 year of age)						
Outcome/ Indicator	**Richest 40 %**			**Poorest 40%**		
	THR	**No THR**	**Overall**	**THR**	**No THR**	**Overall**
Women who were enrolled under BCSP	82.5%***	52.1%	65.1%	63.6%***	25.9%	41.9%
	[0.026]	[0.037]	[0.024]	[0.041]	[0.034]	[0.031]
	288	394	682	296	383	679

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3.6 At midline : Women's mobility for SC households

ML vs BL : Indicators related to women's mobility for women belonging to SC HHs (for all respondents with at least one child below 1 year of age)						
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only technology**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**
Percent of women who are allowed to go to the market, alone or accompanied	47.0%	54.3%	52.1%	51.4%	65.2%*	57.6%
Percent of women who are allowed to go to the local health facility, alone or accompanied	43.2%*	53.3%	51.9%	52.3%	66.9%**	57.3%

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.3.7 ML vs BL : Women's mobility for non-SC households

ML vs BL : Indicators related to women's mobility for women belonging to non-SC HHs (for all respondents with at least one child below 1 year of age)						
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only technology**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**
Percent of women who are allowed to go to the market, alone or accompanied	38.8%	38.6%	37.3%	39.1%	45.4%	39.6%
Percent of women who are allowed to go to the local health facility, alone or accompanied	40.2%	38.4%	41.0%	40.6%	46.0%	39.3%

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4 Bank accounts and payments from the programme

E.4.1 DID: Women with personal bank accounts

DID: Women with personal bank accounts (for respondents with at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Women with personal bank accounts	0.0308	0.250***	0.0527
	(0.0416)	(0.0416)	(0.0409)

Source: BCSP Midline Survey (Aug-Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

E.4.2 ML vs BL: Women with personal bank accounts

ML vs BL: Women with personal bank accounts (for respondents with at least one child under 1 year of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Women with personal bank accounts	16.2%	68.9%***	16.8%	66.2%***	12.4%	36.0%***	14.0%	30.9%***	14.9%	52.4%***
	[0.021]	[0.027]	[0.020]	[0.027]	[0.016]	[0.025]	[0.019]	[0.029]	[0.010]	[0.019]
	600	859	657	830	631	769	586	697	2474	3155

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4.3 At midline: Women with personal bank accounts

At midline: Women with personal bank accounts (for respondents with at least one child under 1 year of age)

Outcome/ Indicator	Hard conditions	Soft conditions	Only technology	Pure control	Overall
Women with personal bank accounts	68.9%	66.2%***	36.0%	30.9%	49.2%
	[0.027]	[0.027]	[0.025]	[0.029]	[0.029]
	859	830	769	697	1556

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4.4 At midline : Opening of bank accounts by beneficiaries

At midline : Bank account opening by the BCSP beneficiaries with at least one child under 1 year of age			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Beneficiaries of the BCSP who opened a bank account just for the purpose of registering with the BCSP	66.9%**	58.8%	61.0%
	[0.024]	[0.028]	[0.022]
	484	442	926
Beneficiaries of the BCSP who faced challenges when opening the bank account specifically for the programme	24.5%	26.2%	25.7%
	[0.027]	[0.029]	[0.022]
	326	259	585
Main challenges faced by beneficiaries in opening bank account, if any:			
Bank branch was too far/ expensive to reach	33.8%	37.8%	36.7%
	[0.050]	[0.065]	[0.049]
	80	70	150
Did not have any govt. ID / address proof	33.7%	30.3%	31.2%
	[0.057]	[0.062]	[0.048]
	80	70	150
Did not have two govt. ID / address proofs	20.4%	15.3%	16.7%

At midline : Bank account opening by the BCSP beneficiaries with at least one child under 1 year of age			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
	[0.048]	[0.047]	[0.037]
	80	70	150
Average no. of times beneficiaries had to visit bank to open account, if account was opened for registering with BCSP	2.91	2.91	2.91
	[0.132]	[0.117]	[0.092]
	318	253	571
Beneficiaries who reported that they paid money (besides minimum balance) while opening a bank account to join BCSP	48.4%	47.9%	48.0%
	[0.041]	[0.047]	[0.035]
	326	259	585

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4.5 At midline : Bank accounts credited with BCSP cash

At midline : BCSP cash transfer credit into bank accounts (for all respondents who are BCSP beneficiaries and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
Beneficiaries whose accounts have been credited with BCSP cash transfer at least once since joining the programme	71.0%	76.1%	74.7%
	[2.480]	[2.469]	[1.936]
	480	437	917
Beneficiaries who are informed when the BCSP cash is credited to their bank account	66.8%	71.6%	70.4%
	[3.125]	[3.887]	[3.031]
	342	333	675
Main sources through which beneficiaries know when the BCSP cash is credited to their account			

AWW	76.1%	81.7%	80.4%
	[3.384]	[3.283]	[2.678]
	230	236	466
SMS from the bank	11.6%	8.2%	9.0%
	[2.706]	[2.160]	[1.792]
	230	236	466
GPM	6.9%	4.3%	5.0%
	[1.957]	[1.704]	[1.384]
	230	236	466
Average no. of times the beneficiaries' bank account has been credited with BCSP cash in the last 6 months, if the beneficiary enrolled more than 6 months ago	3.22***	3.88	3.71
	[0.166]	[0.144]	[0.124]
	265	271	536
Average amount of cash credited to beneficiaries' bank account in the last 6 months, if the beneficiary enrolled more than 6 months ago	916.93**	1059.23	1023.71
	[47.470]	[30.819]	[27.756]
	269	265	534

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4.6 At midline : BCSP cash withdrawn

At midline : BCSP cash transfer withdrawal from bank accounts (for all respondents who are BCSP beneficiaries and have at least one child under 1 year of age)

Outcome/ Indicator	Hard conditions vs. Soft conditions		Overall
	Hard conditions	Soft conditions	
Beneficiaries who have received and withdrawn BCSP cash transfer at least once	85.9%	86.5%	86.3%
	[2.167]	[1.809]	[1.460]
	342	333	675
Average no. of times BCSP cash been withdrawn from the beneficiaries' bank account in the last 6 months, if the beneficiary has been enrolled for 6 months or more	1.83**	2.12	2.04
	[0.078]	[0.086]	[0.067]
	266	247	513
	825.66**	924.45	898.16

At midline : BCSP cash transfer withdrawal from bank accounts (for all respondents who are BCSP beneficiaries and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
Average amount of BCSP cash withdrawn by beneficiary in the last 6, if beneficiary has been enrolled for 6 months or more	[35.312]	[32.054]	[26.469]
	268	244	512
Average proportion of credited BCSP cash withdrawn by beneficiary in the last 6, if beneficiary has been enrolled for 6 months or more	86.1%	84.1%	84.6%
	[0.016]	[0.017]	[0.013]
	231	231	462
Source: BCSP Midline Survey (Aug - Nov 2015). **Notes:** (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.			

E.4.7 At midline : BCSP cash credited by wealth

At midline : Average BCSP cash credited, by wealth quintile					
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Overall**
	Poorest 40%	**Richest 40%**	**Poorest 40%**	**Richest 40%**	
Average amount of cash credited to beneficiaries' bank account in the last 6 months, if the beneficiary registered more than 6 months ago	891.168	927.219	1050.501	1023.026	1001.761
	[51.152]	[77.385]	[61.646]	[39.468]	[30.267]
	97	120	71	140	428
Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.					

E.4.8 At midline : BCSP cash credited by caste

At midline : Average BCSP cash credited, by caste					
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Overall**
	SC	**Non SC**	**SC**	**Non SC**	

Average amount of cash credited to beneficiaries' bank account in the last 6 months, if the beneficiary registered more than 6 months ago	831.338*	965.07	1036.875	1082.725	1023.613
	[72.557]	[46.260]	[45.070]	[45.888]	[27.719]
	90	181	128	137	536

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.4.9 At midline : Challenges faced while withdrawing BCSP cash

Challenges faced in the BCSP cash transfer withdrawal from bank accounts (for all respondents who are BCSP beneficiaries and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
Beneficiaries who reported facing challenges while withdrawing the BCSP cash	16.8%*	9.6%	11.4%
	[3.098]	[2.238]	[1.878]
	292	287	579
Main challenges beneficiaries faced while withdrawing cash			
Bank branch is too far/ expensive to reach	41.9%	27.6%	32.9%
	[0.077]	[0.068]	[0.051]
	49	30	79
Illiterate/ uneducated; do not know how to withdraw money	33.1%	31.7%	32.2%
	[0.065]	[0.094]	[0.063]
	49	30	79
Bank staff is unhelpful	40%**	15.8%	24.8%
	[0.083]	[0.070]	[0.062]
	49	30	79
Bank refuses to payout smaller amounts of money	23.3%	13.6%	17.2%
	[0.055]	[0.064]	[0.047]

Challenges faced in the BCSP cash transfer withdrawal from bank accounts (for all respondents who are BCSP beneficiaries and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
	49	30	79

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

E.5 Most common reasons AWWs were not able to register beneficiaries

E.5.1 At midline: Most common reasons AWWs were not able to register beneficiaries

At midline: Most common reasons AWWs were not able to register beneficiaries			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Most common reasons the AWW was not able to register beneficiaries			
Beneficiaries don't have bank account	76.5%	80.0%	79.2%
	[0.104]	[0.091]	[0.073]
	17	20	37
Difficulties with the BCSP application	23.5%	5.0%	9.5%
	[0.104]	[0.049]	[0.047]
	17	20	37
Beneficiaries don't visit the AWC for registration	0.0%	10.0%	7.6%
	[0.000]	[0.068]	[0.052]
	17	20	37

At midline: Most common reasons AWWs were not able to register beneficiaries			
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Overall**
Beneficiaries not interested in registering from the programme	5.9%	10.0%	9.0%
	[0.058]	[0.068]	[0.054]
	17	20	37

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

Annexe F Resource Effects

F.1 Self-reported use of BCSP cash transfer

F.1.1 At midline : Spending patterns

At midline : Self-reported use of BCSP cash transfer (for all respondents who have withdrawn the BCSP cash transfer at least once, and have at least one child under 1 year of age)	
Outcome/ Indicator	**For both treatment blocks, combined**
Beneficiaries who reported that they spend at least a part of the cash transfer on the child	66.0%
	[2.774]
	579
Beneficiaries who reported that they spend at least a part of the cash transfer on themselves	69.1%
	[2.730]
	579
Beneficiaries who said their expenditure on the following has increased since she started receiving BCSP cash transfers:	
Food for children	62.8%
	[2.345]
	579
Food for self	61.6%
	[2.495]
	579
Sanitation/ hygiene	20.5%
	[2.793]
	579
Children's education	4.6%
	[1.295]
	579

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.1.2 At midline : Most common items that the cash is spent on

At midline : Most common items that cash is spent on (for all respondents who have withdrawn the BCSP cash transfer at least once, and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
Most common items on which the cash transfer is spent on generally			
Fruits/ vegetables for self	60.4%	63.7%	62.9%
	[0.046]	[0.050]	[0.040]
	155	170	325
Milk for self	32.8%	35.9%	35.2%
	[0.055]	[0.044]	[0.036]
	155	170	325
Sweets/ special food for self	9.6%	9.0%	9.1%
	[0.021]	[0.019]	[0.015]
	155	170	325
Food for the baby	43.1%***	24.8%	29.1%
	[0.041]	[0.033]	[0.029]
	155	170	325
Milk for the baby	29.8%	26.1%	27.0%
	[0.033]	[0.039]	[0.031]
	155	170	325
Food (including milk) for other children	15.5%	14.8%	14.9%
	[0.033]	[0.026]	[0.022]
	155	170	325
Misc. spending on children (toys, jewellery, clothes, footwear etc.)	3.2%	1.9%	2.2%
	[0.014]	[0.010]	[0.008]

At midline : Most common items that cash is spent on (for all respondents who have withdrawn the BCSP cash transfer at least once, and have at least one child under 1 year of age)

Outcome/ Indicator	Hard conditions vs. Soft conditions		Overall
	Hard conditions	Soft conditions	
	155	170	325
Crèche or childcare	23.2%	17.2%	18.6%
	[0.039]	[0.040]	[0.032]
	155	170	325
Households health related expenditure	12.6%	11.6%	11.9%
	[0.026]	[0.032]	[0.025]
	155	170	325
Sanitation/ hygiene	5.9%	3.9%	4.4%
	[0.020]	[0.017]	[0.014]
	155	170	325
Misc. Spending on other HH members (Jewellery, Clothes, footwear etc.)	0.5%	0.0%	0.1%
	[0.005]	[0.000]	[0.001]
	155	170	325
Savings	2.2%	1.7%	1.8%
	[0.011]	[0.010]	[0.008]
	155	170	325
Transportation	2.2%	2.6%	2.5%
	[0.012]	[0.013]	[0.011]
	155	170	325
Investment in a small business (e.g. sewing machine, kirana store)	0.6%	1.1%	1.0%
	[0.006]	[0.008]	[0.006]
	155	170	325

At midline : Most common items that cash is spent on (for all respondents who have withdrawn the BCSP cash transfer at least once, and have at least one child under 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
Transfers to friends or family outside the household	0.0%	0.0%	0.0%
	[0.000]	[0.000]	[0.000]
	155	170	325
Medicines/ healthcare for child	4.5%	4.2%	4.3%
	[0.015]	[0.014]	[0.011]
	155	170	325

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) Certain items such as household durables, livestock, alcohol and cigarettes, etc. had no respondents, and hence are not represented in the table above.

F.2 Households weekly expenditure on food

F.2.1 DID : Weekly expenditure on food consumption

DID : HH weekly expenditure on food consumption (In rupees)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Weekly per capita Food expenditure (Rs.)	-11.83	33.85***	13.69
	(9.372)	(9.134)	(9.329)
Weekly HH Food expenditure by food group (Rs.)			
Food group A: Milk and milk products	26.70	26.02	21.79
	(21.24)	(17.91)	(20.97)
Food group B : Meat Poultry and fish	-36.12**	75.91***	4.694

	(17.99)	(15.74)	(13.17)
Food group C : Cereals	44.42**	-24.12	49.38**
	(21.47)	(20.90)	(24.13)
Food group D : Pulses	-14.24	-19.83**	-4.461
	(8.688)	(8.110)	(10.09)
Food group E : Edible Oils	-6.648	-11.85***	4.718
	(4.319)	(3.814)	(5.050)
Food group F : Fresh fruits	-12.62**	5.445	2.857
	(6.146)	(4.839)	(4.078)
Food group G : Dry fruits	3.740	0.431	0.756
	(5.622)	(3.723)	(3.206)
Food group H : Vegetables	-2.238	29.72***	46.15***
	(9.185)	(8.998)	(10.08)
Food group I : Condiments and spices	9.063	-4.016	9.694
	(7.292)	(6.650)	(6.376)
Food group J : Sugar, honey and sugar preparations	-3.291	14.89**	-5.454
	(5.756)	(6.148)	(5.327)
Food group K : Non-alcoholic beverages	0.992	-1.184	0.355
	(2.420)	(2.113)	(1.770)
Food group L : Misc. food items	2.999	10.57	13.95***
	(7.813)	(6.824)	(5.167)
Food group M : tobacco and alcohol	-41.05*	-3.264	19.22
	(21.11)	(20.23)	(18.44)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.2.2 ML vs BL : Weekly expenditure on food consumption

ML vs BL: Household weekly expenditure on food consumption (in Rupees)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Weekly per capita Food expenditure (Rs.)	195.23	221.785***	187.57	228.585***	189.74	199.39	190.20	185.41	189.56	212.488***
	[5.825]	[5.575]	[4.278]	[5.002]	[4.801]	[4.726]	[4.703]	[4.573]	[2.506]	[2.987]
	600.00	858.00	656.00	830.00	631.00	769.00	586.00	697.00	2473.00	3154.00
Weekly HH Food expenditure by food group (Rs.)										
Food group A: Milk and milk products	166.71	258.895***	151.17	206.428***	142.52	185.341***	163.35	171.20	152.30	202.342***
	[14.761]	[18.056]	[11.887]	[16.175]	[13.891]	[13.675]	[13.766]	[16.030]	[7.099]	[8.617]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group B : Meat Poultry and fish	99.01	129.759**	62.16	136.938***	49.38	48.88	67.87	63.98	63.38	99.011***
	[10.199]	[9.556]	[8.833]	[10.693]	[4.294]	[8.109]	[7.131]	[8.861]	[4.264]	[6.306]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group C : Cereals	448.01	457.42	442.57	410.436**	433.81	421.19	466.84	401.607***	444.52	418.917***
	[13.125]	[12.577]	[9.818]	[10.201]	[10.420]	[12.484]	[11.620]	[17.041]	[5.730]	[6.431]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group D : Pulses	111.70	123.915*	95.64	122.614***	83.43	132***	95.92	143.955***	93.75	128.799***
	[5.034]	[5.404]	[4.672]	[5.142]	[4.198]	[4.469]	[5.055]	[7.597]	[2.616]	[2.866]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group E : Edible Oils	87.26	85.73	80.99	85.55	70.00	87.673***	80.76	93.525***	78.27	87.411***
	[3.188]	[2.514]	[2.626]	[2.405]	[2.206]	[2.547]	[2.639]	[3.393]	[1.477]	[1.403]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group F : Fresh fruits	39.13	38.37	28.36	39.688**	18.77	25.165**	14.10	17.35	24.26	31.843***
	[4.982]	[3.835]	[2.932]	[3.379]	[2.088]	[2.620]	[1.699]	[2.920]	[1.569]	[1.827]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group G : Dry fruits	14.27	19.43	11.13	13.40	6.21	8.39	6.77	7.33	9.24	11.87
	[2.764]	[3.542]	[2.194]	[2.782]	[1.253]	[1.503]	[1.596]	[1.997]	[1.071]	[1.369]

ML vs BL: Household weekly expenditure on food consumption (in Rupees)

Outcome/ Indicator	Hard conditions		Soft conditions		Only Technology		Pure Control		Overall	
	BL	ML	BL	ML	BL	ML	BL	ML	BL	ML
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group H : Vegetables	166.82	179.45	151.40	165.452*	146.50	137.50	183.45	123.188***	156.98	152.82
	[6.027]	[5.510]	[4.958]	[5.357]	[5.263]	[6.163]	[6.841]	[3.340]	[3.049]	[3.238]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group I : Condiments and spices	64.41	103.336***	68.44	98.551***	65.13	99.542***	68.78	92.993***	67.01	98.675***
	[3.298]	[3.660]	[3.011]	[3.622]	[2.666]	[3.793]	[2.785]	[3.395]	[1.597]	[1.993]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group J : Sugar, honey and sugar preparations	41.63	54.32***	44.99	60.476***	43.00	45.51	40.01	46.06	43.16	53.02***
	[2.814]	[3.023]	[2.787]	[4.443]	[3.520]	[2.180]	[2.980]	[3.201]	[1.676]	[2.067]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group K : Non-alcoholic beverages	14.37	17.506*	16.49	19.09	12.50	16.903***	13.38	16.32**	14.50	17.803***
	[1.727]	[1.127]	[1.429]	[1.502]	[0.976]	[0.979]	[1.320]	[1.140]	[0.734]	[0.721]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group L : Misc. food items	44.84	78.636***	44.08	76.027***	44.11	66.694***	39.06	45.217*	43.34	68.97***
	[5.179]	[3.798]	[3.897]	[3.960]	[2.530]	[3.238]	[2.405]	[3.510]	[1.909]	[2.141]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
Food group M : tobacco and alcohol	119.00	75.134***	87.69	90.44	92.86	96.70	89.52	75.72	93.18	87.86
	[12.412]	[6.813]	[13.511]	[8.360]	[8.199]	[10.807]	[9.480]	[7.759]	[6.446]	[4.937]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.2.3 At midline: Weekly expenditure on food consumption

At midline: weekly expenditure on food consumption (in rupees)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Weekly Per Capita Food expenditure (Rs.)	221.79	228.585***	199.394**	185.41	212.49
	[5.549]	[4.979]	[4.704]	[4.552]	[2.987]
	858.00	830.00	769.00	697.00	3154.00
Total weekly HH Food expenditure (Rs.)	1597.58	1513.569***	1351.56	1268.00	1440.62
	[47.415]	[38.319]	[37.017]	[40.210]	[22.254]
	858.00	830.00	769.00	697.00	3154.00
HH Food expenditure by food group (Rs.)					
Food group A: Milk and milk products	258.895**	206.428***	185.34	171.20	202.34
	[17.973]	[16.101]	[13.612]	[15.956]	[8.617]
	859.00	830.00	769.00	697.00	3155.00
Food group B : Meat Poultry and fish	129.76	136.94	48.88	63.98	99.01
	[9.512]	[10.644]	[8.072]	[8.820]	[6.306]
	859.00	830.00	769.00	697.00	3155.00
Food group C : Cereals	457.418***	410.44	421.19	401.61	418.92
	[12.519]	[10.154]	[12.426]	[16.963]	[6.431]
	859.00	830.00	769.00	697.00	3155.00
Food group D : Pulses	123.92	122.61	132.00	143.96	128.80
	[5.379]	[5.118]	[4.449]	[7.562]	[2.866]
	859.00	830.00	769.00	697.00	3155.00
Food group E : Edible Oils	85.73	85.55	87.67	93.53	87.41
	[2.503]	[2.394]	[2.535]	[3.377]	[1.403]
	859.00	830.00	769.00	697.00	3155.00
Food group F : Fresh fruits	38.37	39.688***	25.165**	17.35	31.84
	[3.817]	[3.363]	[2.607]	[2.907]	[1.827]

	859.00	830.00	769.00	697.00	3155.00
Food group G : Dry fruits	19.43	13.40	8.39	7.33	11.87
	[3.526]	[2.769]	[1.496]	[1.988]	[1.369]
	859.00	830.00	769.00	697.00	3155.00
Food group H : Vegetables	179.452*	165.452***	137.503**	123.19	152.82
	[5.485]	[5.332]	[6.135]	[3.325]	[3.238]
	859.00	830.00	769.00	697.00	3155.00
Food group I : Condiments and spices	103.34	98.55	99.54	92.99	98.68
	[3.643]	[3.605]	[3.775]	[3.379]	[1.993]
	859.00	830.00	769.00	697.00	3155.00
Food group J : Sugar, honey and sugar preparations	54.32	60.476***	45.51	46.06	53.02
	[3.009]	[4.423]	[2.170]	[3.186]	[2.067]
	859.00	830.00	769.00	697.00	3155.00
Food group K : Non-alcoholic beverages	17.51	19.09	16.90	16.32	17.80
	[1.122]	[1.495]	[0.975]	[1.134]	[0.721]
	859.00	830.00	769.00	697.00	3155.00
Food group L : Misc. food items	78.64	76.027*	66.694***	45.22	68.97
	[3.780]	[3.942]	[3.223]	[3.494]	[2.141]
	859.00	830.00	769.00	697.00	3155.00
Food group M : tobacco and alcohol	75.13	90.44	96.70	75.72	87.86
	[6.782]	[8.321]	[10.758]	[7.723]	[4.937]
	859.00	830.00	769.00	697.00	3155.00

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.3 Calorie consumption

F.3.1 DID : Calorie consumption

DID: Calorie consumption			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Calories consumed per capita per day	65.66	65.12	53.99
	(66.69)	(68.76)	(74.14)
HH money spent per 1000 calories bought (Rs.)	-1.613***	1.610***	0.596
	(0.484)	(0.466)	(0.464)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.3.2 ML vs BL : Calorie consumption

ML vs BL : Calorie consumption										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Calories consumed per capita per day	2212.41	2174.44	2203.74	2100.106**	2291.53	2122.772***	2290.24	2067.487***	2246.23	2112.34***
	[46.077]	[29.610]	[33.864]	[33.800]	[48.413]	[36.132]	[40.812]	[39.047]	[22.129]	[18.882]
	600.00	859.00	657.00	830.00	631.00	769.00	586.00	697.00	2474.00	3155.00
HH money spent per 1000 calories bought (Rs.)	12.81	14.482***	12.30	15.587***	12.00	13.683***	12.11	13.196***	12.23	14.508***
	[0.342]	[0.231]	[0.257]	[0.233]	[0.178]	[0.285]	[0.209]	[0.318]	[0.130]	[0.160]
	600.00	858.00	656.00	830.00	631.00	769.00	586.00	697.00	2473.00	3154.00

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.3.3 At midline : Calorie consumption

At midline : Calorie consumption					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Calories consumed per capita per day	2174.436*	2100.11	2122.77	2067.49	2112.34
	[29.473]	[33.644]	[35.966]	[38.867]	[18.882]
	859	830	769	697	3155
HH money spent per 1000 calories bought (Rs.)	14.482***	15.587***	13.68	13.20	14.51
	[0.230]	[0.232]	[0.284]	[0.317]	[0.160]
	858	830	769	697	3154

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.4 Maternal diet diversity

F.4.1 DID : Maternal diet diversity

DID : Maternal diet diversity indicators			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Number of food groups consumed by mother (out of 13)	0.164	0.564***	0.403**
	(0.193)	(0.205)	(0.185)
Percent of mothers who consumed foods from the following food groups[3]:			
Food group A : Milk and milk products	0.0617	0.0524	0.0527
	(0.0445)	(0.0434)	(0.0451)
Food group B: Meat. Poultry and fish	-0.155***	0.342***	0.0372
	(0.0459)	(0.0461)	(0.0514)

DID : Maternal diet diversity indicators			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Food group C: Cereals	-0.00145	0.000323	-0.00300
	(0.00216)	(0)	(0.00296)
Food group D : Pulses	-0.00547	-0.0268	0.0167
	(0.0267)	(0.0227)	(0.0244)
Food group E : Edible oils	0.0269**	0.00462	0.0218**
	(0.0133)	(0.00532)	(0.00842)
Food group F : Fresh fruits	0.00520	0.0915*	0.0196
	(0.0475)	(0.0471)	(0.0452)
Food group G : Dry fruits	0.000998	0.0409	0.0191
	(0.0283)	(0.0256)	(0.0226)
Food group H : Vegetables	-0.00557	0.00481	-0.00208
	(0.00439)	(0.00420)	(0.00440)
Food group I : Condiments and spices	0.00414	-0.00124	0.00418*
	(0.00381)	(0.00242)	(0.00240)
Food group J : Sugar and honey	0.0672*	0.00360	0.0364
	(0.0355)	(0.0403)	(0.0423)
Food group K : Non-alcoholic beverages	0.110***	-0.0300	0.0623
	(0.0421)	(0.0403)	(0.0440)
Food group L : Misc. food items	0.0627	0.118**	0.111**
	(0.0538)	(0.0548)	(0.0523)
Food group M : tobacco and alcohol	-0.00784	-0.0366	0.0274
	(0.0397)	(0.0374)	(0.0368)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the this indicators (Percent of mothers who consumed foods from the following food groups) should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

F.4.2 ML vs BL : Maternal diet diversity

ML vs BL : Maternal diet diversity										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Number of food groups consumed by mother (out of 13)	8.021	8.994***	8.313	9.122***	8.176	8.42*	8.041	7.882	8.192	8.709***
	[0.118]	[0.119]	[0.136]	[0.108]	[0.102]	[0.106]	[0.117]	[0.110]	[0.068]	[0.067]
	600	859	657	830	631	769	586	697	2474	3155
Percent of mothers who consumed foods from the following food groups:										
Food group A : Milk and milk products	0.488	0.653***	0.528	0.631***	0.504	0.555	0.489	0.487	0.51	0.59***
	[0.028]	[0.028]	[0.031]	[0.028]	[0.028]	[0.026]	[0.028]	[0.029]	[0.016]	[0.015]
	600	859	657	830	631	769	586	697	2474	3155
Food group B: Meat. Poultry and fish	0.391	0.509***	0.283	0.556***	0.293	0.223**	0.334	0.226**	0.307	0.401***
	[0.028]	[0.023]	[0.031]	[0.023]	[0.023]	[0.028]	[0.035]	[0.027]	[0.016]	[0.019]
	600	859	657	830	631	769	586	697	2474	3155
Food group C: Cereals	1	0.999	0.999	0.999	1	1	0.997	1	0.999	0.999
	[0.000]	[0.001]	[0.001]	[0.001]	[0.000]	[0.000]	[0.003]	[0.000]	[0.001]	[0.000]
	600	859	657	830	631	769	586	697	2474	3155
Food group D : Pulses	0.933	0.892**	0.941	0.906*	0.938	0.93	0.924	0.899	0.936	0.91***
	[0.012]	[0.015]	[0.012]	[0.014]	[0.009]	[0.010]	[0.016]	[0.015]	[0.006]	[0.007]
	600	859	657	830	631	769	586	697	2474	3155
Food group E : Edible oils	0.964	0.999***	0.991	0.999**	0.994	0.997	1	0.981**	0.991	0.996*
	[0.013]	[0.001]	[0.003]	[0.001]	[0.003]	[0.002]	[0.000]	[0.008]	[0.002]	[0.001]
	600	859	657	830	631	769	586	697	2474	3155
Food group F : Fresh fruits	0.402	0.463*	0.428	0.484	0.356	0.32	0.257	0.202*	0.374	0.39
	[0.029]	[0.025]	[0.029]	[0.026]	[0.023]	[0.021]	[0.028]	[0.020]	[0.016]	[0.015]
	600	859	657	830	631	769	586	697	2474	3155
Food group G : Dry fruits	0.102	0.152**	0.091	0.139**	0.075	0.083	0.077	0.065	0.085	0.113***

ML vs BL : Maternal diet diversity										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Food group H : Vegetables	[0.014]	[0.016]	[0.014]	[0.018]	[0.012]	[0.010]	[0.015]	[0.012]	[0.007]	[0.009]
	600	859	657	830	631	769	586	697	2474	3155
	0.997	0.998	0.992	0.999*	0.997	0.999	0.994	0.998	0.995	0.999**
	[0.002]	[0.001]	[0.003]	[0.001]	[0.002]	[0.001]	[0.003]	[0.002]	[0.002]	[0.001]
	600	859	657	830	631	769	586	697	2474	3155
Food group I : Condiments and spices	0.994	0.999	0.999	0.999	0.998	1	1	0.997	0.998	0.999
	[0.003]	[0.001]	[0.001]	[0.001]	[0.002]	[0.000]	[0.000]	[0.002]	[0.001]	[0.001]
	600	859	657	830	631	769	586	697	2474	3155
Food group J : Sugar and honey	0.664	0.838***	0.766	0.873***	0.753	0.856***	0.728	0.795**	0.744	0.851***
	[0.023]	[0.020]	[0.028]	[0.017]	[0.027]	[0.017]	[0.031]	[0.023]	[0.015]	[0.010]
	600	859	657	830	631	769	586	697	2474	3155
Food group K : Non-alcoholic beverages	0.472	0.748***	0.619	0.784***	0.561	0.757***	0.567	0.701***	0.575	0.758***
	[0.032]	[0.023]	[0.029]	[0.021]	[0.027]	[0.022]	[0.037]	[0.027]	[0.016]	[0.012]
	600	859	657	830	631	769	586	697	2474	3155
Food group L : Misc. food items	0.461	0.662***	0.541	0.68***	0.587	0.608	0.548	0.458***	0.547	0.623***
	[0.035]	[0.024]	[0.032]	[0.026]	[0.031]	[0.029]	[0.025]	[0.027]	[0.017]	[0.015]
	600	859	657	830	631	769	586	697	2474	3155
Food group M : tobacco and alcohol	0.153	0.082**	0.137	0.074**	0.119	0.093	0.126	0.072*	0.131	0.08***
	[0.024]	0.082**	[0.025]	[0.013]	[0.021]	[0.015]	[0.025]	[0.013]	[0.013]	[0.008]
	600	859	657	830	631	769	586	697	2474	3155

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.4.3 At midline : Maternal diet diversity

At midline : Mother food consumption diversity					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Number of food groups consumed by mother (out of 13)	8.99	9.122***	8.42***	7.88	8.71
	[0.118]	[0.108]	[0.105]	[0.109]	[0.067]
	859.00	830.00	769.00	697.00	3155.00
Percent of mothers who consumed foods from the following food groups:					
Food group A : Milk and milk products	0.65	0.631**	0.555*	0.49	0.59
	[0.028]	[0.028]	[0.026]	[0.029]	[0.015]
	859.00	830.00	769.00	697.00	3155.00
Food group B: Meat. Poultry and fish	0.51	0.556***	0.22	0.23	0.40
	[0.023]	[0.022]	[0.028]	[0.027]	[0.019]
	859.00	830.00	769.00	697.00	3155.00
Food group C: Cereals	1.00	1.00	1.00	1.00	1.00
	[0.001]	[0.001]	[0.000]	[0.000]	[0.000]
	859.00	830.00	769.00	697.00	3155.00
Food group D : Pulses	0.89	0.91	0.93*	0.90	0.91
	[0.015]	[0.014]	[0.010]	[0.015]	[0.007]
	859.00	830.00	769.00	697.00	3155.00
Food group E : Edible oils	1.00	1.00	0.997**	0.98	1.00
	[0.001]	[0.001]	[0.002]	[0.007]	[0.001]
	859.00	830.00	769.00	697.00	3155.00
Food group F : Fresh fruits	0.46	0.484***	0.32***	0.20	0.39
	[0.025]	[0.026]	[0.021]	[0.020]	[0.015]
	859.00	830.00	769.00	697.00	3155.00
Food group G : Dry fruits	0.15	0.139***	0.08	0.07	0.11
	[0.016]	[0.018]	[0.010]	[0.012]	[0.009]

At midline : Mother food consumption diversity					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	859.00	830.00	769.00	697.00	3155.00
	1.00	1.00	1.00	1.00	1.00
Food group H : Vegetables	[0.001]	[0.001]	[0.001]	[0.002]	[0.001]
	859.00	830.00	769.00	697.00	3155.00
	1.00	1.00	1.00	1.00	1.00
Food group I : Condiments and spices	[0.001]	[0.001]	[0.000]	[0.002]	[0.001]
	859.00	830.00	769.00	697.00	3155.00
	0.84	0.87	0.856**	0.80	0.85
Food group J : Sugar and honey	[0.020]	[0.017]	[0.017]	[0.022]	[0.010]
	859.00	830.00	769.00	697.00	3155.00
	0.75	0.78	0.76	0.70	0.76
Food group K : Non-alcoholic beverages	[0.023]	[0.021]	[0.022]	[0.027]	[0.012]
	859.00	830.00	769.00	697.00	3155.00
	0.66	0.68*	0.608***	0.46	0.62
Food group L : Misc. food items	[0.024]	[0.026]	[0.028]	[0.027]	[0.015]
	859.00	830.00	769.00	697.00	3155.00
	0.08	0.07	0.09	0.07	0.08
Food group M : tobacco and alcohol	[0.016]	[0.013]	[0.015]	[0.013]	[0.008]
	859.00	830.00	769.00	697.00	3155.00

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

F.5 Child diet

F.5.1 DID : WHO IYCF indicators

DID : WHO IYCF indicators			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Early initiation of breastfeeding(3)	-0.0270	0.00331	0.0500
	(0.0367)	(0.0311)	(0.0351)
Exclusive breastfeeding under 6 months	0.0440	-0.0390	0.106
	(0.0652)	(0.0669)	(0.0692)
Continued breastfeeding at 1 year(4)	0.0163	-0.000764	0.0161
	(0.0346)	(0.0349)	(0.0426)
Introduction of solid, semi-solid or soft foods(5)	-0.0274	0.146*	0.000992
	(0.0739)	(0.0780)	(0.0777)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) For children between 0-24 months of age (4) For children between 12-15 months of age (5) For children between 6-8 months of age (6) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

F.5.2 ML vs BL : WHO IYCF indicators

ML vs BL : WHO IYCF indicators										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Early initiation of breastfeeding(3)	52.0%	53.5%	54.1%	57.0%	50.2%	53.8%*	50.9%	48.2%	52.1%	54.2%
	[0.025]	[0.017]	[0.024]	[0.018]	[0.018]	[0.017]	[0.020]	[0.021]	[0.012]	[0.010]
	1616	1561	1575	1671	1566	1610	1498	1445	6255	6287

ML vs BL : WHO IYCF indicators										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Exclusive breastfeeding under 6 months	38.2%	35.7%	39.7%	34.4%	34.3%	33.7%	43.6%	29.6%***	38.5%	33.8%*
	[0.036]	[0.026]	[0.038]	[0.033]	[0.034]	[0.027]	[0.039]	[0.038]	[0.020]	[0.018]
	210	380	219	360	222	298	197	270	848	1308
Continued breastfeeding at 1 year(4)	91.0%	87.8%	91.6%	87.1%*	93.3%	88.5%**	90.7%	84.1%*	91.8%	87.1%***
	[0.015]	[0.019]	[0.015]	[0.019]	[0.013]	[0.017]	[0.021]	[0.030]	[0.008]	[0.011]
	303	246	267	317	264	309	271	291	1105	1163
Introduction of solid, semi-solid or soft foods(5)	59.2%	69.7%**	59.1%	71.4%**	68.0%	64.5%	66.3%	66.4%	62.9%	68.2%*
	[0.039]	[0.033]	[0.040]	[0.030]	[0.038]	[0.035]	[0.036]	[0.038]	[0.022]	[0.018]
	190	227	207	230	183	239	170	211	750	907

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) For children between 0-24 months of age (4) For children between 12-15 months of age (5) For children between 6-8 months of age

F.5.3 At midline : WHO IYCF indicators

At midline : WHO IYF indicators					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Early initiation of breastfeeding(3)	53.5%	57.0%	53.8%**	48.2%	54.2%
	[0.017]	[0.018]	[0.017]	[0.020]	[0.010]
	1561	1671	1610	1445	6287
Exclusive breastfeeding under 6 months	35.7%	34.4%	33.7%	29.6%	33.8%
	[0.026]	[0.033]	[0.027]	[0.038]	[0.018]
	380	360	298	270	1308

At midline : WHO IYF indicators					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Continued breastfeeding at 1 year[4]	87.8%	87.1%	88.5%	84.1%	87.1%
	[0.019]	[0.019]	[0.017]	[0.030]	[0.011]
	246	317	309	291	1163
Introduction of solid, semi-solid or soft foods[5]	69.7%	71.4%	64.5%	66.4%	68.2%
	[0.033]	[0.030]	[0.034]	[0.038]	[0.018]
	227	230	239	211	907
Minimum dietary diversity[6]	13.4%	11.7%***	7.7%	6.2%	9.7%
	[0.016]	[0.012]	[0.009]	[0.008]	[0.006]
	1181	1311	1312	1175	4979
Minimum meal frequency[7]	65.3%	64.1%	64.5%	66.0%	64.7%
	[0.018]	[0.016]	[0.016]	[0.017]	[0.009]
	1181	1311	1312	1175	4979
Minimum acceptable diet[8]	9.8%*	7.2%*	5.2%	3.7%	6.30%
	[0.013]	[0.008]	[0.007]	[0.006]	[0.005]
	1181	1311	1312	1175	4979

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) For children between 0-24 months of age (4) For children between 12-15 months of age (5) For children between 6-8 months of age (6) For children between 6-23 months of age (7) For children between 6-23 months of age (8)For children between 6-23 months of age

F.5.4 At midline : Item wise food consumption by children one day before the survey

At midline : Consumption of various food items by children aged 6-11 months one the day before survey					
Food items consumed	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Plain water	44.9%	45.7%**	54.9%	58.5%	45.5%
	[0.023]	[0.030]	[0.030]	[0.032]	[0.023]
	439	451	426	401	890

At midline : Consumption of various food items by children aged 6-11 months one the day before survey					
Food items consumed	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Juice (Fruit juice)/juice drink	0.0%	0.2%	0.0%*	1.1%	0.1%
	[0.000]	[0.002]	[0.000]	[0.006]	[0.002]
	439	451	426	401	890
Clear broth (dal water, rice water, etc.)	1.2%	1.5%*	0.4%	1.1%	1.5%
	[0.005]	[0.006]	[0.003]	[0.005]	[0.004]
	439	451	426	401	890
Milk (tinned, powdered, or fresh animal milk – but not including breast milk)	13.5%	10.1%	7.8%	8.4%	11.0%
	[0.015]	[0.013]	[0.013]	[0.016]	[0.011]
	439	451	426	401	890
Thin porridge	0.0%	0.0%	0.3%	0.2%	0.0%
	[0.000]	[0.000]	[0.002]	[0.002]	[0.000]
	439	451	426	401	890
Milk with Horlicks/Bournvita/Complan etc.	0.2%*	1.3%	0.8%	0.2%	1.1%
	[0.002]	[0.006]	[0.004]	[0.002]	[0.005]
	439	451	426	401	890
Commercial baby food/formula, such as Lactogen, Cerealac, Nestum, Champion, etc.	1.2%	1.5%	0.7%	0.5%	1.4%
	[0.005]	[0.006]	[0.004]	[0.004]	[0.005]
	439	451	426	401	890
Tea, coffee, sugar water, coke, sodas or fizzy drinks like Thumbs Up, Limca and Frooti	1.5%	2.1%	0.8%	1.9%	1.9%
	[0.007]	[0.007]	[0.006]	[0.006]	[0.006]
	439	451	426	401	890
Any other liquids	0.2%	0.2%*	1.1%	2.2%	0.2%
	[0.002]	[0.002]	[0.005]	[0.009]	[0.001]
	439	451	426	401	890
Yogurt	0.0%	0.0%	0.0%	0.0%	0.0%

At midline : Consumption of various food items by children aged 6-11 months one the day before survey					
Food items consumed	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	439	451	426	401	890
Rice, porridge, roti, bread, bun, etc. and any other food made from grain, millet, wheat, maize, barley, etc.	22.9%	22.2%	18.1%	15.6%	22.4%
	[0.022]	[0.021]	[0.021]	[0.018]	[0.017]
	439	451	426	401	890
Pumpkin, carrots, sweet potatoes that are yellow or orange on the inside	0.2%**	1.3%**	0.0%	0.2%	1.0%
	[0.002]	[0.005]	[0.000]	[0.002]	[0.004]
	439	451	426	401	890
White potatoes, white yams, any other foods made from roots	5.7%	5.6%**	2.6%	3.4%	5.6%
	[0.017]	[0.010]	[0.008]	[0.010]	[0.009]
	439	451	426	401	890
Dark green, leafy vegetables like spinach, saag, amaranth leaves, mustard leaves, methi	0.4%	0.9%	0.6%	0.0%	0.8%
	[0.003]	[0.004]	[0.005]	[0.000]	[0.003]
	439	451	426	401	890
Ripe papaya, mangoes, or apricot	0.0%	0.0%	0.0%	0.0%	0.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	439	451	426	401	890
Other fruits or vegetables (e.g. banana, apple, guava, orange, tomato)	2.7%	0.9%	0.6%	0.7%	1.4%
	[0.007]	[0.005]	[0.004]	[0.004]	[0.004]
	439	451	426	401	890
Liver, heart, kidneys, lungs or other organ meats	0.0%	0.0%	0.0%	0.0%	0.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	439	451	426	401	890
Meats such as pork, buffalo, lamb, or goat	0.0%	0.0%	0.3%	0.0%	0.0%
	[0.000]	[0.000]	[0.003]	[0.000]	[0.000]

At midline : Consumption of various food items by children aged 6-11 months one the day before survey					
Food items consumed	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	439	451	426	401	890
Chicken, duck, pigeon or other poultry	0.0%	0.2%	0.0%	0.0%	0.2%
	[0.000]	[0.002]	[0.000]	[0.000]	[0.002]
	439	451	426	401	890
Eggs	1.0%	0.6%	0.0%	0.5%	0.7%
	[0.005]	[0.004]	[0.000]	[0.003]	[0.003]
	439	451	426	401	890
Fresh or dried fish or shellfish	0.2%	0.4%	0.0%	0.3%	0.4%
	[0.002]	[0.004]	[0.000]	[0.003]	[0.003]
	439	451	426	401	890
Beans, peas, lentils, or nuts, germinated (ankuri) gram (chane)/ moong, matar	6.5%	6.4%**	2.4%	3.5%	6.4%
	[0.017]	[0.013]	[0.008]	[0.008]	[0.011]
	439	451	426	401	890
Cheese and other milk items except yogurt (paneer, khuwa etc.)	0.0%	0.2%	0.0%	0.0%	0.1%
	[0.000]	[0.002]	[0.000]	[0.000]	[0.001]
	439	451	426	401	890
Nuts and seeds, such as peanuts, cashews, walnuts	0.0%	0.0%	0.0%	0.7%	0.0%
	[0.000]	[0.000]	[0.000]	[0.005]	[0.000]
	439	451	426	401	890
Fat (oil, butter, ghee)	5.1%	4.8%	4.3%***	0.9%	4.9%
	[0.014]	[0.010]	[0.011]	[0.004]	[0.008]
	439	451	426	401	890
Instant noodles (Maggi etc.)	0.0%	0.0%	0.0%	0.0%	0.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	439	451	426	401	890

At midline : Consumption of various food items by children aged 6-11 months one the day before survey					
Food items consumed	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Snack foods, such as biscuits, chips or chanachur, candies, chocolates, or other sweets, bhunja, kurkure etc.	19.4%	18.8%	18.6%	17.4%	18.9%
	[0.023]	[0.025]	[0.021]	[0.020]	[0.020]
	439	451	426	401	890
Breast milk	50.5%	47.8%	44.0%	39.6%	48.5%
	[0.027]	[0.033]	[0.029]	[0.031]	[0.026]
	439	451	426	401	890

Source: BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

Annexe G Impact of the Conditions

G.1 Uptake of services

G.1.1 DID: Conditions related to the uptake of services

DID: Indicators related to conditions on the uptake of services (For all respondents who have at least one child below the age of 1 year)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
VHSND attendance			
Women who attended the VHSND at least once during their last pregnancy	0.0388	0.284***	-0.0537
	(0.0572)	(0.0661)	(0.0659)
Children who have attended the VHSND at least once	0.0351	0.379***	-0.0725
	(0.0578)	(0.0609)	(0.0555)
Weight monitoring during pregnancy			
Women who had their weight checked at least once during their last pregnancy, if they had received at least one antenatal check-up	-0.0770	0.248***	-0.00563
	(0.0641)	(0.0629)	(0.0671)
Child growth monitoring			
Children whose weight has been checked at least once since birth	-0.112**	0.355***	-0.128***
	(0.0553)	(0.0435)	(0.0429)
IFA Supplementation			
Women who received at least 30 IFA tablets during their last pregnancy	0.130***	0.0486	-0.163***
	(0.0468)	(0.0494)	(0.0480)
Child birth registration			
Children whose birth was registered	0.0584	-0.0143	-0.138***
	(0.0442)	(0.0448)	(0.0469)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.1.2 ML vs BL: Conditions related to the uptake of services

ML vs BL: Indicators related to conditions on the uptake of services (For all respondents who have at least one child below the age of 1 year)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
VHSND attendance										
Women who attended the VHSND at least once during their last pregnancy	29.2%	46.7%***	35.6%	49%***	45.7%	29.6%***	32.5%	21.8%***	37.5%	38.9%
	[0.032]	[0.036]	[0.027]	[0.033]	[0.033]	[0.034]	[0.025]	[0.023]	[0.016]	[0.019]
	600	859	657	830	631	769	586	697	2474	3155
Children who have attended the VHSND at least once	43.9%	48.0%	52.9%	53.3%	65.9%	29.4%***	54.9%	23.8%***	56.3%	41.2%***
	[0.034]	[0.036]	[0.035]	[0.027]	[0.032]	[0.027]	[0.029]	[0.023]	[0.019]	[0.018]
	630	887	679	882	666	797	602	727	2577	3293
Weight monitoring during pregnancy										
Women who had their weight checked at least once during their last pregnancy, if they had received at least one antenatal check-up	60.1%	69.9%*	65.0%	82.2%***	75.3%	67.3%	64.5%	55.2%*	67.2%	72.7%**
	[0.032]	[0.031]	[0.040]	[0.022]	[0.033]	[0.028]	[0.043]	[0.036]	[0.022]	[0.016]
	341	729	323	721	285	584	245	480	1194	2514
Child growth monitoring										
Children whose weight has been checked at least once since birth	40.2%	61.6%***	33.9%	65.5%***	41.0%	39.0%	24.1%	33.3%***	35.2%	52.4%***
	[0.027]	[0.032]	[0.022]	[0.028]	[0.027]	[0.028]	[0.027]	[0.027]	[0.014]	[0.019]
	630	887	679	882	666	797	602	727	2577	3293
IFA Supplementation										
Women who received at least 30 IFA tablets during their last pregnancy	40.1%	86.8%***	51.6%	85.6%***	52.3%	82%***	39.6%	84.1%***	48.5%	84.5%***
	[0.025]	[0.014]	[0.029]	[0.014]	[0.028]	[0.016]	[0.029]	[0.016]	[0.016]	[0.008]
	600	859	657	830	631	769	586	697	2474	3155
Child birth registration										
Children whose birth was registered	57.6%	68.9%***	67.6%	71.8%	59.9%	66.9%**	45.5%	66%***	60.4%	69.1%***
	[0.022]	[0.022]	[0.025]	[0.025]	[0.027]	[0.024]	[0.031]	[0.024]	[0.015]	[0.013]
	624	877	676	870	664	789	600	719	2564	3255

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

G.1.3 At midline: Conditions related to the uptake of services

At midline: Indicators related to conditions on the uptake of services					
	Hard conditions	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
VHSND attendance					
Women who attended the VHSND at least once during their last pregnancy	46.7%	49.0%***	29.6%*	21.8%	38.9%
	[0.036]	[0.033]	[0.034]	[0.023]	[0.019]
	859	830	769	697	3155
Children who have attended the VHSND at least once	48.0%	53.3%***	29.4%	23.8%	41.2%
	[0.036]	[0.027]	[0.027]	[0.023]	[0.018]
	887	882	797	727	3293
Weight monitoring during pregnancy					
Women who had their weight checked at least once during their last pregnancy, if they had received at least one antenatal check-up	69.9%***	82.2%***	67.3%***	55.2%	72.7%
	[0.031]	[0.022]	[0.028]	[0.036]	[0.016]
	729	721	584	480	2514
Women who had been told that they weighed less, when their weight was measured during pregnancy	36.7%	41.1%	43.2%***	31.5%	40.2%
	[2.906]	[1.937]	[2.678]	[3.000]	[1.636]
	547	638	448.0%	279.0%	1185
Women who reported that they changed their behaviour when they were told they weighed less	80.5%	76.8%	70.4%	77.9%	77.5%
	[3.078]	[2.792]	[3.912]	[5.410]	[2.315]
	201	269	192.0%	86.0%	470
Main ways in which women changed their behaviour after they were told they weighed less:					
Started eating more nutritious food	73.7%	66.0%	58.1%	61.6%	67.6%
	[0.032]	[0.044]	[0.047]	[0.059]	[0.035]
	161	206	13500.0%	6700.0%	367
Started eating a greater quantity of food	47.7%	55.8%	65.6%***	43.5%	54.1%
	[0.050]	[0.039]	[0.055]	[0.055]	[0.033]
	161	206	13500.0%	6700.0%	367

At midline: Indicators related to conditions on the uptake of services					
	Hard conditions	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Started drinking milk	46.6%	43.4%	35.5%	36.5%	44.1%
	[0.035]	[0.044]	[0.060]	[0.059]	[0.035]
	161	206	13500.0%	6700.0%	367
Started taking medicines/ supplements (e.g. IFA tablets)	26.4%	22.1%**	33.1%	38.8%	23.0%
	[0.040]	[0.033]	[0.044]	[0.068]	[0.028]
	161	206	13500.0%	6700.0%	367
Child growth monitoring					
Children whose weight has been checked at least once since birth	61.6%	65.5%***	39.0%	33.3%	52.4%
	[0.032]	[0.028]	[0.028]	[0.027]	[0.019]
	887	882	797	727	3293
IFA Supplementation					
Women who received at least 30 IFA tablets during their last pregnancy	86.8%	85.6%	82.0%	84.1%	84.5%
	[0.014]	[0.014]	[0.015]	[0.016]	[0.008]
	859	830	769	697	3155
Child birth registration					
Children whose birth was registered	68.9%	71.8%	66.9%	66.0%	69.1%
	[0.022]	[0.025]	[0.023]	[0.023]	[0.013]
	877	870	789	719	3255
Weighing of child at birth					
Children whose weight was measured at birth	62.5%***	75.1%***	64.5%***	49.8%	66.5%
	[0.030]	[0.028]	[0.027]	[0.029]	[0.017]
	869	873	794	709	3245

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3)

G.1.4 At midline: Average uptake of services

At midline : Average uptake of services					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
VHSND attendance					
Average number of times that women attended the VHSND at during their last pregnancy	2.51	2.807***	1.815***	1.3	2.35
	[0.139]	[0.152]	[0.122]	[0.107]	[0.092]
	499	485	317	251	1552
Average number of times weight was checked during last pregnancy	2.95	2.964***	2.5	2.32	2.78
	[0.133]	[0.112]	[0.118]	[0.193]	[0.072]
	539	629	435	270	1873

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

G.1.5 At midline: AWW stock of IFA tablets

At midline: AWW stock of IFA tablets					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
AWWs who had a stock of IFA tablets	9.8%	16.7%	9.4%	19.2%	14.0%
	[0.042]	[0.051]	[0.040]	[0.055]	[0.026]
	51	54	53	52	210

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

G.2 Uptake of nutrition sensitive behaviour

G.2.1 DID: Correct treatment of diarrhoea – Awareness and practice

DID: Correct treatment of diarrhoea -- awareness and practice (For all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Correct treatment of diarrhoea			
Women aware that the treatment for diarrhoea is:			
ORS and Zinc	-0.0253	-0.0235	-0.0166
	(0.0329)	(0.0306)	(0.0241)
ORS	-0.0514	0.00811	-0.0182
	(0.0369)	(0.0298)	(0.0279)
Children who received ORS treatment for diarrhoea[3]	-0.105	0.0372	-0.0356
	(0.101)	(0.0891)	(0.106)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.2.2 ML vs BL: Correct treatment of diarrhoea – Awareness and practice

ML vs BL: Diarrhoea treatment and exclusive breastfeeding (for all children who are below 1 year of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Correct treatment of diarrhoea										
Women aware that the treatment for diarrhoea is:										
ORS and Zinc	14.7%	3%***	13.8%	4.3%***	8.9%	2.2%***	6.7%	0.6%***	11.2%	2.9%***
	[0.021]	[0.010]	[0.020]	[0.012]	[0.017]	[0.007]	[0.014]	[0.003]	[0.011]	[0.005]
	599	859	657	830	631	769	586	697	2473	3155

ML vs BL: Diarrhoea treatment and exclusive breastfeeding (for all children who are below 1 year of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
ORS	14.8%	13.9%	12.4%	15.8%	7.4%	9.8%	3.6%	7.3%**	9.7%	12.5%**
	[0.021]	[0.016]	[0.020]	[0.021]	[0.015]	[0.015]	[0.010]	[0.015]	[0.010]	[0.011]
	599	859	657	830	631	769	586	697	2473	3155
Children who received ORS treatment for diarrhoea[3]	47.6%	34.9%	36.9%	33.7%	30.2%	24.7%	28.2%	29.5%	35.4%	30.3%
	[0.060]	[0.050]	[0.074]	[0.036]	[0.059]	[0.033]	[0.077]	[0.040]	[0.041]	[0.021]
	75	166	78	211	60	212	41	180	254	769

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The sample size for this indicator is those children whose latest illness was diarrhoea.

G.2.3 At midline: Correct treatment of diarrhoea – Awareness and practice

At midline: Correct treatment of diarrhoea – awareness and practice (For all respondents who have at least one child below 1 year of age)					
	Hard conditions	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Correct treatment of diarrhoea					
Women aware that the treatment for diarrhoea is:					
ORS and Zinc	3.0%	4.3%	2.2%**	0.6%	2.9%
	[0.010]	[0.012]	[0.007]	[0.003]	[0.005]
	859	830	769	697	3155
ORS	13.9%	15.8%**	9.8%	7.3%	12.5%
	[0.016]	[0.021]	[0.014]	[0.015]	[0.011]
	859	830	769	697	3155
Children who received ORS treatment for diarrhoea[3]	34.9%	34.9%*	24.7%	29.5%	30.3%
	[0.049]	[0.049]	[0.032]	[0.040]	[0.021]
	166	166	212	180	769

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

G.2.4 DID: Exclusive breastfeeding

DID: Exclusive breastfeeding under 6 months			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Exclusive breastfeeding under 6 months[3] *(Infants 0–5 months of age who received only breast milk during the previous day)*	0.0460	-0.0423	0.107
	(0.0658)	(0.0672)	(0.0692)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) This indicator was calculated according to the WHO IYCF guidelines. (4) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.2.5 ML vs BL: Exclusive breastfeeding

ML vs BL: Exclusive breastfeeding (for all children who are below 1 year of age)

Outcome/ Indicator	Hard conditions		Soft conditions		Only Technology		Pure Control		Overall	
	BL	ML	BL	ML	BL	ML	BL	ML	BL	ML
Exclusive breastfeeding under 6 months[3] *(Infants 0–5 months of age who received only breast milk during the previous day)*	38.2%	35.7%	39.7%	34.4%	34.3%	33.7%	43.6%	29.6%***	38.5%	33.8%*
	[0.036]	[0.026]	[0.038]	[0.033]	[0.034]	[0.027]	[0.039]	[0.038]	[0.020]	[0.018]
	210	380	219	360	222	298	197	270	848	1308
Children who were exclusively breastfed for the first 6 months (if child is 6 months old or older)[4]	58.40%	17.4%***	62.80%	15.4%***	59.30%	14.9%***	60.50%	14.6%***	60.80%	15.4%***
	[0.037]	[0.023]	[0.030]	[0.017]	[0.035]	[0.020]	[0.036]	[0.021]	[0.018]	[0.010]
	420	507	460	522	444	499	405	457	1729	1985

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) This indicator was calculated according to the WHO IYCF guidelines (4) This EBF indicator is self-reported by the beneficiaries, and therefore is based on the beneficiaries' own understanding and interpretation of the concept of EBF.

G.2.6 At midline: Exclusive breastfeeding

At midline : Exclusive breastfeeding

Outcome/ Indicator	Hard conditions	Soft conditions	Only technology	Pure control	Overall
Exclusive breastfeeding under 6 months[3]	35.70%	34.40%	33.70%	29.60%	33.80%
(Infants 0–5 months of age who received only breast milk during the previous day)	[0.026]	[0.033]	[0.027]	[0.038]	[0.018]
	380	360	298	270	1308

At midline : Exclusive breastfeeding					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Children who were exclusively breastfed for the first 6 months (if child is 6 months old or older)[4]	17.4%	15.4%	14.9%	14.6%	15.9%
	[0.023]	[0.017]	[0.020]	[0.021]	[0.014]
	507	522	499	457	1029

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) This indicator was calculated according to the WHO IYCF guidelines (4) This EBF indicator is self-reported by the beneficiaries, and therefore is based on the beneficiaries' own understanding and interpretation of the concept of EBF.

G.3 Equity considerations

G.3.1 DID: Uptake of services – for SC households

DID : Impact of conditions for SC households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	0.160**	0.100	0.0143
	(0.0739)	(0.0882)	(0.0901)
Women who were weighed at least once during their last pregnancy	-0.211***	0.372***	0.00131
	(0.0792)	(0.0859)	(0.108)
Percent of children who attended at least one VHSND	0.171**	0.302***	-0.115
	(0.0792)	(0.0778)	(0.0733)
Percent of children who were weighed at least once	-0.146*	0.312***	-0.173***
	(0.0845)	(0.0571)	(0.0587)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.154***	0.0637	-0.197***
	(0.0570)	(0.0590)	(0.0591)

DID : Impact of conditions for SC households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
Percent of children whose birth was registered	0.154**	-0.0985	-0.133**
	(0.0636)	(0.0607)	(0.0611)
Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.			

G.3.2 DID: Uptake of services – for non-SC households

DID : Impact of conditions for non-SC households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	-0.0527	0.446***	-0.0965
	(0.0670)	(0.0706)	(0.0708)
Women who were weighed at least once during their last pregnancy	0.0291	0.127*	0.00284
	(0.0727)	(0.0729)	(0.0758)
Percent of children who attended at least one VHSND	-0.0643	0.455***	-0.0306
	(0.0655)	(0.0639)	(0.0592)
Percent of children who were weighed at least once	-0.0692	0.373***	-0.0998
	(0.0586)	(0.0649)	(0.0670)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.145***	0.0149	-0.108*
	(0.0549)	(0.0618)	(0.0613)

DID : Impact of conditions for non-SC households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
Percent of children whose birth was registered	0.0324	-0.00432	-0.113*
	(0.0571)	(0.0604)	(0.0656)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.3.3 DID: Uptake of services – for the poorest 40% of households

DID : Impact of conditions for the poorest 40% off households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	0.0981	0.214***	-0.0635
	(0.0757)	(0.0724)	(0.0696)
Women who were weighed at least once during their last pregnancy	-0.175*	0.361***	-0.0706
	(0.0943)	(0.101)	(0.102)
Percent of children who attended at least one VHSND	0.111	0.356***	-0.134*
	(0.0900)	(0.0858)	(0.0692)
Percent of children who were weighed at least once	-0.0996	0.312***	-0.231***
	(0.0744)	(0.0621)	(0.0594)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.0880	0.101	-0.229***
	(0.0638)	(0.0730)	(0.0661)

DID : Impact of conditions for the poorest 40% off households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
Percent of children whose birth was registered	0.268***	-0.199***	-0.149**
	(0.0651)	(0.0732)	(0.0653)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.3.4 DID: Uptake of services – for the richest 40% of households

DID : Impact of conditions for the richest 40% off households (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	0.0423	0.323***	-0.0615
	(0.0764)	(0.0811)	(0.0854)
Women who were weighed at least once during their last pregnancy	-0.0324	0.200***	-0.0392
	(0.0773)	(0.0753)	(0.0824)
Percent of children who attended at least one VHSND	0.0339	0.377***	-0.0500
	(0.0711)	(0.0684)	(0.0715)
Percent of children who were weighed at least once	-0.110	0.349***	-0.0561
	(0.0699)	(0.0672)	(0.0734)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.134**	-0.00754	-0.0898
	(0.0647)	(0.0646)	(0.0712)
Percent of children whose birth was registered	-0.0232	0.0403	-0.115
	(0.0586)	(0.0634)	(0.0742)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.3.5 DID: Uptake of services – for households with only female children

DID : Impact of conditions for the households with only female children (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	0.129*	0.316***	-0.114
	(0.0673)	(0.0796)	(0.0797)
Women who were weighed at least once during their last pregnancy	-0.0834	0.223***	0.0286
	(0.0762)	(0.0787)	(0.0855)
Percent of children who attended at least one VHSND	0.116	0.388***	-0.132*
	(0.0724)	(0.0743)	(0.0694)
Percent of children who were weighed at least once	-0.120*	0.369***	-0.155**
	(0.0646)	(0.0634)	(0.0597)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.184***	0.0288	-0.155***
	(0.0537)	(0.0547)	(0.0542)
Percent of children whose birth was registered	0.122**	-0.0296	-0.130**
	(0.0496)	(0.0463)	(0.0503)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

G.3.6 DID: Uptake of services – for households with only male children

DID : Impact of conditions for the households with only male children (for all respondents who have at least one child below 1 year of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 2**
SOFT CONDITIONS			
Women who attended the VHSND at least once during their last pregnancy	-0.0394	0.241***	0.0378
	(0.0720)	(0.0759)	(0.0771)
Women who were weighed at least once during their last pregnancy	-0.0601	0.255***	-0.0458
	(0.0839)	(0.0759)	(0.0773)
Percent of children who attended at least one VHSND	-0.0335	0.367***	-0.0343
	(0.0683)	(0.0658)	(0.0627)
Percent of children who were weighed at least once	-0.109	0.302***	-0.140**
	(0.0726)	(0.0571)	(0.0582)
HARD CONDITIONS			
Percent of women who received at least 30 IFA tablets during their last pregnancy	0.0819	0.0798	-0.172***
	(0.0567)	(0.0588)	(0.0578)
Percent of children whose birth was registered	0.0414	-0.0501	-0.146**
	(0.0623)	(0.0606)	(0.0652)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015). Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

Annexe H Empowerment

H.1 Women's mobility

H.1.1 DID: Women's mobility

DID: Women's mobility			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Percent of women who are allowed to go to the market, alone	-0.000525	0.0479	0.0151
	(0.0498)	(0.0438)	(0.0502)
Percent of women who are allowed to go to the local health facility, alone	0.00440	0.0625	-0.00654
	(0.0514)	(0.0439)	(0.0502)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

H.1.2 ML vs BL: Women's mobility

ML vs BL : Indicators related to women mobility										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only technology**		**Pure control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Percent of women who are allowed to go to the market, alone or accompanied	42.3%	45.4%	44.3%	45.9%	55.2%	47.8%**	47.1%	41.5%	47.9%	45.7%
	[0.029]	[0.028]	[0.024]	[0.025]	[0.027]	[0.024]	[0.030]	[0.024]	[0.015]	[0.013]
	600	859	657	830	631	769	586	697	2474	3155
Percent of women who are allowed to go to the local health facility, alone or accompanied	41.5%	44.9%	46.1%	47.0%	56.3%	47.4%***	45.4%	39.6%	48.6%	45.7%
	[0.029]	[0.027]	[0.028]	[0.024]	[0.027]	[0.024]	[0.031]	[0.023]	[0.016]	[0.013]

	600	859	657	830	631	769	586	697	2474	3155

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

Annexe I Social Accountability

I.1 VHSND provision

I.1.1 DID: Provision of services at the VHSND

DID: Anganwadi services - VHSND provision and availability of child weighing machine and ORS			
	Hard conditions vs. Soft conditions	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
Outcome/ Indicator	**Dif 1 - Dif 2**	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
VHSND provision			
Frequency of conducting VHSND			
Once a month	0.0551	-0.0178	0.117
	(0.0667)	(0.0500)	(0.0850)
ANM present during VHSND in the last 3 months			
ANM always attends VHSND (3 times in the last 3 months)	0.0928	0.115*	0.0432
	(0.0766)	(0.0637)	(0.0974)
ASHA present during VHSND in the last 3 months			
ASHA always attends VHSND (3 times in the last 3 months)	0.0525	0.0783	0.121
	(0.0884)	(0.0709)	(0.0998)
Stock & Equipment Availability			
Child weighing machine	-0.242**	0.216*	-0.185
	(0.0982)	(0.110)	(0.113)
ORS	-0.105	0.161	0.0167
	(0.120)	(0.119)	(0.111)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

I.1.2 ML vs BL: Provision of services at the VHSND

ML vs BL: Anganwadi services - VHSND provision and availability of child weighing machine and ORS										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
VHSND provision										
Frequency of conducting VHSND										
Once a month	82.7%	90.2%	96.2%	98.1%	92.5%	96.2%	88.7%	80.8%	91.8%	93.2%
	[0.053]	[0.042]	[0.027]	[0.019]	[0.037]	[0.026]	[0.044]	[0.055]	[0.019]	[0.016]
	52	51	52	54	53	53	53	52	210	210
Once every 2 months	7.7%	2.0%	1.9%	1.9%	1.9%	3.8%	3.8%	3.8%	3.0%	2.8%
	[0.037]	[0.020]	[0.019]	[0.019]	[0.019]	[0.026]	[0.026]	[0.027]	[0.012]	[0.012]
	52	51	52	54	53	53	53	52	210	210
Once every 3 months	1.9%	2.0%	0.0%	0.0%	0.0%	0.0%	0.0%	3.8%	0.2%	1.0%
	[0.019]	[0.020]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.027]	[0.003]	[0.006]
	52	51	52	54	53	53	53	52	210	210
Twice a year	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.9%	0.0%	0.4%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.019]	[0.000]	[0.004]
	52	51	52	54	53	53	53	52	210	210
Once a year	1.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.9%	0.2%	0.4%
	[0.019]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]	[0.019]	[0.003]	[0.004]
	52	51	52	54	53	53	53	52	210	210
Never	0.0%	0.0%	0.0%	0.0%	1.9%	0.0%	1.9%	0.0%	0.9%	0.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.019]	[0.000]	[0.019]	[0.000]	[0.007]	[0.000]
	52	51	52	54	53	53	53	52	210	210
ANM present during VHSND in the last 3 months										
ANM never attends VHSND (Never in the past 3 months)	5.8%	0%*	1.9%	1.9%	0.0%	0.0%	1.9%	5.8%	1.8%	1.8%
	[0.033]	[0.000]	[0.019]	[0.019]	[0.000]	[0.000]	[0.019]	[0.033]	[0.009]	[0.009]

ML vs BL: Anganwadi services - VHSND provision and availability of child weighing machine and ORS										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	52	51	52	54	53	53	53	52	210	210
ANM attends VHSND sometimes (1-2 in the last 3 months)	7.7%	3.9%	1.9%	1.9%	0.0%	13.2%***	5.7%	15.4%*	2.8%	8.2%**
	[0.037]	[0.027]	[0.019]	[0.019]	[0.000]	[0.047]	[0.032]	[0.050]	[0.011]	[0.019]
	52	51	52	54	53	53	53	52	210	210
ANM always attends VHSND (3 times in the last 3 months)	80.8%	90.2%	96.2%	96.3%	98.1%	86.8%**	86.8%	71.2%*	93.0%	87.7%*
	[0.055]	[0.042]	[0.027]	[0.026]	[0.019]	[0.047]	[0.047]	[0.063]	[0.017]	[0.023]
	52	51	52	54	53	53	53	52	210	210
ASHA present during VHSND in the last 3 months										
ASHA never attends VHSND (Never in the past 3 months)	13.5%	3.9%*	1.9%	5.6%	3.8%	1.9%	11.3%	25.0%	5.8%	7.9%
	[0.048]	[0.027]	[0.019]	[0.031]	[0.026]	[0.019]	[0.044]	[0.061]	[0.015]	[0.018]
	52	51	52	54	53	53	53	52	210	210
ASHA attends VHSND sometimes (1-2 in the last 3 months)	5.8%	5.9%	7.7%	0%**	1.9%	11.3%*	9.4%	9.6%	6.0%	6.1%
	[0.033]	[0.033]	[0.037]	[0.000]	[0.019]	[0.044]	[0.041]	[0.041]	[0.017]	[0.017]
	52	51	52	54	53	53	53	52	210	210
ASHA always attends VHSND (3 times in the last 3 months)	75.0%	84.3%	90.4%	94.4%	90.6%	86.8%	73.6%	57.7%*	85.2%	83.7%
	[0.061]	[0.051]	[0.041]	[0.031]	[0.041]	[0.047]	[0.061]	[0.069]	[0.025]	[0.025]
	52	51	52	54	53	53	53	52	210	210
Stock & Equipment Availability										
Child weighing machine	92.3%	76.5%**	73.1%	81.5%	79.2%	66.0%	73.6%	78.8%	77.6%	75.5%
	[0.037]	[0.060]	[0.062]	[0.053]	[0.056]	[0.066]	[0.061]	[0.057]	[0.031]	[0.032]
	52	51	52	54	53	53	53	52	210	210
ORS	35.3%	35.3%	17.3%	27.8%	28.3%	22.6%	18.9%	11.5%	23.3%	24.0%
	[0.068]	[0.068]	[0.053]	[0.062]	[0.062]	[0.058]	[0.054]	[0.045]	[0.031]	[0.032]
	51	51	52	54	53	53	53	52	209	210

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The above indicator was asked in the form of a 'True/False' question to the respondents, wherein different options were read out, and the respondent answered whether they thought them to be true or false.

I.1.3 At midline: Provision of services at the VHSND

At midline: Provision of services at the VHSND					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
VHSND provision					
Frequency of conducting VHSND					
Once a month	90.2%*	98.1%	96.2%**	80.8%	93.2%
	[0.042]	[0.018]	[0.026]	[0.055]	[0.016]
	51	54	53	52	210
Once every 2 months	2.0%	1.9%	3.8%	3.8%	2.8%
	[0.020]	[0.018]	[0.026]	[0.027]	[0.012]
	51	54	53	52	210
Once every 3 months	2.0%	0.0%	0.0%	3.8%	1.0%
	[0.020]	[0.000]	[0.000]	[0.027]	[0.006]
	51	54	53	52	210
Twice a year	0.0%	0.0%	0.0%	1.9%	0.4%
	[0.000]	[0.000]	[0.000]	[0.019]	[0.004]
	51	54	53	52	210
Once a year	0.0%	0.0%	0.0%	1.9%	0.4%
	[0.000]	[0.000]	[0.000]	[0.019]	[0.004]
	51	54	53	52	210
Never	0.0%	0.0%	0.0%	0.0%	0.0%
	[0.000]	[0.000]	[0.000]	[0.000]	[0.000]
	51	54	53	52	210
ANM present during VHSND in the last 3 months (The questions are different in the baseline and midline. The response codes given below are from the baseline but what follows in brackets is how we have interpreted it for the sake of this table.)					
	0.0%	1.9%	0.0%*	5.8%	1.8%

At midline: Provision of services at the VHSND					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
ANM never attends VHSND (Never in the past 3 months)	[0.000]	[0.018]	[0.000]	[0.032]	[0.009]
	51	54	53	52	210
ANM attends VHSND sometimes (1-2 in the last 3 months)	3.9%	1.9%**	13.2%	15.4%	8.2%
	[0.027]	[0.018]	[0.047]	[0.050]	[0.019]
	51	54	53	52	210
ANM always attends VHSND (3 times in the last 3 months)	90.2%	96.3%*	86.8%**	71.2%	87.7%
	[0.042]	[0.026]	[0.047]	[0.063]	[0.023]
	51	54	53	52	210
ASHA present during VHSND in the last 3 months (The questions are different in the baseline and midline. The response codes given below are from the baseline but what follows in brackets is how we have interpreted it for the sake of this table.)					
ASHA never attends VHSND (Never in the past 3 months)	3.9%	5.6%	1.9%***	25.0%	7.9%
	[0.027]	[0.031]	[0.019]	[0.060]	[0.018]
	51	54	53	52	210
ASHA attends VHSND sometimes (1-2 in the last 3 months)	5.9%*	0.0%**	11.3%	9.6%	6.1%
	[0.033]	[0.000]	[0.044]	[0.041]	[0.017]
	51	54	53	52	210
ASHA always attends VHSND (3 times in the last 3 months)	84.3%*	94.4%	86.8%***	57.7%	83.7%
	[0.051]	[0.031]	[0.047]	[0.069]	[0.025]
	51	54	53	52	210
Number of times VHSND conducted in the last 3 months	2.96***	2.72	2.76**	2.50	2.72
	[0.029]	[0.076]	[0.075]	[0.103]	[0.042]
	48	54	53	48	203
ANM present at the VHSND (number of times in the past 3 months)	2.88*	2.69	2.62*	2.29	2.62
	[0.064]	[0.082]	[0.097]	[0.139]	[0.052]
	48	54	53	48	203

At midline: Provision of services at the VHSND					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
ASHA present at the VHSND (number of times in the past 3 months)	2.69*	2.43	2.59***	1.75	2.39
	[0.111]	[0.104]	[0.105]	[0.179]	[0.065]
	48	54	53	48	203
member of the CMG present at the VHSND (number of times in the past 3 months)	2.57	2.27**	1.46	.	2.21
	[0.139]	[0.142]	[0.340]	.	[0.113]
	44	44	13	13	101
Stock & Equipment Availability					
Child weighing machine	76.5%	81.5%*	66.0%	78.8%	75.5%
	[0.060]	[0.053]	[0.065]	[0.057]	[0.032]
	51	54	53	52	210
Adult weighing machine	95.6%	89.6%	81.8%	93.3%	88.8%
	[0.031]	[0.044]	[0.058]	[0.037]	[0.026]
	45	48	44	45	182
ORS	35.3%	27.8%	22.6%	11.5%	24.0%
	[0.067]	[0.061]	[0.058]	[0.045]	[0.032]
	51	54	53	52	210
Stock of IFA tablets	9.8%	16.7%	9.4%	19.2%	14.0%
	[0.042]	[0.051]	[0.040]	[0.055]	[0.026]
	51	54	53	52	210

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

I.2 AWW knowledge of conditions

I.2.1 At midline: Conditions recalled by the AWW

At midline: Conditions recalled by AWW			
Outcome/ Indicator	**Hard vs Soft conditions**		**Overall**
	Hard conditions	**Soft conditions**	
AWWs who could recall the following conditions			
Attend VHSND every month	89.8%	88.5%	88.8%
	[0.043]	[0.045]	[0.035]
	49	52	101
Weight gain monitoring of woman during pregnancy	69.4%	80.8%	77.8%
	[0.066]	[0.055]	[0.044]
	49	52	101
Weight / growth monitoring of children	44.9%	48.1%	47.3%
	[0.071]	[0.070]	[0.055]
	49	52	101
Treatment of child with ORS/ zinc when he/ she contracts diarrhoea	51.0%	48.1%	48.8%
	[0.072]	[0.070]	[0.055]
	49	52	101

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

Annexe J Anthropometric and biomedical outcomes

J.1 Rates of stunting, underweight and wasting among children

J.1.1 ML vs BL : Overall prevalence of moderately and severe stunted, underweight and wasted children

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Stunting										
Moderate	50.3%	45.9%*	52.9%	45.8%***	57.7%	43.9%***	60.6%	41.8%***	55.4%	44.6%***
	[0.020]	[0.019]	[0.019]	[0.017]	[0.017]	[0.017]	[0.021]	[0.021]	[0.010]	[0.010]
	1492	1447	1494	1535	1508	1475	1451	1328	5945	5785
Severe	26.2%	22.8%*	28.5%	21.2%***	32.9%	20.2%***	32.2%	20.3%***	30.2%	20.9%***
	[0.017]	[0.016]	[0.015]	[0.012]	[0.016]	[0.015]	[0.018]	[0.017]	[0.009]	[0.008]
	1492	1447	1494	1535	1508	1475	1451	1328	5945	5785
Underweight										
Moderate	51.2%	47.5%*	54.6%	46.2%***	53.0%	49.2%*	55.0%	48.7%***	53.8%	47.7%***
	[0.018]	[0.016]	[0.019]	[0.014]	[0.015]	[0.018]	[0.021]	[0.019]	[0.010]	[0.009]
	1491	1447	1494	1540	1508	1479	1451	1329	5944	5795
Severe	23.3%	21.0%	25.1%	20.7%**	22.9%	21.7%	24.5%	21.7%	24.1%	21.2%***
	[0.016]	[0.013]	[0.017]	[0.011]	[0.015]	[0.014]	[0.018]	[0.015]	[0.009]	[0.007]
	1491	1447	1494	1540	1508	1479	1451	1329	5944	5795
Wasting										
Moderate	29.2%	27.9%	28.3%	28.3%	25.7%	31.3%***	23.6%	31.1%***	26.8%	29.6%**
	[0.014]	[0.015]	[0.018]	[0.014]	[0.015]	[0.015]	[0.014]	[0.015]	[0.009]	[0.008]
	1491	1446	1491	1534	1507	1472	1451	1328	5940	5780
Severe	10.8%	10.5%	9.4%	10.7%	9.8%	11.1%	7.5%	11.6%***	9.4%	10.9%**
	[0.011]	[0.010]	[0.012]	[0.008]	[0.011]	[0.010]	[0.008]	[0.011]	[0.006]	[0.005]
	1491	1446	1491	1534	1507	1472	1451	1328	5940	5780

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

J.1.2 ML vs BL : Prevalence of moderately stunted, underweight and wasted children by age groups

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)

Outcome/ Indicator	Hard conditions		Soft conditions		Only Technology		Pure Control		Overall	
	BL	ML	BL	ML	BL	ML	BL	ML	BL	ML
Stunting										
All	50.3%	45.9%*	52.9%	45.8%***	57.7%	43.9%***	60.6%	41.8%***	55.4%	44.6%***
	[0.020]	[0.019]	[0.019]	[0.017]	[0.017]	[0.017]	[0.021]	[0.021]	[0.010]	[0.010]
	1492	1447	1494	1535	1508	1475	1451	1328	5945	5785
By age:										
0-5 months	21.3%	22.4%	21.1%	23.6%	28.5%	19%*	25.2%	17.8%*	24.2%	21.4%
	[0.028]	[0.028]	[0.031]	[0.028]	[0.038]	[0.025]	[0.039]	[0.023]	[0.019]	[0.015]
	171	347	202	325	205	269	187	235	765	1176
6-11 months	44.9%	39.7%	46.3%	42.1%	52.1%	35.5%***	55.3%	39.1%***	49.5%	39.3%***
	[0.033]	[0.027]	[0.027]	[0.024]	[0.023]	[0.023]	[0.032]	[0.027]	[0.015]	[0.014]
	384	473	441	487	426	454	393	430	1644	1844
12-17 months	58.7%	61.9%	61.2%	53.6%**	65.1%	53.9%**	69.0%	48.2%***	63.3%	53.7%***
	[0.031]	[0.034]	[0.027]	[0.022]	[0.033]	[0.028]	[0.030]	[0.032]	[0.016]	[0.014]
	379	330	352	383	322	403	333	363	1386	1479
18-24 months	57.1%	66.2%**	65.3%	64.1%	68.5%	62.4%*	71.3%	56.4%***	66.4%	62.6%*
	[0.024]	[0.033]	[0.027]	[0.033]	[0.022]	[0.028]	[0.022]	[0.037]	[0.014]	[0.018]
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	52.3%	47%*	54.8%	49.1%*	59.3%	45.9%***	62.5%	42.2%***	57.2%	46.7%***
	[0.022]	[0.022]	[0.024]	[0.023]	[0.022]	[0.019]	[0.024]	[0.024]	[0.013]	[0.012]
	776	713	750	779	737	806	719	683	2982	2981

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Female	48.1%	44.8%	51.0%	42.5%***	56.2%	41.6%***	58.8%	41.4%***	53.7%	42.4%***
	[0.025]	[0.024]	[0.024]	[0.022]	[0.022]	[0.023]	[0.026]	[0.027]	[0.013]	[0.013]
	716	734	744	756	771	669	732	645	2963	2804
Underweight										
All	51.2%	47.5%*	54.6%	46.2%***	53.0%	49.2%*	55.0%	48.7%***	53.8%	47.7%***
	[0.018]	[0.016]	[0.019]	[0.014]	[0.015]	[0.018]	[0.021]	[0.019]	[0.010]	[0.009]
	1491	1447	1494	1540	1508	1479	1451	1329	5944	5795
By age:										
0-5 months	32.9%	25.4%*	32.6%	21.1%***	34.8%	26.5%*	28.1%	28.1%	32.5%	24.2%***
	[0.036]	[0.031]	[0.031]	[0.027]	[0.040]	[0.025]	[0.038]	[0.032]	[0.019]	[0.015]
	171	347	202	329	205	271	187	236	765	1183
6-11 months	53.4%	46.5%*	55.1%	52.2%	56.0%	50.5%	58.9%	51.9%**	55.8%	50.9%**
	[0.031]	[0.027]	[0.028]	[0.023]	[0.026]	[0.026]	[0.029]	[0.024]	[0.015]	[0.013]
	384	473	441	488	426	454	393	430	1644	1845
12-17 months	56.6%	59.2%	61.5%	51.4%***	59.2%	54.5%	59.2%	51.6%*	59.8%	53.3%***
	[0.025]	[0.026]	[0.030]	[0.026]	[0.026]	[0.030]	[0.037]	[0.031]	[0.016]	[0.015]
	378	330	352	383	322	405	333	363	1385	1481
18-24 months	51.5%	62.8%***	58.1%	56.7%	53.7%	58.7%	58.9%	56.4%	56.0%	58.0%
	[0.026]	[0.032]	[0.030]	[0.031]	[0.023]	[0.029]	[0.022]	[0.031]	[0.014]	[0.017]
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	51.6%	49.2%	55.0%	46.9%***	54.8%	49.1%*	57.6%	49.5%***	55.0%	48.3%***
	[0.023]	[0.021]	[0.021]	[0.021]	[0.024]	[0.021]	[0.025]	[0.026]	[0.012]	[0.012]
	775	713	750	781	737	808	719	683	2981	2985
Female	50.7%	46.0%	54.2%	45.4%***	51.2%	49.3%	52.5%	47.7%	52.6%	47%***

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	[0.022]	[0.021]	[0.025]	[0.017]	[0.021]	[0.023]	[0.025]	[0.024]	[0.013]	[0.011]
	716	734	744	759	771	671	732	646	2963	2810
Wasting										
All	29.2%	27.9%	28.3%	28.3%	25.7%	31.3%***	23.6%	31.1%***	26.8%	29.6%**
	[0.014]	[0.015]	[0.018]	[0.014]	[0.015]	[0.015]	[0.014]	[0.015]	[0.009]	[0.008]
	1491	1446	1491	1534	1507	1472	1451	1328	5940	5780
By age:										
0-5 months	29.6%	22.3%	19.1%	15.1%	33.0%	19.1%***	23.1%	21.4%	25.4%	18.1%***
	[0.035]	[0.029]	[0.033]	[0.022]	[0.035]	[0.030]	[0.028]	[0.031]	[0.019]	[0.014]
	171	346	199	324	204	266	187	235	761	1171
6-11 months	33.1%	26.8%	32.1%	30.8%	30.9%	34.1%	28.8%	34.0%	31.3%	31.7%
	[0.030]	[0.023]	[0.026]	[0.023]	[0.028]	[0.024]	[0.027]	[0.026]	[0.015]	[0.013]
	384	473	441	487	426	454	393	430	1644	1844
12-17 months	34.7%	34.8%	36.0%	34.0%	26.5%	35.4%**	24.4%	33.4%***	31.1%	34.4%
	[0.024]	[0.024]	[0.031]	[0.024]	[0.030]	[0.025]	[0.026]	[0.024]	[0.016]	[0.013]
	378	330	352	383	322	403	333	363	1385	1479
18-24 months	22.7%	28.6%*	23.2%	31.4%***	18.5%	32%***	19.6%	31.7%***	21.0%	31.4%***
	[0.022]	[0.027]	[0.021]	[0.026]	[0.019]	[0.027]	[0.018]	[0.029]	[0.011]	[0.015]
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	29.3%	30.2%	29.5%	29.2%	27.5%	31.0%	24.7%	32.2%***	28.0%	30.4%
	[0.018]	[0.018]	[0.023]	[0.020]	[0.021]	[0.020]	[0.018]	[0.022]	[0.012]	[0.011]
	775	712	747	778	736	803	719	683	2977	2976
Female	29.1%	25.7%	27.2%	27.4%	23.9%	31.6%***	22.5%	30%***	25.5%	28.8%**
	[0.022]	[0.019]	[0.023]	[0.016]	[0.018]	[0.018]	[0.022]	[0.018]	[0.011]	[0.009]

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	Hard conditions		Soft conditions		Only Technology		Pure Control		Overall	
	BL	ML	BL	ML	BL	ML	BL	ML	BL	ML
	716	734	744	756	771	669	732	645	2963	2804

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The above indicator was asked in the form of a 'True/False' question to the respondents, wherein different options were read out, and the respondent answered whether they thought them to be true or false.

J.1.3 At midline: Prevalence of moderately stunted, underweight and wasted children by age groups

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	Hard conditions	Soft conditions	Only technology	Pure control	Overall
Stunting					
All	45.9%	45.8%	43.9%	41.8%	44.6%
	[0.019]	[0.016]	[0.017]	[0.021]	[0.010]
	1447	1535	1475	1328	5785
By age:					
0-5 months	22.4%	23.6%	19.0%	17.8%	21.4%
	[0.028]	[0.028]	[0.025]	[0.023]	[0.015]
	347	325	269	235	1176
6-11 months	39.7%	42.1%*	35.5%	39.1%	39.3%
	[0.026]	[0.024]	[0.023]	[0.027]	[0.014]
	473	487	454	430	1844
12-17 months	61.9%**	53.6%	53.9%	48.2%	53.7%
	[0.034]	[0.022]	[0.028]	[0.032]	[0.014]
	330	383	403	363	1479
18-24 months	66.2%	64.1%	62.4%	56.4%	62.6%
	[0.033]	[0.033]	[0.028]	[0.037]	[0.018]
	297	340	349	300	1286

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
By sex:					
Male	47.0%	49.1%	45.9%	42.2%	46.7%
	[0.022]	[0.023]	[0.018]	[0.024]	[0.012]
	713	779	806	683	2981
Female	44.8%	42.5%	41.6%	41.4%	42.4%
	[0.024]	[0.022]	[0.023]	[0.027]	[0.013]
	734	756	669	645	2804
Underweight					
All	47.5%	46.2%	49.2%	48.7%	47.7%
	[0.016]	[0.014]	[0.017]	[0.019]	[0.009]
	1447	1540	1479	1329	5795
By age:					
0-5 months	25.4%	21.1%	26.5%	28.1%	24.2%
	[0.031]	[0.027]	[0.025]	[0.031]	[0.015]
	347	329	271	236	1183
6-11 months	46.5%	52.2%	50.5%	51.9%	50.9%
	[0.027]	[0.023]	[0.026]	[0.024]	[0.013]
	473	488	454	430	1845
12-17 months	59.2%**	51.4%	54.5%	51.6%	53.3%
	[0.026]	[0.026]	[0.029]	[0.031]	[0.015]
	330	383	405	363	1481
18-24 months	62.8%	56.7%	58.7%	56.4%	58.0%
	[0.032]	[0.031]	[0.029]	[0.031]	[0.017]
	297	340	349	300	1286
By sex:					
Male	49.2%	46.9%	49.1%	49.5%	48.3%

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.021]	[0.021]	[0.021]	[0.026]	[0.012]
	713	781	808	683	2985
Female	46.0%	45.4%	49.3%	47.7%	47.0%
	[0.020]	[0.017]	[0.022]	[0.023]	[0.011]
	734	759	671	646	2810
Wasting					
All	27.9%	28.3%	31.3%	31.1%	29.6%
	[0.015]	[0.014]	[0.015]	[0.015]	[0.008]
	1446	1534	1472	1328	5780
By age:					
0-5 months	22.3%*	15.1%	19.1%	21.4%	18.1%
	[0.029]	[0.022]	[0.029]	[0.030]	[0.014]
	346	324	266	235	1171
6-11 months	26.8%	30.8%	34.1%	34.0%	31.7%
	[0.023]	[0.023]	[0.024]	[0.026]	[0.013]
	473	487	454	430	1844
12-17 months	34.8%	34.0%	35.4%	33.4%	34.4%
	[0.024]	[0.024]	[0.025]	[0.023]	[0.013]
	330	383	403	363	1479
18-24 months	28.6%	31.4%	32.0%	31.7%	31.4%
	[0.026]	[0.026]	[0.027]	[0.029]	[0.015]
	297	340	349	300	1286
By sex:					
Male	30.2%	29.2%	31.0%	32.2%	30.4%
	[0.018]	[0.020]	[0.020]	[0.022]	[0.011]
	712	778	803	683	2976

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Female	25.7%	27.4%*	31.6%	30.0%	28.8%
	[0.019]	[0.016]	[0.018]	[0.018]	[0.009]
	734	756	669	645	2804

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

J.1.4 ML vs BL : Prevalence of severely stunted, underweight and wasted children by age groups

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
Severe Stunting										
All	26.2%	22.8%*	28.5%	21.2%***	32.9%	20.2%***	32.2%	20.3%***	30.2%	20.9%***
	[0.017]	[0.016]	[0.015]	[0.012]	[0.016]	[0.015]	[0.018]	[0.017]	[0.009]	[0.008]
	1492	1447	1494	1535	1508	1475	1451	1328	5945	5785
By age:										
0-5 months	5.8%	8.6%	9.9%	8.2%	12.0%	6.5%	8.5%	6.3%	9.9%	7.5%
	[0.018]	[0.017]	[0.019]	[0.017]	[0.031]	[0.017]	[0.022]	[0.015]	[0.013]	[0.009]
	171	347	202	325	205	269	187	235	765	1176
6-11 months	19.3%	15.2%	20.2%	14.4%**	27.5%	13.2%***	25.1%	16.8%***	23.2%	14.5%***
	[0.023]	[0.019]	[0.020]	[0.020]	[0.023]	[0.019]	[0.026]	[0.025]	[0.012]	[0.011]
	384	473	441	487	426	454	393	430	1644	1844
12-17 months	33.5%	32.5%	34.8%	28.4%*	41.8%	26.8%***	33.6%	25.4%	36.4%	27.9%***
	[0.028]	[0.031]	[0.027]	[0.024]	[0.034]	[0.026]	[0.037]	[0.029]	[0.016]	[0.014]
	379	330	352	383	322	403	333	363	1386	1479

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
18-24 months	32.1%	41.4%**	38.8%	35.5%	39.5%	31.9%**	44.4%	29.6%***	39.2%	34.1%***
	[0.023]	[0.034]	[0.026]	[0.035]	[0.026]	[0.027]	[0.025]	[0.032]	[0.014]	[0.018]
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	27.9%	23.7%	31.5%	23.5%***	34.4%	21.1%***	35.8%	22.6%***	32.6%	22.6%***
	[0.022]	[0.020]	[0.020]	[0.018]	[0.024]	[0.016]	[0.025]	[0.022]	[0.012]	[0.010]
	776	713	750	779	737	806	719	683	2982	2981
Female	24.4%	21.9%	25.6%	18.9%***	31.4%	19%***	28.8%	17.7%***	27.9%	19.1%***
	[0.020]	[0.019]	[0.019]	[0.018]	[0.018]	[0.020]	[0.023]	[0.018]	[0.011]	[0.010]
	716	734	744	756	771	669	732	645	2963	2804
Severely Underweight										
All	23.3%	21.0%	25.1%	20.7%**	22.9%	21.7%	24.5%	21.7%	24.1%	21.2%***
	[0.016]	[0.013]	[0.017]	[0.011]	[0.015]	[0.014]	[0.018]	[0.015]	[0.009]	[0.007]
	1491	1447	1494	1540	1508	1479	1451	1329	5944	5795
By age:										
0-5 months	11.0%	11.2%	11.4%	7.6%	18.6%	9.2%**	14.9%	11.3%	14.2%	9.1%***
	[0.027]	[0.020]	[0.017]	[0.017]	[0.031]	[0.017]	[0.026]	[0.021]	[0.013]	[0.010]
	171	347	202	329	205	271	187	236	765	1183
6-11 months	24.5%	19.7%	24.5%	21.7%	25.7%	21.5%	25.6%	21.6%	25.1%	21.4%***
	[0.027]	[0.019]	[0.025]	[0.019]	[0.029]	[0.022]	[0.029]	[0.022]	[0.015]	[0.011]
	384	473	441	488	426	454	393	430	1644	1845
12-17 months	28.0%	27.2%	30.3%	25.2%	24.7%	27.4%	26.5%	25.5%	27.7%	26.2%
	[0.023]	[0.024]	[0.034]	[0.023]	[0.024]	[0.026]	[0.037]	[0.022]	[0.017]	[0.013]
	378	330	352	383	322	405	333	363	1385	1481
18-24 months	23.0%	27.8%*	27.3%	27.2%	21.4%	25.0%	25.6%	25.2%	24.6%	26.2%

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	[0.023]	[0.025]	[0.021]	[0.032]	[0.020]	[0.024]	[0.022]	[0.030]	[0.012]	[0.016]
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	25.3%	21.8%	25.2%	21.3%	25.4%	22.3%	25.9%	22%***	25.4%	21.8%***
	[0.021]	[0.018]	[0.021]	[0.016]	[0.021]	[0.016]	[0.021]	[0.020]	[0.011]	[0.009]
	775	713	750	781	737	808	719	683	2981	2985
Female	21.1%	20.2%	25.0%	20%*	20.6%	21.0%	23.1%	21.4%	22.8%	20.6%
	[0.017]	[0.016]	[0.023]	[0.014]	[0.018]	[0.018]	[0.025]	[0.017]	[0.012]	[0.008]
	716	734	744	759	771	671	732	646	2963	2810
Severe Wasting										
All	10.8%	10.5%	9.4%	10.7%	9.8%	11.1%	7.5%	11.6%***	9.4%	10.9%**
	[0.011]	[0.010]	[0.012]	[0.008]	[0.011]	[0.010]	[0.008]	[0.011]	[0.006]	[0.005]
	1491	1446	1491	1534	1507	1472	1451	1328	5940	5780
By age:										
0-5 months	13.4%	8.5%	7.3%	5.3%	16.8%	9.2%**	8.6%	7.5%	11.2%	7.1%***
	[0.027]	[0.018]	[0.019]	[0.011]	[0.030]	[0.022]	[0.021]	[0.018]	[0.014]	[0.009]
	171	346	199	324	204	266	187	235	761	1171
6-11 months	13.4%	10.7%	11.2%	12.0%	11.8%	12.2%	10.2%	14.8%*	11.4%	12.3%
	[0.021]	[0.014]	[0.017]	[0.014]	[0.022]	[0.017]	[0.019]	[0.018]	[0.011]	[0.008]
	384	473	441	487	426	454	393	430	1644	1844
12-17 months	12.1%	13.7%	11.6%	14.2%	10.7%	12.4%	6.9%	11.4%**	10.6%	13.1%*
	[0.017]	[0.020]	[0.020]	[0.018]	[0.021]	[0.020]	[0.017]	[0.017]	[0.011]	[0.010]
	378	330	352	383	322	403	333	363	1385	1479
18-24 months	7.4%	8.8%	7.2%	10.3%	5.2%	9.6%**	5.7%	10.4%**	6.3%	9.9%***
	[0.013]	[0.019]	[0.013]	[0.018]	[0.010]	[0.017]	[0.008]	[0.021]	[0.006]	[0.010]

ML vs BL: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
	558	297	499	340	555	349	538	300	2150	1286
By sex:										
Male	11.2%	10.7%	11.3%	11.3%	11.8%	11.2%	9.1%	12.5%**	11.1%	11.4%
	[0.012]	[0.012]	[0.015]	[0.011]	[0.015]	[0.012]	[0.011]	[0.015]	[0.008]	[0.007]
	775	712	747	778	736	803	719	683	2977	2976
Female	10.4%	10.3%	7.5%	10.1%*	7.9%	10.9%	5.9%	10.6%***	7.7%	10.4%***
	[0.015]	[0.013]	[0.012]	[0.010]	[0.012]	[0.014]	[0.010]	[0.012]	[0.007]	[0.007]
	716	734	744	756	771	669	732	645	2963	2804

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) The above indicator was asked in the form of a 'True/False' question to the respondents, wherein different options were read out, and the respondent answered whether they thought them to be true or false.

J.1.5 At midline : Prevalence of severely stunted, underweight and wasted children by age group

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
Severe Stunting					
All	22.8%	21.2%	20.2%	20.3%	20.9%
	[0.016]	[0.012]	[0.015]	[0.017]	[0.008]
	1447	1535	1475	1328	5785
By age:					
0-5 months	8.6%	8.2%	6.5%	6.3%	7.5%
	[0.017]	[0.017]	[0.017]	[0.015]	[0.009]
	347	325	269	235	1176

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
6-11 months	15.2%	14.4%	13.2%	16.8%	14.5%
	[0.019]	[0.020]	[0.019]	[0.024]	[0.011]
	473	487	454	430	1844
12-17 months	32.5%	28.4%	26.8%	25.4%	27.9%
	[0.031]	[0.024]	[0.026]	[0.029]	[0.014]
	330	383	403	363	1479
18-24 months	41.4%	35.5%	31.9%	29.6%	34.1%
	[0.034]	[0.034]	[0.027]	[0.032]	[0.018]
	297	340	349	300	1286
By sex:					
Male	23.7%	23.5%	21.1%	22.6%	22.6%
	[0.020]	[0.018]	[0.016]	[0.021]	[0.010]
	713	779	806	683	2981
Female	21.9%	18.9%	19.0%	17.7%	19.1%
	[0.019]	[0.018]	[0.020]	[0.018]	[0.010]
	734	756	669	645	2804
Severely Underweight					
All	21.0%	20.7%	21.7%	21.7%	21.2%
	[0.013]	[0.011]	[0.014]	[0.015]	[0.007]
	1447	1540	1479	1329	5795
By age:					
0-5 months	11.2%	7.6%	9.2%	11.3%	9.1%
	[0.020]	[0.017]	[0.017]	[0.021]	[0.010]
	347	329	271	236	1183
6-11 months	19.7%	21.7%	21.5%	21.6%	21.4%
	[0.019]	[0.018]	[0.022]	[0.022]	[0.011]

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	473	488	454	430	1845
12-17 months	27.2%	25.2%	27.4%	25.5%	26.2%
	[0.024]	[0.023]	[0.026]	[0.022]	[0.013]
	330	383	405	363	1481
18-24 months	27.8%	27.2%	25.0%	25.2%	26.2%
	[0.025]	[0.032]	[0.024]	[0.030]	[0.016]
	297	340	349	300	1286
By sex:					
Male	21.8%	21.3%	22.3%	22.0%	21.8%
	[0.018]	[0.016]	[0.016]	[0.020]	[0.009]
	713	781	808	683	2985
Female	20.2%	20.0%	21.0%	21.4%	20.6%
	[0.016]	[0.014]	[0.018]	[0.017]	[0.008]
	734	759	671	646	2810
Severe Wasting					
All	10.5%	10.7%	11.1%	11.6%	10.9%
	[0.009]	[0.008]	[0.010]	[0.011]	[0.005]
	1446	1534	1472	1328	5780
By age:					
0-5 months	8.5%	5.3%	9.2%	7.5%	7.1%
	[0.018]	[0.011]	[0.022]	[0.018]	[0.009]
	346	324	266	235	1171
6-11 months	10.7%	12.0%	12.2%	14.8%	12.3%
	[0.014]	[0.014]	[0.017]	[0.018]	[0.008]
	473	487	454	430	1844
12-17 months	13.7%	14.2%	12.4%	11.4%	13.1%

At midline: Rates of stunting, underweight, and wasting (for all children who are below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
	[0.020]	[0.017]	[0.020]	[0.017]	[0.010]
	330	383	403	363	1479
18-24 months	8.8%	10.3%	9.6%	10.4%	9.9%
	[0.019]	[0.018]	[0.017]	[0.021]	[0.010]
	297	340	349	300	1286
By sex:					
Male	10.7%	11.3%	11.2%	12.5%	11.4%
	[0.012]	[0.011]	[0.012]	[0.015]	[0.007]
	712	778	803	683	2976
Female	10.3%	10.1%	10.9%	10.6%	10.4%
	[0.013]	[0.010]	[0.014]	[0.012]	[0.007]
	734	756	669	645	2804

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design.

J.2 Biomedical outcomes for women

J.2.1 DID : Prevalence of underweightedness and anaemia among women

DID: BMI class and anaemia prevalence (for all respondents who have at least one child below 2 years of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
BMI class			
Underweight[3]	0.0183	-0.0801***	0.0826***
	(0.0233)	(0.0288)	(0.0294)

DID: BMI class and anaemia prevalence (for all respondents who have at least one child below 2 years of age)			
Outcome/ Indicator	**Hard conditions vs. Soft conditions**	**Soft conditions vs. Only technology**	**Only technology vs. Pure Control**
	Dif 1 - Dif 2	**Dif 2 - Dif 3**	**Dif 3 - Dif 4**
Anaemia Status			
Anaemic[4]	0.00413	-0.0269	0.00591
	(0.0271)	(0.0270)	(0.0307)

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).

Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) BMI less than 18.5 (4) Haemoglobin level at sea level less than 120 g/l for non-pregnant women of 15 years and above, and less than 110 g/l for pregnant women. (5) The figures for the above indicators should be multiplied by 100 to be interpreted as percentage points. For instance, 0.25 should be interpreted as 25 percentage points.

J.2.2 ML vs BL : Prevalence of underweightedness and anaemia among women

ML vs BL: BMI class and anaemia prevalence (for all respondents who have at least one child below 2 years of age)										
Outcome/ Indicator	**Hard conditions**		**Soft conditions**		**Only Technology**		**Pure Control**		**Overall**	
	BL	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**	**BL**	**ML**
BMI class										
Underweight[3]	50.6%	46.9%**	48.9%	43.5%***	47.3%	49.0%	51.3%	45.0%***	49.0%	45.9%***
	[0.012]	[0.013]	[0.017]	[0.012]	[0.018]	[0.017]	[0.015]	[0.017]	[0.009]	[0.008]
	1519	1488	1517	1566	1502	1516	1445	1369	5983	5939
Anaemia Status										
Anaemic[4]	70.7%	72.5%	71.2%	73.5%	70.2%	74.1%*	71.6%	74.8%	70.9%	73.8%***
	[0.013]	[0.018]	[0.017]	[0.018]	[0.015]	[0.015]	[0.017]	[0.017]	[0.009]	[0.009]
	1519	1487	1517	1565	1502	1515	1445	1367	5983	5934

Source: BCSP Baseline Survey (Jul-Sep 2013) and BCSP Midline Survey (Aug - Oct 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) BMI less than 18.5 (4) Haemoglobin level at sea level less than 120 g/l for non-pregnant women of 15 years and above, and less than 110 g/l for pregnant women.

J.2.3 At midline: Prevalence of underweighted and anaemia among women

At midline: BMI class and anaemia prevalence (for all respondents who have at least one child below 2 years of age)					
Outcome/ Indicator	**Hard conditions**	**Soft conditions**	**Only technology**	**Pure control**	**Overall**
BMI class					
Underweight[3]	46.9%*	43.5%***	49%*	45.0%	45.9%
	[0.013]	[0.012]	[0.017]	[0.016]	[0.008]
	1488	1566	1516	1369	5939
Anaemia Status					
Anaemic[4]	72.5%	73.5%	74.1%	74.8%	73.8%
	[0.018]	[0.018]	[0.015]	[0.016]	[0.009]
	1487	1565	1515	1367	5934

Source: BCSP Midline Survey (Aug - Nov 2015).
Notes: (1) Asterisks (*) indicate that an estimate is significantly different to the relevant comparator, as explained in Box #: *** = 99%; ** =95%; * = 90%. (2) Appropriate Stata 14 commands were used to account for survey design. (3) BMI less than 18.5 (4) Haemoglobin level at sea level less than 120 g/l for non-pregnant women of 15 years and above, and less than 110 g/l for pregnant women.