There is increasing interest in the potential of cash transfers to facilitate safe transitions to adulthood among vulnerable youth in low-income settings. However, little evidence exists that analyses these linkages from at-scale government-run programmes. This brief summarizes the impacts of two government-run large-scale unconditional cash transfers on outcomes of early marriage and pregnancy among youth in Malawi and Zambia after approximately three years. Results indicate limited impacts on safe transitions for both males and females. However, the programmes were successful in reducing poverty and improving schooling outcomes—two main pathways for safe transitions as reported in the literature. Research implications include the need to study transitions over longer time periods, including tracking of youth as they transition out of study households. If reducing early marriage and pregnancy is among policy makers’ primary priorities, then dedicated programming via cash plus or services specifically targeted at addressing the needs of adolescents and youth should be considered.

Recent reviews of ‘what works’ to delay early marriage and prevent unintended and repeat pregnancy among young people in low- and middle-income countries highlight cash transfers as promising interventions to facilitate safe transitions. This proposition is intuitive given that a broad body of literature demonstrates the strong impacts of cash transfers in terms of decreasing household poverty and promoting education of children—two factors linked to favourable later outcomes for adolescents and youth. However, both reviews acknowledge that there are limited studies across programme design typologies and geographies. Results from impact evaluation studies on early marriage and pregnancy in Africa are generally promising but also mixed. For example, adolescent girl-focused programmes in Malawi had favourable short-term impacts on marriage and pregnancy, yet no impacts were found on the latter in South Africa. Moreover, at-scale government cash transfers in Kenya and South Africa had favourable impacts on early pregnancy whereas no such impacts were found in Kenya for early marriage. This brief summarizes new evidence on the impacts of two government-run unconditional cash transfers on outcomes of early marriage and pregnancy among youth (aged 14 to 21 at programme start) in Malawi and Zambia, including investigation of pathways through which impacts may occur.

PROGRAMMES

The Malawi Social Cash Transfer Programme (SCTP) and the Zambia Multiple Category Targeted Grant (MCTG) are both government-run unconditional cash transfers targeted to ultra-poor, rural, labour-constrained households with primary objectives related to poverty reduction (see Table 1). Cash transfers are provided on a bi-monthly basis to heads of households and represent roughly a 20 per cent increase over pre-programme consumption. As transfers are unconditional, cash is delivered with no strings attached; there are neither

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co-responsibilities imposed on beneficiary households nor additional programme components. Although these programmes were not specifically designed to impact safe transitions to adulthood, there is potential for beneficial impacts given that alleviating poverty and promoting education are essential for facilitating safe transitions. Existing evidence indicates that both programmes were largely successful in reaching their main poverty-related objectives, including decreasing poverty and increasing food security and household resilience.

**STUDY DESIGN AND DATA**

Evaluations of both programmes were designed as cluster-randomized controlled trials (cRCTs) in two rural districts *(see Table 1)*. Data were collected at baseline and these households were then followed over approximately three years from 2013 to 2015 in Malawi and 2011 to 2013 in Zambia. The total household sample size was 3,531 in Malawi and 3,078 in Zambia. However, in our analysis, sample sizes for youth aged 14 to 21 at baseline range from 878 and 1,023 for males and females, respectively, in Malawi to 1,296 and 1,070 for males and females, respectively, in Zambia. We examine impacts on outcomes of the following indicators: 1) ever married or cohabited (males and females), and 2) ever pregnant, currently pregnant and ever given birth (females only). The proportion of youth aged 14 to 21 years at baseline who have ever been married or pregnant is, on average, low at baseline (0 to 2 per cent for early marriage among males; 3 to 12 per cent for early marriage among females and 9 to 22 per cent for early pregnancy). To estimate the causal impact of the programme, we run Analysis of Covariance (ANCOVA) models and include a number of sensitivity analyses to show that our results are robust.

<table>
<thead>
<tr>
<th>Table 1: Main features of the programmes and evaluations</th>
<th>Malawi</th>
<th>Zambia</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Programme</strong></td>
<td>Social Cash Transfer Program (SCTP)</td>
<td>Multiple Category Targeted Grant (MCTG)</td>
</tr>
<tr>
<td><strong>Implementer</strong></td>
<td>Ministry of Gender, Children, Disability and Social Welfare</td>
<td>Ministry of Community and Social Services</td>
</tr>
<tr>
<td><strong>Targeting</strong></td>
<td>Ultra-poor and labour-constrained households</td>
<td>Female- or elderly-headed households keeping orphans; households with a disabled member; or special cases (critically vulnerable)</td>
</tr>
<tr>
<td><strong>Transfer size</strong></td>
<td>Variable by household size and number of children enrolled in school, bimonthly (~18% of pre-programme consumption)¹</td>
<td>Flat transfer of 120 kwacha [ZMW] (US$24), bimonthly (~21% of pre-programme consumption)</td>
</tr>
<tr>
<td><strong>Evaluation timeline</strong></td>
<td>2013–2015 (30 months)</td>
<td>2011–2013 (36 months)</td>
</tr>
<tr>
<td><strong>Location</strong></td>
<td>Two rural districts: Salima and Mangochi</td>
<td>Two rural districts: Luwingu and Serenje</td>
</tr>
<tr>
<td><strong>Evaluation design</strong></td>
<td>Cluster randomized-controlled trial (cRCT)</td>
<td>Cluster randomized-controlled trial (cRCT)</td>
</tr>
<tr>
<td><strong>Household sample size</strong></td>
<td>3,531</td>
<td>3,078</td>
</tr>
</tbody>
</table>

¹Post May 2015, the transfer size was adjusted up to 23% of average pre-programme consumption.

**FINDINGS**

Overall, we find no significant impact on the safe transition outcomes in either country (see Figure 1). To better understand the lack of impacts, we further examine two of the main pathways through which cash is hypothesized to lead to improved outcomes for youth: poverty and education. Our analysis confirms strong and significant impacts of the programmes in terms of reducing household poverty and improving youth schooling outcomes, which demonstrates that the preconditions for impacts are met. Further, we explore whether there are subgroup impacts among older youth, the poorest sample of youth, those attending school at baseline, or those living in communities with more gender-progressive norms (measured using information on gender norms at the community level). We find no evidence of significant subgroup impacts. This is particularly notable as it has been suggested that community-level social norms relating to gender and family formation may constrain the impacts of cash transfers in low-income settings. We find no support for this hypothesis in our setting.

**Figure 1. Main impacts on early marriage and pregnancy among youth aged 14–21 at baseline, by sex and country**

Note: Dots represent intent-to-treat point estimates for cash transfer treatment, with confidence intervals represented by bars. Each coefficient is from a different regression estimate using ANCOVA methodology. If the confidence interval passes zero (red line) the estimate is insignificant, representing no programme impact. Sample sizes range from 878 and 1,023 in Malawi to 1,070 and 1,296 in Zambia.

**RESEARCH AND POLICY IMPLICATIONS**

We find limited impacts of large-scale poverty-targeted cash transfers on safe transitions in Malawi and Zambia. However, as these national programmes did not have any youth-specific components and were not specifically aimed at achieving these objectives, null impacts should not be viewed as a marker of programme effectiveness. Rather, the lack of impact has several research implications, including the need to examine outcomes over longer time periods, and design studies to carefully track youth as they transition out of study households. Nonetheless, findings suggest that protective impacts of cash transfers on early marriage and pregnancy found elsewhere in sub-Saharan Africa may not translate to different settings, programme designs and target populations. This finding should encourage policy makers and programme implementers to holistically assess the evidence base when designing programming to affect safe transitions. In particular, complementing cash transfers with services and interventions specifically designed to address the needs of adolescents and youth over longer time periods may be needed to achieve these objectives. We welcome further experimentation and research evaluating outcomes for boys and girls within diverse programme designs to better understand how best to address linkages between responding to poverty and facilitating safe transitions.

**ACKNOWLEDGEMENTS**

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