



The Global Partnership on Output-Based Aid

Gender Impacts of GPOBA Pilot Projects

Estimating Gender Impacts

Unlike the tracking of outputs and/or outcomes, the estimation of "impacts" (in the strict sense of demonstrating a causal link between a program or intervention and some intended results) does not fall under the typical contractual agreement of an output-based aid (OBA) project. As a consequence, the estimation of gender impacts is not usually included in the standard OBA project tracking framework which is based on reporting from implementing agencies, service providers, and independent verification agents (IVAs).

Nonetheless, given the increasing attention to women and girls as beneficiaries of developing programs, GPOBA is increasingly addressing gender aspects in its monitoring and evaluation (M&E) framework. In addition, GPOBA is implementing some ad-hoc impact evaluations¹ of its OBA pilot projects, with funding from its donors and a contribution from the Spanish Impact Evaluation Fund (SIEF). This is consistent with GPOBA's mandate to corroborate lessons learned over the years with rigorous assessment of impacts and outcomes attributed to OBA projects. Five impact evaluations are currently under implementation. All involve a detailed description of the beneficiary households (complete with identification of women and children) and, when relevant, a focus on estimating gender-related development impacts.

This note presents a summary of the expected gender impacts of OBA projects by sector, an overview of how gender impacts are estimated in the ongoing impact evaluations (table 1), and a list of the gender outcomes and impacts that are explicitly acknowledged in other OBA pilot projects (table 2). While the impact evaluations provide a robust estimate of gender impacts, information on the other projects is less comprehensive, so GPOBA can only provide approximate indicators.

¹ The Impact Evaluations (IEs) are larger studies that typically rely on extensive pre/post household-level quantitative surveys. On the one hand, such studies address the normal causal inference problem (how can the outcomes/impacts be attributed to the project?). Whenever possible, GPOBA's IEs attempt to tease out the effect of the distinctive OBA measures through the identification of appropriate "control groups" that may serve as a non-OBA counterfactual to the "treatment group".

Expected Gender Impacts by Sector

As the tables below show, similar types of impacts are expected from projects according to the sector. While the impacts described are not necessarily specific to OBA projects, paying only after outputs are delivered helps ensure that the intended beneficiaries receive the described benefits.

1. Water and Sanitation

Benefits of water and sanitation are generally perceived in the whole population. There are, however, factors that disproportionately benefit women. In many cultures water and sanitation work is the task of women. Access to drinking water and improved sanitation closer to the home helps to reduce the time women spend on such activities – in many areas up to 6 hours per day. Improved access helps keep girls in schools and allows women to participate in more productive activities, thus promoting gender equality and empowerment of women.

Access to water can also improve health and educational attainment, as well as facilitate activities women can undertake in their homes, like cooking, pottery, and other crafts.

Access to safe drinking water leads to improved health, particularly to a reduction in infections of the digestive system and eye infections that affect mainly children. Indirectly, women also benefit from this as they are often the care-givers in the family. (See Uganda Kampala Water in table 1.)

2. Energy

Energy projects can provide households with energy for three purposes: heating, cooking, and lighting. Some of the benefits depend on the source of energy that is replaced by the project.

Projects for heating and cooking generally replace the use of firewood. Gathering wood is frequently a task for women and girls. A reduction in the use of this fuel helps to free time spent on this activity and thus to promote gender equality and the empowerment of women by allowing women to participate in other economic activities and by giving girls more time to dedicate to primary education.

Replacing wood or coal-fired heating or cooking stoves with natural gas or biogas also reduces the exposure of women and children to indoor air pollution, a major cause of infections of the respiratory system.

Energy access (or improvements in service quality and reliability) increases the productivity of businesses and contributes to economic growth. Household access to energy helps women with household-based businesses to improve their livelihood. (See Mumbai Slum Electrification and Kenya Electricity Expansion in table 1.)

Improved lighting (especially electricity as a substitute for kerosene lamps) also helps to extend the hours in which women can engage in productive activity and enables children, particularly girls who are often needed during the daylight hours to help their families, to study and do their homework. (See Bangladesh SHS program in table 1).

3. Health

Three of the ongoing GPOBA health projects are specifically addressing gender-related health risks, particularly maternal health and safe childbirth (one of them, Uganda Reproductive Health, is also the subject of an in-depth impact evaluation). Safe childbirth projects significantly reduce maternal mortality as well as the burden of disability related to pregnancy and delivery. Such interventions also reduce child mortality, thus contributing to a decrease in fertility rates.

In some places cultural norms prevent women from seeking medical treatment. This may be the case where medical practitioners are mostly male and it is considered inappropriate for men to treat women. In such cases women may be forced to use untrained traditional healers.

4. Information and Communication Technology (ICT)

GPOBA ICT projects mainly extend the reach of rural cellular telephony to poorer and more remote areas and in some cases provide such areas with access to the internet by setting up internet kiosks. OBA approaches in telecommunications are entirely demand-driven so that service providers have an incentive to adapt their service to the needs of women. This addresses a concern frequently found in the literature on gender in ICT-projects, that service providers do not sufficiently address the needs of their female customers, for example by adapting opening hours.

In rural areas in developing countries women have mostly household-related tasks that require them to stay near their home. Telephones enable women to get medical help, for example during childbirth, either by having a medical professional visit the household or by receiving remote medical advice. Girls and women use the internet to access health information, particularly information on reproductive health that is not available through traditional channels.

Telecenters have the potential to benefit women who engage in household-based economic activities and micro enterprises. Information available on the web can help to improve the production process and product design and therefore to contribute to the economic empowerment of women. Access to telephones enables women to be better informed about market opportunities for their products.

Table 1: Gender Impacts in Rigorous Impact Evaluations of GPOBA Pilot Projects

Activity	Evaluation Method	Main Evaluation Questions Addressed	Specific Consideration of Gender in Impact Estimates
<p>Uganda Reproductive Health</p>	<p>Pre-post household-level surveys with Treatment & Control groups</p>	<p>(1) Expected health impacts (2) Improved operational efficiency (3) Is there an increase in utilization in communities with vouchers? (4) Is there a decrease in untreated complications in communities with vouchers? (Comparison with other voucher schemes and traditional service delivery)</p>	<p>The study is primarily focused on women (Safe Delivery) or both men & women (Sexually Transmitted Diseases).</p> <p>The study rigorously estimates IMPACTS on: maternal care utilization; perceived treatment quality/patient satisfaction; and actual health improvements (reduced maternal/infant mortality, increased birth weight, reduced pregnancy- and delivery-related illness/injury).</p>
<p>Uganda Kampala Water</p>	<p>Pre-post household-level surveys with Treatment & Control groups</p>	<p>(1) Expected impacts of increased access to clean water (health, economic, etc.) (2) Comparison of yard taps and public water points (3) Comparison of prepaid and traditional public water points (4) Comparison of OBA to a KfW-funded input-based project</p>	<p>The study is not primarily focused on women, but will capture distinctive effects of safe and affordable water on children and families.</p> <p>The study rigorously estimates IMPACTS on: health improvements as well as time and expenditure savings; productivity gains due to a reduction in water-borne diseases in adults; reduction of infant and child mortality due to cases of diarrhea/other sicknesses prevented; improvements in education due to reduced absenteeism, and improved child development among other benefits (biometric data for children 7 years and below are collected).</p>

Table 1 (cont.)

Activity	Evaluation Method	Main Evaluation Questions Addressed	Specific Consideration of Gender in Impact Estimates
India Mumbai Slum Electrification	Pre-post household-level surveys with Treatment & Control groups	(1) Effectiveness of the project at increasing access to electricity for Mumbai slum dwellers (2) Potential of the adopted output-based funding approach for scaling up/replication (3) Effectiveness of the OBA approach to address affordability + institutional constraints (no mandate of delivering the service beyond the utilities' regulated point of electric supply; informal or illegal status of land occupancy; lack of awareness of the availability and benefits of legal provision)	The study is not primarily focused on women, but will capture distinctive effects of safe and affordable electricity that may affect women . The study rigorously estimates IMPACTS on: accrued benefits of legal electricity such as reduced fire hazard, reduced indoor pollution, increased potential for home-run micro-businesses).
Kenya Electricity Expansion Project	Enhanced Verification & Evaluation mandate for IVA (TBD) + small pre-post household-level survey	(1) Effectiveness of the project in increasing the number of legal electricity connections among slum residents in Nairobi (in a context with a highly motivated utility) (2) Impact of increased access to legal/safe electricity in reducing poverty of slum residents (3) Effect for the beneficiaries of the project on ownership/profitability of micro-businesses	The study is not primarily focused on women, but will capture distinctive effects of safe and affordable electricity that may affect women . The study rigorously estimates IMPACTS on: increased potential for home-run micro-businesses, increased security (criminal cartels are currently reselling electricity).
Bangladesh SHS Program	Household, community, PO and market-level surveys (including comparison grid versus off-grid SHS)	(1) Assess the benefits of SHS and compare with the relative benefits of grid for lighting and other purposes; (2) Evaluate the effectiveness of the delivery system by partner organizations (POs) delivering SHS for IDCOL; (3) Develop an M&E system for IDCOL to monitor and evaluate its performance; and (4) Conduct a marketing study to examine the pros and cons of the SHS developed and marketed by IDCOL with the help of the POs	The study is not primarily focused on women, but will capture distinctive benefits of SHS (vs. non-electrified households using kerosene) that may affect women/children. The study rigorously estimates IMPACTS on: lower risk of poisoning or burns / lower incidence of Acute Lower Respiratory Infection (ALRI), increased time reading/studying for children, decrease in school-days missed from illness in electrified home compared to non-electrified areas.

Table 2: Gender Outcomes/Impacts (Approximate Indicators) in Other OBA Pilot Projects

Country	Title	Outputs	Outcome/Impacts (Estimates) Affecting Women and Children
Armenia	Access to Gas & Heat Supply for Poor Urban Households	Individual Gas-Heater Based Solution Local Heating Solution	<i>Awareness campaigns relied heavily on the participation of women</i>
Colombia	Natural Gas Distribution for Low Income Families in the Caribbean Coast	Household Gas Connection and Gas Stove	<ul style="list-style-type: none"> • Reduced expenditures on alternative sources of energy • Reduced time spent in gathering fuel wood • Reduced indoor air pollution -> disease and medical expenditure • 5,500 outpatient visits avoided
Bolivia	Bolivia Rural Electricity Access with Small-Scale Providers	SHS Pico-PV system	<ul style="list-style-type: none"> • Increased time spent by a child on reading/studying (under electric lighting vs. kerosene lamp) • Increased potential for household income-generating activities for women (e.g., weaving).
Cameroon	Cameroon Water Affirmage Contract - OBA for Coverage Expansion	Household Water Connection	<ul style="list-style-type: none"> • 2 hours per day time saved for fetching water • 5 working days saved a year
Ethiopia	Ethiopia Electricity Access Rural Expansion Project	Metered Connection	<ul style="list-style-type: none"> • Increased potential for household income-generating activities for women (energy available 24x7) • Children can improve the quality of learning at night
Indonesia	Expansion of Water Services in Low-income Areas of Jakarta	Household Water Connection	<ul style="list-style-type: none"> • 15 minutes per day saved by women
Indonesia	Extending Telecommunications in Rural Indonesia Project	Community Access Point (CAPs)	<i>Involvement of women in the community decision-making during GPOBA implementation</i>
Nepal	Biogas Support Programme in Nepal	Biogas Plant 2/4/6/8 cubic meters (Hill/Remote Hill)	<ul style="list-style-type: none"> • 3 hours per day reduction in time spent on gathering wood and food preparation (mostly women) • Reduced respiratory diseases caused by indoor air pollution (mainly women exposed)
Philippines	Manila Water Supply	Household Water Connection	<ul style="list-style-type: none"> • 2 hours per day time saved fetching water (typically women)

Table 2 (cont.)

Country	Title	OUTPUT(S)	Outcome/Impacts (estimates) affecting women/children
Philippines	Reproductive Health Services in the Philippines	Safe Delivery Package	<ul style="list-style-type: none"> • Maternal care utilization • Reduced maternal/infant mortality • Reduced pregnancy- and delivery-related illness/injury
Senegal	On-Site Sanitation Project	BALP (wash basin w/ soakway) DP (shower w/ soakway) Septic Tank TCM (pour flush latrine) TCM+shower	<ul style="list-style-type: none"> • Improved access to sanitation (essential for women) • The BALP has already significantly improved environmental conditions in the yards where it has been implemented (no more stagnant water or bugs)
Vietnam	Vietnam Education Project	School Enrollments Professional Secondary Education School Enrollments Upper Secondary Education	<ul style="list-style-type: none"> • Increased gender equality (generally attributed to equal access to education)
Vietnam	Vietnam Rural Water (EMW)	Household Water Connection	<ul style="list-style-type: none"> • Reduced morbidity and mortality rates due to unsafe water (especially in infants) • Reduced time to fetch water (typically women/children) • Improved personal hygiene and environmental protection, through satisfactory sanitation
Yemen, Republic of	Yemen Safe Motherhood Program	Safe Delivery Package	<ul style="list-style-type: none"> • % of births assisted by skilled attendants (target of $\geq 80\%$) • % of women with potential or acute obstetric complication referred to the hospital (target of 5-15%) • % of women that complete basic antenatal care visits (4 visits) (target of $\geq 75\%$) • % of women that complete basic postnatal care visits (1 visit) (target of $\geq 75\%$)