Learning agenda for an ECD and livelihoods project in Northern Uganda

September 2022

Executive Summary

With support from the Hilton Foundation, BRAC is planning to implement its Ultra-Poor Graduation (UPG) and Humanitarian Play Lab (HPL) programs in refugee and host communities of West Nile, Uganda, representing the first time the two interventions will be implemented within the same population. This document presents a proposed learning agenda for this joint UPG-HPL project. It is based on a collaborative development process over the past two months between BRAC and IPA, BRAC's Learning Partner for the project. The purpose of this learning agenda is to summarize BRAC's internal priorities for learning, identify possible research and learning activities for the project, and to share relevant evidence on topics related to the two interventions. This plan is intended to serve as a flexible and responsive document that can both inform decision-making moving forward as well as change and adapt in response to future developments. Ultimately, the goal is to identify and implement the most useful research and learning activities that can be completed within the scope of the project and that can inform BRAC's future work in social protection, education, and their potential combination. This document will serve as a key input for future conversations between BRAC and IPA as plans are refined and finalized. The document is composed of three main sections: a review of the **Existing Evidence Base**, a description of the **Learning Agenda Development Process**, the **Learning Agenda** itself, and brief **Next Steps**.

Existing Evidence Base for UPG and HPL

This section provides a detailed description of the current research base for both Graduation and Play Lab approaches. It introduces and synthesizes existing evidence for the two interventions and relevant fields of research and utilizes this evidence base to hypothesize potential theories of change that might connect the two interventions and explore different program models to address the question of how the two interventions might be combined. For Graduation approaches, the review includes a particular focus on outcomes for women and child outcomes. For Play Lab models, it reviews available research and also

explores key themes in the broader literature, such as parental engagement in center-based programs and outcomes in diverse and global settings. The evidence review concludes by examining what theories of change might connect UPG and HPL interventions and understanding the range of possibilities for how UPG and HPL interventions can be combined to maximize impact.

Learning Agenda Development Process

This section outlines the process that IPA and BRAC went through to identify key research topics, including initial interviews with both BRAC staff and external stakeholders, two workshops and a BRAC team survey to identify and prioritize learning questions, and further refine the learning approaches based on existing project plans. This section is largely documentation of these activities and can be skipped by those who were involved throughout the process.

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Learning Agenda

The proposed learning agenda for this project covers activities that address key learning questions that are of interest to BRAC, relevant to the current literature and state of practice, and feasible within the scope of the project. The section also includes additional details about each of the proposed learning approaches:

- *Initial Descriptive Study*: This study would involve a survey of participant households in order to move towards a more in-depth understanding of the target population and the factors and dynamics influencing household vulnerability and child development. This would inform both program implementation and decisions on the design of the other learning approaches. The largely quantitative data collection would be done by IERC and the analysis and design would be supported by IPA, in conjunction with the Project team to ensure that the survey is complementary to initial data collection activities such as the child survey.

- *Regression Discontinuity Study*: If certain theoretical and statistical assumptions are met in the targeting process, BRAC will be able to compare the outcomes for UPG-HPL households with the children of households who receive HPL only. The initial descriptive study and conversations with BRAC around the targeting approach could help establish whether this design is feasible and credible. If so, it would allow a rigorous assessment of the complementary improvements in child outcomes attributable to UPG. This would also require significant data collection support from IERC and alignment with the project team.

- *Topical Studies:* IPA has outlined two studies that could address specific topics of interest to BRAC:
    - *Time Use*: In-depth qualitative research throughout the project to better understand the impact of the two programs on participants' habits and time use.
    - *Mindset Shifts*: In-depth qualitative research on the mindset of UPG participants throughout the project.

  These studies are exploratory and will be used to inform future research on these specific topics rather than necessarily generate externally published studies. Additional topical studies on mental health and psycho-social support and gender-sensitive program adaptations can be found in **Appendix 1**.

Study options will need to be selected and further detailed based on the various factors and constraints upon which they depend:

- Interest in pursuing the identified topics and learning questions at this stage in the project
- Available resources and capabilities available to research and monitoring teams to support additional research and learning activities
- Collaboration from the project team on the modification of project design to facilitate the respective research designs
- The specific needs and characteristics of the beneficiary population
- IPA's capacity and added value in support of the selected designs

Existing Evidence Base for UPG and HPL

Introduction

Children are more than twice as likely as adults to live in extreme poverty (17.5 percent of children compared to 7.9 percent of adults in the year 2017). Households with children also tend to be more vulnerable to shocks; an estimated 55 percent of households without children reported total income lost in the wake of COVID, but at least 66 percent of households with children and more than 75 percent of households with three or more children reported total income lost in the early phases of the pandemic - suggesting that children might now be even more overrepresented among the poor.[1]

Children born into poverty will often live in poverty all their lives, as countries with high levels of poverty also tend to have the lowest levels of economic mobility.[2] Poverty is also becoming increasingly concentrated in fragile states (by 2030, projections estimate that 63% of the world's poor will be located in fragile states[3]); these contexts introduce or add to the many intersecting sources of vulnerability for poor families. Young children's experience of severe adversity - such as violence or neglect - can have life-long consequences in everything from health, to education, to economic activity.[4] Even if a child doesn't directly experience a traumatic event, a growing body of research is documenting how parental traumatic exposure can affect the physical and mental health of children.[5] As with poverty, children are overrepresented among populations affected by conflict and crisis - more than half of the world's refugees, for example, are children.

Work to address poverty must accordingly include a focus on children. Similarly, work to support early childhood development must address the settings and contexts in which children live. Unfortunately, poverty alleviation programs typically focus on adults and rarely consider outcomes for children. Conversely, early childhood programs typically focus exclusively on child outcomes and only consider parents in relation to their direct interactions with children and knowledge of child development.

Dual generation theory for early childhood development argues that to meaningfully transform the lives of children facing severe adversity it is necessary to support parents and other caregivers to transform their

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[1] World Bank, UNICEF 2022. The Impact of COVID-19 on the Welfare of Households with Children. Washington, DC: World Bank https://www.unicef.org/media/117301/file/The%20Impact%20of%20COVID-19%20on%20the%20welfare%20of%20households%20with%20children.pdf

[2] GDIM. 2020. Global Database on Intergenerational Mobility. Development Research Group, World Bank. Washington, D.C.: World Bank Group. https://www.worldbank.org/en/topic/poverty/publication/fair-progress-economic-mobility-across-generations-around-the-world

[3] Baier, Kristensen, & Davidsen. (2021) Poverty and fragility: Where will the poor live in 2030? Brookings 2021 https://www.brookings.edu/blog/future-development/2021/04/19/poverty-and-fragility-where-will-the-poor-live-in-2030/

[4] BRFSS 2015-2017, 25 states, CDC Vital Signs, November 2019. https://www.cdc.gov/vitalsigns/aces/index.html

[5] Daskalakis, N. P., Xu, C., Bader, H. N., Chatzinakos, C., Weber, P., Makotkine, I., ... & Yehuda, R. (2021). Intergenerational trauma is associated with expression alterations in glucocorticoid-and immune-related genes. *Neuropsychopharmacology*, *46*(4), 763-773.

own lives. Dual generation theory thus represents a meaningful departure from typical intervention, advocating for a social-ecological approach to early childhood intervention, rather than simply working directly with children, and explicitly targeting intergenerational dynamics.

While dual generation theory has gained some traction in the United States, it has not yet been applied to many international contexts. Certain core themes and principles might be expected to translate, but program, policy, and implementation models will likely vary significantly across different settings. Investigating existing policy and intervention through a dual generation lens will be an important part of the work to explore the theory's potential in international contexts. Equally important will be work to understand the contexts themselves and how certain issues manifest across diverse populations and varied settings.

Combining BRAC's Ultra Poor Graduation (UPG) Program and Humanitarian Play Lab (HPL) in refugee communities in Uganda represents an incredible opportunity to operationalize dual generation theory in an international setting and context of forced displacement. Defining a learning agenda for the combination of UPG and HPL interventions will need to include theoretical, empirical, and programmatic perspectives, and build on the evidence base and field of research informing each individual intervention, as well as theorize potential connections between the two.

This evidence review is accordingly structured as follows: it starts with a review of relevant research for the Graduation intervention, then follows with a review of relevant research for the Play Lab intervention. It then uses this evidence base to hypothesize potential theories of change that might connect the two interventions, and explores different program models to address the question of how the two interventions might be combined.

Graduation approaches

What do we know about the Ultra Poor Graduation Program? (UPG)

- *How does the graduation program affect children?*
- *Does the graduation program affect the intergenerational transfer of poverty?*

The "graduation approach" is a multi-component anti-poverty intervention that supports households to be able to weather and avoid shocks while finding a path out of poverty. Programs are typically defined by five core components: consumption support (cash or food assistance), an income-generating asset (or a combination of assets, most often livestock), skills training to manage the asset(s), a savings account or savings group, and coaching or mentoring over a two-year period.

Originally developed and pioneered by BRAC in Bangladesh, the graduation approach has since been implemented by multiple organizations in countries around the world. It is likely the single-most well-researched anti-poverty intervention. Studies have pooled findings across six different countries[6], followed

[6] Banerjee, A., Duflo, E., Goldberg, N., Karlan, D., Osei, R., Parienté, W., ... & Udry, C. (2015). A multifaceted program causes lasting progress for the very poor: Evidence from six countries. *Science*, *348*(6236), 1260799.

up after four[7], seven[8],[9] and ten[10] years, and included a variety of settings, such as conflict/post-conflict (Yemen)[11]and forced displacement (Congolese refugees in Uganda).[12]

Across studies, the graduation approach has been shown to improve a wide range of outcomes: income and revenues, time spent working, assets, financial inclusion, total per-capita consumption, food insecurity, physical health, mental health, and women's empowerment. A few outcomes have been observed in the short term but potentially are not as robust in the long term across all settings, but several impacts were persistent across multiple years and settings. The graduation approach is accordingly one of the most effective anti-poverty interventions to have been rigorously evaluated. Cost-effectiveness analysis estimated a benefit/cost ratio of 166 percent on average, with a ratio for one site over 400 percent.[13]

Building on this foundation and the proven effectiveness of the graduation approach, recent studies have begun to investigate additional research questions. One key line of questioning considers the multiple components of the approach and asks which components or combination of components might be most effective and cost-effective. Research in Ghana compared two components on their own (the transfer of a productive asset and access to savings) to see if either might be able to generate impacts comparable to the full program (neither did).[14] A similar line of questioning concerns how to make the program easier and more efficient to deliver. Group coaching compared to the traditional individual coaching showed promising results in Uganda.[15] Additional areas for investigation include the optimal dosage and duration of the different components, varying the number, frequency, and timing of home visits, for example. Other research in Uganda compared a traditional graduation approach, a pared down version, and a treatment in which beneficiaries received only cash; researchers concluded that attempting to simplify and streamline the program tended to reduce its impact.[16] These initial studies provide some evidence to support the need for holistic programming and the full graduation approach, but further investigation into

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[7] Bandiera, Oriana, Robin Burgess, Narayan Das, Selim Gulesci, Imran Rasul, and Munshi Sulaiman. 2016. "Labor Markets and Poverty in Village Economies." LSE Working Paper. http://sticerd.lse.ac.uk/dps/eopp/eopp43.pdf.

[8] Banerjee, A., Duflo, E., Chattopadhyay, R., & Shapiro, J. (2016). The long term impacts of a "Graduation" program: Evidence from West Bengal. *Unpublished paper, Massachusetts Institute of Technology, Cambridge, MA*.

[9] Bandiera, O., Burgess, R., Das, N. C., Gulesci, S., Rasul, I., Shams, R., & Sulaiman, M. (2012). Asset transfer programme for the ultra poor: A randomized control trial evaluation.

[10] Banerjee et al., forthcoming.

[11] Brune, L., Karlan, D., Kurdi, S., & Udry, C. (2022). Social protection amidst social upheaval: Examining the impact of a multi-faceted program for ultra-poor households in Yemen. *Journal of Development Economics*, *155*, 102780.

[12] Brune, L. Goldberg, N., Karlan, D., Parkerson, D., & Udry, C. (2020). The Impact of a Graduation Program on Livelihoods in Refugee and Host Communities in Uganda. Innovations for Poverty Action. https://www.poverty-action.org/printpdf/36101

[13] Goldberg, N. 2019. A Research Agenda for the Next Wave of Graduation Programs. Innovations for Poverty Action. https://www.poverty-action.org/sites/default/files/publications/IPA-Graduation-Research-Agenda.pdf

[14] Banerjee, A., Karlan, D., Osei, R., Trachtman, H., & Udry, C. (2022). Unpacking a multi-faceted program to build sustainable income for the very poor. *Journal of Development Economics*, *155*, 102781.

[15] Brune et al., 2020.

[16] Sedlmayr, R., Shah, A., & Sulaiman, M. (2020). Cash-plus: Poverty impacts of alternative transfer-based approaches. *Journal of Development Economics*, *144*, 102418.

these issues is critically important for considering potential scale and sustainability and the goal to enable as many as possible to exit poverty.

Graduation approaches and women's outcomes

The graduation approach is focused on households, but in practice, typically addresses a primary beneficiary, in many cases a woman. Accordingly, many of the reported outcomes relate to this beneficiary and/or rely on her self-report. There has been relatively little exploration into other household members, or the dynamics and relationships between household members. While some graduation programs report increases in women's empowerment, these effects have not been observed across all settings and on average were found to decrease and fade over time.[17] More broadly, economic interventions tend to have inconsistent effects on domestic violence and intimate partner violence.[18]

Research on an anti-poverty program in Uganda investigated its interaction with and effects on intimate partner relations and violence, finding that the program's impact on monthly income was moderated by the initial quality of intimate partner relationships. While the program doubled business ownership and incomes, it had only small increases in marital control, self-reported autonomy and the quality of relationships with a partner, and no change in intimate partner violence.[19] In an additional treatment, involving husbands in the program was found to improve the quality of relationships, but had no impact on perceived gender norms, business success, or intimate partner violence, and potentially decreased women's autonomy.

Research in Burkina Faso added a psychosocial intervention into a graduation program, including initial sensitization sessions as part of the women's savings groups, followed by family coaching sessions conducted at the household during the program's mentoring visits. These activities aimed to address existing gender beliefs related to family violence and women's role in family decision-making. The study found improvements in women's financial autonomy, marital relationship quality, and a reduction in emotional violence from spouses, but did not observe any changes in relation to gender equality beliefs, decision-making power or physical violence.[20] Researchers concluded that focusing on economic outcomes has the potential to strengthen women's status within the family, but economic strategies alone

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[17] Banerjee, A., Duflo, E., Goldberg, N., Karlan, D., Osei, R., Parienté, W., ... & Udry, C. (2015). A multifaceted program causes lasting progress for the very poor: Evidence from six countries. *Science*, *348*(6236), 1260799.

[18] Ismayilova L, Karimli L, Gaveras E, Tô-Camier A, Sanson J, Chaffin J, Nanema R. An Integrated Approach to Increasing Women's Empowerment and Reducing Domestic Violence: Results of a Cluster-Randomized Controlled Trial in a West African Country. Psychol Violence. 2018 Jul;8(4):448-459. doi: 10.1037/vio0000136. Epub 2017 Aug 7. PMID: 34790432; PMCID: PMC8594903.

[19] Green, E. P., Blattman, C., Jamison, J., & Annan, J. (2015). Women's entrepreneurship and intimate partner violence: a cluster randomized trial of microenterprise assistance and partner participation in post-conflict Uganda (SSM-D-14-01580R1). *Social science & medicine*, *133*, 177-188.

[20] Ismayilova L, Karimli L, Gaveras E, Tô-Camier A, Sanson J, Chaffin J, Nanema R. An Integrated Approach to Increasing Women's Empowerment and Reducing Domestic Violence: Results of a Cluster-Randomized Controlled Trial in a West African Country. Psychol Violence. 2018 Jul;8(4):448-459. doi: 10.1037/vio0000136. Epub 2017 Aug 7. PMID: 34790432; PMCID: PMC8594903.

may not be enough to challenge prevailing gender beliefs and norms, particularly in contexts with complex family dynamics such as polygamous households.

These and other studies illustrate that changes to women's economic status do not exist in a vacuum and highlight some of the complexity of household dynamics, economic activity and relationships, all of which will have important implications not just for adults in a household but for children and child development as well. Though research from low and middle income countries is limited, an established evidence base from high income settings has shown how domestic violence, intimate partner violence, and other family relationship dynamics can have profound impacts on children's development and long-term trajectories - from pregnancy and birth outcomes to school readiness to behavior in adolescence.[21]

Graduation approaches and child outcomes

Research on graduation generally has not addressed many (if any) outcomes for children. Evaluations have typically included one or two indicators such as "no children skipped meals," or aggregated across all members of the household, regardless of age. One of the studies in Bangladesh did include an investigation into children's malnutrition, focused on children under 5 years of age. It found positive effects on weight for height and wasting, but no impacts on height for age or stunting. Effects were largest for the youngest children (those born during or after implementation of the graduation program), and smallest for the oldest children (those who were approximately one year old at the start of the graduation program).[22] Researchers noted that the lack of an effect on height for age was concerning, as stunting is a more reliable indicator of long-term undernutrition. What is encouraging about this study was that in relation to the effects identified on weight, the research found positive effects not just for children whose households participated in the program, but additional spillover effects for children in poor households that did not receive the graduation program.

An evaluation of graduation programs in refugee communities in Uganda did not find any impacts on any anthropometric measures for young children, but is currently collecting data on a wider range of child development measures.[23] Research in Burkina Faso compared three treatments: cash transfers, cash transfers plus a productive asset, and cash transfer plus a productive asset and a nutritional component, where households with pregnant or nursing women or children aged 6 to 23 months were offered an allotment of enriched flour each month and materials to grow small gardens for personal consumption.

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[21] Shah, P. S., & Shah, J. (2010). Maternal exposure to domestic violence and pregnancy and birth outcomes: a systematic review and meta-analyses. *Journal of women's health*, *19*(11), 2017-2031; Orr, C., O'Donnell, M., Fisher, C., Bell, M., Glauert, R., & Preen, D. (2021). School readiness of children exposed to family and domestic violence. *Journal of interpersonal violence*, 08862605211050099; English, D. J., Marshall, D. B., & Stewart, A. J. (2003). Effects of family violence on child behavior and health during early childhood. *Journal of family violence*, *18*(1), 43-57..

[22] Raza, W. A., Van de Poel, E., & Van Ourti, T. (2018). Impact and spill-over effects of an asset transfer program on child undernutrition: Evidence from a randomized control trial in Bangladesh. *Journal of Health Economics*, *62*, 105-120.

[23] Brune et al. 2022. The Impact of a Graduation Program on Livelihoods in Refugee and Host Communities in Uganda. Innovations for Poverty Action. https://www.poverty-action.org/printpdf/36101

Effects on chronic and acute malnutrition and food insecurity were observed only in households that received all three interventions.[24]

Further investigation across contexts will be critical to understand under what conditions and through which mechanisms graduation interventions can address critical health outcomes for children such as stunting. Some promising research exists to suggest that graduation approaches have the potential to affect these outcomes, such as from Northern Nigeria, where providing health information to parents and unconditional cash transfers reduced stunting, in part by enabling women to make productive investments in livestock, which increased income, but also provided protein rich diets for children.[25] It is possible that without the targeted information on children's health and development, though, the economic inputs are not as effective. There is an extensive evidence base of the effectiveness of cash transfer programs on a range of early health outcomes for children, but variation exists across contexts, interventions, and outcomes.[26] In addition, in considering child development beyond health, a review of global early childhood intervention found that children benefit directly from a range of interventions, but interventions with an educational or stimulation component had larger cognitive effects than cash transfer or nutrition-only programs.[27]

In relation to older children, there could be concern that a household's participation in graduation programs might increase child labor. While research on cash transfers generally finds decreased levels of child labor,[28] research from the Philippines found that the transfer of a productive asset, though intended to decrease child labor, in fact increased it, as children were needed to manage the asset, resulting in increases in child labor, including hazardous work.[29] Research in Burkina Faso, conversely, included a family coaching intervention along with a graduation program, providing monthly coaching sessions delivered at the home with all family members and covering key issues related to child protection. Looking at children ages 10-15, the intervention decreased their participation in hazardous work and also improved mental health. As with the research on women's empowerment, this study suggests that while improving economic conditions for households is critical, additional targeted intervention might be needed to meaningfully address other interrelated concerns, particularly those related to household dynamics and cultural concerns related to gender and children.

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[24] Bouguen, A., Diallo, Al., Dillon, A. (2021). The Impact of a Nutrition-Focused Livelihoods Program on Child Health and Nutrition in Burkina Faso. Innovations for Poverty Action. https://www.poverty-action.org/sites/default/files/publications/Child-Health-Nutrition-Burkina-Faso_Endline_3.4.22.pdf

[25] Carneiro, P., Kraftman, L., Mason, G., Moore, L., Rasul, I., & Scott, M. (2021). The impacts of a multifaceted prenatal intervention on human capital accumulation in early life. *American Economic Review*, *111*(8), 2506-49.

[26] Fernald, L. C., Gertler, P. J., & Hidrobo, M. (2012). Conditional cash transfer programs: effects on growth, health, and development in young children. *The Oxford handbook of poverty and child development*, 569-600.

[27] Nores, M., & Barnett, W. S. (2009). Benefits of early childhood interventions across the world: (Under) investing in the very young. *Economics of Education Review*, 29, 271–282.

[28] De Hoop, J., & Rosati, F. C. (2014). Cash transfers and child labor. *The World Bank Research Observer*, *29*(2), 202-234.

[29] Edmonds, E., & Theoharides, C. (2020). The short term impact of a productive asset transfer in families with child labor: Experimental evidence from the Philippines. *Journal of Development Economics*, *146*, 102486.

The Play Lab model

What do we know about the Play Lab?

- *How might household poverty affect children's experience of the Play Lab and its effectiveness?*
- *Could the Play Lab change outcomes for other members of the household?*

BRAC began implementing pre-primary education programs in the 1990s, but developed the Play Lab model in 2015 in partnership with the LEGO Foundation. The vision of the Lab is to use play to promote learning and healing for children ages 0-6. Across different ages, the approach includes home-based, center-based, and community-based interventions. The Play Lab has also been adapted for implementation in crisis and emergency settings, as the Humanitarian Play Lab.

A comparably newer initiative, the Play Lab does not have as extensive an evidence base as graduation, but initial research in Bangladesh has some encouraging results. An impact evaluation conducted in Cox's Bazar from 2019 through 2020 focused on the home-based intervention, which targets mothers and children ages 0-2. Mothers were counseled on mental health, child development, and parenting through small group sessions on a weekly basis and home visits on a monthly basis. This included engaging mothers and children in playful activities and was delivered by three key agents: para-counselors, project assistants, and mother volunteers. As the study period included the COVID-19 lockdown, implementation faced serious disruptions and for several months used mobile phone counseling to stand in for the in-person sessions.

The study found that the intervention improved mothers' mental health, as well as happiness and belongingness (but not aspirations). It also improved a range of child outcomes, from gross motor skills to problem solving to mental health. Researchers conducted mediation analysis to investigate whether the improvements in children's mental health resulted from the improvements to mother's mental health, or through some other channel, and concluded that the effects on children were almost entirely mediated by the improvements to mother's mental health. [30]

Center-based Play Lab approaches

Also in Bangladesh, but not in a humanitarian context, an evaluation assessed the impact of the center-based Play Lab approach. Across different interventions, the center-based delivery mode for the play lab targets children of different age ranges, such as 2-4, 4-6, and 4-5. In the study, the program targeted children ages 3 to 5. In Bangladesh, publicly provided preschool is often available for children once they are four years old. Accordingly, 5 percent of children in the control group attended two years of preschool and 63 percent attended one year, while children in the treatment group attended two years of the Play Lab. This speaks to an important theme in early childhood research: understanding the counterfactual and what children experience in the absence of the target intervention. This will likely vary across different contexts.

[30] Impact Evaluation of BRAC's Humanitarian Play Lab Program: Mothers of Children Below 2 Years. BIGD and CDES at Monash University.

In the center-based program in Bangladesh, children attend the center for two hours a day, enabling the implementation team to run two shifts per day in the center.[31] The curriculum and activities are designed to promote children's development across a number of domains: including physical, cognitive, language and social-emotional skills. In addition, parents participate in monthly group sessions, which aim to convey the value of learning through play and encourage parents to use playful activities to support their children's early development and learning; the sessions also cover other relevant topics such as nutrition and hygiene.

The study of the center-based Play Lab in Bangladesh found positive impacts across several measures of child development, including standard instruments such as the Ages and Stages Questionnaire, as well as some tools developed specifically to assess outcomes for the Play Lab. In addition, caregiver surveys found large impacts on Knowledge, Attitudes, and Practices (KAP) related to early childhood development and learning.[32] One encouraging finding was that the program was particularly effective for children who were below average at the start of the program.

The Play Lab model and early childhood outcomes

These two studies of BRAC's Play Lab connect to a broader literature on early childhood development and education in LMICs. Early childhood development is an intersectoral field, including health, nutrition, social protection and education. Intervention in health and nutrition can provide key insight into the potential combination of Graduation and Play Lab, in relation to considering the inclusion of additional content (for example, home-based growth monitoring has been found to be a cost effective intervention for addressing stunting[33] and could be easily integrated into Graduation or home-based Play Lab interventions) and for understanding potential causal pathways (for instance, researchers working on an evaluation of a multicomponent WASH intervention in Bangladesh hypothesized that impacts on child development might not have been through the biological mechanisms of the WASH interventions, but rather through the positive impact on maternal mental health that resulted from the frequent visits and support of community health workers).[34]

Given the Play Lab's focus on early learning and that one of its core interventions is designed as a preschool intervention, the literature and field of early childhood care and education is potentially best positioned to provide the most immediately relevant insight. Intervention and research can be roughly organized by children's age: 0-3 and 3-5. In relation to the former, intervention is typically defined as parenting programs, which can be delivered through home-visiting, group-based, or increasingly in the

[31] In Uganda, children attend the center for 4.5 hours a day, to align with national early education standards set by the government.

[32] BRAC, 2021. Play Lab Research Brief. https://playlabs.bracusa.org/wp-content/uploads/2021/12/BRAC-Play-Labs-Research-Brief-Bangladesh-Final.pdf

[33] Fink, Günther, Rachel Levenson, Sarah Tembo, and Peter C. Rockers. 2017. "Home-and community-based growth monitoring to reduce early life growth faltering: an open-label, cluster-randomized controlled trial." The American Journal of Clinical Nutrition 106, no. 4: 1070-1077.

[34] Tofail, F., Fernald, L. C., Das, K. K., Rahman, M., Ahmed, T., Jannat, K. K., ... & Luby, S. P. (2018). Effect of water quality, sanitation, hand washing, and nutritional interventions on child development in rural Bangladesh (WASH Benefits Bangladesh): a cluster-randomised controlled trial. *The Lancet Child & Adolescent Health*, *2*(4), 255-268.

wake of COVID-19, remote delivery models such as text messages, phone calls, and radio. Recent meta-analyses of early childhood parent intervention and early stimulation and parenting interventions find that these interventions can improve maternal parenting and a range of child outcomes, such as child cognitive, language, and social emotional development.[35]

A few key takeaways offer important insight: first, parenting programs that focus on and include explicitly content on responsive caregiving find greater impacts on child cognitive development and parent knowledge and behavior, as well as parent-child interactions, than programs that do not include this content.[36] Second, despite the established evidence base of the short-term impacts of parenting programs, much less is known about whether these impacts are sustained over time. While a meta-analysis of parenting programs identified 111 articles on 102 unique RCTs of early childhood parenting programs in LMICs, only two trials were found that included a long term follow up.[37] One of the most compelling arguments for intervention in children's first years is that early experiences have been found to have life-long consequences; it is critically important to investigate whether interventions are able to generate long-term change. And finally, pooled effect sizes across interventions do not find any reduction in parental depressive symptoms, though a couple isolated interventions did (notably, Singla et al., 2015 in Uganda).[38] Caregiver mental health represents a promising area for further investigation, both understanding how parenting and early education interventions can be used to support caregivers mental health but also exploring how caregiver mental health is associated with their caregiving behavior and children's outcomes.

In relation to the 3-5 age range, intervention typically includes center-based early education services and preschool programs. Around the world, this is a very dynamic and policy relevant field of research and practice. The most extensive body of research focuses on the United States; several themes characterize that debate: targeted vs. universal programs, investigating phenomena such as fade out or convergence and testing potential explanations such as the sustaining environments hypothesis, emphasizing the importance of longitudinal research and long term outcomes, and across all work, paying critical attention to quality, and how to define, measure, and promote high quality early education experiences for children.

Though there is comparably less research in low-income countries, many themes and trends are relevant across contexts. For example, in the US, early education programs are often found to have the greatest impact on children who are most economically disadvantaged,[39] possibly relevant for BRAC's center-based Play Lab, where the evaluation found it was particularly effective for children who were initially below

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[35] Jeong, J., Pitchik, H. O., & Yousafzai, A. K. (2018). Stimulation interventions and parenting in low-and middle-income countries: a meta-analysis. *Pediatrics*, *141*(4).

[36] Jeong, J., Franchett, E. E., Ramos de Oliveira, C. V., Rehmani, K., & Yousafzai, A. K. (2021). Parenting interventions to promote early child development in the first three years of life: A global systematic review and meta-analysis. *PLoS medicine*, *18*(5), e1003602.

[37] Jeong, J., Pitchik, H. O., & Fink, G. (2021). Short-term, medium-term and long-term effects of early parenting interventions in low-and middle-income countries: a systematic review. *BMJ global health*, *6*(3), e004067.

[38] Singla, D. R., Kumbakumba, E., & Aboud, F. E. (2015). Effects of a parenting intervention to address maternal psychological wellbeing and child development and growth in rural Uganda: a community-based, cluster-randomised trial. *The Lancet Global Health*, *3*(8), e458-e469..

[39] Philips et al., 2017. Puzzling It Out: The Current State of Scientific Knowledge on Pre-Kindergarten Effects A Consensus Statement. Brookings: Washington DC.

average. Interestingly, research in Mozambique on the effect of community preschools found that treatment effects were larger for children from more vulnerable households, but also for children with higher initial cognitive development levels.[40] More research is needed across diverse global contexts to better understand the associations between household and caregiver characteristics, knowledge, and behavior with child development outcomes, and their interventions interact with these existing dynamics.

Understanding the Status Quo

An important issue related to understanding which interventions will be most effective for which populations is understanding the counterfactual and what children experience in the absence of intervention. In the United States, evaluations of preschool interventions sometimes find that even if children aren't able to enroll in the intervention of focus, they will attend an alternative. An evaluation in Boston, for example, found that almost all of the children in the control group - children whose families applied to the lottery to attend the public prekindergarten program, but did not secure a seat given limited availability - still attended some form of center-based early education experience.[41] This of course has significant implications for estimating and interpreting the impact of interventions. Similarly, in the BRAC Play Lab evaluation in Bangladesh, a majority of children in the control group still attended the publicly provided government preschool.

Research in international contexts finds positive effects when comparing children who attend early education services compared to those that do not attend, and also when comparing children who attend higher quality services compared to those attending services of lesser quality. Examples can be found in East Africa, comparing Madrasa and non-Madrasa preschools,[42] in Cambodia, comparing home-based, community-based, and state-run early childhood programs,[43] and in Indonesia, comparing government early education models with and without NGO support.[44] As access to early education services continues to expand across different contexts, and the landscape of actors continues to shift between private and public, formal and informal services, continued work to understand the status quo and dynamics of school choice will be an important part of intervention research in early childhood education.

Parental engagement in center-based programs

Another critical theme of early childhood education research concerns if and how to engage parents in center-based early education programs. A comprehensive meta-analysis from the United States

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[40] Martinez, S., Naudeau, S., & Pereira, V. A. (2017). Preschool and child development under extreme poverty: evidence from a randomized experiment in rural Mozambique. *World Bank Policy Research Working Paper*, (8290).

[41] Weiland, C., Unterman, R., Shapiro, A., Staszak, S., Rochester, S., & Martin, E. (2020). The effects of enrolling in oversubscribed prekindergarten programs through third grade. *Child Development*, *91*(5), 1401-1422.

[42] Mwaura, P. A., Sylva, K., & Malmberg, L. E. (2008). Evaluating the Madrasa preschool programme in East Africa: a quasi-experimental study. *International Journal of Early Years Education*, *16*(3), 237-255.

[43] Rao N, Sun J, Pearson V, Pearson E, Liu H, Constas MA, Engle PL. Is something better than nothing? An evaluation of early childhood programs in Cambodia. Child Dev. 2012 May-Jun;83(3):864-76. doi: 10.1111/j.1467-8624.2012.01746.x. Epub 2012 Apr 17. PMID: 22506857.

[44] Aboud FE, Proulx K, Asrilla Z. An impact evaluation of Plan Indonesia's early childhood program. Can J Public Health. 2016 Dec 27;107(4-5):e366-e372. doi: 10.17269/cjph.107.5557. PMID: 28026699; PMCID: PMC6972448.

investigated the added benefit of including a parenting component in center-based early childhood education programs. In a sample of 46 studies, researchers found that approximately half of the programs included some parenting component - defined as a systematic attempt to improve the parenting attitudes, skills, and behavior of caregivers with children participating in the education program. Across these studies, the researchers found no effect for the inclusion of a parenting component, challenging the general assumption in the field that including an educational component for parents is a strategy for improving educational programming for children. The researchers did find that more intensive parenting additions - with one or more home visits per month - and additions that included active learning for parents were associated with larger positive impacts.[45]

Some research in low-income contexts might be seen to resonate with this finding from the US, or at least indicate that effectively engaging parents along with center-based early education services might not be very simple or straightforward. Research in Ghana found that adding a parent intervention to a teacher training program aimed at improving the quality of public prekindergarten actually undermined the otherwise effective teacher training program.[46] An additional follow up a year after the conclusion of the intervention found persistent negative effects of the combination of teacher training and parent awareness meetings, driven primarily by children in households with non-literate, male household heads.[47]

Conversely, research in Malawi found that a teacher training program did not improve outcomes for children attending community-based, informal preschools when implemented on its own, but when it was combined with a parenting program, children had significantly higher scores on language and social-emotional assessments at an 18-month follow-up (notably, there were no effects for any intervention at the 36th month follow-up).[48] An important note from the US meta-analysis is that studies often do not provide detailed information on the parenting components of early childhood interventions; these details will be key to further investigation into their effectiveness.

Outcomes in diverse and global settings

More broadly, additional research is needed to better understand the drivers of positive outcomes for early childhood development in diverse and global settings. Though certain practices, such as speaking directly or singing to children, and conditions, such as having books in the home, predict better development outcomes with relative consistency, research is limited and some initial work has surprising

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[45] Grindal, T., Bowne, J. B., Yoshikawa, H., Schindler, H. S., Duncan, G. J., Magnuson, K., & Shonkoff, J. P. (2016). The added impact of parenting education in early childhood education programs: A meta-analysis. *Children and Youth Services Review*, *70*, 238-249.

[46] Wolf, S., Aber, J. L., Behrman, J. R., & Tsinigo, E. (2019). Experimental impacts of the "Quality Preschool for Ghana" interventions on teacher professional well-being, classroom quality, and children's school readiness. *Journal of Research on Educational Effectiveness*, *12*(1), 10-37.

[47] Wolf, S., Aber, J. L., Behrman, J. R., & Peele, M. (2019). Longitudinal causal impacts of preschool teacher training on Ghanaian children's school readiness: Evidence for persistence and fade-out. *Developmental science*, *22*(5), e12878.

[48] Özler, B., Fernald, L. C., Kariger, P., McConnell, C., Neuman, M., & Fraga, E. (2018). Combining pre-school teacher training with parenting education: A cluster-randomized controlled trial. *Journal of Development Economics*, *133*, 448-467.

findings. A study in Ghana found that practicing at-home stimulation activities such as reading a book with children was negatively associated with motor, literacy, and numeracy skills.[49] These were descriptive findings and not causal estimates; it is possible that the quality of these activities matters more than the quantity, or that parents target their attention towards children who might be struggling, but this study highlights that established models and associations from high-income and Western contexts might not easily translate to other settings, and more research is needed to better understand what best promotes child development in global and low-income settings. This can be true for diverse populations in the same setting, such as the early childhood education and parenting intervention implemented in Chicago that found positive effects for white and Latino families and children, but not for black families and children.[50]

Across dramatically different contexts, the children of more affluent, urban, and educated parents have better developmental outcomes than children of less affluent, rural, and less educated parents, but the underlying mechanisms defining these trends are unclear, particularly in low-income countries. Using data from UNICEF's MICS surveys, researchers explored the association between mothers' and fathers' education levels, their practice of stimulating and learning activities with children, and child development outcomes; the models were able to explain almost twice the portion of variance in middle-income countries as compared to low-income countries.[51] It is possible that in low income countries, parents promote child development with activities other than those included in the MICS survey, or also that other factors influence the association between caregivers' education levels and child development outcomes, such as use of harsh discipline practices or risks of infectious disease. Identifying these underlying mechanisms and the specific activities that most promote children's development and early learning will be critical for designing effective intervention.

Other key themes

Several additional themes represent important areas to build on existing research in early childhood education: defining and measuring quality in teaching and environments in early education classrooms, identifying and developing an effective workforce, exploring how to effectively engage fathers, understanding current care practices across household members (including older siblings), and longitudinal research. An additional key area of focus is to consider outcomes for parents and other caregivers beyond parenting knowledge and behavior, and how that might directly and indirectly affect children.

Just as research on anti-poverty intervention and graduation programs has typically not included much of a focus on children, similarly, research on early childhood development generally does not address outcomes for parents beyond parenting itself. A review of 478 evaluations of ECD interventions in LMICs found that only 22 percent included outcomes for mothers aside from parenting, only 12 percent reported

[49] Wolf, S., & McCoy, D. C. (2019). Household socioeconomic status and parental investments: Direct and indirect relations with school readiness in Ghana. *Child Development*, *90*(1), 260-278.

[50] Fryer, R. G., Levitt, S. D., & List, J. A. (2015). *Parental incentives and early childhood achievement: A field experiment in Chicago heights* (No. w21477). National Bureau of Economic Research.

[51] Jeong, J., McCoy, D. C., & Fink, G. (2017). Pathways between paternal and maternal education, caregivers' support for learning, and early child development in 44 low-and middle-income countries. *Early Childhood Research Quarterly*, *41*, 136-148.

on maternal mental health, and only 3 percent of studies included father-specific outcomes.[52] Early childhood education interventions could have direct or indirect impacts on outcomes for parents and other caregivers such as labor force participation, health and wellbeing, relationship-dynamics and time use, which are typically unexplored.

The research on community preschools in Mozambique found that caregivers of children attending the preschools were 26% more likely to have worked in the 30 days prior to the endline survey, suggesting that center-based ECD models may free up time and resources for adults and older children in the household.[53] Similarly, research in urban Kenya found that offering women vouchers for subsidized child care led to higher levels of employment.[54] And a study that provided mothers in Uganda with childcare subsidies led to a 44 percent increase in income.[55] These studies echo findings from other contexts, such as Chile[56] and Washington DC[57] that also find that women's work and labor force participation increase and improve in response to more accessible and affordable child care.

Intergenerational Effects

Considering how children's early education experiences might affect the adults in their lives is an important starting point for dual generation theory. Providing high quality early education experiences that improve outcomes for children and also enable caregivers and particularly mothers to work more, in better jobs is a starting point that could generate multiplicative and lasting impacts. It also provides a foundation from which to consider more expansive thinking for the kinds of theory and approaches that might define intervention that would be able to effectively disrupt the intergenerational transfer of poverty.

Research on the potential for intervention to disrupt the intergenerational transmission of poverty is limited, even in contexts like the United States. One research study on Head Start, the US' largest early childhood development program, explored an intergenerational effect, comparing the children of mothers who were exposed to Head Start when they themselves were children. They find evidence of increased

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[52] Evans, D. K., Jakiela, P., & Knauer, H. A. (2021). The impact of early childhood interventions on mothers. *Science*, *372*(6544), 794-796.

[53] Martinez, S., Naudeau, S., & Pereira, V. (2012). The promise of preschool in Africa: A randomized impact evaluation of early childhood development in rural Mozambique.

[54] Clark, S., Kabiru, C. W., Laszlo, S., & Muthuri, S. (2019). The impact of childcare on poor urban women's economic empowerment in Africa. *Demography*, *56*(4), 1247-1272.

[55] Bjorvatn, K., Ferris, D., Gulesci, S., Nasgowitz, A., Somville, V., & Vandewalle, L. (2022). Childcare, labor supply, and business development: Experimental evidence from Uganda. Working Paper.

[56] Berthelon, M., Kruger, D., Lauer, C., Tiberti, L., & Zamora, C. (2020). Longer school schedules, childcare and the quality of mothers' employment: Evidence from school reform in chile. *Partnership for Economic Policy Working Paper*, (2020-07).

[57] Mallik, R. (2018) The Effects of Universal Preschool in Washington, D.C. Children's Learning and Mothers' Earnings. Center for American Progress. https://www.americanprogress.org/article/effects-universal-preschool-washington-d-c/

educational attainment, reduced teen pregnancy, and reduced criminal engagement in the second generation.[58]

In international settings, given the often limited longitudinal data, even descriptive studies on intergenerational dynamics are rare. What research exists suggests that it might be very difficult to affect change across generations. Countries with high levels of poverty tend to have lowest levels of economic mobility.[59] Countries with high levels of stunting also have lower economic mobility. Education is often seen as a critical lever for economic mobility but research from the World Bank finds that even progress in educational attainment is limited, particularly in certain contexts; in some low-income and/or fragile African countries, less than 15% of today's young adults have more education than their parents.[60]

Research using data from the Young Lives initiative explored how changes in parents' income/consumption and education level would affect the incidence of poverty and inequality in the children's generation. The study concluded that for the poorest households with the lowest education levels, it seems reducing poverty in the parents' generation would not be an effective strategy for trying to address poverty in the children's generation. The study argued, "while reducing poverty and inequality in the parents' generation may be desirable in and of itself in terms of improving welfare among current adults, substantial increases in parental schooling for parents with limited schooling and in per capita consumption for parents in the left tail of the distributions are not likely to have large impacts on reducing per capita consumption poverty and inequality in the next generation."[61]

What theories of change might connect UPG and HPL interventions?

A foundational question for considering the combination or integration of UPG and HPL interventions is why should they be combined? There are a few possible approaches to answering this question.

First, the integration/combination of BRAC's graduation and play lab programs could be considered from the vantage point of each individual intervention. The evidence review foreshadowed some of these perspectives with the questions: how might the graduation program affect children and the intergenerational transmission of poverty? And how might household poverty constrain the effectiveness of the play lab intervention? In this way, the motivation for integration/combination is to enhance or

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[58] Barr, Andrew C., and Chloe Gibbs. (2019). Breaking the Cycle? Intergenerational Effects of an Anti-Poverty Program in Early Childhood. (EdWorkingPaper: 19-141). Retrieved from Annenberg Institute at Brown University: http://www.edworkingpapers.com/ai19-141

[59] Narayan, A., Van der Weide, R., Cojocaru, A., Lakner, C., Redaelli, S., Mahler, D. G., ... & Thewissen, S. (2018). *Fair progress?: Economic mobility across generations around the world*. World Bank Publications.

[60] Gerszon M, Gupta, M., Ramasubbaiah,N. & Thewissen., S. 2018. Fair Progress? Economic Mobility across Generations around the World. Washington,DC: World Bank.

[61] Behrman, J. R., Schott, W., Mani, S., Crookston, B. T., Dearden, K. A., Le Duc, T., ... & Stein, A. D. (2013). *Intergenerational transmission of poverty and inequality: Young Lives*. Lima.

improve the effectiveness of each individual intervention or to address possible limitations of each individual intervention.

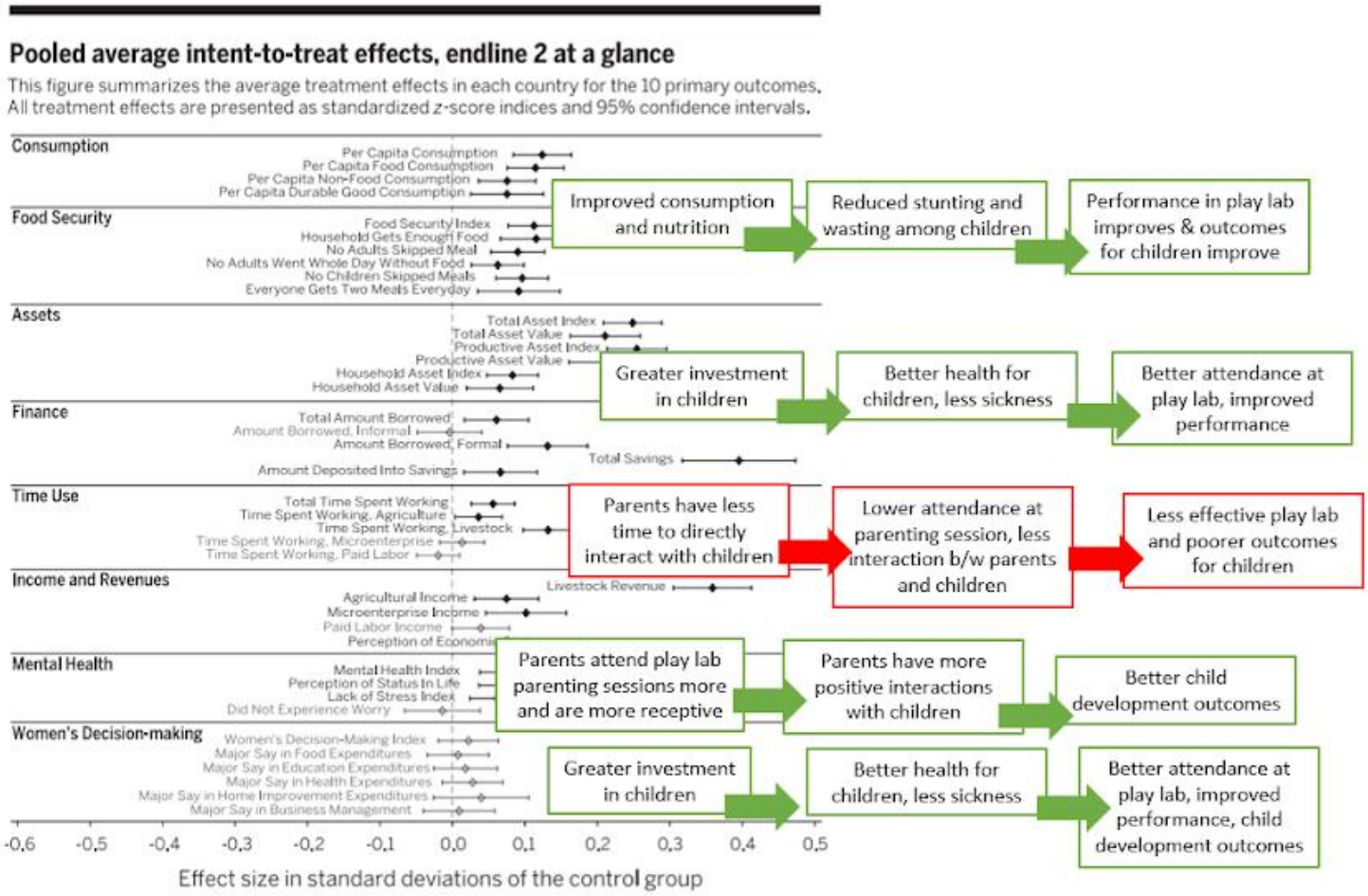
From the graduation perspective, there might be a concern that the program in its current form doesn't do as much as it could to improve outcomes for children and particularly outcomes related to early childhood development and education. Relatedly, the graduation program might not address the intergenerational transmission of poverty. Therefore, including the play lab or elements of the play lab along with the implementation of graduation might realize greater, more meaningful, or more transformative impacts than the graduation program on its own.

From the perspective of the play lab, it's possible that the program might not be as effective for children from ultra-poor households or that the experience of poverty might constrain the effectiveness of the play lab - for example, if children are hungry and unable to concentrate while at the lab or if ultra-poor parents are too busy or not motivated to attend the play lab's parenting sessions. Providing the graduation program to households of children attending the play lab or including some components of graduation along with the parenting sessions to in some way address household poverty could enhance the effectiveness of the play lab.

There is also the possibility that in trying to implement both interventions, each individual intervention might undermine or lessen the impact of the other. It should not simply be assumed that a combination of the two interventions would necessarily lead to positive impacts for all beneficiaries. It is important to clearly articulate the theories of change that could connect the two programs. This theoretical exercise of tracing potential causal impact pathways builds on the existing evidence base of each intervention and related fields of research, and presents a series of testable hypotheses for research on the integration and combination of graduation and play lab programs.

In this learning agenda, we describe several potential pathways that we consider important to highlight, but these do not represent the full universe of possibilities. As a starting point, we reference the six-country graduation paper by Banerjee et al. (2015) and the eight primary outcome areas. In Figure 1, we hypothesize five possible impact pathways for how the proven impacts of the graduation program could affect children and households interaction with the play lab. We include four pathways that would result in improved effectiveness of the play lab program and one pathway that would undermine or reduce the effectiveness of the play lab.

Figure 1. Possible Causal Pathways Graduation to Play Lab (Positive Impact in Green, Negative Impact in Red)

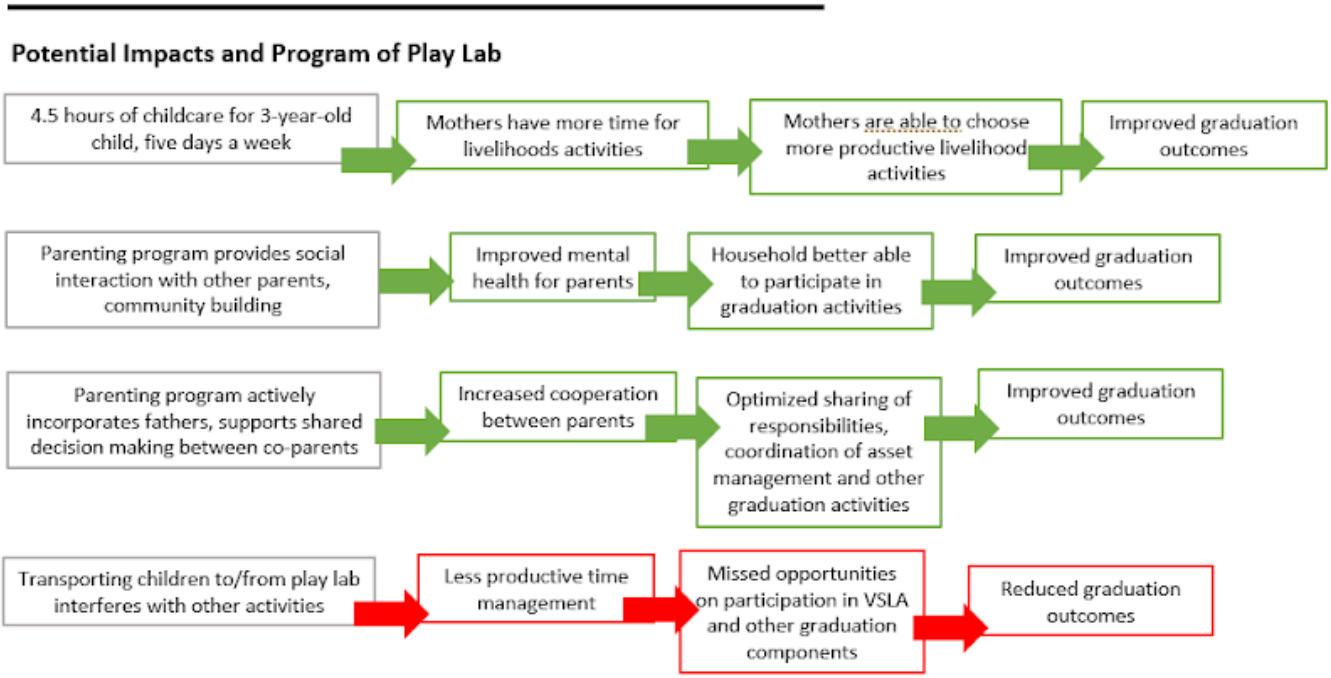


There are also potential pathways that would start with the play lab and affect implementation and effectiveness of the graduation program. One key theory to highlight is that the childcare provided by the play lab could enable women to spend more time on livelihoods activities or would influence women to choose different or possibly more productive livelihoods activities. In this way, the inclusion of the play lab has the potential to improve the effectiveness of the graduation program.

These theories directly relate to and build on an established evidence base, but are also an opportunity for exploration and to consider new directions for programming and research, particularly in relation to the play lab, which hasn't been the focus of as many studies. For example, previous implementation of the play lab has recognized that it typically engages with mothers, and fathers are much less involved, if at all, in the Ugandan context. Moving forward as the team considers a focus on gender for its curriculum, and potentially working to directly involve fathers, it could build on the work of another parenting program in

Uganda that implemented content on interpersonal dynamics, building love and respect in the relationship between mothers and fathers, and fathers to support mothers in the parenting of young children. This content was very positively received and qualitative research identified it as a core component of an overall program that was found to improve child development and also to reduce maternal depression. This pathway and other possibilities are included in Figure 2, tracing potential theories of change from the play lab to graduation.

Figure 2. Possible Causal Pathways Play Lab to Graduation (Positive Impact in Green, Negative Impact in Red)



Ultimately, a key motivation for combining or integrating the two programs is not just that each intervention might complement the other and become more effective, but also that this would lead to possible synergies and multiplicative effects, that the impacts of each program could be mutually reinforcing. The simple theories of change presented here should be considered an initial starting point. As program implementation and research continues to develop, more complex theories of change will be useful to consider the dynamic and interconnected nature of many of these issues.

An additional consideration for combining or in some way integrating the graduation and play lab programs is that this work might generate new possibilities for program implementation and operations. Depending upon the prioritized outcomes, integrating elements from each intervention to create a possible third intervention might turn out to be a more efficient and more effective delivery model. This is a critical consideration for the combination of the two programs and the need to define what might be considered a successful combination. It's possible that specific outcomes and populations might be better served by separate intervention, or that from an operations or organizational perspective, separate

implementation is preferred. A range of factors including cost and ease of implementation would inform decision-making. Ultimately, investigating different delivery models will be helpful to understand how best to approach the questions of combination/integration in relation to different priorities and concerns, such as potential for scale, sustainability, cost effectiveness, reaching the most vulnerable, and the greatest and long-lasting impact. This leads to the question of how the two interventions might best be combined.

What programmatic models for combining UPG and HPL interventions would maximize impact? What programmatic models would be most cost-effective to deliver?

There are several factors relevant for considering how the two interventions could best be combined or integrated. These decisions should build on the causal pathways and theory for what approaches would maximize impact and optimize resources.

A primary concern is timing and possible sequencing: should the interventions be implemented concurrently? Or should they be sequenced? Answers will vary based upon the priority outcomes. For example, one key causal pathway between graduation and the play lab is nutrition. A broad evidence base has established that for children earlier intervention is better, even arguing that certain outcomes such as stunting are even “generally irreversible” after children reach two years of age (though there is some research that shows that some outcomes are still responsive to improved nutrition when children are three or four years of age.) Findings from the graduation and nutritional study in Bangladesh support these trends - the program was most effective for the youngest children. Early health indicators such as stunting are strongly correlated with a host of later outcomes across children’s lifespan. If the graduation program is able to improve consumption, food security, and nutrition for households, and as a result, improve children’s nutritional status and early health outcomes, it is possible that they could be put on an improved developmental trajectory and be better positioned to benefit from the play lab and other interventions.

This evidence would suggest that if the improved nutrition pathway is prioritized, it would be better to implement the graduation program with households when children are younger, to establish a better foundation of health from which to later enroll in the play lab. This approach could enable dynamic complementarities between the two interventions. If the graduation program were to be implemented when children are 3 or 4 years old, concurrent with the play lab, it might be too late for children to meaningfully benefit from the nutrition pathway.

Conversely, for the childcare impact pathway, it might be better to implement the two programs concurrently, or even start the play lab slightly before the graduation program, to enable households to experience the time opened up by being relieved of childcare duties and accordingly be informed by that experience to choose and engage in the livelihoods activities of graduation. Each of these two theories of change might suggest that some form of sequencing between the two programs might maximize impact.

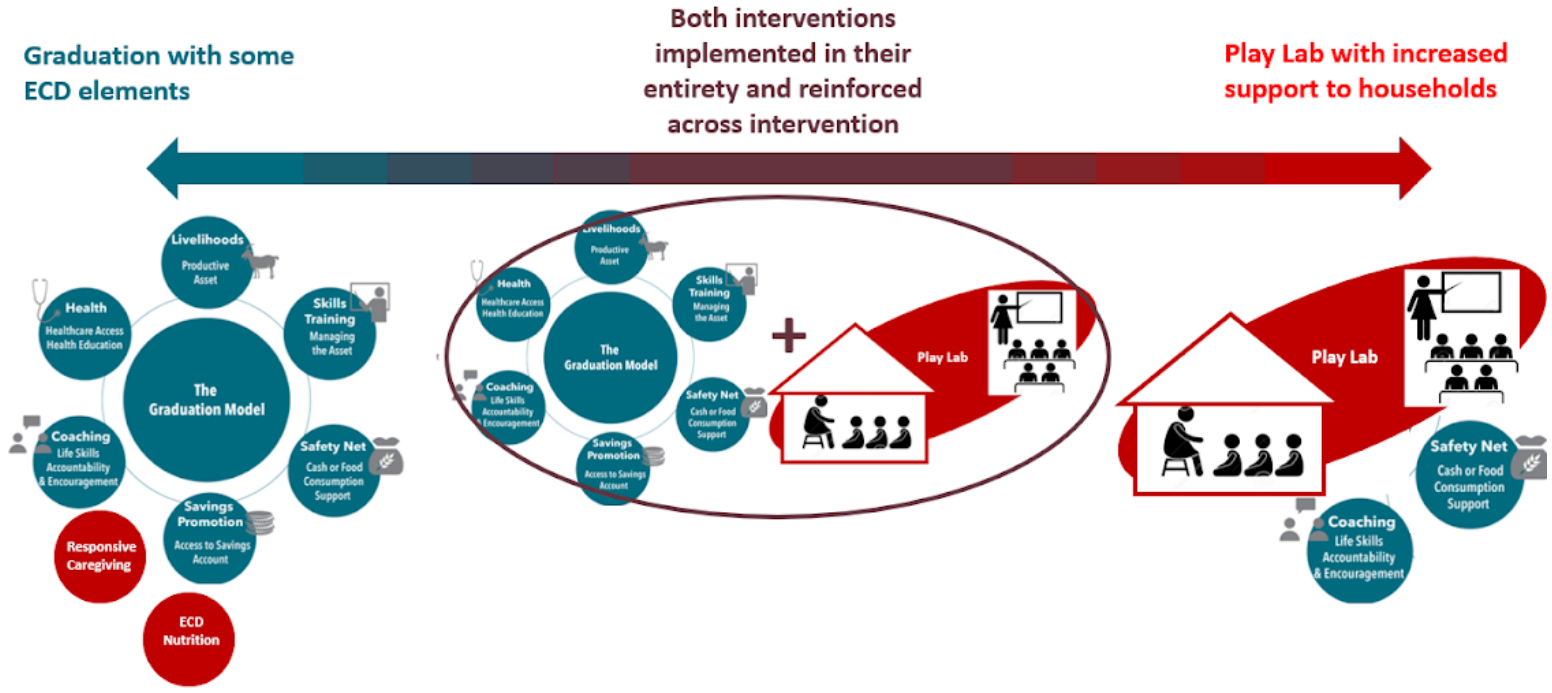
A different argument for the sequencing of intervention is that it might be challenging for households to manage multiple interventions at once. It could be an overload of information if parents are working to learn skills and participate in graduation at the same time they are attending the parenting sessions of the lab and learning about and working to promote child development.

One other consideration is that families often have children of multiple ages. It might not be necessary or constructive to try to precisely target the sequencing of interventions in relation to children's ages, given that households will have multiple children or might have additional children later and different children might be able to benefit in different ways.

Related to the issue of timing and children's age is the process of identifying or targeting potential beneficiaries. The targeting process is often a defining feature of graduation programs, aimed at identifying the most vulnerable households within communities. The process will include both data collection and community participation. The play lab targets children by age, but otherwise is not strongly defined by an individual targeting approach, instead aiming in Uganda to locate in communities not yet served by early education services. Combining the two interventions might need to adjust the targeting process, which will inform pivotal research themes such as what defines household poverty and vulnerability across different contexts and how children and the age of children relates to poverty and vulnerability.

For both concurrent and sequenced program implementation, an important area for exploration is whether each individual intervention will be adjusted or adapted, if at all, and in which ways. This can be envisioned as a spectrum where on either end, each individual program is implemented in its original form, including a couple small adjustments to include content or programming from the other intervention. Then in the middle, each program receives equal emphasis and is implemented in its entirety, with effort to emphasize and focus on themes that align across each intervention. This spectrum is illustrated in Figure 3.

Figure 3. Spectrum of Possible Program Implementation Models



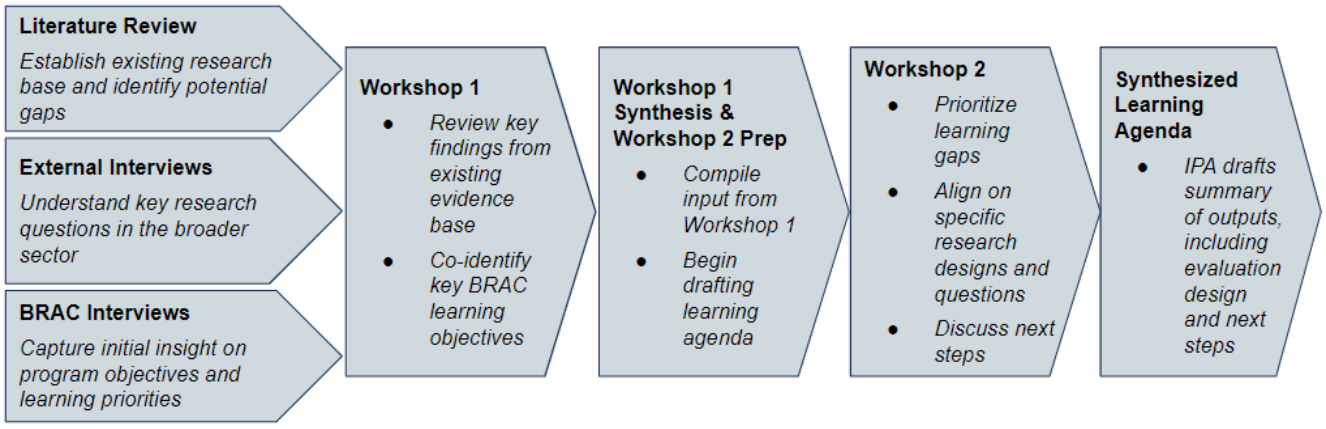
As with other issues such as targeting and sequencing, there are many perspectives which could influence decision-making on the model of program implementation. A few include: what models are implementation teams able to implement with fidelity? What approaches lead to the best beneficiary experience? Which approaches lead to the greatest impact? Which approaches lead to the most long-lasting impact, and for which outcomes?

The models for program delivery should directly reference the two themes of the previous section: theoretical causal pathways between the two interventions and operational concerns. Choices on program implementation need to address both. Implementing complex programs in low resource contexts with fidelity is always challenging. Which program models will be most effective is very related to which models are most likely to be successfully implemented.

Considering different program models also references the distinction between combining the two programs and integrating them. To combine, components of each intervention or each intervention in its entirety are simply implemented with the same population. It is mostly through the beneficiaries' perspective that the combination can be viewed. Operationally, the programs are implemented as they are independently. To integrate, each program is adapted and adjusted. This can be as minimal as the two implementation teams (social protection and education) sharing data, information, and experiences (for example, a play leader noting that a child seems listless and inattentive in class might share with a graduation coach so that they can follow up at the household to see if the child is getting enough sleep and enough to eat). This could also inspire major project adjustment, such as integrating child development topics into the graduation home visits or encouraging livelihoods activities that would provide animal foods and improved nutrition for young children.

Learning Agenda Development Process

IPA facilitated a multi-stage process to identify the learning priorities for this project based on existing gaps in the research base, input from key stakeholders within BRAC, and the learning approaches that were logistically feasible given the design of this project:



This section will outline the methodology used to arrive at the learning agenda, including the key decisions and moments of consensus building that allowed the learning agenda to synthesize diverse perspectives and priorities. Additional information on the questions that were developed during this process are available in **Appendix 2**.

Building Initial Hypotheses

In order to complement the review of published evidence detailed above, IPA also facilitated a series of interviews with external experts in the field. These interviews included both early education and graduation researchers and focused on the existing evidence base for both interventions, outstanding research questions for the field of early childhood education and social protection, as well as theories to support the integration of the interventions. IPA conducted four external interviews:

- Frances Aboud, Professor Emerita, Department of Psychology, McGill University
- Lasse Brune, Research Assistant Professor at the Global Poverty Research Lab at Northwestern University
- Erum Miriam, Executive Director of BRAC IED (Institute of Educational Development) BRAC University
- Hirokazu Yoshikawa, Courtney Sale Ross Professor of Globalization and Education at NYU Steinhardt, Co-Director of the Global TIES for Children Center at NYU

In addition to these external interviews, IPA spoke with a number of BRAC staff to better understand the internal evidence that BRAC had generated on these programs throughout the years, as well as what additional learning priorities remained for this project. The content of these interviews varied by role, but included variations on the following question areas:

- Knowledge Gaps: What information aren't you certain about for HPL, UPG, or their combined implementation?
- Risks: What is the biggest risk to this project's ability to achieve its desired impact?
- Key Indicators: What is a piece of data that you would look at that would identify whether this project was successful?

These interviews were conducted between July 14 and August 1st, 2022 and drew on a range of roles within the BRAC team. This diverse set of seven key informants allowed IPA to draw on both UPG and HPL knowledge, as well as complementary perspectives within BRAC USA, IERC, and the Uganda Country Office.

Based on the output of these interviews, IPA was able to generate an initial list of potential learning questions to inform a series of refinement and prioritization workshops.

Question Refinement & Prioritization

Based on the initial list of potential learning questions, IPA facilitated two workshops with BRAC staff to work on refining the learning objectives for this project and identifying potential strategies for their implementation. Workshop 1 included an overview of the existing research from the evidence review, including indications of existing gaps. This was followed by a collective review of the questions that had

been identified during the BRAC internal interviews, with opportunities for other team members to refine the language of the learning questions or suggest additional topics for investigation. At the end of the two-hour workshop, the team had an initial list of questions of interest for this project. Some of these questions were specific to HPL or UPG, while others covered the programs' implementation in the Uganda refugee context or the integration of the two programs.

Following the first workshop, IPA shared an anonymous online survey to workshop participants asking them to prioritize the refined list of questions that had been identified in the workshop. With 11 responses, the survey allowed IPA to identify the questions that most resonated with the BRAC teams' learning goals for this project, considering both the level of existing evidence and the impact that the additional learning would have for the project. IPA used the results of the survey to inform the conversation in the second workshop. See **Appendix 2** in this document for the list of prioritized questions.

Workshop 2 began with a discussion of learning approaches that could be used to answer some of the questions identified throughout this process, as well as some opinions for possible research designs that could lay a foundation for future research. The workshop centered around the high and medium priority questions that had been identified in the survey, excluding the bottom third of the questions from further discussion. These prioritized questions mapped to three broad topic areas, that crossed both HPL and UPG's specific questions:

- Implementation Quality: Questions about how to ensure that the programs are being implemented well in the Ugandan Refugee Context
- Meeting Diverse Needs: Questions about how to connect refugees and host communities with specific services or program adaptations to best meet their needs
- Integration Effects: Questions about the specific impacts that result from the combination of the two programs

Discussion in this workshop focused on these three topic areas, first in breakout groups and then in plenary. The implementation quality group discussed how the identified questions could align with the planned Monitoring approach and project team activities. The "Meeting Diverse Needs" discussion focused on adding detail to the collaborators and key indicators for a potential integration with additional necessary support based on existing needs. Finally, the Integration Effects conversation touched on the challenges of causal inference in regard to rapidly changing child outcomes and reviewed which of the integration-related questions could be addressed within the initial year or so of this program. To conclude the workshop, IPA helped identify additional linkages between the programs, both on the programmatic and M&E dimensions.

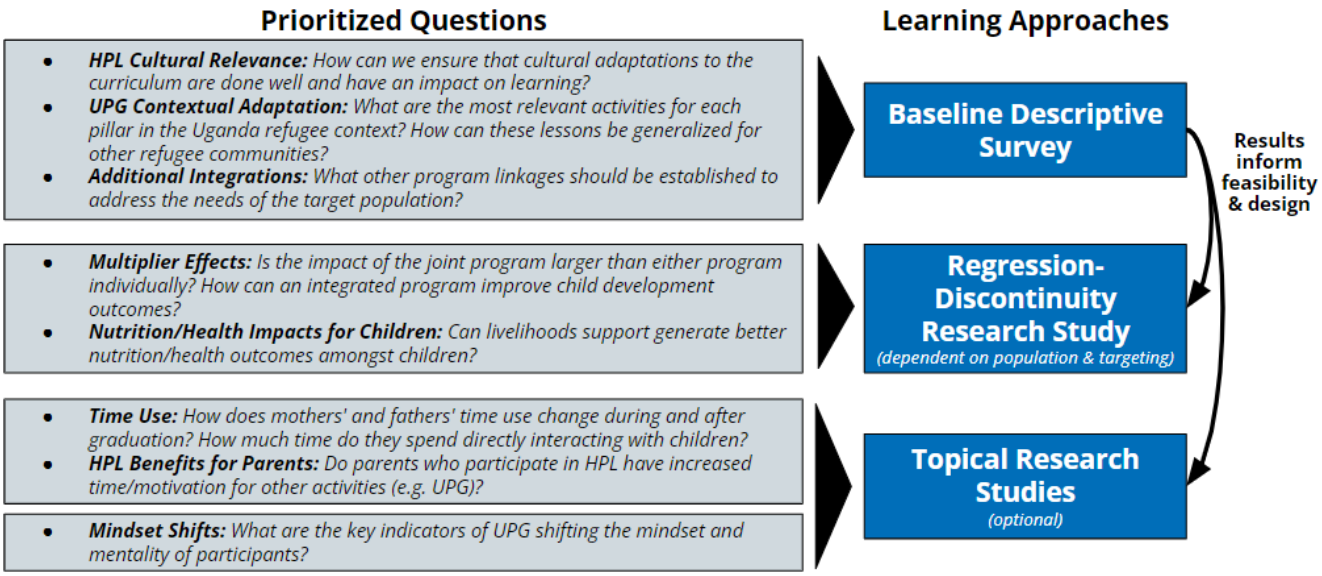
Consolidation & Dissemination

Upon completion of the workshops, IPA worked with the BRAC team to gather additional specific details around the currently planned Monitoring activities and available research resources. IPA has used these inputs to further refine the proposed design of the learning activities for this project. The output of this process is this learning agenda document, which summarizes the process, proposes learning questions

and research methods for this project, and identifies next steps for the BRAC team moving forward. This learning agenda can serve as a consolidated summary of the learning objectives and methods for this project and can be a reference for both external stakeholders and project staff.

Learning Agenda

Through the Learning Agenda Development process described above, this project has arrived at three proposed avenues to both strengthen the learning within this project and build the evidence for future implementation, intervention, and research. These areas are aligned with the key priority research topics identified during the learning agenda development process and can be organized as follows: 1) baseline descriptive survey 2) possible impact assessment using a regression-discontinuity research design and 3) topical research studies.



This section will outline each of these three learning approaches in turn and can serve as a basis for project planning both within BRAC and collaboratively between BRAC and IPA.

Baseline Descriptive Survey

A number of key areas of interest were raised across the workshops and conversations: in particular, gender, mental health and well-being, time use, and mindset and aspirations. This initial phase of the learning agenda is a unique opportunity to learn more about the target population, the issues that affect them, and these areas of interest. As a result, we believe program design, program implementation, research design, and potential monitoring and evaluation activities could all be informed by initial descriptive data collection. A baseline survey conducted in early 2023 would have three key goals:

1. *Providing additional information about the target population:* BRAC has not previously implemented the graduation program in Imvepi and Rhino refugee settlements, and in the workshops there was uncertainty about the needs and characteristics of these target populations, both in relation to UPG and HPL interventions. These questions can be explored through initial data collection, and should be addressed early in order to inform project implementation decisions (regardless of what additional research activities are undertaken). IPA can collaborate with the project team to ensure

that this survey also directly integrates with the contextualization process for both UPG and HPL. While this would not be a substitute for a full contextualization process, the results of this survey could help support the project team's work.

2. *Informing a decision around the feasibility of a regression-discontinuity research study:* Given the factors defining this engagement, a regression-discontinuity design is the most likely approach to be able to credibly assess the difference between the combined UPG-HPL implementation relative to HPL alone. At this point it is not clear if this approach will be feasible, as there are key outstanding questions for the targeting process and for our understanding of the population. Using an initial baseline survey to compare UPG participants vs. nonparticipants would be a critical input.

3. *Providing feedback for the targeting process:* A key question for both UPG and Play Lab interventions is defining and understanding vulnerability and how extreme poverty is manifested across different populations and settings. Collecting rich descriptive information on households will provide key feedback on the targeting process, and in particular, whether targeting household level factors correlates with children's development.

4. *Informing the definition of additional topical research studies:* Based on the results of the prioritization process with BRAC, IPA has identified a series of potential research studies that could address specific questions of interest. The primary factor to determine whether to move forward with any of these studies in this initial period will be IERC's interest and capacity, in addition to available resources and IPA availability. However, in addition to these organizational constraints, the selection of specific studies can be informed by the specific needs and characteristics of the target population, as established by an initial baseline analysis.

The data collection for this survey will be implemented by BRAC, through the efforts of IERC. We estimate that this survey could cover all UPG participant households, as well as a sample of households with children participating in the HPL program but not selected to receive the UPG program, aiming for the two groups of households (UPG and non-UPG) to be as similar as possible IPA is available to collaborate on the design of tools and measures, sample identification and selection, and data analysis. It is important for this data collection to begin soon, before project activities fully begin and to inform decisions around research design.

We believe this initial study will be critically important on its own for program implementation and for considering later research activities. Depending upon whether a regression discontinuity or other experimental design is feasible, it might be useful to have a subsequent endline data collection exercise, or we might believe this would not be a good use of resources. For example, if there are substantial differences between UPG participants and nonparticipants, there would not be any way to draw conclusions across these two groups, and resources could be better spent understanding implementation fidelity or participant's experience of the combined interventions.

Initial Descriptive Study

<table>
<tr><th colspan="3">Descriptive Study to Explore Mental Health, Aspirations, and Gender and their Potential Association with Child Development Outcomes</th></tr>
<tr><td>Purpose</td><td colspan="2">Both UPG and HPL interventions rely upon a detailed understanding of the communities in which they operate. As the interventions work to better target the unique needs of Rhino and Imvepi communities, as well as consider new content areas of mental health and gender, it will be critically important to investigate what different factors and dynamics define the population, and in particular, relationships between parents and children.

Possible Learning Questions:
- What early learning and stimulating activities do parents in Rhino and Imvepi communities regularly perform with young children?
- What existing parenting practices are associated with child development outcomes? What other household factors are associated with child development outcomes?
- What kinds of child care activities do mothers perform? What kinds of child care activities do fathers perform? What cultural and gender beliefs define child care in these communities?
- What is the prevalence of depressive symptoms and other mental health challenges among mothers and fathers?
- What kinds of aspirations and mindsets are associated with attitudes towards education and with children’s development?</td></tr>
<tr><td>Requirements</td><td colspan="2">This will require data to be collected at the household and surveys with both children and caregivers.</td></tr>
<tr><td rowspan="2">Proposed Approach</td><td>Design</td><td>As an initial descriptive study, the key question would be how representative the sample is in relation to the overall population. This relates both to the targeting exercise, but also more broadly, how BRAC has coordinated with other development actors and selected sites at the community and regional level.</td></tr>
<tr><td>Resources</td><td>This study would require significant detailed data collection on the part of IERC, but could build off of existing expertise in data collection and measurement, for example, using many of the tools already used to monitor UPG and HPL programs.</td></tr>
</table>

As previously noted, questions of impact, and in particular whether a combined version of the interventions realizes greater impact than individual interventions, represented important priority questions for the BRAC team. Given the large sample size for program implementation, this initial phase

does present a potential opportunity to explore the impact of including the graduation program on top of the play lab. Accordingly, it is worth exploring the possibility of conducting a regression discontinuity research study to develop some estimate of impact. More details are provided below.

Regression-Discontinuity Research Study

<table>
<tr><th colspan="3">Regression Discontinuity Design to Study Incremental Impact of Ultra-Poor Graduation on Humanitarian Play Lab Child Outcomes</th></tr>
<tr><td>Purpose</td><td colspan="2">Without collecting data on a non-participant control group, it is not possible to establish the true impact of both programs together. However, it might be possible for BRAC to compare the impact of the joint program for the 700 families in both UPG and HPL with a comparison group of households that only receives the HPL. These questions around the incremental impact of receiving UPG on top of HPL were highlighted in the workshops as a key area of focus for BRAC, and there is currently no rigorous research in the broader literature on this topic.

Key Learning Questions:
- Do children in UPG + HPL households have better learning and development outcomes than children in HPL-only households?
- Do caregivers Knowledge, Attitudes and Practices change when receiving UPG in addition to HPL?</td></tr>
<tr><td>Requirements</td><td colspan="2">This type of study is only possible if we learn in the targeting process that many households qualify for UPG and only some receive it, and if there is a rich set of variables on various household characteristics that allow us to establish a similarity between the selected and unselected groups. If these two assumptions are met, it might be possible to conclude that UPG-targeted households are broadly similar to another set of non-targeted households, creating a quasi-experimental comparison group.</td></tr>
<tr><td rowspan="2">Proposed Approach</td><td>Design</td><td>This study would begin with a detailed assessment of household and child characteristics across the entire UPG cohort and a HPL only comparison group. A regression discontinuity design relies on observed similarity between participant and non-participant groups around a single cutoff point (or discontinuity). If this similarity is established, we might be able to credibly compare child outcomes for the UPG and HPL-only households from the baseline survey to an endline at the conclusion of the program.</td></tr>
<tr><td>Resources</td><td>This study would require significant technical input and detailed data collection on the part of IERC. If we end up believing that the RDD is a</td></tr>
</table>

		very strong and credible design, we might consider soliciting additional funding for data collection in order to conduct a full study. IPA would be able to provide some support on the design, analysis, and potentially seeking additional funding for this research.

Topical Research Studies

Throughout the Learning Agenda development process, the BRAC team highlighted specific areas of interest and potential channels of impact that merited further research that were relevant for each intervention independently as well as for the joint implementation of these projects. IPA has proposed two studies below to address specific topics that were prioritized by the team: participant time use and mindset-shifts. It is possible to do both, one, or none of these additional studies, depending on the level of interest to BRAC and in particular IERC, IPA availability, available resources, and design considerations as outlined for each study.

Time Use Study to Identify Participant Constraints to Joint Implementation	
Purpose	One key question for the implementation of this project is whether guardians and household heads will have enough time to participate fully in both UPG and HPL (in addition to their other daily activities). This topic was of particular interest to the BRAC team, who prioritized Time Use questions as the third highest priority across all UPG, HPL and integration questions. This study would explore how parents spend their time, how this is influenced by UPG, and how livelihoods and other economic activities influence the time spent directly interacting with children and participation in HPL group sessions and activities. In addition, a key line of inquiry would be whether the availability of child care might change how households and mothers in particular approach the graduation program and livelihoods activities. Findings from this study can be used to inform future designs in regards to sequencing and/or balancing HPL and UPG demands on households. *Key Learning Questions:* - In the absence of intervention, how do different household members spend their time and who spends time directly interacting with children? - How does mothers' and fathers' time use change during and after graduation? How much time do members of the households spend directly interacting with children? What opportunities are there to promote children's early learning and development in parents' days? - Does the availability of childcare influence parents' livelihood activities? What economic activities allow for / discourage the presence of children?
Requirements	- *Baseline study* should ask a few questions about beneficiaries' current time use and available time, to assess whether this question is worth pursuing further.

	- *IERC* will need to have staff who are capable of coordinating and executing qualitative data collection activities.	
Proposed Approach	**Design**	This study would require intensive qualitative data collection based on a sample of approximately 20-40 households. These households would participate in a series of data collection activities, including keeping time use diaries, daily phone calls, observations, and/or qualitative interviews. This study would take place over the course of the project implementation in order to assess time-use throughout different stages. Data analysis would involve the creation of a detailed report on participant time use, which could be used to inform the design of figure implementations.
	Resources	This study would require significant qualitative data collection efforts from IERC staff with qualitative experience (or who can be trained). Ideally, IERC could also manage initial cleaning and analysis of the qualitative data, and collaborate with IPA on the synthesis and dissemination of key findings.

Study on Mindset Changes in Children and Guardians as a Result of UPG		
Purpose	A key hypothesis in the theory of UPG is that it improves parental mindset/aspirations. One potential causal pathway that could connect UPG and HPL interventions is that this change in mindset could facilitate enhanced engagement in children's education. This study would explore the mindset hypothesis, in particular looking at the timeline upon which shifts in mindset occur. Findings could inform an approach to dual generation programs where UPG program is sequenced ahead of offering the HPL program in order to enhance effectiveness of the HPL program element. *Key Learning Questions:* - What aspirations or mindset changes occur through graduation with this population? - When over the course of graduation do these changes take place? - What mindset or aspirations might be relevant for children and education? - What measures best capture both initial variation and changes in mindset?	
Requirements	- IERC would need to be interested in this mindset question and commit to in-depth qualitative research throughout the duration of the project.	
Proposed Approach	**Design**	This study would involve detailed qualitative investigation of interrelated concerns of aspirations, mindsets, future orientation, and locus of control. This could shed additional light on an under-studied component of the Graduation program, while also understanding how changes in

		parental mindsets are connected to children's aspirations. This study would use periodic in-depth interviews with a selected cohort of 20-40 participant households and children throughout the duration of the project in order to capture any subtle shifts in their mindset. While this study is not tied to economic outcomes, it could be an interesting descriptive analysis to inform future projects and further develop BRAC's understanding of both Graduation itself as well as its multigenerational effects. An additional approach could include work on measurement, identifying the key indicators and language that best connects and captures potential changes in mindset and has concurrent and predictive validity to other outcomes.
	Resources	IERC would need to have the bandwidth and capacity to lead the data collection and initial cleaning and translation. IPA can support tool development and qualitative analysis.

An additional two iterative topical studies focused on mental health and gender were deprioritized by BRAC because their iterative learning approach would have complicated the implementation of an already-complex project. Descriptions of these deprioritized studies can be found in **Appendix 1** of this document.

Appendix 1: Deprioritized Topical Studies

The below two topical studies on mental health gender were deprioritized by BRAC, in order that iterative learning approaches not distract from the implementation of the project as planned.

<table>
<tr><th colspan="3">Iterative Development of Integrated Mental Health & Psycho-Social Support</th></tr>
<tr><td>Purpose</td><td colspan="2">Given the often traumatic nature of refugees' experience of forced displacement, as well as the stressors of extreme poverty, it is possible that the target beneficiaries would benefit from additional psycho-social and mental health support in addition to UPG and HPL program activities. Throughout the workshops, BRAC staff prioritized MHPSS content integration as priority questions for both the HPL and the UPG programs. This study would include a detailed needs assessment, followed by iterative testing and prototyping with the UPG and HPL teams to design and refine MHPSS content additions for HPL and UPG programs.

Key Learning Questions:
- How can the shared theme of MHPSS be used to connect across the two programs? How can they be used to mutually reinforce issues related to mental health?
- What defines the need for mental health support across refugee/ host communities? How are challenges with mental health expressed in both children and parents?
- What content or approaches are most effective in this context?</td></tr>
<tr><td>Requirements</td><td colspan="2">- Baseline study should identify a high prevalence of depressive symptoms or PTSD among adults and/or children to motivate this study
- BRAC project team is interested in including MHPSS content, and has the capability to do so (potentially building on resources from BRAC Bangladesh). They also must have significant bandwidth available to support this iterative design process.
- IERC has the capability to do mental health assessments, and is interested in pursuing these mental health questions.</td></tr>
<tr><td>Proposed Approach</td><td>Design</td><td>The project would start with a detailed needs assessment to better identify the specific mental health challenges facing the target population, and understand the resources that are available to help. This would likely include a behavioral study among children to understand the expression of mental health challenges in this specific context.

Based on the results of this initial fact-finding, IPA could work with the project team to design a series of iterative learning approaches,</td></tr>
</table>

		including participant feedback, prototyping, and rapid pilots to quickly test approaches to MHPSS in this context. These would likely center around the curriculum development and contextualization process that is part of both HPL and UPG programs. If possible, IPA would also like to involve members of IERC and/or the BRAC Uganda Monitoring team in order to build these capabilities within BRAC. Given the iterative and exploratory nature of this study, it would be difficult to credibly establish the impact of this program on participant mental health, but it could be used to lay the foundation for future MHPSS work within BRAC.
	Resources	- Depending on the severity and extent of the needs, both IERC and the project team may want to commit significant resources to this study. Alternatively, a scaled-down pilot could also generate useful learnings at a smaller scope. - IERC (with collaboration from the project team) would lead the data collection for the needs assessment, with IPA supporting on design and analysis. - The iterative learning component would require significant Project Team support to both collect data and implement changes, so this study should not be undertaken if they will not have substantial bandwidth available.

Assessment of Gender-Sensitive Program Adaptations	
Purpose	Gender is a key concern for UPG and HPL programs as they both primarily target and involve mothers. A gender-sensitive study could assess whether it would be possible to improve these individual or joint programs by 1) better engaging fathers; 2) exploring ways for fathers to better support mothers; 3) strengthening BRAC's understanding of local dynamics and issues relevant to relationships and gender norms. This study would involve an initial round of qualitative data collection to assess needs, followed by iterative development of gender-sensitive tools and curriculums to address identified challenges and gender dynamics. *Key Learning Questions:* - How do issues related to gender affect implementation of these interventions in their current form? - How could the Play Lab meaningfully involve fathers? Would this lead to greater impacts for children? - How are childcare responsibilities divided across mothers and fathers? As well as siblings?

	- What household dynamics influence the implementation of UPG?	
Requirements	- *Baseline survey* indicates that gender roles or gender-based discrimination are a barrier for participants in their daily lives. - *Project team* is interested in iterative learning and adaptation of curriculum to address gender issues - *IERC* has the interest and capacity to support the initial gender-based needs assessment	
Proposed Approach	**Design**	This study would start with initial qualitative research into gender norms and child-rearing practices in order to ground the study design in the particular challenges that are specific to this context. This could include semi-structured interviews and/or focus groups with selected participants. Based on these findings, this study would work with the project team to adapt and test curriculums for fathers or other gender-sensitive content. This could include participant feedback, prototyping, and rapid pilots, much like the approach to MHPSS. It would similarly not be able to establish rigorous impact, but could help inspire future research with BRAC and other organizations in the sector.
	Resources	- IERC (with collaboration from the project team) would lead the data collection for the initial qualitative data collection, with IPA supporting on design and analysis. - The iterative component would require significant Project Team support to both collect data and implement changes, so this study should not be undertaken if they will not have substantial bandwidth available.

Appendix 2: Prioritized List of Initial Learning Questions

The tables below outline the questions that were generated by the Workshop series, as well as their ranking based on the survey of BRAC participants. Scores were based on the unweighted average score of all respondents, asking them to consider both the importance of the question to the successful implementation of this project, and the level of uncertainty in the current evidence base.

HPL Questions

Topic	Question	Score	Priority
Parental Engagement	What is the best way to ensure that Ugandan parents (and other guardians) are engaged with HPL?	1.7	High
Measuring Implementation Quality	How can BRAC ensure that center-based implementation is being implemented with high fidelity/quality?	1.7	High
Disability-Inclusion	How can HPL be adapted to support disabled children and families?	1.7	High
Psycho-Social Support	What is the best way to integrate PSS into HPL? For children and for caregivers?	1.6	Medium
Cultural Relevance	How can we ensure that cultural adaptations to the curriculum are done well and have an impact on learning?	1.6	Medium
Gender Sensitivity	How can HPL programming best support women and girls?	1.5	Medium
Workforce	How can we support the Play Leaders with long term capacity building?	1.4	Medium
Social Cohesion	Can HPL be used to strengthen engagement between refugee and host communities?	1.4	Medium
HPL Benefits for Parents	Do parents who participate in HPL have increased time/motivation for other activities (e.g. UPG)?	1.3	Medium
Advocacy	How can HPL be used to shift ECD policy in Uganda?	1.2	Low
Session Time	How does increased session time increase impact?	1.1	Low
Service Linking	What other services could parents be connected to?	1.0	Low
Family Dynamics	Is there a way to engage other household members such as older siblings or grandparents who might already be involved in care activities?	1.0	Low

UPG Questions

Topic	Question	Score	Priority
Time Use	How does mothers' and fathers' time use change during and after graduation? How much time do they spend directly interacting with children?	1.8	High
Contextual Adaptation	What are the most relevant activities for each pillar in the Uganda refugee context? How can these lessons be generalized for other refugee communities?	1.7	High
Intergenerational Effects	How can benefits be maximized for children of UPG households?	1.7	High
Mental Health	Would it be helpful to include content on mental health and psychosocial support?	1.5	Medium
Other Integrations	What other program linkages should be established to address the needs of the target population?	1.3	Medium
Mindset Shifts	What are the key indicators of UPG shifting the mindset and mentality of participants?	1.3	Medium
UPG Impact on Children	Are children of UPG parents better able to participate in HPL? If so, what are the key drivers? Are these effects different depending on the children's ages?	1.0	Low
Innovations	Are there technology or other innovative solutions (e.g. digital banking) that can address key contextual challenges?	0.8	Low

Integration-Related Questions

Topic	Question	Score	Priority
Multiplier Effects	Is the impact of the joint program larger than either program individually? How can an integrated program improve child development outcomes?	2.0	High
Longitudinal Outcomes	How does the integrated program affect children's later educational experiences and household outcomes over the long term?	1.8	High
Linking	What existing services could be effectively integrated or combined with the joint intervention (e.g. disability-inclusion, gender empowerment, mental health/PSS)?	1.7	High
Sequencing	Are participants (both parents and children) more able to engage with the programs if they have a staggered implementation? How would UPG participation for parents benefit children's participation and gains from HPL?	1.3	Medium

Integrated Delivery	Are we asking too much of participant time? Can graduation participants learn parenting skills during regular coaching visits?	1.3	Medium
Nutrition/Health Impacts for Children	Can livelihoods support generate better nutrition/health outcomes amongst children?	1.3	Medium
Host Communities	Are there differential effects for host community and refugee populations for these integrated programs?	1.3	Medium
Sustainability	Play Lab model made sure that play labs are graduated and mainstreamed into primary schools how do we ensure that ultra poor graduation school graduates are getting benefits	1.2	Low
Targeting	How to implement targeting for ultra-poor children in the right age range? How do we do targeting/exclusion well?	1.1	Low
WASH	Does improved WASH practices amongst parents have a positive impact on child health/nutrition?	1.0	Low
Food Security	How can we differentiate the nutrition effects of school feeding vs. UPG livelihood support? Which channel is more impactful for nutrition outcomes?	1.0	Low