Building a world with more evidence and less poverty
A lottery for IPA’s Graduating to Resilience project, organized in a host community in the district of Kamwenge, Uganda in December 2018. Credit: Aude Guerrucci

Letter from Annie & Dean

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Two members of a team of IPA surveyors—team leader Jackie and enumerator Alice—walk in the district of Kamwenge, Uganda. Credit: Aude Guerrucci

Cover: Annie, an enumerator, teaches a faith leader how to use a smartphone as part of IPA’s evaluation of the Becoming One program in the district of Kamwenge, Uganda. Becoming One is a couples counseling program conducted by faith leaders to encourage behavior change that may prevent extreme partner violence. Credit: Aude Guerrucci

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DEAR FRIENDS,

Last year was a time of both growth and reflection at IPA. Amidst the exciting developments—from starting a new unit that advises organizations on gathering and using data and right-fit evidence, to supporting various government agencies to apply evidence to their programs—we also paused, reflected, and articulated an ambitious strategy to make a bigger impact in the years to come. Here are some highlights of IPA’s accomplishments last year, which were made possible by the world-class researchers, organizations, and funders we are proud to call our partners.

We generated more evidence to share with the world. Generating rigorous evidence with a network of renowned researchers and partners remains the cornerstone of what we do. Last year, we started 98 new studies and continued our efforts to share research findings and promote the use of evidence through 66 events around the world.

Governments, NGOs, and private enterprises used rigorous evidence from IPA-implemented evaluations to inform and improve their programs. These impacts included institution-wide shifts, scale-ups, and programmatic changes. For example, the U.S. Agency for International Development (USAID) cited IPA research in its decision to shift from traditional microfinance to the Graduation Approach and to building more inclusive markets; the World Health Organization (WHO) issued a new guideline citing IPA research in a recommendation to offer a career ladder to practicing community health workers; and Peru’s MineduLAB, an embedded evidence lab within the Ministry of Education launched by IPA and our partners at J-PAL, scaled up a campaign that helped schools use maintenance funds as intended.

We launched the Right-Fit Evidence (RFE) Unit. Built on the principles outlined in The Goldilocks Challenge by Mary Kay Gugerty and Dean Karlan, the RFE unit provides resources and consulting services to organizations, donors, and governments in designing and supporting cost-effective, appropriately-sized monitoring & evaluation (M&E) systems.

We influenced global debates and communicated key findings to a global audience. Our work was featured multiple times in The New York Times and NPR, and in other respected news outlets including The Atlantic, Vox, and WIRED. Several of these media stories focused on a Rwanda study that benchmarked cash transfers to a more standard development program (see feature on pages 18-19).

We released our 2025 Strategic Ambition, where we laid out an ambitious plan that rests on three pillars: create stronger evidence, share evidence strategically, and equip decision-makers to use evidence.

As always, all of this work happens because of you: the researchers, organizations, and funders who make it all possible. We are deeply appreciative of your partnership and hope you will continue to join us as we forge ahead in achieving our vision of a world with more evidence and less poverty.

Annie Duflo
Executive Director
Dean Karlan
Founder

Last year, our work was featured in many respected national and international news outlets.
We create and share evidence, while equipping decision-makers to use evidence to reduce poverty.

With a long-term field presence in 21 countries in Africa, Asia, and Latin America, IPA leads the field of development in cutting-edge research quality and innovation. We test promising ideas across contexts and along the path to scale, proactively engage key decision-makers throughout the research process, share findings with the right people at the right time, and equip partners with the skills and tools they need to co-create and use data and evidence.

Since our founding in 2002, our research has led to better programs and policies that have made a positive impact on hundreds of millions of people’s lives worldwide.

Complementing our randomized evaluation work, IPA’s new Right-Fit Evidence unit provides resources and consulting services to organizations, donors, and governments to support them in designing a learning agenda, collecting the right M&E data, and putting the findings into action.

IPA’s work in M&E employs four key principles, known as the “CART” principles:

1. **Create Stronger Evidence**
   - To deepen public knowledge on how to reduce poverty

2. **Share Evidence Strategically**
   - To influence conversations & inform decisions

3. **Equip Decision-Makers to Use Evidence**
   - To improve the lives of the global poor

4. **Transportable**
   - Collect high-quality data and analyze the data accurately.

5. **Credible**
   - Commit to act on the data you collect.

6. **Responsible**
   - Ensure the benefits of data collection outweigh the costs.

7. **Transportable**
   - Collect data that generate knowledge for other programs.

**Our Work at a Glance**

- **21** Country Programs
- **8** Program Areas
- **700+** Partners
- **600+** Researchers in our network
- **800+** Evaluations to date in 51 countries
- **16** Years of generating evidence and moving evidence to policy
IPA’s Policy Influence

Last year, IPA collaborated with government partners in 21 countries to create and apply evidence. Here are some highlights.

**Evidence-Informed Policies for Mexico City’s Police Force**

IPA Mexico is engaged in several ongoing projects with the Secretariat of Public Safety (SSC) of Mexico City. Researchers with the Yale School of Management and IPA first worked with the SSC to study a procedural justice training program for officers that the city is now planning to scale.

**Fostering Dialogue Between Researchers and Decision-makers for SME Development**

IPA’s Small & Medium Enterprises (SME) program hosted a series of roundtables in Lima, Peru, Bogotá, Colombia, and Accra, Ghana in August and September. The events aimed to identify the challenges and opportunities for applying evidence to policies, products, and services targeted at SME growth and explored where further research is needed.

**Embedded Advice for Two Government Ministries on Employment Programming**

IPA received the 2018 “Outstanding International NGO of the Year” award in November at the Sierra Leone Business, CEO, Leadership and NGO Awards in Freetown. The award was given “in recognition of (IPA’s) demonstrated support and commitment, through professional services, best practices and sound management principles, to use evidence in employment programming.”

**Convening Decision-Makers Around Evidence in Health**

IPA is partnering with researchers, the government of Côte d’Ivoire, the World Bank and the Agence Française de Développement to support evidence-informed decision-making in the government’s employment programming. An IPA staff member embedded in the Ministry of Youth and Employment and the Ministry of Employment and Social Protection is sharing relevant global research findings in a series of policy notes and building the ministry’s capacity to use evidence in employment program design.

**Promoting Effective Poverty Measurement With the PPI®**

IPA is working with the World Bank and the World Data Lab to promote the Poverty Probability Index® (PPI®), an easy-to-use poverty measurement tool, made its home at IPA in 2016. IPA released new PPIs using its new construction methodology for 10 countries in late 2017 and 2018. The events, which garnered national media attention in both countries, introduced existing and potential users to the new PPI, explained how it can be used to drive organizational decisions, and shared tips and tools for using it most effectively.

**Research to Influence Supreme Court Reforms**

In March of 2018, the Zambian Ministry of Health, with support from USAID, the UK Department for International Development, and Population Council, convened the first national Evidence for Impact research symposium in Lusaka. IPA presented strategies for fostering evidence-informed decision making in the health sector and shared results and policy lessons from our health research in Zambia. Over 300 participants from government and civil society attended, and the event built momentum for co-creating evidence with policymakers, local academics, and the National Health Research Authority.

**Advancing a Research Agenda on Financial Inclusion and Climate Resilience**

In May of 2018, PI’s Financial Inclusion Program, Mercy Corps, and the International Food Policy Research Institute (IFPRI) organized a workshop in Washington, D.C. on financial inclusion and resilience to climate variability. The event brought together researchers, donors, and practitioners to advance a research agenda aimed at discovering effective ways to strengthen vulnerable households’ ability to mitigate, cope, and recover from unexpected emergencies and stresses such as natural disasters or humanitarian crises without compromising their future welfare. Attendees took stock of existing evidence, identified important gaps, and prioritized open research questions. Insights from the event were incorporated into an evidence brief IPA published later in the year.

**Ministry of Education Scales Up a Program to Reduce School Dropout**

Peru’s Ministry of Education scaled up a telenviña-video information campaign to all full-day public secondary schools in Peru based on rigorous evidence that it reduced school dropout rates. The innovative information campaign was evaluated at scale through MineDLAB—a research and policy partnership between IPA, J-PAL, and the Ministry of Education. The program now reaches over 2,000 public secondary schools.

**Researchers and Decision-makers for SME Development**

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Improving Learning with Effective and Scalable Solutions: A Decade of Partnership

IPA Ghana has a long history of collaborating with researchers, the Ministry of Education (MoE), and its implementing arm, the Ghana Education Service (GES). Together, we have developed scalable ways to improve the quality of education in Ghana, using evidence to inform program design and to test solutions at scale.

2008
First partnership between Ghana’s Ministry of Education and IPA

When IPA Ghana was a fledgling office, researchers partnered with GES to measure the short- and long-term impacts of providing full, needs-based scholarships to secondary school students through the Ghana Secondary Education Program. This research helped establish a relationship with the Ministry of Education and more than ten years later, researchers continue to evaluate the impact of the program—both on recipients and on their children.

With researchers Esther Duflo, Pascaline Dupas, and Michael Kremer

2010
IPA partnered with the Ministry of Education to develop and evaluate a targeted instruction program in Ghana’s public primary schools

Building on previous research from India and Kenya, internal IPA researchers worked with the Ministry of Education and the Ghana Education Service to develop and evaluate a targeted instruction model in Ghana. This project engaged decision-makers through a consultative process and demonstrated that targeted instruction can work in Ghana, laying the groundwork for a future opportunity to adapt the program and evaluate it at scale.

With researchers Annie Duflo, Jessica Kiessel, and Adrienne Lucas

IPA has been a distinct partner to the Ministry of Education in generating evidence for decision-making. It’s a rich partnership that has deepened over time, and I look forward to IPA facilitating deeper evidence generation and better utilization of data to inform decision-making in Ghana’s education sector in the years to come.

CYNTHIA BOSUMTWI-SAM
Former Acting Executive Secretary, Ghana’s National Inspectorate Board

SPOTLIGHT / EDUCATION IN GHANA

A TCAI school in Ghana. Credit: Jessica Kiessel
2013
IPA ran a pre-primary education scoping study in four different African cities, including Accra

This project allowed IPA to begin engaging with Ghanaian educators in early childhood education (ECE) and ultimately helped IPA become a visible key partner in Ghana’s ECE research and programming, setting the stage for future partnerships described below.

With researchers Kelly Bidwell and Loic Watine

2015-2018
Building a body of evidence on ECE in Ghana

With implementing partners and researchers, IPA worked closely with the government on several ECE projects, including:

- A mentoring and pre-service training program for student teachers learning to teach kindergarten.
- A scalable and affordable in-service teacher training and coaching model called Quality Preschool for Ghana.

A regular steering committee meetings, the research team engaged policymakers throughout the lifespan of the study. The education ministry used the results from the evaluation to inform the design of a policy framework on school-based in-service training for kindergarten teachers.

- Lively Minds’ play-based community-led preschool program. We are currently discussing the implications of the study on policy and program development.

With researchers Sharon Wolf, Lawrence Aber, Jere R. Behrman, Sonya Kuzelova, and Gervais Attanasio

2017
IPA signed an MOU with the Ghana Education Service

IPA Ghana signed a Memorandum of Understanding with the Ghana Education Service to formalize our partnership in developing rigorous evaluations of proposed education programs, provide credible empirical evidence from research programs to inform policy decisions, and collaborate on capacity-building of staff in research and evaluation processes. The MOU formalized an existing partnership of co-creating evidence for the education sector.

2017 & 2018
IPA co-organized Ghana Education Evidence Summit and Education Evidence Day with the Ministry of Education

IPA co-organized two major events with the Ministry of Education on the latest education evidence and its relevance to Ghana. In 2018, Evidence Day opened the ministry’s annual education sector review. During this event, IPA convened workshops to share lessons among Ministries of Education from Zambia, Peru, and Côte d’Ivoire. These learning events further strengthened the Ghanaian education sector’s commitment to generating and using evidence.

2018-2019
Ministry-led targeted instruction program adapted for evaluation at scale

Building on the previous evaluation and partnership, the Strengthening Teacher Accountability to Reach All Students project brings together government, development partners, and researchers to design a refined targeted instruction curriculum, train teachers, implement it at scale within the existing government systems, and monitor the program through a participatory process. We expect that with positive results, the evaluation will lead to the scale-up of this model within the Ghanaian education system.

With researchers Adrienne Lucas, Sabrin Baj, and Anne Fitzpatrick

WHAT’S NEXT?

IPA is supporting the Ministry of Education to strengthen its embedded evidence capacity.

This project will equip staff to leverage data for improved accountability and decision-making and generate and apply evidence to policy and implementation decisions.

WHAT WE’VE LEARNED

- Government ownership of evidence generation and evidence-informed decision-making is possible when we:
  - Support country-led priorities
  - Facilitate an intentional and collaborative process of program design
  - Strengthen partnerships to implement within the government system
  - Ensure continuous dialogue among partners

Aligning policy relevance with research goals and timelines is possible when we:

Reach out and partner with the policy community before the intervention or evaluation is designed and engage decision-makers throughout the lifecycle of a study and beyond.

Co-creating evidence with decision-makers can be a painstaking process, but over time it leads to a culture of evidence generation and evidence-informed decision-making, in addition to policy changes and programming design.
Diarrheal diseases are a leading cause of death for children in the developing world, killing nearly half a million children under the age of five each year. Even when diarrheal episodes are not fatal, illness early in life can have long-term effects on child growth and development. Given the established benefits of safe drinking water, handwashing with soap, and using an improved latrine, many organizations implement water, sanitation, and hygiene (WASH) programs in rural areas of many low-income countries as a way to improve child health. Evidence on the relative health benefits of these interventions has been lacking, however.

IPA-Kenya worked with researchers to conduct a large-scale randomized evaluation of the impacts of water, sanitation, hygiene, and nutrition interventions delivered alone and in combination. The WASH intervention was comprised of behavioral messaging and simple technological interventions, including chlorination for treating household drinking water, improved pit latrines and tools for disposing of child and animal feces, and handwashing stations with soapy water. The nutrition intervention included counseling from community health promoters and nutritional supplements for undernourished children.

After two years, researchers found that adherence was high and drinking water quality improved, but the WASH interventions were insufficient to reduce diarrhea or improve child growth. The nutrition intervention modestly improved children’s growth. None of the interventions improved measures of child development two years after intervention delivery began. A sister-trial in Bangladesh, conducted at the same time, also had limited impacts.

Overall, the findings call into question the ability of large-scale water, sanitation, and handwashing interventions to reduce diarrhea or improve children’s growth or development in similar contexts.

The Limited Effects of WASH Interventions in Rural Kenya

Researchers: Clair Null, Amy Pickering, Christine Stewart, Holly Dentz, Benjamin Arnold, Charles Arnold, Jade Benjamin-Chung, et. al.

Water, sanitation, hygiene, and nutrition interventions were designed to reduce diarrhea and promote child health, but only the nutrition intervention made an impact, raising questions about what works.

The approaches that were tested had been carefully piloted and appeared to hold much promise, and the results were disappointing to many who work in the sector. What could have gone wrong? A couple of possible leads:

### Chlorine didn’t kill all types of parasites

A very common parasite infecting kids in the comparison group was *Giardia*—39 percent of kids had it. However, none of the interventions reduced *Giardia*. Another common parasite called *Ascaris* infected 23 percent of comparison-group kids. The water treatment reduced *Ascaris* by 18 percent and the water treatment combined with handwashing reduced it by 22 percent. In other words, the water treatment intervention was effective at killing some parasites that infect kids, but not all of them.

The water treatment reduced *E. coli* in drinking water, but children under age two still had high levels of fecal bacteria on their hands and toys. “One overlooked source may be animal feces, particularly from chickens that roam in and out of most houses,” said lead researcher Clair Null of Mathematica. Null pointed out the household environment is generally very contaminated and “young children are constantly putting things in their mouths.”

“These results were disappointing, but they tell us we really need to investigate other innovative approaches to reduce child exposure to fecal contamination because what we’re doing might not be working,” Null said.

### WHY SO LITTLE IMPACT?

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In Bogotá, Colombia, security has improved in recent years, but crime remains a major concern for city residents. When a new mayor took office in 2016, he promised to confront crime and violence on the city’s highest-crime streets. The city then had to decide on its strategy.

Many cities around the world tackle crime by concentrating their personnel and resources on the highest crime blocks, often called “hot spots.” While most U.S. cities rely on hot spot policing, it’s not clear if it works in all contexts: increasing police presence in the highest-crime areas may simply drive crime to nearby areas, leaving overall crime levels unchanged.

In Bogotá, the city decided to partner with researchers to measure the impact of doubling police patrols and increasing municipal clean-ups on the highest-crime streets on crime. They wanted to see not only if crime went down on those streets, but if it went up on nearby streets. After working with police to identify 1,919 of the highest-crime blocks in Bogotá, researchers randomly assigned the blocks to either receive intensified police patrols, municipal clean-ups, both, or neither.

After eight months, researchers found a large improvement in security: crime went down on blocks that received both clean-ups and extra police patrols, but not when they only got one or the other.

Most crime, particularly property crime, appears to have shifted to nearby streets. There is some evidence, however, that violent crimes, especially homicides and rapes, decreased citywide as a result of the intervention.

These findings suggest that different types of crime respond differently to different place-based tactics, and cities may find it effective to match their tactics with the specific types of crime they are trying to reduce. In Bogotá, intensified city presence seems to have been most effective at deterring violent crimes, especially homicides and sexual assaults, which in the view of a policymaker could be the most important to prevent. More evidence from a larger-scale study is needed on this topic, however.
Providing cash grants to the poor with no conditions on how the money can be spent was once a radical idea, but recent research has found that unconditional cash transfers can have important welfare benefits for poor households, such as increasing income, assets, psychological well-being, and women’s empowerment. Little research exists, however, on the relative impact and cost-effectiveness of giving people cash compared to a more standard set of goods and services.

IPA-Rwanda worked with researchers to conduct a randomized evaluation that compared the impacts of an integrated nutrition and WASH program, funded by USAID, and a cash transfer of equivalent cost (a cost to USAID of $142 per household, with $114 transferred). Researchers measured impacts on household dietary diversity, child and maternal anemia, child growth, value of household wealth, and household consumption, as well as other secondary outcomes.

After approximately one year, the nutrition and WASH program had a positive impact on savings, a secondary outcome, but did not impact child health or any other main outcomes. The equivalent amount of cash allowed households to pay down debt and boosted productive and consumption asset investment but had no impact on the main outcomes of interest either.

The research team also tested the impact of a larger transfer to examine if it’s more cost-effective to give larger amounts of money to fewer people or to spread out the money to more people. The large cash transfer—of more than $500 per household—had a wide range of benefits: it not only increased consumption, house values, savings, and assets, but improved household dietary diversity and height-for-age, and appeared to also decrease child mortality.

Together, the findings suggest larger investments, at least when it comes to cash grants, may be needed to reduce child malnutrition over a short time-horizon.

Following the release of the results, USAID reported that it has used the results from the study to inform its water, sanitation, and hygiene interventions. IPA presented the results to the Rwandan government before the public release, and as of early 2019, IPA was following up with the government’s nutrition lead consultant as they were building their new national strategy.
The Challenge of Eradicating Child Labor in the Philippines

Researchers: Eric Edmonds and Caroline Theoharides

Around the world, 152 million children are engaged in child labor, and in the Philippines many of the children working illegally are in occupations that pose a threat to their health and safety. Because poverty is considered to be the root cause of child labor, policymakers have aimed to reduce child labor by improving the economic welfare of poor households that are using or vulnerable to using child labor. In the Philippines, an IPA research team worked with the government to test the impact of providing poor households (that have any children engaged in child labor) with a one-time productive asset transfer equivalent to US$518, along with a short business training.

About 18 months after the program started, preliminary results find that the asset and training increased household business activity and had a positive rate of return on family-firm generated income. The program also increased food security and improved some measures of child welfare, including children’s life satisfaction. However, the program also had the unexpected consequence of increasing child labor as a result of the work opportunities of the new business, specifically for children who had not worked before and for children whose families already had at least one business before the program started. These new working children did not experience the improvements in life satisfaction that their previously working siblings experienced as a result of the program.

Overall, these findings raise questions about the value of providing a productive asset transfer to families in order to reduce child labor. They also highlight the value of this program in ameliorating poverty, enhancing food security, and improving the life satisfaction of children already engaged in child labor.

The Philippines Department of Labor and Employment (DOLE) reported that they are working on improving their program as a result of the findings from the evaluation. Since one of the findings showed that the program draws in children to work from households who did not have any children working before, they plan to broaden their child labor advocacy component to include all targeted livelihood beneficiaries of the DOLE, regardless of whether they are identified as parents of child laborers. All beneficiary households will sign a written document stating they will not have their children engaged in child labor. They also reported they are in the process of improving and standardizing their child labor orientation module since the study found that the information presented did not appear to be salient.
More Results from Around the Globe

**Uganda**

A bottom-up community monitoring program fell short of improving child health in Uganda

Researchers: Doug Parker, Dan Posner, Pia Raffler

Previous research in Uganda found that having community members monitor health service providers improved the delivery of health services, leading to a substantial drop in child mortality. Ten years later, IPA-Uganda worked with researchers to conduct a large scale randomized evaluation of a similar program called Accountability Can Transform Health. The evaluation found that the program marginally improved the quality of treatment patients received and increased patient satisfaction nearly two years after the program began, but the changes were not driven by increased monitoring or bottom-up pressure by community members. Moreover, the program did not affect how often people sought healthcare, nor did it improve child health.

**Bangladesh**

Cognitive behavioral therapy improved subjective well-being and business outcomes for women in sectors dominated by men in Bangladesh

Researchers: Paula López Fels

Previous research suggests teaching entrepreneurial attitudes, such as proactiveness and persistence in the pursuit of goals, can lead to higher increases in sales and profits than standard business training. In Bangladesh, female business owners were randomly assigned either to receive a 10-week cognitive behavioral therapy training. In Bangladesh, female business owners were randomly assigned either to receive a 10-week cognitive behavioral therapy training. In Bangladesh, female business owners were randomly assigned either to receive a 10-week cognitive behavioral therapy training.

**Sierra Leone**

Simple bracelets increased immunization rates in Sierra Leone, at a cost of just $1 per child

Researcher: Anne Raking

Childhood immunization is one of the most cost-effective ways of reducing child mortality. While more children are getting vaccinated than before, many children in low-income countries are not completing the first-year series of vaccinations. In Sierra Leone, IPA worked with researchers to evaluate the impact of social incentives—in the form of highly visible bracelets for children—in adherence to children’s immunization schedules. The bracelets make it highly salient whether the immunization schedule is unfinished and if other children have received immunizations that one’s own child has missed. The study found the signal provided by the bracelets increased timely and complete vaccination by 14 percentage points at a cost of US$1 per child, with impacts persisting 12 months after the program rollout. The most effective bracelet was color-coded to show if a child had completed all five vaccines on time.

**Uganda**

In Uganda, a nine-year study found that start-up grants for young men and women offered more of a jump-start than a lift out of poverty.

Researchers: Chris Blattman, Nathan Fiala, Sebastian Martinez

In northern Ghana, where agricultural productivity is low, previous research found that offering farmers rainfall insurance led them to invest more in their farms. Building on that evidence, researchers evaluated the impact of access to rainfall insurance either coupled with or compared to tailored extension advice, weather forecasts, and improved access to inputs. Preliminary results indicate that extension program led to increases in farmers’ knowledge and improved farming practices, that these changes increased yields and earnings, but only by a small amount (reducing farm costs by about 3 percent while leaving levels of output unchanged). There is no evidence that access to the commercially-available rainfall insurance in Ghana changed input choices on farms. Further, overall demand for rainfall insurance was low. Some evidence suggests an underlying problem may be poor-quality seeds, and follow-up research investigating this question is currently underway.

**Kenya**

For high-risk women in Kenya, labeled mobile savings accounts increased savings, reduced transactional sex, and improved health outcomes.

Researchers: Kelly Jones, Erik Gang

Many poor women around the world rely on sexual partners for the purpose of financial assistance, particularly when faced with financial setbacks. In Kenya it is estimated that about 20 percent of sexual relationships are formed for the purpose of financial assistance. Providing these women with appropriate financial tools has the potential to reduce transactional sex as a coping strategy, and reduce exposure to sexually transmitted infections. Building on previous evidence on the impacts of digital finance, IPA-Kenya worked with researchers to evaluate the impact of providing high-risk women in rural and urban areas of western Kenya with mobile savings accounts labeled for emergency expenses and individual goals. The evaluation found that the labeled mobile savings accounts led to an increase in savings, reductions in transactional sex as a risk-coping response to adverse events, and a decrease in symptoms of sexually transmitted infections.
**Behind the Data**

IPA’s ability to collect high-quality data rests on the quality of our dedicated staff in the field. Behind every number, every result, is a painstaking (often years-long) process that involves traveling, searching, interviewing, entering, storing (then repeating), and eventually, analyzing and publishing. Who are the people and what are the stories behind the data? Here are a couple from studies featured in these pages.

**Fatu Conteh**

Research Associate, IPA-Sierra Leone

Social Incentives project, with IPA since 2009

As Fatu highlights, IPA field staff sometimes have to improvise to come up with culturally appropriate ways to improve implementation or data collection (study featured on p. 22).

**What was the most interesting and/or challenging part of working on the bracelets for immunization study?**

So, the “social incentives” in this study were colored bracelets that indicated where a child was in their vaccination schedule. But we quickly realized that mothers, even though they were given a card with the official name of the vaccine, wouldn’t necessarily remember the medical name of the vaccine.

In Sierra Leone, we use songs to teach children—in schools, teachers come up with songs to help kids learn and the clinics already had songs with hygiene tips. So we came up with a song based on our implementation guideline set to the local creole language to remind the mothers of what the different colors meant:

**Bracelet Song**

Green for number 1

Yellow for number 5

But you for cam when the nurse tell you: Kombra yeri nor

You tell her: Mama yeri nor

You tell her: Papa yeri nor

Sometimes we’d be walking through the villages and hear the song being sung!

Similarly, we had to adjust on our data collection side. We learned not to ask what vaccinations the child had most recently had, but where on the body the vaccination was—left arm, right arm, leg—and then we would know which one it was.

**What made an impression on you during the field work?**

One thing that made an impression was how much more mothers want to get their children vaccinated and the trouble they go through to do it. We saw them traveling far and staying overnight in the town where the clinic is to be there in the morning. But to complete a full vaccination sequence requires multiple visits—it could be as many as six visits before the baby is 15 months old, so even though they really wanted to get their children fully vaccinated, many don’t complete them all.

Fatu Conteh has been working with IPA-Sierra Leone for almost ten years, supporting the implementation and management of research projects as well as policy engagement with government ministries and development partners. Before joining IPA, Fatu worked as a registered nurse in hospitals in Sierra Leone and a health officer at a charity that works with street kids. She also worked as a field research staff for several years at the Government Statistics Office in Sierra Leone. Fatu graduated as a State Registered Nurse from the National School of Nursing in Freetown and has a BA in Development from the University of Makeni, Northern Sierra Leone.

**Leodomir Mfura**

Senior Research and Policy Associate, IPA-Rwanda

Cash Benchmarking project, with IPA since 2014

What made an impression on you during the field work?

One thing that I didn’t expect was how the leaders in the villages were reluctant to [the idea of disbursing] cash. Local leaders told me that the cash could never have an impact when it’s not controlled closely.

Another thing I was surprised by was how almost every mother in the communities we visited—not only those in the sample—wanted their kids to get screened for malnutrition, as we were equipped with anthropometrics materials and anemia testing machines.

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What was the most interesting and/or challenging part of working on the cash benchmarking study?

The most interesting part of working on this study was getting to know the real living conditions at the village level. A big challenge we overcame was finding the participants in hilly and mountainous areas with altitude between 1,500 to 1,800 meters, bad road conditions, inaccessible areas whereby an enumerator could walk three hours one way to get to the study participants.

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* Gifts from these donors, four of whom were anonymous, were made via the Vanguard Charitable Endowment Fund.

We are grateful to all members of the global IPA community who support our mission to discover and promote effective solutions to global poverty problems. In 2018, in addition to grassroots-level support from hundreds of donors around the world, our work was made possible by research grants and contributions from the following generous funders and donors.

Pedro Pereira
Jacob Perkins
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Quadrature Capital Limited
Marguerite Moyler & David Radamaker
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Rosalind Chew & Jeff Galak Charitable Fund of The Pittsburgh Foundation
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2018 Financial Report

Revenue

$41.1 MILLION

Grants & Contracts

$36.8 m (89.5%)

Program Services

$32.4m (81.2%)

Expenses

$39.9 MILLION

Management & General

$7 m (17.5%)

Fundraising

$0.5m (1.3%)

Contributions

$4.3m (10.5%)

Net Assets

End of 2017 / $0.07 million
End of 2018 / $1.24 million
Change in Net Assets / $1.17 million

IPA is recognized as a gold-level GuideStar participant, demonstrating our commitment to transparency. We are also a BBB Accredited Charity and one of The Life You Can Save’s top recommended charities for effective giving.

IPA’s 2018 fiscal year covered January 1 to December 31, 2018. Percentages are calculated using exact amounts rather than rounded amounts. See our audited financials at: poverty-action.org/financials

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