# Impact evaluation of Oportunidades

Submission date	Recruitment status No longer recruiting	<ul><li>Prospectively registered</li></ul>		
08/05/2007		☐ Protocol		
Registration date 08/08/2007	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	Individual participant data		
29/10/2021	Other			

# Plain English summary of protocol

Not provided at time of registration

# Contact information

# Type(s)

Scientific

#### Contact name

Dr Paul Gertler

#### Contact details

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# Additional identifiers

# Protocol serial number

N/A

# Study information

#### Scientific Title

Impact evaluation of Oportunidades

# Acronym

**PROGRESA** 

## **Study objectives**

Oportunidades (http://www.oportunidades.gob.mx/htmls/quienes\_somos.html) is a federal program aimed at improving the lives of people in extreme poverty. The program offers supports in education, heath, nutrition and employment for people in extreme poverty.

Study hypothesis: Program participation will be associated with improvements in health outcomes

# Ethics approval required

Old ethics approval format

## Ethics approval(s)

- 1. Human subjects review obtained from Center for Protection of Human Subjects at University of California Berkeley in 2003. Refs: CPHS Protocol #2004-6-128 and CPHS Protocol #2004-6-132
- 2. Ethics Review Board of National Institute of Public Health in Mexico, approved in 2003

## Study design

Randomized controlled trial (Randomized at community level)

#### Primary study design

Interventional

### Study type(s)

**Not Specified** 

## Health condition(s) or problem(s) studied

Child development, adolescent risk behavior, adult health.

#### **Interventions**

Due to budgetary and logistical constraints, the Mexican Government was unable to enroll all eligible families simultaneously; rather, it needed to phase in enrollment over a period of time. For ease of implementation, the Government decided that it would enroll whole communities at a time and that it would enroll them as fast as possible so that no eligible household would be kept out of the program. As a result of this process, the government randomly chose 320 treatment and 186 control communities for a phased roll-out in seven states for a total of 506 experimental communities. Random assignment was generated without weighting using randomization commands in STATA (statistical software); thus, each of the communities was given equal chance of being included. None of the sites was told they would be participating in the study, and information regarding timing of roll-out was not made public.

Key activities: Program benefits are distributed only if children, pregnant women, lactating women, and other family members complied with a series of behavioral changes. The requirements included prenatal care, good baby care and immunization, nutrition monitoring and supplementation, preventive checkups, and participation in educational programs regarding health, hygiene and nutrition. Adult family members were required to attend a bi-annual health check-up, and were encouraged to participate in regular educational sessions at which health, hygiene, and nutrition issues and best practices were discussed. Oportunidades verified that households completed the required health care visits by having medical providers at participating public health clinics provide certification of participation. The control communities started the interventions after 18 months of randomization.

### Intervention Type

Other

#### **Phase**

**Not Specified** 

## Primary outcome(s)

Child development, adolescent risk behavior and adult health were assessed in 2003 by the following:

- 1. Body mass index (BMI, defined as weight in kilograms divided by the square of height in meters) was used to define overweight (25≤BMI), obesity grade I (30≤BMI), and obesity grade II (35≤BMI) at a follow-up survey in 2003.
- 2. Uncontrolled hypertension was defined as diastolic blood pressure (DBP)≥90 mm Hg or systolic pressure (SBP) ≥140 mm Hg in accordance with The Joint National Committee on Hypertension at a follow-up survey in 2003.
- 3. Questionnaires were administered to obtain information about the following:
- 3.1. Demographic characteristics
- 3.2. Educational attainment
- 3.3. Assets (large and small household assets, and vehicles)
- 3.4. Household construction (presence of dirt floor, electricity or bathroom)
- 3.5. Land and animals owned
- 3.6. Household composition (age and sex of all household members)
- 3.7. Marital status (married/cohabitating or unmarried/living alone)
- 3.8. Indigenous ethnicity (whether an indigenous language is spoken by the head of household)
- 3.9. Self-reported health status (distance he/she can walk without being tired)
- 3.10. Health outcomes (report from doctor regarding status of blood pressure or diabetes within the past five years)

These outcomes will be assessed again in 2007.

# Key secondary outcome(s))

No secondary outcome measures

# Completion date

31/12/2010

# **Eligibility**

## Key inclusion criteria

- 1. All households with income <20% of national average
- 2. Living in one of the following seven states: Guerrero, Hidalgo, Michoacán, Puebla, Querétaro, San Luis Potosí, or Veracruz

### Participant type(s)

Patient

# Healthy volunteers allowed

No

#### Age group

# **Not Specified**

#### Sex

All

## Total final enrolment

10202

# Key exclusion criteria

All households with income >20% of national average.

### Date of first enrolment

01/01/1997

### Date of final enrolment

31/12/2010

# Locations

# Countries of recruitment

Mexico

United States of America

# Study participating centre Haas School of Business

California United States of America 94720

# Sponsor information

## Organisation

Department of Social Welfare (Mexico)

# Funder(s)

# Funder type

Government

### **Funder Name**

National Institute of Child health and Human Development (NICHD) (USA)

#### Alternative Name(s)

**NICHD** 

#### **Funding Body Type**

Government organisation

## **Funding Body Subtype**

National government

#### Location

United States of America

#### **Funder Name**

Fogarty International Center (USA)

### Alternative Name(s)

Fogarty, Fogarty at NIH, John E. Fogarty International Center, John Edward Fogarty International Center, NIH John F. Fogarty International Center, NIH's Fogarty International Center, NIH Fogarty International Center, Fogarty International Center at NIH, Fogarty International Center, U.S. National Institutes of Health (NIH), Fogarty International Center AT THE NATIONAL INSTITUTES OF HEALTH, FIC

## **Funding Body Type**

Government organisation

### **Funding Body Subtype**

Research institutes and centers

#### Location

United States of America

#### **Funder Name**

Mexican Government (Mexico)

# **Results and Publications**

# Individual participant data (IPD) sharing plan

Not provided at time of registration

## IPD sharing plan summary

Not provided at time of registration

#### Study outputs

Output type Details Date created Date added Peer reviewed? Patient-facing?

Results article		12/12/2009	29/10/2021	Yes	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes