# Philippines Pantawid Pamilya conditional cash transfer and sanitation impact evaluation: overcoming barriers to adoption of sanitation for poor households in the Philippines

Submission date	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li></ul>		
05/10/2017		Protocol		
Registration date 18/10/2017	Overall study status Completed	Statistical analysis plan		
		[X] Results		
Last Edited	Condition category	[] Individual participant data		
23/04/2021	Other			

#### Plain English summary of protocol

Background and study aims

Access to basic sanitation remains one of the largest development challenges in the Philippines as 26% of the total population is without access to improved sanitation facilities. In rural areas alone, access to improved sanitation is less than 70% or about 9.5 million people, with 5.7 million of them defecating in the open and 3.7 million using unimproved toilets. Household latrines provide substantial health and other welfare benefits to users as well as positive development outcomes to others in the community, yet ownership of sanitary household latrines is uncommon among the poor. This study aims to address a key knowledge gap: what is the best mechanism to address the financial constraints of households to improving their sanitation situation – savings, subsidy, or a combination of the two?

Who can participate?

All people living in the participating barangays (villages)

#### What does the study involve?

Participating barangays are randomly allocated to one of the three intervention groups or the control group. All groups receive sanitation promotion through Family Development Sessions (FDS) and a Community Led Total Sanitation (CLTS) campaign. The control group receive no further interventions apart from this. Intervention group 1 receive access to funding through national and municipal programs to subsidize the purchase and construction of household latrines. Intervention group 2 have access to a 25% microfinance institution (MFI) grant for purchase of a latrine and make regular savings contributions to repay the remaining 75%. Intervention group 3 have access to a 50% MFI grant for purchase of a latrine and make regular savings contributions to repay the remaining 50%. Household take-up of improved sanitation is measured through surveys at the start and end of the study.

What are the possible benefits and risks of participating?
Participants in the three intervention groups are eligible to receive subsidies or savings grants

that help subsidize the construction of household latrines. All participants are exposed to national sanitation promotional campaigns. There is some risk for participants that enroll in savings grants programs will not be able to repay their portion of latrine costs. Study and MFI protocols include protections to ensure households that do not meet appropriate income levels will not be offered savings grants, thereby minimizing this risk. Otherwise, participation in the study does not represent risks to participants beyond what would be expected otherwise.

Where is the study run from?

The study takes place in the Philippines and includes 17 municipalities in the provinces of Negros Oriental, Cebu and Bohol and Leyte and Eastern Samar

When is the study starting and how long is it expected to run for? September 2015 to December 2015

Who is funding the study?
World Bank Strategic Impact Evaluation Fund (SIEF)

Who is the main contact?

1. Claire Chase (scientific) cchase@worldbank.org

2. Edkarl M. Galing (public) egaling@worldbank.org

## Contact information

## Type(s)

Public

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## Type(s)

Scientific

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# Additional identifiers

## Protocol serial number

N/A

# Study information

#### Scientific Title

Increasing access to improved sanitation for poor households in the Philippines through financial savings and subsidies: a cluster randomized controlled trial

## **Study objectives**

The primary hypothesis being tested in the study is that addressing the financial constraints of poor rural households, in combination with promotional activities, will increase the proportion of households that adopt and use improved sanitation.

## Ethics approval required

Old ethics approval format

#### Ethics approval(s)

University of the Philippines Manila Research Ethics Board, 02/11/2015, ref: RGAO-2015-0034

## Study design

Experimental multi-arm parallel-assignment unmasked multi-center cluster randomized control trial with an active control group

## Primary study design

Interventional

## Study type(s)

Other

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

Sanitation

#### **Interventions**

The evaluation is a four-arm cluster randomized controlled trial, where treatment is randomly assigned at the cluster (village / barangay) level. Barangays were randomized within municipality to one of the three treatment arms, or control (stratified randomization within municipality). Random assignment was accomplished through standard practices using STATA.

Intervention Arm 1 (Municipal Subsidy + Promotion):

Households will have access to funding through national and municipal programs to subsidize the purchase and construction of household latrines. Treatment will also include promotion through Community-led Total Sanitation (CLTS) and enhanced Family Development Sessions (FDS).

Intervention Arm 2 (MFI Savings + 25% Grant + Promotion):

Households will have access to a 25% MFI grant for purchase of latrine and will make regular savings contributions to repay the remaining 75%. Treatment will also include promotion through Community-led Total Sanitation (CLTS) and enhanced Family Development Sessions (FDS).

Intervention Arm 3 (MFI Savings + 50% Grant + Promotion):

Households will have access to a 50% MFI grant for purchase of latrine and will make regular savings contributions to repay the remaining 50%. Treatment will also include promotion through Community-led Total Sanitation (CLTS) and enhanced Family Development Sessions (FDS).

#### Control (Promotion):

Promotion through Community-led Total Sanitation (CLTS) and enhanced Family Development Sessions (FDS).

### Intervention Type

Other

#### Primary outcome(s)

Household take-up of improved sanitation (proportion of sample that has access to improved sanitation at the endline); improved sanitation defined using WHO/UNICEF Joint Monitoring Committee (JMP) guidelines. Data collected through household and barangay level surveys in December 2015 and December 2017

The study is powered to detect differences in sanitation take-up both between each treatment arm and the control arm, as well as across treatment arms.

## Key secondary outcome(s))

1. Open defecation habits (proportion of sample that practices open defecation). Data collected through household and barangay level surveys in December 2015 and December 2017 2. Childhood diarrhea (2-day, 7-day and 14-day diarrhea prevalence in children aged less than 5 years). Data collected through household and barangay level surveys in December 2015 and

December 2017

## Completion date

31/12/2017

# **Eligibility**

## Key inclusion criteria

Barangays (villages) were selected based on the following criteria:

- 1. Water, Sanitation and Hygiene (WASH) priority areas identified for WASH convergence
- 2. Participation in the national Zero Open Defecation Program
- 3. At least 20% of households in the barangay having no toilet (defecating in the open)
- 4. At least 40 households participating in the Pantawid Pamilya. Within each barangay, the NHTS was used as the sampling frame

The Pantawid Pamilya utilizes the National Household Targeting System for Poverty Reduction (NHTS-PR) to target beneficiaries. This is a national database of poor households, containing

information on household eligibility and includes households' access to sanitation. This targeting system identifies household eligibility and participation in Pantawid Pamilya, household composition, and proxy-means test.

There was no minimum/maximum age and both genders were included.

## Participant type(s)

Other

## Healthy volunteers allowed

No

### Age group

All

#### Sex

All

## Key exclusion criteria

Does not meet inclusion criteria

## Date of first enrolment

01/09/2015

#### Date of final enrolment

01/12/2015

## Locations

#### Countries of recruitment

**Philippines** 

## Study participating centre

N/A

Philippines

N/A

# Sponsor information

#### Organisation

World Bank Strategic Impact Evaluation Fund (SIEF)

#### **ROR**

https://ror.org/00ae7jd04

# Funder(s)

## Funder type

Other

#### Funder Name

World Bank Strategic Impact Evaluation Fund (SIEF)

## **Results and Publications**

## Individual participant data (IPD) sharing plan

The data will be stored in the World Bank repository. For access, Claire Chase (cchase@worldbank.org) should be contacted. The data will include household level surveys and the statistical data from baseline and endline evaluation.

## IPD sharing plan summary

Stored in repository

## **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Funder report results	results in funder report	12/11/2019	23/04/2021	No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes