
<table>
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<tr>
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**Abstract**

This article reviews the results of an impact evaluation of small-scale rural infrastructure projects in health, water, and education financed by the Bolivian Social Investment Fund. The impact evaluation used panel data on project beneficiaries and control or comparison groups and applied several evaluation methodologies. An experimental design based on randomization of the offer to participate in social fund project was successful in estimating impact when combined with bounds estimates to address noncompliance issues. Propensity score matching was applied to baseline data to reduce observable preprogram differences between treatment and comparison groups. Results for education projects suggest that although they improved school infrastructure, they had little impact on education outcomes. In contrast, interventions in health clinics, perhaps because they went beyond simply improving infrastructure, raised utilization rates and were associated with substantial declines in under-aged-five mortality. Investments in small community water systems had no major impact on water quality until combined with community-level training, though they did not increase the access to and the quantity of water. This increase in quantity appears to have been sufficient to generate declines in under-age-five mortality similar in size to those associated with the health interventions.

**Gender Connection**

Gender Informed Analysis

**Gender Outcomes**

Child mortality, use of healthcare services, school performance

**IE Design**

There were many different projects analyzed that had different IE methodologies including: RCT, Matched Comparison, Reflexive Comparison and DID.

**Intervention**

In 1991, the Bolivian government replaced a temporary Emergency Social Fund with a permanent Social Investment Fund. The fund concentrated on delivering social infrastructure to underserved areas. It provided financing to communities rather than projects itself. Between 1994 and 1998 the SIF distributed more than $160 million on projects in education, health and water sanitation.

**Intervention Period**

The study focuses on the increased investment in the social fund from 1994-1998

**Sample population**

The sampling for each intervention was conducted separately. Data were collected from a baseline survey in 1993 and a follow up survey in 1997-1998. The surveys collected data from 5 provinces in the Chaco region and 17 provinces in rural areas. In Chaco, the baseline survey had sample sizes of 2029 for health, 995 for education and 666 for water.
Gender Impact: The World Bank’s Gender Impact Evaluation Database

Comparison conditions
- Among each intervention, many different types of matching schemes were employed. See the paper for greater detail.

Unit of analysis
- Using different datasets, the paper looks at outcomes on a school level, health clinic level, student level and individual level.

Evaluation Period
- 1993-1997

Results
- The social fund improved the quality of school infrastructure, however it has little impact on education outcomes. The fund's interventions in health clinics raised utilization rates and were associated with reduction in under-five mortality. Prenatal checkups significantly reduced under-age five mortality.

Primary study limitations
- Some of the projects randomization was not possible. In others, there were high rates of non-compliance.

Funding Source
- Impact Evaluation of Social Funds

Reference(s)

Link to Studies
- [http://wber.oxfordjournals.org/content/16/2/241.short](http://wber.oxfordjournals.org/content/16/2/241.short)

Microdata