

Do multi-level adolescent-centric interventions improve girls' capabilities?

Mixed-methods evidence from a cluster randomised controlled trial in Ethiopia

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Abstract

Adolescence is a window for interventions to improve current and longer-term well-being, yet it is also a time when girls face an array of restrictive gender norms, reinforced by peers, families, communities and institutions. Without norms change at each of these levels, it may be difficult to improve girls' outcomes in a sustainable way. This study analyzes data from a cluster randomized controlled trial in Ethiopia to evaluate near-term impacts of multi-level adolescent-centric interventions aimed at gender norms transformation layered to include girls, boys, their families and communities—on the empowerment of approximately 2,300 young adolescent girls (10-14). We find that gender-focused programming can improve a broad range of girls' capabilities after one year, though we don't detect sustained improvements after an additional 1-2 years of follow-up. In locations where there is strong community-level support and where interventions are implemented well, there are improvements in girls' capabilities as a result of the most comprehensive programming, and these improvements are more wide-ranging, more sustainable (at least up to 2.5 years). Impacts are weaker (and sometimes even negative) where support and implementation are less consistent, suggesting the need for tailored and well-monitored implementation approaches in different contexts. Analysis of data collected one year after programme launch suggests that, in more marginalised sites, any gender-focused programming can improve a broad range of girls' outcomes in the short term; we do not detect sustained improvements in these sites on girls' outcomes after an additional 1-2 years of follow-up, although there is evidence of improvements in gender-focused outcomes of male peers in the medium term. More broadly, in locations where there is strong community-level support and where interventions are implemented well, there are improvements in girls' outcomes as a result of the most intensive programming, these improvements are more wide-ranging and more sustainable (at least up to 2.5 years), and include boys' gender-focused outcomes when interactions with boys and parents are included. Yet, impacts are weaker (and sometimes even negative) without such community support and where implementation is less consistent, which suggests the need for tailored and well-monitored implementation approaches in different contexts.

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1 Introduction

Adolescence (age 10–19 years) is recognised as a 'critical period' for development, akin to the first 1,000 days of life (Bundy et al., 2017). As such, it is considered a key window of opportunity for interventions to improve contemporaneous, longer-term and intergenerational economic and social well-being (Bundy et al., 2017; Sheehan et al., 2017; Steinberg, 2015) – reaping the 'triple dividend' (Patton et al., 2016). This is especially relevant in low- and middle-income countries (LMICs), where (as of 2019) nearly 90% of adolescents live (United Nations, 2019).

Adolescence is also a time when gender norms and expectations – reinforced by families, communities and institutions – are keenly felt and internalised, determining what young people do and expectations around appropriate behaviour (Chung and Rimal, 2016). This transitional time is particularly fraught for adolescent girls in LMICs as many face an array of restrictive gender norms that ultimately reinforce disadvantage (Duflo, 2012; Jayachandran, 2015). Adolescent girls in these contexts are often kept home from school and face mobility restrictions in their community; they rarely have access to formal employment, yet face disproportionate care, and domestic and paid work burdens. In many contexts, girls are required to leave school and marry early, abandoning not only their educational and occupational plans but also their peer support systems (International Center for Research on Women, 2016). Ultimately, many adolescent girls in LMICs have few routes to economic empowerment and limited voice and agency within their homes, schools and communities (Kabeer, 2018).

This is certainly the case in Ethiopia, the context for our study. School dropout rates are high for girls and boys alike, with only 73% of girls and 77% of boys completing grade 6 and net enrolment ratios at around 33% in secondary school (grades 9-12; Ministry of Education, 2023). Yet girls are substantially more disadvantaged than boys across a range of economic, social and health outcomes. Eighteen percent of girls aged 15–19 years were not in education, employment or training in 2021 (compared to 9% of boys), and in 2016 nearly half of young women aged 20-24 in rural areas were married before the age of 18 (UNICEF, 2024).

Because restrictive gender norms surrounding adolescent behaviour are often reinforced by peers, families, communities and the broader institutional structures that surround them, it stands to reason that interventions that lack involvement and gender norms change at each of these levels are unlikely to lead to sustained improvements in girls' outcomes (GAGE consortium, 2019). Moreover, given that poverty is a key driver of adolescent outcomes (Bergstrom and Özler, 2023), economic support is likely another key factor for impact.

Following a detailed pre-analysis plan registered prior to the launch of follow-up data collection (Jones et al., 2020a), this analysis uses mixed-methods data (including quantitative data from nearly 4,000 adolescents, and qualitative data from a subset of these adolescents as well as from caregivers and other key informants in study communities) to evaluate the short- and medium-term impacts of multi-level adolescent-centric interventions designed to transform gender norms and empower young adolescents (aged 11–13 years), as well as provide economic support—interventions which are layered, allowing us to disentangle added value of specific programme components at different levels. Partnering with Pathfinder, CARE Ethiopia, and others in the Act With Her consortium, we conducted a cluster randomised control trial (cRCT) across two rural zones in Ethiopia. In these zones, 155 communities (kebeles) were randomly allocated to: (1) curriculum-based group meetings for girls only; (2) curriculum-based group meetings for girls, for boys, and for parents, plus community-level engagement; (4) curriculum-based group meetings for girls, for boys, and for parents, and the community-level engagement, with the addition of in-kind transfers to girls; and (5) control sites. We describe these interventions in detail in Section 4. Interventions were implemented during 2019 and 2020, and we evaluate impacts at two different time points – late 2019 / early 2020 and again in late 2020 / early 2021.



This evaluation fills critical evidence gaps around the potential value of beginning interventions with Very Young Adolescents (VYA), as well as around the added value of specific components of complex interventions, such as targeting boys alongside girls, community-level involvement and systems-strengthening, and in-kind asset transfers. The study also moves beyond simply measuring gains in education, health and/or incomegenerating activities, and instead provides a more comprehensive measure of adolescent well-being across six domains: education; bodily integrity, which includes freedom from violence and child marriage; physical health, nutrition and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. We include both quantitative and qualitative measures to understand programme impacts.

The increasing recognition that adolescence — as with the first 1,000 days of life — is a critical period of transition suggests that interventions that tackle the multitude of disadvantages that girls face—even if only for a limited duration—may lead to transformative change. Our evaluation is, to the best of our knowledge, the first to provide causal mixed-methods evidence of the effectiveness of multi-level programming during early adolescence that also unpacks the contributions of different components to better inform future programming and policy.



2 Literature review

Well-identified, causal research on the impacts of programmes seeking to improve the lives of adolescent girls in LMICs has expanded rapidly in recent years. Most of the interventions studied focus on provision of knowledge, skills and/or financial support for girls, though some explore alleviation of supply-side constraints such as access to schooling or job opportunities, or girl-focused policy change (Bergstrom and Özler, 2023). These studies typically examine impacts on (some subset of) a core set of outcomes, often related to education, sexual and reproductive health, or bodily integrity (most commonly, early marriage). Existing evidence suggests that some interventions, such as those that provide cash or in-kind transfers or information on returns to education, can improve educational outcomes, especially enrolment and attendance, as well as delay marriage and pregnancy (Baird et al., 2011 in Malawi; Jensen, 2012 in India), and, to some extent, test scores (Baird et al., 2011). The evidence on technical and vocational education and training (TVET) programmes, which typically target out-of-school adolescents, remains mixed (Blattman and Ralston, 2015; Chakravarty et al., 2015), but Chakravarty and colleagues (2015) conclude that for girls, the most promising programmes take place in girl-only or girl-friendly settings, providing a combination of information on sexual and reproductive health and complementary training and assets.

An increasing number of adolescent- or girl-focused programmes seek to improve girls' life skills (soft skills), sometimes packaged with other elements such as knowledge, vocational skills, and/or educational or financial support for girls and their families. At present, evidence from evaluations of these interventions on girls' education, marriage and fertility timing is mixed. In some settings, the well-known Empowerment and Livelihood for Adolescents (ELA) program - which provides life skills and vocational training to adolescents through safe spaces (single-sex adolescent clubs) - has been found to delay teen marriage and pregnancy (Bandiera et al., 2020 and 2023), while in other settings it has been shown to have no impact on or even worsen these outcomes (Buehren et al., 2017a; Buehren et al., 2017b). A life-skills intervention for out-of-school girls in India lowered early marriage there (Pande et al., 2006), while a life-skills intervention for in-school girls elsewhere in India had no such impact (Edmonds et al., 2021). A programme providing negotiation training to girls in Zambia improved educational outcomes but did not affect teen fertility (Ashraf et al, 2020), while a different program which provided curriculum-based safe spaces for Zambian girls as well as facilitated access to health and financial services had no impact on educational or fertility outcomes (Austrian et al, 2020). An intervention including hard and soft skills for girls in addition to information on gender rights through safe spaces improved education and early marriage outcomes in Bangladesh (Amin et al., 2016), and a similar programme in Bangladesh that included hard and soft skills, empowerment, and in-kind transfers improved education, marriage and teen fertility (Buchmann et al., 2018).

Yet programmes that are not multi-level, that do not actively attempt to address the entrenched norms within families, communities and broader institutions that restrict women's and girls' opportunities, are unlikely to lead to sustained change for women and girls (Palmer, 2010; Chandra-Mouli et al., 2017; Levy et al., 2020). Because unequal gender norms and power dynamics are often reinforced by adolescents' peers, families, communities and the broader institutional structures that surround them, it stands to reason that without change in gender attitudes and norms at each of these levels, improved adolescent outcomes are much less likely to be sustained.

Although many of the programmes discussed above focus on adolescent girls, gender norms are, for the most part, not at the centre of programming. Initially the interest in gender norms was largely centred on adults (Beaman et al., 2009; Jensen and Oster, 2009; La Ferrara et al., 2012), but there is an increasing interest in the specific role of gender norms during adolescence (see, for example, Dhar et al., 2022), and in programmes that target gender norm change more broadly at the parent or community level, including Gender Equity Movement in Schools (GEMS) in India (Achyut et al., 2016) and TESFA in Ethiopia (Edmeades et al., 2014). Our study seeks to contribute to the evidence base in this area by evaluating the impacts of adolescent programming that takes a complex, multi-level approach.



There is a growing literature that highlights the importance of working with adolescent girls to tackle the deep-rooted effects of discriminatory gender norms and to support their individual and collective empowerment (Harper et al., 2018). Working with adolescent boys, before gendered attitudes and behaviours are firmly cemented, is also likely to be critical. Because gender is a relational concept, this work is important not only in terms of the space it opens for girls but also in terms of impacts on boys' own lives (Kato-Wallace et al., 2016). Rigid gender norms place pressure on boys to prove their masculinity, and can drive them to engage in harmful behaviours such as violence towards girls and other boys, unsafe sex and substance abuse. Indeed, interpersonal violence is a leading cause of mortality for adolescent boys globally, second only to road injuries (World Health Organization, 2014).

Families and communities also often perpetuate inequitable gender norms. Parents, siblings and broader communities both directly and tacitly communicate collectively-held expectations and beliefs about how girls and boys, and women and men, should behave and interact in specific social settings at specific stages of their lives. Parents and other adult family members also often make decisions that affect girls' healthy transitions (e.g., school dropout, child marriage) and impact girls' mobility. Through social pressures and standards, communities either inhibit or foster progress toward gender equality.

Finally, institutional structures can further drive gender inequality and reinforce other structural drivers of girls' constrained choices and unhealthy outcomes as they transition through adolescence. Formal laws and policies, such as those that allow or prevent child marriage or deny girls' inheritance rights, often uphold and promote unequal treatment of women and girls. Furthermore, services that are critical for girls to positively transition through adolescence, such as education, health and psychosocial services, and sexual and gender-based violence (SGBV) prevention and response, are often limited in coverage, of poor quality, do not address gender equity, and are not responsive to the needs of adolescents. To have the most sustained impact, institutional structures (including education, health, justice and social protection) must be well coordinated and work cohesively to support girls and women. When this is not the case, advances made by one system are less effective than they could be if supported by other institutional structures.



3 Study setting

This study was conducted in two rural zones of Ethiopia: South Gondar zone in Amhara region, and East Hararghe zone in Oromia region (see Figure 1). Oromia and Amhara are Ethiopia's two most populous regional states at 38% and 22% of the national population, respectively, according to 2023 projections (Ethiopian Statistical Service, 2023). Zones were selected on the basis of two criteria: programming capacity on the part of the implementing partners, the non-governmental organizations (NGOs) Pathfinder (in Amhara) and CARE (in Oromia)¹; and key vulnerability criteria, including high child marriage rates (a proxy for conservative gender norms) and high levels of food insecurity (a proxy for household economic distress).²

On the one hand, Amhara and Oromia share some similarities; their economies are centred around agriculture, and both have seen fewer improvements recently in tackling poverty than the country as a whole (Beyene et al., 2020). However, similarities begin to fade on closer examination. Regional differences are especially marked in terms of gender outcomes, with girls and women in Amhara broadly advantaged over their peers in Oromia.³ Recent macro-level events, including the Covid-19 pandemic, drought and ethnic conflict, have further contributed to regional divergence – we discuss these in more detail below.

In Amhara, as of 2016 (the year of the most recent full Demographic and Health Survey), 26% of the population lived below the national poverty line, with the rural poverty rate effectively unchanged since 2011 (Beyene et al., 2020). Food poverty was even more common than monetary poverty, and at 31%, Amhara's rate was the second highest in Ethiopia (UNICEF, 2022a). With the caveat that figures pre-date a recent drought that impacted Oromia more than Amhara, Oromia has made faster progress on poverty reduction than Amhara. As of 2016, 24% of the Oromia region's population lived below the national poverty line with declines in the rate of food poverty in Oromia – from 33% in 2011 to 21% in 2016 – the largest in the country (Beyene et al., 2020; UNICEF, 2022b).

On nearly every other indicator, however, Amhara performs better than Oromia. For example, the Ministry of Education (2023) reports that for the 2021/2022 school year, the net secondary enrolment rate in Amhara was 40%, compared to 27% in Oromia. Girls in Amhara were especially advantaged in that they were more likely to be enrolled in secondary school (45%) than boys in their own region (35%), boys in Oromia (29%) and girls in Oromia (26%). Findings from the Gender and Adolescence: Global Evidence (GAGE) research programme, the same study that underpins this analysis, which has been collecting longitudinal data on adolescents in both regions since 2017, help explain this patterning. GAGE data suggest that girls' educational advantage in Amhara is driven by boys' engagement in paid agricultural labour, and that boys' educational advantage in Oromia is primarily shaped by parents' under-investment in girls' education, especially in relation to demands on girls' time and a growing trend of adolescent-driven child marriage (Presler-Marshall et al., 2020a).

Higher rates of girls' education in Amhara are also accompanied by lower rates of child marriage and adolescent pregnancy. Although historically, girls in Amhara were more at risk of child marriage than girls in Oromia, UNICEF (2022a, 2022b) reports that this is no longer the case. Of women aged 20–24 years, 43% of those in Amhara and 48% of those in Oromia were married before the age of 18. Driven by their higher likelihood of child marriage – and by Oromia's lower uptake of modern contraceptives (28% versus 47% in Amhara for all married women aged 15–49 years) – the 2016 Ethiopian Demographic and Health Survey reports that girls aged 15–19 in Oromia were more than twice as likely to have begun childbearing as those in Amhara (17% versus 8%) (CSA and ICF, 2017). Findings from GAGE add nuance to these broader patterns. Not

 $^{^{}m 1}$ Key capacity criteria included operational presence and experience, and absence of security concerns.

² According to the 2016 Ethiopia Demographic and Health Survey, women aged 20–24 years in Oromia have a median age at first marriage of 17.4 years, and women aged 20–24 years in Amhara have a median age at first marriage of 16.2 years.

³ Prior adolescent girl-focused work in South Gondar included a CARE-implemented program focused on improving economic empowerment and sexual and reproductive health of ever-married adolescent girls during 2011-2013 (Edmeades et al., 2014). Follow-up research was conducted on this programming in 2017, shortly before the GAGE research project began.



only is the risk of child marriage declining for girls in Amhara (especially in early adolescence), but married girls are supported to use contraception to delay their first pregnancy until their body is mature (Presler-Marshall et al., 2020b, 2020c). This is not the case in Oromia, where adolescent-driven marriages are pushing up the incidence of child marriage, and where contraception is strictly forbidden until girls have demonstrated their fertility. Recent GAGE research found that 79% of married girls in South Gondar (Amhara) had ever used a form of modern contraception, compared to only 7% of their peers in East Hararghe (Oromia) (Presler-Marshall et al., 2020b).

Girls and women in Amhara are also less likely than those in Oromia to have undergone female genital mutilation or cutting (FGM/C). The most recent Demographic and Health Survey reports that of women aged 15–49 years, 62% of those in Amhara compared to 76% of those in Oromia had undergone the procedure (CSA and ICF, 2017). Recent GAGE research suggests an even larger gap at the zonal level among adolescent girls: 32% had undergone FGM/C in South Gondar (Amhara) compared to 73% in East Hararghe (Oromia) (Presler-Marshall et al., 2022a). Qualitative research findings highlight that the regional government of Amhara has worked especially hard to eliminate FGM/C through awareness-raising activities in schools and in the community; those findings also highlight that FGM/C is seen as a prerequisite for marriage in East Hararghe (Presler-Marshall et al., 2022b).

The more advantageous position of girls in Amhara is evident in the region's economic outcomes too. For example, 21% of married women aged 15–49 in Amhara have a bank account, compared to only 8% in Oromia (CSA and ICF, 2017). Compared to their peers in Oromia, married women in Amhara are also less likely to report that their husband has primary control over women's earnings (3% compared to 10%) and more likely to individually or jointly own land (51% compared to 37%) (ibid.). GAGE's research with adolescents extends these findings – recent data finds that 12–14-year-old girls in East Hararghe were four times as likely as their peers in South Gondar to have worked for pay in the past year (20% versus 5%) – and twice as likely as boys in either region (10%) – primarily because girls in East Hararghe become responsible for paying for their own clothing (and school supplies if they are still enrolled) in early adolescence (Presler-Marshall et al., 2021). It also found that although girls in East Hararghe (Oromia) are more likely to have their own savings than girls in South Gondar (Amhara) (72% compared to 32% for 17–19-year-olds), they not only save informally – because they lack access to formal financial services – but often save secretly, hiding their savings from parents and husbands who might appropriate them.

The national and international events that have unfolded over the past few years have had myriad and diverse impacts on adolescent girls and boys in Amhara and Oromia, that are important to keep in mind when analysing program effectiveness from 2020 and beyond. Pandemic-related school closures in spring 2020, for example, knocked students in both regions off their educational trajectories. GAGE research found that although 73% of rural adolescents tried to keep learning while schools were closed, two-thirds (69%) depended entirely on self-study because other options were not available (Jones et al., 2022). Of the three-quarters of previously enrolled students who returned to formal education when classrooms re-opened in fall 2020, those in Amhara were far more likely to be offered catch-up classes (74%) than those in Oromia (24%) (ibid.).

A drought that began in late 2020 has also further disadvantaged adolescents in Oromia. ACAPS (2023) reports that the drought (the worst in at least a decade) affected nearly 3.5 million people in that region, and GAGE research found especially devastating impacts on girls' access to education due to increased demands on their time for collecting water (Presler-Marshall et al., 2022c).

Furthermore, the waves of ethnic violence that have roiled Ethiopia in recent years have impacted adolescents in both regions, albeit at different times and in different ways. Young people living in Amhara experienced spillover violence from the conflict that started in Tigray in late 2020 and later on spread to North Wollo and parts of South Gondar (Center for Preventive Action, 2023; Human Rights Watch, 2022). GAGE research has found that violence impacted adolescents' access to education, especially at secondary and tertiary levels, and that community-level violence tended to increase the violence that adolescents experienced inside the home



as well (Woldehanna et al., 2024). Young people living in Oromia have also been impacted by inter-ethnic violence, which was intense in 2017 and 2018 (Harter, 2023).

These distinct economic, social and cultural settings provide an interesting backdrop for our study, which seeks to understand the impacts of programming designed to transform gender norms in order to improve adolescent girls' outcomes.



4 Interventions

In this section, we detail the set of multi-level, layered interventions that we study in this paper. Figure 2 provides a summary. ⁴ These interventions were implemented in South Gondar zone by Pathfinder International, and in East Hararghe zone by CARE.

Her Spaces is a safe spaces programme pioneered in Ethiopia in which young adolescent girls aged 11–13 participate in 10 months of weekly curriculum-based, mentor-led group sessions (40 sessions in total) (Pathfinder International, 2020).^{5,6} The curriculum covers a range of topics, including nutrition, puberty and menstrual health, relationships, negotiation skills, harassment and safety in the community, community services (health, justice and financial), financial management and creating an aspirational plan; there is some emphasis on discussion of attitudes and norms related to gender equality among boys and girls. The group leaders (mentors) are young women, typically from the local area or nearby in their early 20s. A small number of sessions invite male relatives to join, but other interactions with the family and community are fairly light-touch, consisting of a small number of community sensitisation meetings held during implementation to raise awareness of and familiarity with the programme (ibid.).

The intervention that we call Act With Her Essential (AWH Essential) builds on and expands the Her Spaces model, adding a gender synchronization component. Girls aged 11–13 participate in 10 months of weekly curriculum-based, mentor-led sessions (again, 40 in total), but there are also separate curriculum-based groups for boys of the same age, as well as for the primary caregivers of the girls and the boys. Boys' groups meet approximately twice a month (for a total of 18 sessions), covering topics that are temporally aligned with the girls' groups. Four sessions bring the boys and girls together for interactions that are specifically designed to delve deeper into topics around gender equality. Building on the Her Spaces curriculum, the Act With Her curriculum was designed by Pathfinder International in collaboration with the Government of Ethiopia, CARE International and the GAGE research consortium, with funding from the Bill & Melinda Gates Foundation. It includes many of the same topics as Her Spaces, but goes into more depth on several issues – particularly sexual and reproductive health, sexual and gender-based violence and harmful traditional practices. Act With Her also places much more emphasis on changing attitudes and norms around gender equality. Six caregiver sessions are held over the 10-month period to orient parents to topics covered in the adolescent curricula, and to help them create a supportive home environment for the adolescent. The global versions of the Act With Her curriculum and key tools are open-access and freely available at

https://www.pathfinder.org/publications/act-with-her-program-package.

⁴ The set of interventions we study here also included adolescent-focused systems-strengthening work at the district level and above, which entailed strategically engaging key stakeholders across multiple sectors at the woreda (district), regional, and national levels, with the objective of raising the visibility, prioritization and subsequent improvement of adolescent-responsive systems and services (particularly those related to health, education, sexual and gender-based violence and child protection). Because this systems-strengthening work focused on broader institutional structures at the national and subnational levels, it potentially impacts all of our study sites (control and intervention alike) and we cannot disentangle impacts of it here.

⁵ The Her Spaces curriculum was developed through a collaboration between the Ethiopian Federal Ministry of Health and the international non-profit organization, Girl Effect. It was piloted with approximately 2,000 girls in four regions of Ethiopia (including our study regions) prior to the launch of the present study (IPE Global, 2019).

⁶ Note that Her Spaces and Act With Her programming attempted to include all adolescents of the relevant gender aged 10–13 in programme sites. However, our evaluation focuses only on adolescents aged 11–13 at the time of programme launch, as this was the group for which baseline data were collected. Throughout this report we refer to programming as including those aged 11–13 years to avoid confusion.

⁷ In earlier descriptions of this study, we referred to this treatment arm as "Act With Her (curriculum only)".

⁸ Gender synchronization refers to the practice of working with boys and girls (or men and women) in an "intentional and mutually reinforcing way that challenges gender norms, catalyzes the achievement of gender equality, and improves health" (Greene and Levack, 2010).

⁹ We will not be able to differentiate the impacts of the Act With Her curriculum itself from the inclusion of boys and parents in the programming. We consider any differences we find between the Her Spaces treatment arm and the AWH Essential treatment arm as a combined impact of an enriched curriculum as well as the inclusion of male adolescents and caregivers.

¹⁰ Caregiver sessions are not segregated by the gender of the parent, but sessions are held separately for the parents of adolescent boys and girls.



The intervention that we call Act With Her Comprehensive (AWH Comprehensive) includes all of the activities in the AWH Essential model, but adds a two-pronged community-level component.¹¹ This community-level work is operationalised by: (1) a social norms change component that brings together key decision-makers and stakeholders from the community for regular, structured meetings led by trained facilitators to establish locally-led mechanisms for discussing social norms in ways that initiate shifts over time; ¹² and (2) a local-level systems strengthening approach that enhances community-level capacity for social accountability through increased participation, accountability and transparency between service users, providers and decisionmakers.¹³ The systems strengthening component focuses on: (1) supporting multi-stakeholder, cross-sector action in the public sector; (2) enhancing social accountability structures via community scorecards; (3) offering gender and age sensitivity training with a focus on school-related gender-based violence; (4) strengthening implementation of the national School Health and Nutrition Package; (5) improving menstrual health and hygiene management in schools; and (6) establishing 'Roll Back Early Marriage' clubs for girls at school. The social norms change community group meetings and the local system strengthening efforts were launched in AWH Comprehensive sites approximately 2 months after the first adolescent groups started, and continued for approximately 2 years (though implementation was disrupted for several months due to Covid-19 pandemic-related closures and restrictions).

The final intervention variation, which we refer to as AWH Comprehensive Plus Transfers (AWH Comprehensive+), implements the full AWH Comprehensive programme but with in-kind transfers to the participating girls. Girls in eligible communities were allowed to choose among three equal-value (approximately US\$115, in 2019 prices) supply package options: one including school supplies, one including personal hygiene supplies, and one that is a combination of the first two. ¹⁴ Each girl chose the package she wanted to receive within the first weeks of the group meetings (those who did not choose were assigned the combination package), and received three deliveries of that package over the course of the 10-month adolescent group meeting intervention.

 $^{^{11}}$ In earlier descriptions of this study, we referred to this intervention arm as "Act With Her".

¹² Work on catalyzing shifts in social norms is primarily focused on applying CARE's well-known Social Analysis and Action (SAA) approach to gender and social transformation, which seeks to enable communities to identify for themselves the linkages between social factors and well-being, and then determine what actions will help improve them (Mekuria et al., 2018). Groups meet monthly to discuss harmful socio-cultural norms relevant to their local community, and to devise an action plan as to how they can be tackled.

¹³ Strengthening local capacity for social accountability is approached through the implementation of CARE's Community Score Card (CSC) intervention. Used throughout CARE's programming, the Community Score Card offers a way to increase participation, accountability and transparency between service users, providers and decision-makers. In Act With Her, particular attention is paid to ensuring that adolescent girls and boys directly participate in the Score Card processes, with the objective of improving local stakeholders' ability to hold providers of key services for adolescents accountable for optimal access and quality.

¹⁴ The school supplies package included pens, pencil, crayon or colored pencil, ruler, eraser, exercise books, backpack/bag, compass, solar lantern and English and math reference books. The personal hygiene package contained water purification tablets or bottled water purification, cloth to make sanitary pads, body lotion or Vaseline, hair oil and body soap. The combination package contained exercise books, solar lantern, water purification tablets or bottled water purification, pens and cloth to make sanitary pads.



5 Research design

5.1 Experimental design

In order to study and contrast the impacts of these layers of adolescent-centric programming, we employ a multi-arm parallel cluster randomised controlled trial (cRCT) in 155 communities across the two rural zones of Ethiopia (South Gondar and East Hararghe). This section summarises our research design; for more detail, please refer to our registered pre-analysis plan (Jones et al., 2020a).

Five woredas (districts) were purposely selected within each zone on the basis of implementing partner programming capacity and key vulnerability criteria (including high child marriage rates as a proxy for conservative gender norms, and high levels of food insecurity as a proxy for household economic distress); these criteria are described in more detail in Section 3. Within these 10 woredas, all kebeles (communities) were characterised into one of three groups: (1) unsafe for data collection and programming; (2) marginalised (lack of programming, isolated from key services and road/transport infrastructure); and (3) less marginalised (in terms of access to services and to the main woreda town). Kebeles identified by local officials as a high security concern fell into this first group and were excluded from consideration. Among the remaining eligible sites, 16 kebeles (6 marginalised, 10 less marginalised) in each woreda were randomly selected to be included in the study. Prior to any quantitative data collection, these 155 communities were stratified (by woreda, and kebele marginalisation status) and then within each strata were randomised into one of five study arms: (1) pure control; (2) curriculum-based programming for girls only (Her Spaces); (3) curriculum-based programming for girls, boys and parents (AWH Essential); (4) curriculum-based programming for girls, boys and parents as well as community-level work (AWH Comprehensive); and (5) curriculum-based programming for girls, boys and parents, with community-level work plus in-kind transfers for girls (AWH Comprehensive+). 15 Randomisation within each woreda and by kebele marginalisation status ensured balance on these two critical observables; we discuss balance across intervention groups further in Section 5.8 below.

5.2 Enrolment of study participants

Within each of our sampled kebeles, the population of age-eligible adolescents was identified through a census-style household listing. The listing was conducted by GAGE survey enumerators, who started at a standardised location within each kebele and moved in a standardised fashion from there, stopping at each household along the way to record age-eligible adolescents living there until a pre-designated number of households was reached (see Jones et al., 2020a for more details). A total of 15 girls and 11 boys aged 10-12 (in late 2017) were randomly sampled from this census list in each kebele, and the final quantitative study sample includes 3,991 adolescents (2,294 girls and 1,697 boys). Recruitment for quantitative data collection also included female primary caregivers of adolescents (a total of 3,218 women), and a randomly selected subset of male primary caregivers. Power calculations conducted during study inception suggested that this adolescent sample size would be able to detect small-to-medium effect sizes on girl and boy outcomes in the quantitative analysis, reasonable in the context of the existing literature (see Jones et al., 2020a for more details).

Table 1 provides key adolescent and household characteristics at baseline (in late 2017 and early 2021) from the sample of female adolescents and their households. Across both zones, approximately 30% of households had received support from Ethiopia's Productive Safety Net Programme (PSNP), which targets food-insecure households (Table 1, Panel A). Yet the household-level Food Insecurity Experience Scale (FIES), developed by

¹⁵ In South Gondar, we allocated 19 communities to control and 14 communities per treatment arm; in East Hararghe, there were 20 communities allocated to control and 15 communities per treatment arm.

¹⁶ If the household had more than one eligible adolescent, one adolescent was randomly selected to be the designated eligible adolescent; thus, the evaluation includes only one adolescent per household. We include a control for multi-adolescent household in analysis



the Food and Agriculture Organization as a metric to capture the experience of constrained access to food (Cafiero et al., 2018), suggests higher levels of food insecurity in East Hararghe (5.0 out of 8) compared to South Gondar (2.9). Furthermore, girls in East Hararghe reported substantially higher rates of hunger (26% report feeling hungry in the past 4 weeks due to lack of food) compared to those in South Gondar (12%); and far fewer were enrolled in school in early adolescence (70% in East Hararghe versus 97% in South Gondar, Table 1, Panel B).

While both zones are characterised by strongly conservative gender norms and attitudes, and high rates of harmful traditional practices – which is why they were included in the GAGE study – they differ significantly in terms of cultural factors. As described in Section 3, girls in Amhara typically marry later than those in East Hararghe (where adolescent-driven marriages are currently on the rise). Although marriage rates at baseline (when girls were aged 10-12) show only a marginally statistically significant difference across the zones, with South Gondar slightly worse off (0.6% versus 0.2% in East Hararge; Table 1, Panel B). Furthermore, FGM/C is practiced at different times and in different forms across the two zones. In Amhara, it is practiced in infancy, and is Type 1 (partial or total removal of the clitoris); in our South Gondar sample, one-quarter of girls reported having experienced this by aged 10-12. In Oromia, FGM/C is often carried out in early adolescence, and is Type 2 (partial or total removal of the clitoris and labia) or 3 (sewing the labia together); in our East Hararghe sample, more than a third of girls reported having experienced FGM/C by the time they were aged 10–12.

Panel C of Table 1 summarises attitudes toward gender equality elicited from primary female caregivers of the adolescent girls in our sample at study baseline. Across a range of statements related to gender equality across men and women and boys and girls in the household, female caregivers in both zones display conservative attitudes; for instance, 73% of female caregivers in South Gondar and 82% in East Hararghe agree that 'a man should have the final word on decisions in his home'. Yet attitudes in East Hararghe in somewhat more conservative than in South Gondar. For example, 83% of female caregivers in South Gondar agree that 'girls and boys should share household tasks equally', though only 60% of female caregivers in East Hararghe agree with this statement.

Table 1 Qualitative sample

Respondent Type	Sex	Location			
		Rural		Urban	Total
		South Gondar	East Hararghe	Debre Tabor	
Adolescents	Girls	56 (90)	11 (27)	9	76 (126)
	Boys	50 (81)	12 (29)	6	68 (116)
Total		106 (171)	23 (56)	15	144 (242)
Young adults	Females	13 (22)	8(16)	8	29 (46)
	Males	13(25)	6(12)	11	30 (48)
Total		26 (47)	14 (28)	19	59 (94)
Sub-sample of those with disability		5 (11)	-	3	8 (14)
Sub-sample of girls married <18		5 (8)	2	2	9 (12)
Sub-sample of IDPs		4 (16)	-		4 (16)
Parents/Caregivers	Mothers	10 (58)	6 (35)	3 (18)	19 (111)
	Fathers	10 (56)	5 (34)	3 (18)	18 (108)
Total		20 (114)	11 (69)	6 (36)	37 (219)
Key informants		99 (125)	32 (63)	10	14 (198)
TOTAL		265 (492)	82 (218)	55 (85)	402 (795)

For qualitative data collection, adolescents were purposefully chosen at baseline from the census lists created for the quantitative sample in 5 kebeles in a single woreda (district) per zone (1 site per study arm). Adolescents were selected for inclusion in the qualitative data collection to ensure a mix of ages, male versus



female household heads and inclusion of the most disadvantaged (i.e. young people with disabilities, already married, out of school) in order to capture the voices of those at risk of being 'left behind' – for a total of 224 adolescents in 10 study sites across the two zones. At the second follow-up data collection, two additional sites (where quantitative data was already being collected) were added from a different zone in each woreda, in order to expand the qualitative data collection sample.

5.3 Research data collection and programme implementation

Figure 3 shows the timeline of the study, including the timing of intervention components, quantitative and qualitative data collections and overarching national and international events.

Recruitment of adolescent participants and baseline data collection on adolescents, their caregivers and their communities were conducted between November 2017 and January 2018. In total, 3,962 adolescents (99% of the sample) completed a baseline quantitative interview. At baseline, 86% of adolescent girls in our sample were enrolled in school, though absenteeism was frequent (affecting 27% of school days in the two weeks preceding the survey). Health was generally poor, with 51% of adolescent girls reporting at least one of 14 common health ailments (such as fever, headache or cough) in the two weeks preceding the survey.

Programme implementation (of Her Spaces and all variations of Act With Her) by Pathfinder (in South Gondar) and CARE (in East Hararghe) began about one year after the completion of baseline data collection, in February 2019.17 Mentors, women and men aged 17-24 with an 8-10th grade literacy level, were recruited from the local areas through open postings. Adolescent recruitment was done separately from the research study recruitment, but also used a household listing methodology aiming to locate all adolescent girls and boys (where appropriate for the intervention arm) aged 10–13. Staff implementing the programme aimed to include as many eligible adolescents from each community as possible—including the entire research sample, and so most communities had two girls' groups and two boys' groups (where applicable), with up to 35 members each. Approximately 84% of girls (and 81% of boys) in the research sample living in treatment communities in South Gondar enrolled in programming. Recruitment rates among the research sample in East Hararghe were somewhat lower, with 64% of girls (68% of boys) enrolled.¹⁸ As noted earlier, enrolment rates among the research sample were substantially lower in East Hararghe than in South Gondar. Average attendance rates among those who did enrol also differed across the two zones: average attendance across girls' sessions (among all girls enrolled in the programme) in South Gondar was 93%, and in East Hararghe was 79%; for boys' groups, the corresponding rates were 89% and 77%. 19 Perhaps more anecdotally from our implementing partners' records, reasons cited for girls dropping out of the groups after enrolment were very different across the zones: in South Gondar, almost three quarters of recorded dropouts were reportedly moving, while in East Hararghe, just 15% of recorded dropouts cited migration as the reason, while another 77% cited lack of interest

¹⁷ The time lag between baseline data collection and programme implementation may raise concerns of non-compliance with treatment group assignment, particularly if adolescents move between communities in the intervening period. Note that study participants are assigned to trial groups in the analysis on the basis of their residential location at the time of the household listing activity, not at the time of programme implementation.

¹⁸ We also note interesting enrolment differences across programme arms. For South Gondar, 90% of girls from the research sample in Her Spaces communities enrolled in programming, while 80%–83% of girls in Act With Her (all variations) communities were enrolled. For East Hararghe, 57% of girls from the research sample in Her Spaces communities enrolled in programming, while 82% of girls in AWH Essential sites, 66% of girls in AWH Comprehensive sites, and 51% of girls in AWH Comprehensive+ sites were enrolled. We see a similar trend for boys. In South Gondar, 74% of boys in AWH Essential sites, 79% of boys in AWH Comprehensive sites, and 89% of boys in AWH Comprehensive+ sites were enrolled. In East Hararghe, 82% of boys in AWH Essential sites, 71% of boys in AWH Comprehensive sites, and 54% of boys in AWH Comprehensive+ sites were enrolled. Given that programme enrolment rates were not 100% and varied across treatment arms, we provide results from a treatment on the treated (TOT) analysis in the appendix to this paper.

¹⁹ Attendance rates across treatment arms (among all adolescents participating in the programming) was as follows: for South Gondar girls, Her Spaces attendance averaged 93%, AWH Essential averaged 90%, AWH Comprehensive was 93%, and AWH Comprehensive+ was 93%. For South Gondar boys, AWH Essential attendance averaged 88%, AWH Comprehensive was 89%, and AWH Comprehensive+ was 90%. For East Hararghe girls, Her Spaces attendance averaged 73%, AWH Essential averaged 81%, AWH Comprehensive was 77%, and AWH Comprehensive+ was 85%. For East Hararghe boys, AWH Essential attendance averaged 77%, AWH Comprehensive was 76%, and AWH Comprehensive+ was 78%.



or family objection for the reason they dropped out. Mentor turnover was also higher in East Hararghe than in South Gondar.

Weekly adolescent group meetings began in March 2019 and continued for 10 months. Meetings were required to be held in a private, safe place located less than one hour's walk from adolescent homes; in practice, meetings were held on school grounds, thus many were outdoors. Parent group meetings started shortly thereafter. Community-level Social Analysis and Action (SAA) meetings and systems strengthening activities began by June 2019. Although this component was meant to continue for 24 months, in practice there was disruption for a number of months due to pandemic-related closures, as illustrated in Figure 3.²⁰ The adolescent and parent group meetings were completed by January 2020, so were not affected by those closures.

Our own data collection efforts, as well as information provided by our NGO partners, confirm that programming in East Hararghe was potentially more challenging and did not run as smoothly as in South Gondar. Implementation was abandoned prior to programme launch in two communities in East Hararghe – one due to internal conflict that led to security issues and the other due to religious backlash to the program within the community (though the curriculum does not include religion). Work in five communities in the zone were discontinued approximately two-thirds of the way through the 40 weeks of adolescent group meetings – three due to religious backlash and two because mentors left and were not replaced. And boys' group meetings were suspended in an additional two sites in East Hararghe, one due to religious backlash and the other due to male mentors' perceived inequality between boys and girls groups. And so nine (out of 60 total programme kebeles in East Hararghe) did not receive the full intervention they were assigned. Furthermore, community-level interventions in all AWH Comprehensive communities in East Hararghe were suspended shortly before the pandemic was declared, to be re-organised and started from the beginning after services reopened in late 2020.

We note that although our main quantitative discussion focuses on intention-to-treat results (ITT, where we estimate the impact of community-level assignment to a particular set of program layers – and all communities are included, regardless of whether programming was abandoned or discontinued prior to program end), we present quantitative results from treatment on the treated analysis (TOT) – at its core an estimate of the treatment effect for those that took up treatment. These findings are shown in Appendix C.

In both study zones, delivery of the supply packages for girls in the AWH Comprehensive+ treatment arm happened later than originally intended. The original design was to provide the transfers at 3 timepoints spread across the 10-month group meetings. However, due to procurement and supply delays, the first delivery was provided approximately 4–6 months into the 10-month period, and the second and third transfers were provided in tandem towards the end of the scheduled adolescent group meetings. Information given to us by our implementing partners illustrates that girls were much more likely to have chosen the educational supplies package (84% of packages delivered) rather than the personal hygiene package (12%) or the combination package (3%). This gap was even more pronounced in East Hararghe (where 94% of girls requested the education package and 6% requested the hygiene package) than in South Gondar (where 71%

²⁰ Community meetings and systems-strengthening activities were impacted by the onset of the pandemic in early 2020, but did continue on to the extent that was possible.

²¹ One issue that did arise in South Gondar is that in two communities, the treatment arms were switched during implementation (one was an AWH Essential community, and the other was an AWH Comprehensive community). We use assigned treatment status for these communities in the analysis presented in this paper.

²² One community was assigned to the Her Spaces intervention, and the other was assigned to the AWH Comprehensive+intervention.

²³ These communities were spread across three of the four treatment arms – 2 Her Spaces, 1 AWH Essential, and 2 AWH Comprehensive.

²⁴ One community was assigned to the AWH Essential treatment arm, and the other was assigned to the AWH Comprehensive+.



of girls requested an education package, 21% the hygiene package and 8% requested the combination package).

The first round of follow-up quantitative follow-up data collection (Round 2) was conducted by the research team from November 2019 to March 2020. In South Gondar, the bulk of interviews took place starting in week 36 of the 40-week adolescent girls' groups, when girls had covered nearly the full AWH curriculum save for a session focusing on exercise, a session focusing on village savings and loan associations, and a joint session with the boys involving a community mapping and safety activity. In East Hararghe, the bulk of Round 2 interviews took place starting in week 32 of the 40-week adolescent girls' groups, and so in addition to the last four sessions above, these girls would likely not yet have reached a second joint session with the boys' groups (focusing on a continuation of discussions of gender roles) as well as some remaining topics on health (anaemia) and financial empowerment (model women in the community). At the time of data collection, all parent meetings across both zones had been finished for at least a month. The second asset transfer (which contained the equivalent of two packages per girl) was made during data collection in both zones.

Round 2 data collection round provides evidence on the 10-month impacts of layered programming. ²⁵ All sampled adolescents and their caregivers were sought for re-interview, and attempts were made to track adolescents no longer living at their baseline residence. Follow-up survey data was collected for 87% of girls (89% of the adolescent sample overall); refusal rates were low (2.6% of girls), and most of those who were not interviewed were simply unable to be found (8.5% of girls, most likely due to migration). We explore survey attrition formally in Appendix A.

A second round of follow-up data collection (Round 3) was conducted in two waves, from March to May 2021 and October 2021 to May 2022. At this time, all interventions had been finished for over a year, with the exception of the community-level work in AWH-Comprehensive and AWH-Comprehensive Plus sites (which, as we explain above, had a prolonged stoppage due to the COVID-19 pandemic). Figure 3 shows the timing of the second follow-up data collection waves in relation to the community-level work. With regard to quantitative data collection logistics, the research sample was prospectively randomly divided into these two waves in expectation of work stoppages around a national election that was scheduled for mid-2021, with approximately 35% of the sample randomly sampled for data collection prior to the election, and the remaining sample randomised for data collection afterwards. Furthermore, a two-stage tracking methodology was implemented in this data collection round to minimise survey attrition.²⁶ Round 3 data collection provides evidence on the 24-to-36-month impacts of layered programming. ²⁷ As before, all sampled adolescents were sought for re-interview (across the two survey waves), and attempts were made to track adolescents no longer living at their baseline residence. Follow-up survey data was collected for 94% of girls (88% of the full adolescent sample); refusal rates were low (3.7% of girls), and most of those who were not interviewed were simply unable to be found (2.3% of girls, again, most likely due to migration). We explore survey attrition formally in Section 5.9, below.

5.4 Ethics

The GAGE research design and tools were approved by the George Washington University Committee on Human Research Institutional Review Board (071721), the Overseas Development Institute Research Ethics Committee (02438), the Ethiopian Policy Studies Institute (EDRI/DP/00689/10), the Addis Ababa University College of Health Sciences Institutional Review Board (113/17/Ext) and the Amhara and Oromia regional

²⁵ The pre-analysis plan for this study specifies that near-term impacts will be measured at 8 months post-programme launch; data collection was actually conducted over a 2-month period, so 8–10 months post-programme launch. We refer to the 10-month end point of the follow-up data collection here for brevity.

²⁶ See Baird et al. (2016) for further details on this methodology.

²⁷ This second follow-up data collection was later than specified in the pre-analysis plan, due to delays resulting from the Covid-19 pandemic, the 2021 national election in Ethiopia, and armed conflict that erupted within the country around this time.



Bureaus of Health ethics committees. Consent was obtained from caregivers and married adolescents; assent was obtained for all unmarried adolescents under the age of 18. There was also a robust protocol for referral to services, tailored to the different realities of the diverse research sites.

5.5 Outcome measures

Following the GAGE conceptual framework (Figure 4), which is explained in more detail in Jones et al. (2020), baseline and follow-up survey data includes rich information on outcomes across six adolescent capability domains: education; bodily integrity; physical health, nutrition, and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. The data also includes cross-cutting information on attitudes and knowledge. In the pre-analysis plan registered before the launch of follow-up data collection (Jones et al., 2020a), we defined 14 primary outcomes to analyse for adolescent girls at the time of the first follow-up, and 19 primary outcomes to analyse for adolescent girls at the time of the second follow-up. These primary outcomes include 1–2 measures per capability domain and an additional set of crosscutting measures of knowledge, attitudes, and support network. Several of the measures are indices, intended to capture a key construct of the domain.²⁸ We discuss the measures in detail in Section 6, below.²⁹

5.6 Quantitative empirical specification

We use regression analysis to quantitatively estimate the impacts of the layered programme treatment arms described above on our pre-specified set of outcomes by each follow-up data collection round. Our main analysis focuses on the intention-to-treat (ITT) programme impacts, separately by round, across all research sites and also separately for South Gondar and East Hararghe, using the following reduced form linear model:

$$\begin{aligned} y_{ic} &= \alpha_1 + \beta_1 \text{HerSpaces}_c + \beta_2 \text{AWHEssential}_c + \beta_3 \text{AWHComprehensive}_c + \\ \beta_4 \text{AWHComprehensivePlus}_c + X'_{ic} \gamma_1 + \epsilon_{ic} \end{aligned} \tag{1}$$

where y_{ic} is the outcome of interest for individual i in community c, $HerSpaces_c$ is a binary indicator for living in a Her Spaces community, $AWHEssential_c$ is a binary indicator for living in an Act With Her Essential community, $AWHComprehensive_c$ is a binary indicator for living in an AWH Comprehensive community and $AWHComprehensivePlus_c$ is a binary indicator for living in an AWH Comprehensive+ community (where community residence is assigned at study baseline). Regressions include all adolescent girls (or boys) surveyed during the follow-up data collection round. The standard errors ε_{ic} are clustered at the kebele level, which accounts for both the design effect of the kebele-level treatment and the heteroskedasticity inherent in the linear probability model (for binary outcomes). X_{ic} includes both a 'basic' and 'rich' set of controls. The 'basic' controls consist of block indicators used in the randomisation (where blocks combine woreda and marginalisation status), adolescent age (in years) and an indicator for whether there were multiple eligible adolescents in the household. The 'rich' set of controls include: household size; an indicator for household head literate; an indicator for female-headed household; a household asset index; an indicator for household receives PSNP benefits; and survey month indicators. Sampling weights are used to make the results representative of the target population in the study area. We utilise linear probability models in the case of binary outcomes. We provide estimates from TOT analysis in Appendix C.

Our study aims to evaluate the short- and medium-term impacts of a set of layered adolescent-centric interventions, in isolation and in comparison, to each other. For the first goal, we examine the size and

²⁸ To construct indices, we employed the following procedure: (1) for each index component, create a normalised measure by subtracting the control group mean and then dividing by the control group standard deviation; (2) construct the index by calculating the raw mean across all normalised component variables; and (3) create the normalized index value by subtracting the control group mean of the index and then dividing by the control group standard deviation of the index.

²⁹ Furthermore, we defined a set of secondary outcomes for each group, largely composed of primary outcome index components; see Jones et al. (2020) for more details on these.

³⁰ We are unable to use ANCOVA analysis, due to lack of baseline data on several components of the primary outcome indices.

³¹ For the second follow-up, we additionally include an indicator for survey wave assignment and year of survey as controls.



statistical significance of the estimated β 's from equation (1). For the second goal, we test a set of hypotheses that the estimated β 's from increasing layers of adolescent-centric programming are not equal to each other (i.e. we test $\beta_1 \neq \beta_2$, $\beta_2 \neq \beta_3$, and $\beta_3 \neq \beta_4$).³² To be conservative, given the number of hypothesis tests and primary outcomes we pre-specify here, we construct FDR q-values, as described in Anderson (2008). This multiple-hypothesis testing is conducted across the primary outcomes for each hypothesis and sample separately.

5.7 Qualitative methods and analysis

The 3 rounds of quantitative survey data were complemented by in-depth longitudinal qualitative research with adolescent programme participants (163) and non-participants (85), parents (208), mentors and supervisors (30), service providers and government officials (77), to better understand some of the emerging patterns and mixed findings painted by the survey findings. Qualitative tools, which are also available online (Jones et al., 2018; Jones et al., 2019), consisted of an array of interactive activities, including object-based interviews, worries exercises, vignette-based discussions, social norm and body mappings and timelines. Tools were used in individual and group interviews conducted by researchers (of the same sex and from the same region as the respondent) who had been trained to communicate effectively and sensitively with adolescents. Preliminary data analysis took place during daily and site-wide debriefings with the research team, and findings were used to develop a thematic codebook that was informed by the GAGE multi-capability conceptual framework (GAGE consortium, 2019). All interviews were transcribed and translated by native speakers of either Afaan Oromo or Amharic, then coded using a qualitative software package, MAXQDA, according to the codebook, but with flexibility to incorporate local specificities. This deductive coding process was quality assured through weekly debriefing sessions with the coding team and double-coding of a subsample of transcripts. The use of quotes presented in the results section is illustrative.

5.8 Balance testing

Our baseline balance tests, in essence, a confirmation of the success of the randomization, are presented in Appendix Table A2 and discussed in the text of Appendix A. Overall, we interpret the evidence presented in these tables to suggest that there is little imbalance across baseline household characteristics ('rich controls', which we include in our primary regression specification in any case), and weak evidence that any intervention group was better or worse off in a broad sense (across a range of baseline measures of outcome variables) than any other intervention group.

5.9 Follow-up survey attrition

The quantitative follow-up survey data collections involved locating thousands of adolescent girls in the rural study sites (or wherever they had moved) one to three years after initial study recruitment. Survey enumerator teams were well-trained in tracking methods, and where necessary worked in concert with locals and the qualitative research team to successfully survey more than 87% of girls in each follow-up round. While there is evidence of small differential attrition across treatment arms (Appendix A), given low overall rates this is unlikely to impact findings.

³² As secondary analysis, we conduct treatment on the treated (TOT) analysis for the primary outcomes, using detailed individual-level information on programme enrolment. This analysis is performed by running separate regressions for each treatment group (where the sample included in the regression is that treatment group as well as the control group), using treatment group assignment to instrument for an adolescent-level measure of recruitment into that programme. Results of this analysis are provided in Appendix C.



6 Analysis

In this section, we describe results from the analysis detailed in Section 5.6 on a set of pre-specified outcomes for adolescent girls and boys.

For girls, we pre-specified a set of 19 primary outcomes across six different adolescent capability areas (education; voice and agency; bodily integrity; psychosocial; economic empowerment; and physical health, nutrition and sexual and reproductive health) as well as a group of cross-cutting outcomes (knowledge, attitudes toward gender equality, supportive network). Table 2 provides results for the full sample of girls; Tables 3 and 4 summarise results for the subsamples with baseline residence in South Gondar and East Hararghe respectively; and Tables 5 and 6 summarise results for the subsamples with baseline residence in marginalised and less marginalised communities (across both administrative zones). For each table, the Panel A presents results at the time of the first follow-up data collection round (approximately 10 months after programme launch, when adolescent groups were roughly 80% complete, parent meetings had ended, the second asset transfer packages were being distributed, and community work was ongoing – and prior to covid-19 pandemic-related disruptions), and Panel B presents results at the time of the second follow-up data collection round (approximately 24-to-36 months post program launch, over a year after all adolescent and parent groups and asset transfers had been completed, but while the community-level and broader systemsstrengthening work was still ongoing, and there had been disruption to the latter work as a result of the covid-19 pandemic, national elections and the flare of conflict in northern Ethiopia). Outcome measures of interest are listed as column titles, and for each outcome and programme variation (treatment group), we present the coefficient estimate, standard error (in parenthesis), and FDR adjusted q-value across all outcomes tested for that single hypothesis (in brackets).³³ We also present FDR adjusted q-values testing the set of hypotheses that the estimated β 's from increasing layers of adolescent-centric programming are not equal to each other (i.e. we test $\beta_1 \neq \beta_2$, $\beta_2 \neq \beta_3$, and $\beta_3 \neq \beta_4$) – the q-values show adjustments from testing across all primary outcomes within a particular hypothesis test. Appendix B provides regression results for the full set of secondary outcomes listed in our pre-analysis plan; secondary outcomes include components of the primary outcome indices, as well as a small set of additional outcomes of interest. Appendix C provides TOT regression results for all primary and secondary outcomes.

For boys, we prespecified a smaller set of 6 primary outcomes, focusing on a subset of the cross-cutting outcomes we explore for girls (knowledge, attitudes, supportive network), violence and mental distress. Table 7 provides results for the full sample as well as separately by zone and baseline residential location marginalization status. For the boy analysis, Appendix B provides results on all pre-specified secondary outcomes.

6.1 Girls' Outcomes

6.1.1 Girls' knowledge

Panel A of Tables 2-6 displays findings from the first follow-up round of data collection. We find large, positive 10-month impacts (on the order of a 0.27-0.32 standard deviation improvement, q-value<0.03) across all programming variations (Her Spaces, AWH Essential, AWH Comprehensive and AWH Comprehensive Plus) on an index of knowledge that includes topics covered in the Act With Her girls' group curriculum, related to sexual and reproductive health, nutrition, bodily integrity, economic empowerment and gender roles (Table 2).³⁴ Knowledge gains appear across multiple topics, including menstruation frequency, legal age of marriage,

³³ Results for the treatment on the treated (TOT) analysis, which incorporates actual programme participation among adolescent girls in treatment sites, are included in Appendix Figures A1–A5.

³⁴ Note that a subset of these topics was also covered in the Her Spaces curriculum. Appendix B lists the components of this index, which are covered in the Act With Her versus Her Spaces curricula.



risks of FGM/C and places to seek help if experiencing violence (Appendix Table B1). ³⁵ Findings for the knowledge index outcome are similar in magnitude across region, though after multiple hypothesis testing correction, gains in South Gondar are most robust among those in AWH Comprehensive+ (q=0.019) sites, and gains in East Hararghe are concentrated in AWH Essential (q=0.096) and AWH Comprehensive (q=0.69) sites (Tables 3-4). Across marginalization status, gains are strong across all programming iterations in marginalised communities (and substantial, on the order of 0.33-0.56 standard deviations; Table 5), but not in non-marginalised communities (Table 6). We do not detect statistically significant differences across increasingly intensive programme layers.

Short-term gains in knowledge were also echoed in the qualitative findings. The most powerful set of messages was around menstrual health. Messaging focused on the fact that menstruation is a natural phenomenon and not a curse or something to hide, and how to manage the menstrual cycle so that girls' daily activities, especially schooling, did not need to be disrupted. The programme gave out reusable sanitary pads to participants and taught them—as well as their mothers—how to use them: as one Act with Her Comprehensive + mentor in South Gondar noted:

We train them menstruation is a natural for all women and the indication of girls reached to give birth. We also taught to care for their daughter when they start seeing menstruation. As we know menstruation may stay 3 to 5 days monthly, and we told parents advise daughters dress panties and use sanitation pad to protect the flow of menstruation, and also, we advised them daughters not to do much work at home.

In terms of stigma, girls emphasised that the programme had helped them to become aware that menstruation was a natural part of maturation rather than something to be ashamed of. A girl in South Gondar participating in an Act with Her Comprehensive + community explained: 'They told us menstruation cycle is not something to be ashamed of and if men asks us about it they told us to tell them that it's nature's gift'. The knowledge gained from the Act With Her clubs was also evident in the interviews with boys and parents. For example, an adolescent boy participating in the programme in an Act with Her Comprehensive site in South Gondar noted that: 'We used to perceive menstruation as something wrong and we used to laugh at girls when they had their period. But I am no longer laughing at girls as I understood it is a normal process.' Similarly, a mentor from an AWH Comprehensive + site in South Gondar explained that some girl participants were also passing on to their mothers the knowledge they had gained about the need to shift social norms around menstruation: 'A young girl said that one day I saw my mother prohibit my older sister from preparing coffee for the family, since my older sister was on her time of menstruation... The young girl then explained to her mother that menstruation is not a demonic event.' It is important to note, however, that while girls spoke in some detail about menstrual hygiene management and feeling empowered by this knowledge, because of the programme's focus on very young adolescents, the knowledge was still theoretical for many girls, at least at the time of the first qualitative follow-up data collection. The extent to which this would be reflected in girls' actual school-going could only be determined in subsequent data collection rounds (see below), as this reflection from a girl in an AWH Comprehensive site in East Hararghe attests:

The mentors told us that we have to change the menstrual pads every hour and that we do not have to miss school because of that... But now since there are very few female students, no one misses school. For example, there are only two girls in grade 4. But in the past, they used to feel afraid and miss classes... Though we know a lot about menstruation, none of us has experienced it yet... They instructed us how we should manage the cycle... and then when it got soaked that we change another one and wash this one... There is nothing we are afraid of now...

The qualitative findings also indicate improved knowledge in terms of awareness of the risks of sexual and gender-based violence, how to mitigate those risks, and how to report violence, although it was more frequently reported in South Gondar, possibly because of the widely perceived (among study communities) risk of sexual assault by strangers en route to school or the market. A girl participant from an AWH

³⁵ The knowledge gains relating to menstrual health literacy are explored more deeply in Baird et al. (2022).



Comprehensive+ site in South Gondar explained that they had learned about how best to protect themselves from possible attacks: 'We take different paths if we sense any danger and we also go to school in groups... If we get into trouble, screaming out loud.' Another girl in another AWH Essential site in South Gondar said:

First, they try to smoothly talk to you... They hold our hands and say they like us... Then we try to respond positively and smoothly also. But if they don't listen to our 'No' we threaten them that we are going to tell the police or we have an older brother. Then they will leave us alone.

Other respondents commented on the medical and judicial recourse options available to sexual violence survivors: 'They told us that they'll give her a pill right away and they'll make sure the offender gets proper punishment too. If a girl is raped, they told us that she has to take examinations at the clinic' (girl, Her Spaces site in South Gondar). By contrast, in East Hararghe, the knowledge that girls reported having gained tended to be linked to the risks of participating in the adolescent-only cultural dance, shegoye, where girls may be at risk of sexual harassment, assault and abduction for the purpose of early marriage. A key informant from an AWH Comprehensive+ site explained how knowledge from the sessions had led to community and parental action against these spaces:

Girls were getting pregnant while they were going to the dance... We stopped the dance. Religious leaders stopped the dance... After Act With Her, the dance stopped, rape was stopped. Parents advised and stopped their children from going to the dance.

The qualitative interviews suggest that knowledge gains related to sexual and reproductive health beyond menstrual health appeared to be much more uneven. Some girls – almost exclusively in South Gondar, where attitudes towards contraception were already more accepting prior to programme launch³⁶ – spoke openly and accurately about pregnancy prevention options:

If a girl who starts to see monthly period has sexual intercourse with a man, she might get pregnant... To prevent this, she can use contraceptive methods like injections... There is also a natural method that involves counting the date of the monthly period as well... after her period comes, the next 14 days it is safe to have sexual intercourse, but after that it's risky (Participant in focus group discussion with qirls, AWH Comprehensive+ site).

In East Hararghe, by contrast, where attitudes towards contraceptives are much less accepting (including among some programme mentors), the messaging that existed seemed to be around abstinence only (Jones et al., 2019; Presler-Marshall, 2021d). A girl participating in the Act With Her sessions noted that the mentors 'educated us not to have sexual intercourse during the age of puberty'. In other cases, there was considerable misinformation. A girl in one AWH Essential site, for instance, noted that:

If a girl wears pants of a male person and if there is sperm on the pants of that person, that girl can become pregnant'. Another girl from a Her Spaces site reported that they had learned in the sessions 'Not to hang out with males on the days one has a period... They told us that the bleeding increases if we don't stop doing that. We haven't asked them more explanation on this.

Similarly, given that FGM/C in Ethiopia is prohibited by law, some participants knew that circumcisers could be fined and imprisoned for carrying out the practice. A girl in one AWH Comprehensive+ site in East Hararghe noted that:

People may report to 'hadaa garee' or women's group leader about the circumciser and also the circumcised girl. And the circumciser may be put in prison for a maximum of 3–5 months... There is also a fine but we don't know how much. Since then, we have not seen any girl undergoing circumcision.

In one Act with Her Essential community in South Gondar, a mentor also reported that as a result of the training several girls had proactively sought to intervene to prevent an impending circumcision:

³⁶ GAGE formative and baseline research found a strong contrast in attitudes towards and accessibility of contraception for unmarried girls between South Gondar and East Hararghe.



When I was taking the training to become a mentor, I watched the video while a girl was circumcised, by then I get shocked and cried. However, after we teach these girls one of the participants was my younger sister and she explained for our relatives how female genital mutilation affects their daughter's health and life as well and then they stopped their preparation to circumcise their daughter.... When my mother and my younger sister heard, they were going to circumcise their daughter, they got upset, and opposed them fiercely. Particularly my younger sister explained them the effect of FGM based on what she learned in the training...My mother also explained them the effect of FGM on their daughter's health, and later life.

Another participant in the same community also explained that she had intervened to stop a relative's circumcision as a result of what she had learned in the training which had reinforced messaging from her science class at school:

I first told my father then they told my aunt. He told her that it is a harmful practice. Then my older sister also told them that this is something she learned in science class and that it is unhealthy for the girl. Then they broke the razor blade.

However, others admitted that while they had learned about the risk of excessive bleeding at the time of circumcision, this did not align with what they knew about girls needing to be circumcised in order to be deemed marriageable, as one girl in an AWH Comprehensive site in East Hararghe explained:

Yes, they [Act With Her mentors] have told us not to undergo circumcision... We learned that it has impacts... that it causes too much bleeding... But in the community, the boys will not marry you if you are uncircumcised. You cannot get married if you are not circumcised... We have not seen a girl who married without undergoing circumcision in our community.

In other words, although the programme curriculum covered negotiation and discussions on gender norms in general, it did not tailor the discussions so that participants were able to think through the implications of the legal ban on FGM/C and be supported – along with parents and community members – to negotiate and challenge entrenched norms that perpetuate the harmful practice. Moreover, in order to resonate with girls' realities, the curriculum would need to be nuanced to take into account the different ages at which girls are at risk of FGM – in early infancy in Amhara versus in middle childhood and early/mid adolescence in East Hararghe. In other words, in Amhara any awareness raising with girls on FGM would have to be about their attitudes towards their own children or persuading parents to avoid cutting any new-born children, whereas in East Hararghe it is possible that some girls in the groups would still be uncut but at risk up until the point of marriage.

Interestingly, the quantitative research does not detect any knowledge gains by the second follow-up round of data collection, across any intervention or site group (Tables 2-6). This may be explained at least in part by ageing of the study sample and/or diffusion of knowledge. For instance, at the first follow-up, 47% of girls in control sites could correctly identify menstruation frequency, while 82% could identify this by the second follow-up; findings were similar for identifying the legal age of marriage for girls (14% could correctly name this at the first follow-up, and 38% at second). In fact, knowledge improved among the control group across every single item we study between the first and second rounds of data collection (Appendix Table A1).

In addition to increasing levels of knowledge among adolescents as they age – through more years of schooling, exposure to media and role models, among others – the qualitative interviews also revealed varied levels of programme participation and implementation fidelity, which might also explain why knowledge gains were not consistently sustained over time. In some cases, the club dynamic was conducive to learning. For example, a female mentor from an AWH Essential site in South Gondar noted that:

What makes me happier is children laughing and getting happier due to the training. They never want to go home even after we complete... our sessions. Always I remember children's happiness during the training.



However, these sentiments were not universal. Some adolescents noted that not all participants found the content engaging. An adolescent girl from a Her Spaces site in South Gondar explained that 'They [some participants] quit the class because they don't think the lessons are relevant.' Others (especially girls) had patchy attendance at the sessions due to competing demands on their time, as a girl from an AWH Comprehensive site in East Hararghe observed: 'They may miss one class for looking after livestock. They may repeat such absence over time and quit it permanently ultimately.' Mentors also noted that even in cases where they did household visits to discuss and try to resolve poor participant attendance, parents were sometimes reluctant due to need for adolescent support with livestock and household chores:

One mother forbade her daughter to continue participating in the sessions. We went to her to talk to her and convince her to send her daughter to the training... However, she got upset and even she shouted at us, saying that; take her daughter if we can be her mother... She told me that she is alone; no one helps her in keeping cattle. She also explained us that, she has sheep, and even she is not in good health and no one help her in keeping her sheep except her daughter, so that she forbade her daughter to participate in the training.

Also, a sizeable number of adolescents were expecting material benefits from participating, which (except in the AWH Comprehensive+ arm) were not part of the programme design: 'It has no benefit, they are giving us false promises to give us solar lamp and 300 birr and school bag... We wait for a long time then we stop attending the session, they are cheating us' (participant in focus group discussion with girls, AWH Comprehensive site in East Hararghe). A mentor from an Act with Her Essential community in East Hararghe painted a similar picture in terms of the negative implications of the targeted material support on wider programme attendance:

All of the boys dropped out.... Children need some small support...If you told them as there is a smaller support as little as chewing gum, they will come.... Within two months they become absent totally. Before that they were decreasing in number. Such decline in number exhibited after the solar lamp was provided for others [in a neighbouring community]. They were asking us and we were also convincing them as it will be given for them, since officials told us as it will be given for them. Then finally all of them became absent.... Boys dropped out first then girls follow them. Girls were attending class after boys dropped out. Then after both of them dropped out.

In communities where the material transfers were part of the design, there were also widespread complaints from non-participants' caregivers who accused the programme implementers of nepotism, leading to tensions within the community and negative perceptions of the programme and its messaging. One mentor explained the dynamic as follows:

There are parents of children's who never participated in Act with Her complained and some parents tried to quarrel with us for why their children excluded not to participate in Act with her. We tried to convince them as we received children who are registered previously for the membership. However, they talked as we did this in favour of our relatives inappropriately. ...They also complained over the issue of the solar lamps. Look, there were 33 solar that we were given to distribute. Out of the 33 solar we gave 1 for the woreda and distributed 32 for trainees. We distributed the solar and other materials according to each trainee's choice. There were teaching aids, exercise books, the solar lamp, pens and pencils. There are also washable sanitation pad, lotions and creams for girls. When allowing them to choose the material, older adolescents preferred teaching aids, and those younger girls preferred the lotion and creams.... However, the material was not enough to reach to all. After the distribution parents complained on the distribution and some parents quarrelled with us.

A lack of community buy-in to the programme in some locales in East Hararghe also led to high levels of disillusionment by mentors who felt isolated within the community and without adequate support and guidance from the supervisors who lived in the regional capital (more than two hours by vehicle) and seldom visited during programme implementation:

Our morale broke down. When we went and talked to the children, they refused to accept us. When we talked to their families, our words did not get acceptance... I myself decided to quit from such work.



I quit and considered myself as I am out of the work. This is because while I am exerting my efforts when the people do not recognise your efforts. Such work is not making us happy. This is because students are not properly attending the education, we deliver them and there is high drop out. Previously we were striving though there was dropout as far as we were working for our people and as far as such children got awareness, we were willing to strive. At the beginning when we started the work, we started it just for the sake of supporting students. We did not consider it as a means of livelihood. ... We started the work to improve our community. When they disappeared finally, I felt much.

6.1.2 Girls' education

In terms of educational outcomes, the quantitative survey findings revealed no statistically significant impacts for any intervention at either follow-up, either on an index of education participation (which was only measured at second follow-up) or on aspirations to attain higher than a secondary school degree (Tables 2-6). We also do not detect any statistically significant differences across increasingly intensive layers of programming. Yet the qualitative interviews pointed to important shifts in attitudes about the value of girls' education in some communities. A participant in a focus group discussion with parents in East Hararghe explained that their children were more motivated to attend school, and to study after school, since joining the AWH programme:

Our children give more attention to their education, they study well after school. Those that did not attend AWH are not like them, they may think of going to honeymoon, playing shegoye... Before AWH they were not focusing on education, they did not understand well what the teacher advises them. Now their focus is on their education, they do not want to attend honeymoon celebrations, they stay at home. They stay at home and study. Those who did not attend AWH... are learning from AWH participants. Since AWH students have good rank in school, the other girls are following them.

Some adolescents also reported that parents had shifted their attitudes towards girls' chores and, in some cases, were actively supporting girls to fit in study time. For example, a girl from an AWH Comprehensive site in South Gondar noted:

We discuss that all parents should send their children to school. They should not give their children too much work and allow them to study. If they have chores to do, then they cannot do their homework or study. They say parents should advise their children to use their time wisely and have a timetable to do chores and some studying... Now we only do a few chores and go back to studying.

Changes were also reflected in some girls' educational aspirations, which were often linked to achieving economic independence, as one girl in a focus group discussion in that same site reflected:

I want to finish school first... I will never get married until I see the end of my education... Some parents say they will send us to school even if we get married. They promise to do that. But it does not happen. You cannot go to school while you are married... You have a lot of responsibilities... There is a lot of work to do in the house that you do not get the time to study or go to school... I want to finish 12th grade... I want to support my family first and repay my debt to them for raising me. I want to have money before I get married. If you get divorced and you do not have money, people talk behind your back and disgrace you. If I have money, I can support myself and do not have to wait for my ex. If you do not have money, you have to rely on your ex-husband and you live a pathetic and sad life.

Adolescents noted that changes in girls' and parents' attitudes towards the value of education and delaying girls' marriage was reinforced by follow-up by teachers – one girl in a focus group discussion said:

In the past, there were very few girls in the school as they got married early. Now... some girls are even attending in grade 9. Even the teachers are making good follow-ups on the girls who discontinue their education... Some younger girls still get married with interest. They marry at 13, 14 and 15 years of age... In the past, some friends were involved as brokers and take your money. They will take you to



their parents' place. But now the community has boosted its knowledge about the importance of education. (AWH Comprehensive+ site in South Gondar)

In some AWH programming localities in South Gondar the mentors together with local community leaders played an active role in cancelling child marriages. A mentor of a girls' group from an Act with Her Comprehensive site explained how one participant admitting that she was at risk of an imminent arranged marriage led to the identification then cancellation of 18 intended marriages of very young adolescents in a single community:

18 early marriage cases have been banned in this locality. One of these 18 girls exposed her case to us. 8 of these girls are my trainees, and 10 are Fasika's trainees. A girl who exposed her case for us was previously bashful and timid hut she is very young...One day I took her outside of the training room and I asked her in the office whether she has any problem which may makes her worry. She told me all her problems. She told me that her parents are arranging her for marriage, and she told me all what she is thinking about. She said that; "I spend my time thinking and worrying about my marriage with a man whom I have never seen him yet. I am losing my hope, even I ask myself why I am here in the school, because I can't continue my schooling once after I get married, whom can I talk to my worries?" By this time, I feel sorry, I tried to make her calm. Then I continued asking her further to dig out if there are other girls who have such problems. Then within a few days we got 18 girls with similar case of early marriage arranged by parents. 8 of them were my trainees and 10 girls were [the other instructor's] trainees...We reported to the kebele administrator and other kebele officials who are working with us. He came here and began to discuss with other concerned bodies including the woreda's women, and children affair office. We also informed to the coordinator to hurry up since parents has been completing their preparation for their daughters' marriage. Then all they worked together quickly and the marriage these girls stopped, and they continued their schooling.... Later all parents of the trainee girls signed not to coerce daughters for marriage and also not to make daughters dropout of school due to early marriage. Then parents changed their idea and the early marriage arranged for these girls banned within a short period of time. These girls are still attending schooling.

However, even in cases where there was active buy-in from the school community and local government officials, both girls and key informants recognised that there were limits to the extent to which norms around girls' education and age at marriage could shift. In another AWH Comprehensive site in South Gondar, an adolescent girl pointed out that club participants were encouraged to intervene and report cases of child marriage, but only when the girl in question wanted support to resist pressures to marry, as some girls saw early marriage as a preferable option for future advancement:

If a girl is about to get married, we report that to our school principal. The teachers and the school principal will talk to the parents and stop the marriage. If you learn about child marriage and you hear about a girl that is going to get married, first you need to talk to the girl and report it. If she does not want it to be reported and is ok with the marriage, we do not report it. If she wants us to tell the school principal and for the school to intercept the wedding, we do so... If she wants it, the parents come together and arrange the marriage... There are girls who want to get married... Maybe it is because they think they will get some property when they get married... or the husband is from the town and they want to live there... If we report on them without their consent, they deny everything.

Similarly, a key informant from an AWH Comprehensive+ site in South Gondar explained that even with close cooperation between the community and district-level women's bureau officials, it is often not possible to cancel an impending child marriage – even those of very young adolescents, aged 12 to 15 years – on account of parental and community resistance, and uneven buy in across sectors to tackling the problem:

But the community is still practicing early marriage even though we are working in cooperation with police and the women's affairs office. For example, three students are getting married already after we work hard in convincing the parents to cancel the marriage. And there is one student who hid from her parents on her wedding day and came to us, and after talking to her we communicated with the police, and finally she was transferred to the woreda women's affairs office. But her parents were mad



at her when she returned home and they told her to stop learning or if she wants to learn she must get out of their house, which was really hard. This year, three students' weddings were cancelled but three students got married. It was not easy, but comparing to past years, currently things are getting better... We get the information from the students. We consider the students might be afraid to tell it directly to us, so we prepared a comment box and the students write down the problem and place the paper in the comment box. Three of them were grade 6 students and we can't save those students from marriage, and one student was grade 4, the rest were grade 7 students. They were on average 12–15 years... We reported the cases to higher offices, including women affairs, but there is nothing done. We told everything by phone and face-to-face at an annual discussion session, but nothing is done. Currently the students are dropouts from school.

6.1.3 Girls' voice and agency

In the quantitative analysis, we find large, positive impacts of all programming variations on an index of voice and agency (a 0.18 to 0.28 standard deviation improvement) across all research sites at the 10-month follow-up (Table 2). This index encompasses girls' participation in decision-making at home and at school, comfort having discussions with friends, caregivers and elders and mobility outside of the household. These impacts are driven by increased participation in decision-making at home and school, increased comfort discussing various issues with girls' caregivers (female and male), and increased sense of voice at home, among their peers, and in the community – although there are no detected changes to girls' mobility (Appendix Table B1). These improvements in voice and agency are somewhat larger for girls in AWH communities in South Gondar (ranging from 0.21 to 0.36 standard deviations), particularly for aspects of voice and comfort speaking with a female caregiver (Table 2, Appendix Table B2). In contrast, for girls living in East Hararghe, we only detect statistically significant improvements in voice and agency among those who received the AWH Comprehensive treatment (Table 3, Appendix Table B3). As with the knowledge index, impacts are much larger for girls living in marginalised communities than those living in less marginalised communities (Tables 4 and 5). Once again, we cannot reject the hypothesis of no statistically significant differences across increasingly intensive program layers, either in the full sample or in any subsample that we study.

These short-run positive effects on adolescent voice and agency were echoed in the qualitative findings, although there was not the same level of differentiation across sites as indicated by the quantitative survey data. Adolescent girls, parents and key informants alike noted that girls participating in the programme often developed greater self-confidence and were more willing to ask questions and to engage in conversation with adults. A key informant from an AWH Comprehensive site in South Gondar emphasised that this was a key gain, and that the effects endured even after the adolescent sessions had been phased out:

Students developed a self-confident personality and don't get ashamed to forward their question as well as to have a discussion with others... We are receiving good feedback from parents. Students are interested to continue the discussion habit once the project is phased out.

Girls in some communities also noted that they were encouraged to identify and learn from positive role models outside their families. In an AWH Comprehensive+ site in South Gondar, for instance, a participant in a girls' focus group discussion explained that:

We have discussed inspiring role model women in the community... When we say inspiring women, for example, a single woman who doesn't see herself as inferior to others just because she doesn't have a husband. She is empowered and she provides for herself.

Girls in the Her Spaces communities also underscored that the community visits to key services had helped them feel more empowered about seeking support if they were to need it in future. A girl from a Her Spaces site in South Gondar emphasised that as a result of her group's visit to the community health centre, she would now feel more confident to visit the centre and seek out services:



If we're in some kind of trouble or want to check up on our health, we can visit the centre. In the previous times I used to be shy to talk to them, but now that they give us a grand tour and give us so much advice, I'm not afraid of them anymore.

By the second follow-up round of quantitative data collection, these impacts on voice and agency were not as apparent (with q-values well over 0.1) in any site or treatment arm grouping (Tables 2-6). Furthermore, there is suggestive evidence that point estimates for the AWH Comprehensive Plus programming arm became negative and were statistically significantly different from the AWH Comprehensive layer (q=0.05 in South Gondar, q=0.129 in East Hararghe) by two or more years post programme launch, and this was particularly true for marginalised sites (q=0.129). Results from qualitative interviews suggest that boys in AWH Comprehensive+ research sites felt some anger that they were not given some type of transfer packages as well. As a boy from such a site in South Gondar noted: 'Why did they make a gap between the females and the males? We were feeling very angry. Everybody felt angry when they gave solar lamps to the females.' Similarly, in East Hararghe, a male mentor from a AWH Comprehensive+ site noted that the uneven support for girls compared to boys in the community was a source of discontent and also contributed to the limited traction of messages:

The education is intended for the whole community members. But we only target sixty boys and sixty girls. We are ordered to educate only such children. But the complaint from the community is the reason why they are excluded from that. For the future it should expand and the participation of all young people should be ensured.... For those children that we teach, exercise books and pen was given only one round. Such materials are quickly depleted and worn-out.... The children who are enrolled in the program have got only one round of support just for one time. But it would have been better if they were sustainably supported.... Most importantly, the gifts of exercise books, pens, solar lamps were for girls but the education messages would have been better received by the community if boys received these too — at least they can learn with it and feel motivated to participate in the changes the programme wants.

One hypothesis could be that this discontent resulted in a decreased sense of voice and agency among girls in these sites. This explanation seems plausible for East Hararghe, as there, the estimated treatment impact for the transfers arm even at first follow-up was close to zero (and lower than the AWH Comprehensive arm, q-value=0.127, Table 4). Girls in AWH Comprehensive+ sites in East Hararghe were less likely to report being comfortable expressing themselves with agemates or elders, were less likely to agree that they could ask adults for help if they needed it, and reported decreased mobility (Appendix Table B3); no such findings were apparent in South Gondar (Appendix Table B2). The qualitative findings underscore important gains in girls' voice and agency in South Gondar over time even in the AWH Comprehensive+ sites. A key informant from one such site in South Gondar noted:

Most of the time outside meetings used to be held only with men, but after taking the discussion with Act With Her project, a lot of girls and women are in the front chairs attending and giving directions. Currently, girls can talk with boys freely since they are their brothers and friends, but previously this was unacceptable.

Another key informant, also from that site, explained that:

The girls participating in the Act With Her activities have now developed open discussion with others – for instance, they don't hesitate to raise any personal matters. At school level, they are the ones who report to the school about any early marriage arrangement.



6.1.4 Girls' psychosocial well-being and social connectedness

We next explore impacts on girls' psychosocial well-being, across three key measures: resilience, mental distress, and self-esteem (the latter was measured only at the second follow-up).³⁷ We note that adolescent girls in our study sites display low levels of depression on average; at the first follow-up, girls in control sites had an average score of 26.4 (out of 27) on the mental distress scale (where higher values indicate less mental distress, Appendix Table A1). Girls demonstrate moderate-high levels of resilience – with a score of 31.3 in the control group, on a scale from 12–36 where higher levels indicate more resilience – and self-esteem (scoring 30 in the control group on a scale from 0-40).

At the 10-month follow-up, regression analysis reveals positive point estimates across all treatment arms in the full sample of girls for resilience and (less) mental distress (Table 2). These impacts are wholly driven by girls living in marginalised communities – with improvements estimated at 1.5–2 points on the resilience scale, and up to 0.4 points on the mental distress scale across the Her Spaces, AWH Essential and AWH Comprehensive communities (Table 5). By the second follow-up, point estimates are smaller and none are statistically different from zero at standard levels of confidence, and point estimates on the resilience measure have become negative for girls in Her Spaces and AWH Essential sites in marginalised communities (not statistically significant). We measured self-esteem in the second follow-up only, but do not detect any differences between the intervention groups and the control group. We cannot reject the null hypothesis of no statistically significant differences across any of these measures of psychosocial well-being from increasing layers of intervention intensity, either.

The qualitative findings suggest that there are several change pathways throughout the AWH programme that shaped some aspects of adolescent resilience. The curriculum content around short- and long-term goal setting was widely recalled and appreciated by adolescents as it helped them to think about their future (and future goals) in a more systematic way, and to make plans, especially for their education. A mentor from an AWH site in South Gondar provided an example from participants in her group:

The girls told me their short- and long-term goals. For example, their short-term goal is focusing on schooling and learning properly and scoring high in the grade they are attending this year because short-term goal is prepared for less than a year... Studying hard, doing what they can do only, not to do things over their capacity, focusing on their schooling until they complet^e 12th grade, and succeeding in their future aspiration. They also explained their long-term goal as they want to be famous, knowledgeable, to be trustworthy by others, to be self-reliant and to be supportive.

Some participants noted that a focus on goal-setting and on communication and negotiation skills in the curriculum helped them to have greater self-confidence and control over their lives. A girl from an AWH Comprehensive+ site in South Gondar, for instance, explained: 'Ever since I started this class, I've seen visible changes in myself. Now I'm able to have a conversation with my parents and convince them about things.' However, for some adolescent girls, it was evident that the changes in girls' opportunities they were learning about were not realistic in their current environment and that in practice, much more would be needed to overcome structural barriers. A girl from that same site explained the situation as follows:

There is not really any change in the environment... The boys don't help in the house equally with us... Even though they took the training [these actions] aren't really appreciated by the community... There needs to be education given to the older people at the church by priests, and also more training to the boys in the school would also help a lot.

³⁷ For details on the resilience, depression, and self-esteem scales used, see Appendix D. Note that we have signed these scales so that higher values indicate improvements (i.e. higher resilience, less mental distress, more self-esteem).

³⁸ It should be noted that although Ethiopia was affected by both the Covid-19 pandemic and a months-long internal armed conflict between the first and second follow-up data collections, we do not see worsening of depression or resilience among control communities between these two time periods for our sample overall, or by region. Thus, we do not think that these findings reflect pandemic or conflict impacts, but we will attempt to explore this more rigorously in future work.



Another girl from an AWH Comprehensive site in East Hararghe similarly emphasised that while they are learning about equality for girls and boys in the Act With Her sessions, community perceptions are still lagging, which is discouraging:

They told us that a boy and a girl are equal... They have also said there is no need for division of labour... But if you give a work of a girl to a boy, he may say 'no' thinking that he is not a girl... Although mostly the boys look after the livestock, many of the girls also engage in it, usually after school. I also do that work... People say that a girl cannot reach a higher level after education... 'we have not seen a successful girl because of education, rather a girl who marries after being educated'... This perception of the community highly demoralises a girl who wants to pursue her education.

These findings suggest that the disconnect between the content of the Act With Her sessions and girls' daily lived realities might, at least in part, explain why the programme has had limited impacts on resilience and mental well-being. It is also the case that the programme was not designed to provide young people facing mental health challenges with referrals or linkages to service providers, and thus it is not surprising that the findings reveal limited change in terms of improvements in adolescents' psychosocial well-being.

We next turn to an index of supportive networks, which includes measures of having trusted female peers, male peers and adults. At the first quantitative follow-up survey, nearly two-thirds of girls in control communities reported having a trusted female friend, 4% reported having a trusted male friend, and 58% reported having a trusted adult in their life (Appendix Table A1). Table 2 suggests little statistically significant impact to this index for any variation of programming, other than the AWH Comprehensive+ group (q=0.123) when considering the full sample, and this impact was not detected by the second follow-up survey. Yet these results once again mask substantial heterogeneity – girls in Her Spaces, AWH Essential and AWH Comprehensive+ communities in marginalised sites showed fairly substantial improvements in support networks, at least at the first follow-up. By the second follow-up, we do not detect any statistically significant differences in supportive networks between any intervention group and the control, nor across any of the increasingly intensive intervention layers.

The qualitative research found limited evidence that the programme had helped young people improve relationships with trusted adults. A few girls noted that their parents appeared to appreciate them more, as indicated by increased spend on material support; for example, a girl from a Her Spaces site in South Gondar noted that 'They didn't used to buy me clothes before.' Others also said that they had learned better communication skills, and this had decreased tensions with parents. A girl from an AWH Essential site in South Gondar explained: 'Our teacher on Sunday taught us how to live peacefully with our parents. She advised us to avoid conflict.'

There was more evidence of shifts in relationships with peers, with girls commonly reporting that they had learned about how to strengthen friendships through trust and respect for confidentiality, as a girl from a Her Spaces site in East Hararghe highlighted:

They [mentors] taught us that good friendship involves keeping secret, respecting, motivating and loving each other. We didn't have such awareness previously... We didn't have the understanding of friendship... Previously, I would share the secret of a friend of mine with others. Now, I don't do so... I may quarrel with a friend if I share her secret with others. I have become able to prevent such potential conflicts.

Several key informants also noted that in some communities, Act With Her participants were encouraging peers to persevere with their education. An official from the Bureau of Women's Affairs in East Hararghe noted how:

The change is visible within the students and the community. If girls are absent from school, they – the students participating in the Act With Her activities – will go and bring the girls to school... I have seen with my [own] eyes when such girls tried to bring their peers who did not come to school on one school day. So, sustaining this good experience has to be the responsibility of every person...



6.1.5 Girls' risk of age- and gender-based violence

Next, we turn to an index of violence, which measures exposure to physical and emotional violence from peers and household members as well as sexual violence; we sign this index such that higher values represent less violence. We note that rates of self-reported peer violence and sexual violence were not high at the time of our first quantitative follow-up survey – 12% of girls living in control sites reported experiencing violence from their peers in the previous 12 months, and 2% reported having experienced sexual violence (Appendix Table A1). Moreover, exposure to peer violence actually lessened over the whole sample by the second follow-up; at that point, fewer than 8% of girls living in control sites reported having experienced peer violence in the previous 12 months. However, it should be noted that adolescents likely had less exposure to peers during that period, as the second follow-up data collection took place soon after schools reopened having been closed for some months during pandemic-related lockdowns. Interestingly, reported rates of experience of violence within the household (either own experience of or witnessing a female caregiver experience violence) also decreased among the control group between the two follow-up surveys, with 43% of girls reporting such violence in the 12 months preceding the first follow-up survey, and 36% reporting in the 12 months preceding the second follow-up (Appendix Table A1).

The results in Table 2 suggest an improvement (if 0.13 standard deviations) in the violence index among girls living in AWH Comprehensive+ sites (q=0.106) at the time of the first follow-up. These improvements are strongest in East Hararghe (though only among the AWH Essential sites, q=0.096), and are driven by reductions in peer violence, rather than household or sexual violence (Table 4, Appendix Table B3). And note that violence in AWH Essential sites is significantly less than in AWH Comprehensive sites (q=0.055). By the time of the second follow-up, we fail to detect statistically significant improvements in violence between any treatment arm and the control group, or across layers of increasing programme intensity.

Improvements in awareness about violence were reported in the qualitative interviews, but while boys discussed changes in the risk of peer violence, for adolescent girls the focus was predominantly on the risk of sexual and gender-based violence and how best to report it. This difference may be partly because in some communities, largely in East Hararghe, the risk of such violence towards girls is more frequently from male peers in the context of the shegoye cultural dance (as noted earlier). As a girl from an AWH Comprehensive+ site in East Hararghe emphasised: 'Boys [participating together in the shegoye] may try to stop a girl and influence her to begin a sexual relationship with a boy, whereas the interest of the girl is going further in her education'.

By contrast, in South Gondar, girls perceived the risk of sexual assault by strangers as much more likely. A participant from a focus group discussion with girls in an AWH Comprehensive+ site explained that:

Boys are threatening us, try to rape or sexually assault us... Anywhere outside the house, usually girls above 15 years old are exposed to these actions. Mostly older boys are doing that to the girls... For example, last October, there was a girl who was about to be raped while she was heading home from school.

Across communities, many girls had gained awareness about the importance of reporting harassment and assault, and the different options for reporting. A girl from a Her Spaces site in East Hararghe explained:

If boys harass us while we are moving in the locality, the mentors advised us not to fuel the dispute and to report them [to the authorities] instead so that they will face justice. They told us that the boys will be held responsible for their misbehaviour... They advised us that the case will be dealt with by the legal system. We are told to report to school teachers if we face harassment while going to school. We will report to our parents if we face harassment in the neighbourhood... If it is beyond the capacity of teachers and parents, we should tell our parents and our parents will report to the legal bodies such as kebele administrator, police militia. And to sheiks.



Another girl from that site, however, emphasised that although the Her Spaces sessions had helped raise their awareness about how to mitigate the risk of sexual assault, and advised girls to report any incidents to the formal justice system, reliance on informal or traditional justice routes largely persists:

We don't go out alone. We usually go out in groups... The mentor of the ... group told us how to take care of ourselves... But girls don't talk freely to families and friends when someone tried to rape us... because it brings conflict between families... [Girls] don't go to the police station... The families prefer to handle this by themselves.

Nonetheless, there were reports from several communities that in addition to the awareness sessions provided to girls (as well as to boys and parents), the Social Analysis and Action groups had taken collective community action to minimise risky environments for girls and women. A key informant from an AWH Comprehensive site in South Gondar noted that the community had come together and hired guards to police the main roads to the market and school so as to deter predatory male behaviour:

We want a high school to be built here... Our girls have to walk long distances to get to school. There are many young men who give them a hard time on the road... they get raped. So, they are always afraid to go to school. If they had school close to their home, they can easily commute... But we have now hired a guard to protect us on the road... It is not just the girls. We could not also go to the market without having trouble... and on market days now the guards work in shifts to make sure everyone is safe.

In the case of an AWH Comprehensive+ site in East Hararghe, community stakeholders and religious leaders elected to intervene and discourage participation of both girls and boys in the shegoye dance so as to protect girls from rape and abduction:

Gender-based violence stopped after AWH... Girls were getting pregnant while they were going to the shegoye dance, we stopped the dance. Religious leaders stopped the dance. After AWH and the dance stopped, rape stopped... Abduction and rape stopped after the religious leaders set punishment for parents that send children to dance... Parents in turn advised and stopped children from going to the dance... The religious leader and kebele leaders... supervise the area and identify those who are not working to stop the practices... When girls and boys are found outside home at night, their parents are punished, they pay 1,000 birr and more than that, the dance stopped by those measures... There was also a broker that was facilitating marriage, he was found and punished. The religious leader refused to approve the marriage, and then the community stopped the practices... (Community key informant).

6.1.6 Girls' ideal age of marriage and first child

The quantitative research asked girls about their ideal age of marriage (at both follow-ups), and their ideal age to have their first child (at the second follow-up only). Quoted ideal age for marriage was high (especially in comparison to local average age of marriage for women and girls) among control group girls at the first follow-up, when girls were aged 12-15 – girls in South Gondar averaged an ideal age of 23.4, and girls in East Hararghe averaged an ideal age of 21.3 (Appendix Table A1). Interestingly, by the second follow-up survey when girls were aged 13-17, ideal age of marriage among the control group fell across both zones, to 22.7 in South Gondar and 19.7 in East Hararghe – perhaps coming down to get closer in line with actual marriage ages. We detect little in the way of statistically significant increases in reported desired age at marriage in the full sample or in any subsample, although ages reported by girls in the AWH Comprehensive group are marginally significantly higher than the control group (by 1.7 years, q=0.140) in South Gondar at the first follow-up, and ages reported by girls in the AWH Essential group are marginally significantly higher than that reported by girls in the Her Spaces group (by 0.4 years, q=0.145) in East Hararghe at the second follow-up.

Information of ideal age of first child was only collected at the second follow-up, when girls were aged 13-17. Among the control group, reported age was again higher than girls will realistically start having children, at 25.6 in South Gondar and 21.0 in East Hararghe. For this outcome, we do not detect any differences either between any intervention arm and the control group, or across intervention layers.



In terms of the qualitative findings, girls in South Gondar programming sites appeared to have more articulate responses about child marriage being a violation of girls' rights. A 15-year-old girl in an Act with Her Essential site explained:

When we get married before 18 without our interest it impacts our future life. When parents arrange us marriage, we have to report it to school principal. We also report the case to health extension worker and discuss with her. We also report marriage to a policeman who is assigned to and works in our village.

However, we hypothesise that this is likely because in South Gondar marriages are typically arranged by families and so the violation of a girl's rights is more obvious, in contrast to East Hararghe where many girls get married because there are very constrained alternative options (see Jones et al., 2020b for further discussion).

6.1.7 Girls' economic empowerment

Next, we turn to an index of economic empowerment, which includes measures of control over money, savings and time use. At the first quantitative follow-up, 16% of girls in the control group reported having money they control, 53% reported having some savings of their own, and they reported having (on average) 28% of their time devoted to school, studying and leisure (Appendix Table A1). Although all treatment coefficients on the economic empowerment index were positive at the time of the first follow-up for the sample as a whole, only the girls in the AWH Comprehensive+ group (who received packages containing educational and/or menstrual health supplies) were better off than the control group at near-traditional levels of confidence (q=0.123, Table 2). However, there is a great deal of regional heterogeneity in these findings. In South Gondar, girls living in AWH Comprehensive and AWH Comprehensive+ communities were substantially better off than the control group, on the order of 0.4 standard deviations (q=0.054 and q=0.019, respectively, Table 3). These findings are driven by an increase in the likelihood of having money they control as well as savings for the future (Appendix Table B2). In East Hararghe sites (Table 4), girls living in AWH Comprehensive communities were actually worse off than the control group (by close to 0.3 standard deviations, q=0.087) and worse off than the AWH Essential group (q=0.055), driven by a lower likelihood of having money they control (Appendix Table B3).

By the time of the second follow-up, girls living in AWH Comprehensive communities in East Hararghe were no longer disadvantaged compared to the control group (Table 4), while there is some evidence that girls in AWH Essential and AWH Comprehensive sites in South Gondar had higher economic empowerment than girls living in control communities (q=0.094 and q=0.149, respectively) – and compared to girls living in Her Spaces communities (q=0.080) – on the order of 0.3 to 0.4 standard deviations (Table 3). This was driven by higher likelihood of having money they control as well as savings for the future (Appendix Table B2).

The qualitative findings indicate that the curriculum module on savings encouraged girls, both individually and collectively, to save small amounts of money (primarily given to them by their parents) in order to invest in income-generating activities such as buying chickens and selling eggs, or rope-making. A girl from East Hararghe explained the Her Spaces curriculum messaging as follows:

We should save and use money wisely for the purposes of pen, exercise book, shoes and clothes... We could buy macaroni and other food... They gave us awareness that we shouldn't waste it arbitrarily... They advised us that we shouldn't spend all the money we get on consumption... They advised us that we should use 0.50 cents for food and 0.50 cents for some other beneficial stuff if our father gives us 1 birr, for example.

Another girl explained that the curriculum had encouraged her to develop entrepreneurial thinking:

I bought a chicken... My mother and father gave me 20 and 10 birr. I bought some snacks with 5 birr and saved the remaining 25 birr. I saved even more by making and selling ropes and by saving little money that my father gave me at different times. I bought chicken with the savings ultimately... It was after I learned from the programme of Her Space.



Girls noted that they used the money to help cover the costs of school materials or to address urgent challenges. A girl from an AWH Essential site in South Gondar explained that 'It is good for emergency and urgent problems. For instance, if our parents lack money to buy exercise books at the beginning of the year. In this case, I will use the money I deposited.' In some communities, girls also reported that they pooled the savings and then purchased school supplies, basic sanitary supplies and clothing so that they could support their friends and peers from poorer households to stay in school:

We contribute 5 birr every week we meet. And we buy soap, sanitary pads and shiti [traditional cloth] with the money. So, there is no one missing school now...This also helps you not to miss exams if you are menstruating on that day...The teacher told us if we can, [to] contribute 1 birr only but we insisted we can contribute 5 birr... We also support poor children who cannot buy exercise books and pens... You know many students do not come to school just for lacking a pen... We are 52 and we contribute 260 birr... You know, we have been in school because of this and now this contribution has benefited us a lot. We also thought that it is good to contribute at least 1 birr for those poor children so that they can get exercise books and pens. (Participant in focus group discussion with girls, South Gondar AWH Comprehensive+ site)

The quantitative data collections compiled information on girls' economic aspirations, including aims of skilled and/or professional, or self-employment, work as an adult. Aspirations for such work were high in South Gondar (93% and 99%, respectively, among the control group at the first follow-up), but comparatively lower in East Hararghe (at 81% and 92%, respectively) (Appendix Table A1). Yet, no statistically significant improvement in economic aspirations was detected across any intervention arm for any site grouping (Tables 2-6). The qualitative interviews also suggest mixed impacts on aspirations. Some adolescent girls spoke about wanting to follow in the footsteps of powerful role models from the same ethnic heritage. For example, girls in a focus group discussion in East Hararghe identified male politicians from Oromia as a source of inspiration:

When the educators asked us what we want to achieve in our education, we told them that we want to be like Dr Abiy Ahmed [Ethiopian Prime Minister], to be a doctor, to be like Lemma Megersa [former President of Oromia region], to be an engineer, and others... They advised us to set a goal and continue to study hard and complete our homework at home after carrying out some domestic activities.

For others, however, the curriculum content on savings had a limited impact on their economic aspirations, as they were unable to overcome the larger challenges facing rural adolescents, in securing higher education and eventually gainful employment. A girl in an AWH Comprehensive+ site summed up the problem in South Gondar as follows:

The boys want to go to Sudan or Metema [lowlands where there are agricultural plantations] and the girls want to go to the town to work as a home maid or something. Because the families can't afford their education anymore and since they have to focus on basic daily needs...some Act With Her students think that way and there is a member who got married too and gave up on education.

6.1.8 Girls' physical health and nutrition

The quantitative index of physical health and nutrition includes self-reported measures of health, protein intake and hunger due to lack of food. Across our control sites, 90% of adolescent girls reported 'good' health, though just 4% of their meals contained protein, while 14% reported hunger due to lack of food in the month preceding the survey (Appendix Table A1). We did not find quantitative evidence of any improvements in adolescent girls' physical health and nutrition outcomes for any of the programming variations in South Gondar at the time of the first follow-up survey, though there is suggestive evidence that girls in AWH Comprehensive communities there were actually worse off than their control group counterparts (q=0.149) and their AWH Comprehensive+ counterparts (q=0.050) by the time of the second follow-up survey (Table 3), driven by higher rates of reported hunger (Appendix Table B2). This is a surprising finding which we think is unlikely to be actually connected to the programming itself, but we do plan to investigate in future work. The situation in East Hararghe seems quite different, however, with positive impacts detected for girls in AWH Essential



communities compared to the control group at the 10-month follow-up at near standard levels of statistical significance (q=0.102), though these impacts are no longer detected by the second follow-up.

The qualitative findings provide further evidence of these very limited changes in physical health and nutrition. Adolescent girls were able to report on different food groups and why they are important to good health and nutrition, but also acknowledged that what they learned in Act With Her sessions largely reinforced what they learned in human biology classes at school, but often provided less detail. 'Some topics from AwH are similar with what we learn at school...like body change, nutrition...but we did not learn about menstruation and about it not being shameful at school' (14-year-old girl, South Gondar Act with Her Essential site).

6.1.9 Girls' menstrual hygiene management

The quantitative research collected information on girls' menstrual hygiene management (MHM), including questions on whether normal activities are affected by menstruation, whether modern sanitary products (such as a sanitary pad or re-usable pad) are used, and if appropriate disposal of sanitary products is practiced at home. Despite substantial differences across residential zone at the first follow-up – 95% of girls in South Gondar reported that their normal activities were not affected versus 79% in East Haraghe, 47% of girls in South Gondar reported using a modern sanitary product versus fewer than 20% in East Haraghe (Appendix Table A1) – we do not detect statistically significant improvements in MHM for girls across any intervention arm in either residential zone (Tables 3 and 4). That said, girls in marginalised sites living in AWH Comprehensive+ communities (so who received an in-kind transfer) did have improved MHM both in comparison to the control group (q=0.004) and in comparison, to their peers in AWH Comprehensive sites (q=0.118, Table 5). By the second quantitative data collection – when girls were aged 13-17 – MHM measures had improved greatly across both South Gondar and East Haraghe (even in the control group, Appendix Table A1), and regression estimates suggest gains only among AWH Essential girls (in comparison to Her Spaces girls, q=0.028, Table 2) in South Gondar.

While the qualitative findings did not identify key differences among programming sites in terms of menstrual health awareness and awareness-raising regarding the importance of not stigmatising girls as a result of menstruation and instead regarding it as a natural phenomenon, there was a notable difference to the control site, where there was not the same openness by girls and boys regarding menstruation. The following quote from a 14-year-old boy in a Comprehensive AWH site underscores the important change that programming had helped to instil in the community:

An astonishing change is about the awareness made with regard to female menstrual periods. Previously, females were not aware of the menstruation and got shocked when the menstruation approached them unexpectedly. Lots of females dropped out of the school due to the shock and surprising experience of menstruation. Males would abuse females and used to be sarcastic about it as if it's somehow females' fault. But now, sufficient awareness has been made and male students are even cooperative to help females in the situation not to be frightened and shocked of the incident. The male students would comfort their female friends by telling them that it's a natural cycle; but not a curse.... Females are no more humiliated nor do male students laugh at her; but instead share her feelings and attempt to help her in that situation.

6.1.10 Girls' gender attitudes and consciousness

Because the AWH curriculum includes substantial discussion of attitudes and norms related to gender, we explore an index of attitudes toward gender equality. This index combines the Global Early Adolescent Study (GEAS) Index of Gender Stereotypical Traits (for example, 'girls are expected to be humble') and the GEAS Index of Gender Stereotypical Roles (for example, 'girls and boys should share household tasks equally'). ³⁹ The index is constructed such that attitudes in favour of gender equality receive higher values. We discussed the stark contrast in attitudes toward gender roles in the two different contexts of our study in Section 2 'Study setting', but here we highlight a few of the measures included in our index. East Hararghe performs somewhat

³⁹ For more information on the GEAS, see geastudy.org.



worse on the Index of Gender Stereotypical Traits. For instance, 71% of girls in control communities in East Hararghe agreed that 'girls should avoid raising their voice' at the first follow-up, compared to only 58% of comparable girls in South Gondar (Appendix Table A1). Similarly, 82% of girls in control communities in East Hararghe agreed that 'it is important for boys to show they are tough', compared to 73% of comparable girls in South Gondar. East Hararghe also performs somewhat worse on the Index of Gender Stereotypical Roles. For instance, 65% of girls in control communities in East Hararghe agreed that 'girls and boys should share household tasks equally' at the first follow-up, compared to 80% of comparable girls in South Gondar. Similarly, 85% of girls in control communities in East Hararghe agreed that 'a man should have the final word on decisions in his home', compared to 58% of comparable girls in South Gondar.

Because there were stark differences in attitudes toward gender across the two regions, we proceed directly to the regional heterogeneity. In South Gondar, there is a large positive impact of the AWH Comprehensive programme on attitudes toward gender equality compared to girls in control group sites at the first follow-up (0.245 standard deviations improvement, q=0.110, Table 3). This finding is driven by an improvement in the Index of Gender Stereotypical Roles – in fact, girls in every intervention arm were more likely than girls in control sites to agree that 'girls and boys should share household tasks equally', and girls in AWH Comprehensive sites were less likely to agree with 'it is okay to tease a girl who acts like a boy' or 'it is okay to tease a boy who acts like a girl' compared to their peers living in control sites (p<0.05) and girls living in AWH Essential or AWH Comprehensive+ sites (Appendix Table B2). These differences are no longer detected at the time of the second follow-up survey. It is important to note, however, that of the 16 items we consider across this Gender Equitable Attitudes Index, 13 of them moved in a positive (more gender equal) direction for control group individuals in South Gondar between the first and second follow-ups (Appendix Table A1).

For East Hararghe, where (as we describe in section 3, above) attitudes are somewhat more conservative, there is little evidence of any differences in gender-equitable attitudes between treatment and control communities at the first or second follow-up in the aggregate index. Of the 16 items we consider across this Gender Equitable Attitudes Index, 11 of them changed in a positive (more gender equal) way for control group individuals in East Hararghe between the first and second follow-ups (Appendix Table A1).

Perhaps an important point to note is found in the analysis across marginalised versus non-marginalised communities. In non-marginalised communities, we find no statistically significant differences between any intervention and the control group, nor differences across intervention layers, at either the 10-month or the 24- to 36-month follow-up (Table 6). In marginalised communities, however, we do detect some differences at the first follow-up (Table 5). At this time point, attitudes appeared to be less gender-equal in Her Spaces and AWH Comprehensive+ sites as compared to the control group (on the order 0.2 to 0.3 standard deviations; q=0.088 and q-0.004, respectively), and attitudes in AWH Comprehensive+ sites were somewhat less gender-equal than in AWH Comprehensive sites (q=0.118).

The final outcome related to perceptions of gender that we explore through regression analysis is an index of gender consciousness. This index measures concepts like 'I think about how boys' and girls' roles differ from each other', and 'I think it is possible to change how people react to my being a girl'. We find increased gender consciousness among girls living in AWH Comprehensive+ communities in South Gondar (q=0.032) at the first follow-up round, and suggestive evidence that girls in Her Spaces and AWH Comprehensive communities showed increased gender consciousness compared to girls in AWH Essential communities at the second follow-up (q=0.001 and q=0.020, respectively). These findings hold both for items such as 'I'm very aware of people's reactions to my being a girl' and 'I think it is possible to change people's reaction to my gender.'

In East Hararghe, we do not detect statistically significant differences between any intervention arm and the control group at either time point, though there is suggestive evidence that girls in AWH Essential sites displayed increased gender consciousness compared to girls in Her Spaces sites at the second follow-up (q=0.083).

The qualitative findings on gender attitudes and norms are perhaps more positive in that many girls in both zones – and also parents and key informants – talked about their awareness of the gender division of labour in the household and the importance of changing this so that men and boys would be more supportive of



women and girls, and take on a fairer share of domestic chores. For example, one girl participating in a focus group discussion in a Her Spaces site in East Hararghe explained that:

They taught us that there shouldn't be division of labour between male and female in household activities... In previous times, women have been confined to some activities and some other roles are left for men. The educators taught us that such division of labour is wrong. Men and women should carry out all activities by helping each other. A husband should pound pepper if the wife is cleaning the homestead. In previous times, boys used to go to school earlier. Girls, however, would go to school after undertaking some indoor activities. The educators denounced such practice. They educated us that we should handle the activities by helping each other with our brothers and go to school together... They educated us that our right should be equal with boys in carrying out household activities and going to school.

Similarly, a girl from an AWH Comprehensive site in South Gondar explained that 'We learned how females and males have equal role and responsibility in managing household jobs... Girls are equal with boys such that boys have to take similar responsibilities with their female counterparts.'

However, some girls acknowledged that shifting attitudes did not necessarily translate to changes in practice. As one girl participating in a focus group discussion in an AWH Comprehensive+ site in East Haraghe noted:

They taught us that males and females can play all roles equally. But males refrain from going to the mill house, collecting firewood, washing clothes and others by explaining that these aren't roles for males... They haven't changed... It is we, females, who beg them to support us when we are much overloaded... We have been educated that males should support us in domestic chores but they haven't begun to do so.

Furthermore, the qualitative interviews also underscored that gender equality was predominantly narrowly equated with the equal distribution of domestic tasks and was not expanded to other domains of life, especially outside the family. A girl from an AWH Comprehensive site in South Gondar explained that there was a need to shift attitudes about girls' roles beyond marriage and family life:

All girls need to get education and train them on the importance of school... They need to be advised on how they should envision their life... There are also parents who want us to be like them and get married... They need to be advised not to marry off their children... But they don't talk about this in the community discussions [Community Score Card meetings].

6.1.11 Girls' knowledge and beliefs about service accessibility

The final set of outcomes we explore in the quantitative analysis relate to girls' knowledge and beliefs about service availability and accessibility, which we collected only at the second follow-up when girls were aged 13-17. We construct an Index of Service Knowledge, using a set of questions measuring whether girls can correctly name a place where an adolescent in their woreda could go to seek support (beyond family and friends) for the following: substance addiction, mental health, pregnancy prevention, legal abortion, experience of violence, or injustice under the law. Three of these topics were discussed in the AWH curriculum (pregnancy prevention, violence and other injustices under the law); the other three were not discussed explicitly (abortion, substance abuse and mental health), but we include these as important services for adolescents that systems strengthening work might touch on.⁴⁰ We also construct an Index of Service Accessibility, using a set of questions to measure whether girls think that an adolescent like them (who lives in their kebele) could actually access the place that they named (whether right or wrong) for such support.

Among the control group, knowledge related to where services for these types of issues are provided is low (Appendix Table A1). Among control group girls in South Gondar, half could name a place to get pregnancy

⁴⁰ For pregnancy prevention, the AWH curriculum focuses primarily on abstinence, but also discusses speaking to a health worker for more options. For experience of violence (including any type of violence, but particularly focusing FGMC, early marriage, sexual or other physical violence, or even unwanted attention from the opposite gender) or other types of injustice under the law, the curriculum mentions speaking with a trusted female teacher, a community leader, a member of the Anti-Harmful Traditional Practices task force, the police, or the girls' club mentor.



prevention, but only between a quarter and a half of girls could name a place to get help with legal abortion, experience of violence, or injustice under the law, and just over 10% could name a place to seek help for substance abuse and mental health (Appendix Table A1). In East Hararghe, the rates are substantially lower in almost every case; just 13% of girls could name a place to get support for pregnancy prevention, 15% for injustice under the law, and fewer than 10% for legal abortion, substance abuse, or mental health. On just one margin – experience of violence – were girls in East Hararghe more likely to be able to correctly name a place to get support (at 34%). Regression analysis suggests that service knowledge was higher for AWH Essential girls in South Gondar, compared to Her Spaces and (surprisingly) Act With Her Comprehensive girls (q=0.100 and q=0.083, respectively), though no different than the control group (Table 3). We did not detect any statistically significant differences either between intervention arms and the control group, or across increasingly more intensive intervention layers, in East Hararghe (Table 4).

Regardless of whether the place they had named was a 'correct' answer in terms of a place one could seek support for the given issue, we next asked the girls if they felt an adolescent like them from their kebele could actually access that support if they wanted to. Again, responses among control group girls in South Gondar were more favourable than among their peers in East Hararghe (Appendix Table A1). Among control group girls in South Gondar, half could name a place to get pregnancy prevention, but only between a quarter and a half of girls could name a place to get help with legal abortion, experience of violence, or injustice under the law, and just over 10% could name a place to seek help for substance abuse and mental health (Appendix Table A1). In East Hararghe, the rates are substantially lower in almost every case; just 13% of girls could name a place to get support for pregnancy prevention, 15% for injustice under the law, and fewer than 10% for legal abortion, substance abuse, or mental health. On just one margin – experience of violence – were girls in East Hararghe more likely to be able to correctly name a place to get support (at 34%). Regression analysis suggests that service knowledge was higher for AWH Essential girls in South Gondar, compared to Her Spaces and (surprisingly) Act With Her Comprehensive girls (q=0.100 and q=0.083, respectively), though no different than the control group.

The qualitative findings found similarly limited knowledge about public services that adolescents could access to find support with gender-based violence, substance abuse or mental health concerns. The focus of the discussions around protection against violence was predominantly on girls needing to avoid walking in forests or at night by themselves and asking friends or relatives to accompany them to mitigate against risks of assault. As a 15-year-old boy from an AWH Essential site in South Gondar explained:

We also learned that girls should not go alone in the dark place or crossing the forest since they may face rape or abduction. We learned that we should warn girls not to go alone somewhere in the darkness or through the forest, and that girls should keep themselves from being violated by boys/men and one of the mechanisms that girls can protect themselves from being raped or abducted is not going alone to somewhere they want crossing the forest or in the darkness, ...and that they should go with their friends or men/boys they know.

In the Her Spaces sites, adolescent girls reported valuing the opportunity to visit the local police station but nevertheless did not have a lot of actionable information on how to report cases of gender or sexual-based violence. From the participants' responses it seems that more support could have been provided to girls to orient their questions as to how they could get support for example if a friend, relative or they themselves were a survivor of violence. For example, a 12-year-old girl from a Her Spaces site in East Hararghe reported on her visit to a police station as follows:

We also learned that males should be held responsible if they abuse us. In relation to this, we have learned the information of the time at which offices including police station are opened for services and closed...We visited a police station as a part of the education. When we made the visit, we asked the workers the time at which the station is opened and closed. They gave us the answer that it is opened at 6:00am in the morning and closed at 12:00pm in the evening. Furthermore, we asked them the punishment of the male criminal in case they rape a female and people who practice FGM.



However, in terms of access to abortion services while these are available in the district towns and were openly talked about by Bureau of Health staff – especially in terms of providing services to secondary school students – none of the participants mentioned that these had been discussed in the Act with Her sessions.

In the case of mental health and substance abuse services girls did not mention any discussion on these or any awareness about services.

6.2 Boys' Outcomes

We present results of the ITT analysis of boys' outcomes in Table 7 (primary outcomes) and Appendix Tables B6 (secondary outcomes). Recall that for boys, we focus on six primary outcomes, encompassing knowledge, attitudes related to gender, support networks, violence and mental distress.

6.2.1 Boys' knowledge

We measure boys' knowledge by constructing an index of knowledge similar to the one constructed for girls, but focusing on the subset of outcomes that also appeared in the boys' AWH curriculum (particularly related to sexual and reproductive health and gender roles; see Appendix Tables B6 for included elements). In the full sample of sites, we do not detect statistically significant differences in knowledge between any treatment group and the control sites, or across increasing layers of programming, at the time of the first follow-up; this holds for results disaggregated by zone and by marginalization status as well. By the second follow-up, there is evidence of increased knowledge among boys in AWH Comprehensive+ sites compared to control sites (0.169 standard deviations higher, q=0.086), driven by East Hararghe. AWH Essential boys in marginalised sites also have more knowledge compared to control at this later follow-up (0.19 standard deviations, q=0.058).

The qualitative interviews echo the survey findings that boys across programming sites in both regions had more detailed knowledge about the difference between sex and gender, sexual and reproductive health issues, about pubertal changes and about menstruation being a natural phenomenon. A 13-year-old boy from a AWH Comprehensive site in East Hararghe explained that in his boys' group they had learned about gender roles and the implications of this in their daily lives:

We learned about supporting each other...about gender and sex: in previous times, males had been embarrassed to take on the roles which belong to females. We have begun to support the female since this project came. For example, we clean house when she prepares breakfast. We support her and she supports us...Sex is fixed characteristics; it cannot be changed. For example, a woman can conceive but a man cannot. This is called sex. Gender is something that can be changed.

Similarly, a 15-year-old boy in a AWH Comprehensive site in South Gondar underscored that they had learned in detail about the way in which gender roles are socially constructed and because of this they can be changed to better support women and girls:

I learned that sex is natural and can't be changed. It is the nature of being male and female. Sex includes those differences on male and female like, the ability to get pregnant, give birth, and breast feeding all which are natural and can't be changes. I also learned that gender is the society's perception toward for being male and female and division of roles and house chores based on sex.... We also learned that these divisions of house chores and other tasks for female and male are manmade and should be changed. Nowadays, I and other boys who attended session with AWH, have started helping our sisters and mothers by doing different house chores like fetching water, washing plates, collecting fire wood, and even making stew and preparing coffee for our parents etc. Sessions we attended with AWH changed our mind on these gendered divisions of house chores and these divisions of chores and rules for male and female can be changed through education and training.

For some boys this increased knowledge about gender roles and the ways that boys could support their female peers also extended to enhanced awareness about the risks of child marriage for girls and the responsibility that boys have in also reporting pending cases to authorities. A 13-year-old boy from an AwH Comprehensive



site in South Gondar explained this own personal case where as a result of the discussions in the AwH group he reported his parents' intention to marry off his younger sister:

We also learned that if we witnessed child marriage practice, we can report the case to our mentors, the school principal and school teachers then they will report to the woreda so that the child marriage will be arranged.... while I was attending sessions with AWH and learning about child marriage, my parents have been arranging child marriage for my younger sister.... The first thing I tried was, trying to convince my parents to cancel the marriage they arranged.... When I knew the case, I was too upset and I told my father what he was doing is criminal and against my sister's rights. I mentioned him all what I learned in sessions of the AWH including its effects and what would happen to her, but he was not willing to listen to me, and to cancel the marriage.... When they refused, I reported it to my teacher and the teacher told the case to the school principal, and then the school principal talked to my parents over the phone, and he warned them he would report them to the woreda Women's and Social Affairs Office and others... finally they cancelled the marriage they planned. ...My sister was 14 years old at the time, and she was attending 4th grade. She was not even aware about what was going on. ... My father is illiterate, he knew nothing about child marriage and its effects, so that when the principal talked to him He stopped preparations he had started for the wedding. Nowadays my sister is learning in this school and she is attending 6th grade....

More common were reports from boys that they had gained knowledge about girls' menstruation, the menstrual cycle and what it meant in terms of pregnancy and also that stigmatization of menstruation is wrong and that boys instead need to support their sisters and female peers during her period. A 15-year-old boy in an Act with Her Essential site in South Gondar explained what they had learned as follows:

We learned about menstruation. I learned that menstruation is natural for girls/women and girls should be helped when they menstruate and they shouldn't be teased and mocked by boys/men including their parents.

Another boy of 14 years from an Act with Her Comprehensive site in East Hararghe emphasised that they had been taught things clearly and in detail which was different to biology classes in school:

We learned that after girls first see their menstruation, they can become pregnant when she had an intercourse with a man. The menstruation cycle may come every 26 days or once a month and when girls have sexual intercourse during the middle of the cycle, she can become pregnant.

Others underscored that parents are often reluctant to talk about sex and reproductive health issues with them and that the sessions were helpful in addressing these topics. As a 15-year-old boy also from the same East Hararghe community added:

Some of the boys did not inform their parents about the content of the sessions because some of the issues are sensitive. For example, the topic on sexual relationships is sensitive and difficult to talk to parents about this event though we know that children are the products of sexual intercourse. Parents know that they produce children after having sexual relationships, but they do not want their children to talk about it.

In some cases, boys also reported that they learned about HIV and HIV prevention approaches. Boys attending sessions in an Act with Her Essential site in South Gondar noted:

In sessions we attended with AWH, we also learned the ways that HIV can be transmitted and also ways HIV can't be transmitted from an infected person to uninfected one. We learned that HIV is transmitted through sexual intercourse, sharing sharp materials, blood contamination etc. We also learned that HIV can't be transmitted by working and learning together with infected person, handshake with infected person, living together, etc. Besides, we also learned how to protect ourselves and others using preventative ways like abstaining [from sex], using condoms, having sex only with a marriage partner.



6.2.2 Boys' gender attitudes and consciousness

We construct an index of attitudes toward gender equality, and an index of gender consciousness, both identical to the ones we constructed for girls (see section 6.1.10). Once again, because of the stark differences in attitudes toward gender across the two regions, we proceed directly to the regional heterogeneity.

In South Gondar, interestingly, we find at the first follow-up that boys have less gender-equitable attitudes across three of the treatment arms in comparison to the control group (excluding the AWH Comprehensive sites), and this difference is statistically significant for Her Spaces boys in comparison to the control group (0.296 standard deviations less, q=0.046; Table 7). This may be explained by the fact that girls in Her Spaces sites received programming, while boys in Her Spaces sites did not. Furthermore, AWH Essential boys have less gender-equitable attitudes than AWH Comprehensive boys (by more than 0.25 standard deviations, q=0.137) – which again may be attributed to the imbalance in programming provided for boys and girls, as the girls' groups in AWH sites met twice as often as the boys' groups. 41 The finding that the AWH Comprehensive programme had positive impacts (if small and not statistically significant compared to the control) on boys' attitudes toward gender equality aligns with the finding above that girls' attitudes in South Gondar sites improved as well, although for boys the impact is driven by an improvement in the Index of Gender Stereotypical Traits rather than in the Index of Gender Stereotypical Roles. Boys in AWH Comprehensive sites were more likely to agree that 'boys should be able to show their feelings' and less likely to agree that 'boys who behave like girls are weak' (Appendix Table B7). Although the finding of changes in attitudes among some girls in South Gondar had disappeared by the second follow-up, we find that changes in boys' attitudes toward gender equality actually strengthened for all AWH treatment arms by the second follow-up, and became highly statistically significant compared to the control group for the AWH Comprehensive arm (0.319 standard deviations improvement, q=0.013; Table 7). We do not detect substantial change in the index of gender consciousness at either follow-up across any treatment arm in South Gondar.

In East Hararghe, we see a similar general trend in the direction of impacts at both the first and second follow-ups. At the first follow-up, coefficient estimates suggest negative impacts of all treatment arms on boys' attitudes toward gender equality, particularly for AWH Essential boys (0.253 standard deviations less equitable compared to the control group, q=0.049, Table 7). By the second follow-up, all coefficient estimates have become positive except for the Her Spaces treatment arm, though none are statistically significantly different from zero at standard levels of confidence. AWH Comprehensive+ boys score 0.345 standard deviations lower on the index of gender consciousness at the first follow-up in comparison to the control group (q=0.023) and in comparison, to the AWH Comprehensive group (q=0.007) – but this difference disappears by the second follow-up.

From the qualitative interviews, boys across both regions did not report major shifts in gender attitudes in consciousness besides the three key issues discussed in the preceding section on shifts in attitudes towards the gendered division of labour in the household, towards menstruation and girls' rights to be free from child marriage. In a few cases, more reflective boys in South Gondar made the link between changing attitudes towards menstruation and greater mobility and agency for girls. For example, a 15-year-old boy in an Act with Her Comprehensive site in South Gondar explained:

In sessions I attended with AWH, I learned that menstruation is natural and God's gift for girls/women. Before I attended sessions, I have been mocking girls when I saw blood of menstruation on their clothes and I have been teasing them, and insulting them... when we were on our way to and from school. However nowadays I learned that menstruation is the natural gift for girls and I started helping them and treating them if I knew a girl is menstruating I will help her by advising her not to get worried and frustrated and even to go to the MHM room prepared in the school separately and use the sanitary pad...Currently no one teases the girl and girls are not ashamed about menstruation because they learn it is a gift and that they can do anything, and move around freely, even when are on menstruation.

⁴¹ Girls' groups in AWH Comprehensive and AWH Comprehensive+ sites also met twice as often as the boys' groups.



6.2.3 Boys' experience and perception of peer violence

Whereas for girls our quantitative analysis of violence focused on an index of experience of peer, household, and sexual violence, for boys we construct an index that measures both perpetration toward and victimization by peers (signed so that higher values indicate less violence). In the full sample, we do not detect any statistically significant differences across any treatment arm and the control group, nor across increasingly intensive layers of programming, at either follow-up round (Table 7). There is some suggestive evidence of regional heterogeneity, with the AWH Essential arm performing better than the Her Spaces arm (on the order of 0.2 standard deviations, q=0.16 at the first follow-up and q=0.078 at the second follow-up, driven by improvements in victimization) in South Gondar (Table 7 and Appendix Table B7), and the AWH Essential arm performing worse than the Her Spaces arm (on the order of 0.3 standard deviations, q=0.049 at the first follow-up only, driven by worsening in both victimization and perpetration) in East Hararghe (Table 7 and Appendix Table B8).

The qualitative findings suggest that there was some discussion of the risks of peer violence and links to substance abuse in boys' groups, but that the knowledge was more general about identifying this as a social problem rather than providing detailed information about how to tackle it. For example, a 13-year-old boy from an Act with Her Essential site in South Gondar noted:

Some boys and youths also violate people especially on Saturday since Saturday is the market day in this locality. Youths and boys drink alcohol or 'Tella' [local drink] on Saturday and then after they get drunk, they will try to rob or loot people who came from different rural areas for marketing. This situation is aggravated especially after the conflict since many youths got guns from different battle. Nowadays people in this locality do not move freely and situations are threatening. Boys and youths also conflict each other after they get drunk, they conflict with each other over minor reasons even. Mostly they are boys who are out school who conflict each other and who rob others. They rob people during the nighttime when people are on their way home after trading in the marketplace.

Similarly, a 15-year-old boy from an Act with Her Comprehensive site in East Hararghe explained:

They fight about farm issues or when livestock of one person damages crop of the other person! For example, a guy may hit a younger boy when their crops are damaged for the boy couldn't keep the livestock properly. The brother of the young boy may come up grabbing a machete to attack the guy who hit his brother. The other guy may also come up with machete and they attack each other...This happened recently in this locality – the victim was injured in the head and taken to the health facility...It was also reported to the police.... Fights don't happen in the school compound...it isn't permitted.... They attack each other when they go out of the school compound for there may be no one to intervene and stop them.

6.2.4 Boys' mental distress and support network

In the quantitative analysis, we measure boys' mental distress using the same index that we constructed for girls. We do not detect statistically significant changes in distress in the full sample at either time point, though coefficients on all treatment arms are negative at the first follow-up (Table 7). This overview ignores some suggestive regional heterogeneity, however. In South Gondar, the results are as in the full sample – no significant changes in distress were detected. Yet in East Hararghe, we find negative impacts of AWH Comprehensive+ in comparison to the control group (by nearly 0.5 standard deviations lower, q=0.105) at the first follow-up (Table 7). This effect disappears by the next interview, 1–2 years later.

We also measure whether boys have a supportive adult in their life. In the full sample, we do not detect any differences in likelihood of having a supportive adult across any treatment arm at the first follow-up, but boys in all treatment groups except for AWH Essential are more likely to report such a person by the second follow-up, in comparison to the control group (Table 7) — a finding driven by East Hararghe and marginalised sites.



The qualitative interviews did not identify any key effects from the programme in terms of psychosocial well-being. Because boys in general have greater mobility than their female peers the groups did not function in the same way as a safe space that they did for girls who have fewer opportunities to meet outside of school settings. There also appeared to be more criticisms by some of the boys of some of the male mentors who did not attend sessions regularly or act as a strong role model. For example, a 15-year-old boy in an Act with Her Essential site in East Hararghe noted:

The discussion was not attractive for the boys, and many boys could read the manual and they could not understand. Some of them even could not write from the blackboards. This is the major reason because if they could not understand, it is wastage to come to the sessions. Students hated the session because the mentors were not motivated to teach the students. They had their own farm work and they were not motivated to teach us, and this was the major reason for the dropout.

However, several boys emphasised that they had been advised in the AwH sessions to surround themselves with educated and well-behaved peers and to seek out positive role models to guide their behaviour. A boy from an Act with Her Comprehensive + site explained that the messaging had been as follows:

They educate to be friends with people who have education background. To be friends with persons who have interest in education, who keep their hygiene but not with bad mannered individuals...To be friend with educated persons is also an opportunity for learning. One is able to learn basic numeracy skills from friends for example....Educated persons can support us if we approach and request them. This in turn helps to be motivated in one's education and perform well by easily understanding teachers' lectures. ... They advised us that it is very important to be companions with others who are educated. We will get motivated to continue our education if we pass most of our time with educated people. But, we will be discouraged if we pass our time with bad people. They discourage us not to go to school by undermining education. They may also cause conflict between us and others.



4 Discussion and conclusion

In this paper, we explore impacts of layered adolescent-centric interventions implemented in two zones of rural Ethiopia on the outcomes of approximately 2,300 very young adolescent girls, as well as on a set of gender-focused outcomes of their male peers. We study impacts on girls across six different capability areas, including: education; bodily integrity; health, nutrition and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. We also explore impacts on a range of cross-cutting outcomes related to girls' knowledge, attitudes, and supportive networks. In total, we examine 19 different pre-specified outcomes for girls across these themes (14 at the first follow-up). We also explore a smaller set of gender-focused outcomes for boys (6), in order to understand any changes that were taking place in the contexts in which the girls live. We study whether outcomes are statistically different in intervention versus control sites, and also compare and contrast outcomes across increasingly intensive layers of programming – programming that includes girls only; girls, boys, and caregivers; girls, boys, caregivers, and their broader communities; and the latter plus the addition of in-kind transfers provided to girls.

One useful way to succinctly summarise the many quantitative findings on girls from our study (across 14 outcomes for the 10-month follow-up, and 19 outcomes for the 24- to 36-month follow-up) is to count – by residential zone, treatment group assignment and survey round – the number of positive coefficients, and the number of positive and statistically significant coefficients, compared to outcomes of girls in control sites. ⁴² We first note that there are very few statistically significant negative impacts for any treatment arm compared to the control group – none for the full sample, South Gondar, or for non-marginalised sites; only one statistically significant negative impact for girls in East Hararghe (the index of economic empowerment among girls assigned to the AWH Comprehensive treatment), and two for marginalised sites (the Index of Gender Equitable Attitudes among girls in Her Spaces and AWH Comprehensive+ sites). Thus, no set of programme layers was harmful to girls' capabilities in a broad sense, compared to the status quo.

Table 8 displays counts of positive coefficient estimates across treatment arm, residential location, and survey round (ignoring statistical significance). Across the 14 outcomes we explore in the full sample at the first follow-up, 13 (93%) are positive in AWH Essential sites, 12 (86%) are positive in Her Spaces and AWH Comprehensive sites, and 9 (64%) are positive in AWH Comprehensive+ sites. At the second follow-up, 17 (89%) are positive (out of 19) in AWH Essential sites, 13 (68%) are positive in AWH Comprehensive sites, 12 (63%) are positive in AWH Comprehensive+ sites, and 11 (58%) are positive in Her Spaces sites. As we look across sites and rounds, AWH Essential sites consistently have the highest number of positive coefficients (except for in non-marginalised sites in the first follow-up), ranging from 74% to 100% of outcomes – something that is unlikely to occur by chance. The lowest number of positive coefficients primarily switches back and forth between Her Spaces sites (concentrated at the second follow-up) and AWH Comprehensive+ sites (concentrated at the first follow-up, and in East Hararghe and marginalised sites) – unsurprising as Her Spaces is the intervention arm that offered the lightest touch, and we provide evidence in Section 6.1 that some AWH Comprehensive+ sites may have experienced a higher degree of negativity due to the more intense perceived imbalance between what girls and boys received.

A final point of interest in Table 8 is to explore, for each intervention arm, the change in fraction of positive coefficients between the 10-month and 24- to 36-month follow-up surveys. For the AWH Comprehensive arm, the fraction of positive coefficients rose across both South Gondar (by 1 percentage point) and East Hararghe (by 11 percentage points). Since community engagement activities in this treatment arm continued through the second follow-up, and we know that in East Hararghe these activities were actually restarted from the beginning after the first follow-up round and persisted until almost the start of the second follow-up round,

⁴² This method equally weights each of the 19 pre-specified primary outcomes for girls. Another way to do this would be to weight the six capability areas equally – by counting whether any outcome in a given capability area was positive and statistically significant (for a total of 6 outcome sets) – and then to provide perhaps a knowledge and an attitudes category as well. Our takeaways would be identical using this method instead.



this suggests that ongoing community work may extend benefits. ⁴³ In contrast, in Her Spaces and AWH Essential communities, the fraction of positive coefficients fell between the first and second follow-up survey rounds everywhere except in non-marginalised sites. And, puzzlingly, the fraction of positive coefficients also fell between the first and second follow-ups in AWH Comprehensive+ communities in every type of location, by between 6 and 31 percentage points; this is perplexing since AWH Comprehensive+ communities also received the community-level engagement (as in the AWH Comprehensive sites). We seek to disentangle this surprising result in future work.

Table 9 summarises statistically significant results only, using the standard cutoff of adjusted q-values ≤ 0.10. Each cell in the table displays impacts on girls' primary outcomes by direction and statistical significance, both between each intervention arm and the control group (+/- noted in cell indicates pos/neg coefficient that is statistically significant), and across increasing intensity of intervention layers (a cell border indicates that the intervention arm is statistically significantly different from the intervention layer to the left, with a thick solid border indicating an increase from the previous layer, and a hashed border indicating a decrease from the previous layer).

We first consider findings summarised in Table 9 separately by region and marginalization status. At the 10month follow-up in South Gondar, the AWH Comprehensive+ arm was the most impactful compared to control sites (four significant positive impacts across domains of voice and agency, economic empowerment, knowledge and gender consciousness), compared to only one in the AWH Essential and AWH Comprehensive arms, and none in the Her Spaces arm. In East Hararghe the AWH Essential arm had the most positive and wide-ranging impacts compared to the control group at the first follow-up (three significant positive impacts across domains of knowledge, bodily integrity, and psychosocial well-being) compared to two statistically significant and positive impacts in AWH Comprehensive sites (but an additional impact was statistically significant and negative) and none in Her Spaces and AWH Comprehensive+ sites. Moving to the marginalised versus non-marginalised site comparison at the first follow-up, we see that there were no improved girls' capabilities in non-marginalised sites due to any intervention intensity, with the exception of one positive and statistically significant impact on knowledge in the AWH Comprehensive+ treatment arm. In marginalised sites, in contrast, all treatment arms had numerous positive impacts compared to control communities (six outcomes in AWH Essential sites, five in Her Spaces and AWH Comprehensive+ sites – though there were also two negative impacts in each of these intervention arms – and four in AWH Comprehensive sites). As discussed in section 6.1, girls' voice and agency and AWH curriculum knowledge were improved by all intervention arms in the full sample, and these impacts were largely driven by improvements in marginalised study sites. But by the second follow-up, there are no statistically significant impacts across any treatment arm and site combination, except for a positive impact on the index of economic empowerment in AWH Essential sites in South Gondar (as compared to control sites).

Next, we consider the findings in Table 9 by each programming arm, additionally factoring in statistical tests of differences across increasing layers of programming intensity. Her Spaces had no statistically significant impacts (compared to the control group) on any outcome at the first or second follow-up in South Gondar, East Hararghe, or non-marginalised sites. In marginalised sites (where we noted above that all interventions had a substantial number of impacts), Her Spaces had a significantly positive impact on five outcomes at the first follow-up (and a negative impact on one outcome), and none at the second follow-up. The AWH Essential intervention had no impacts at either follow-up in non-marginalised sites, and improved only one outcome at the first follow-up and one (different) outcome at the second follow-up in South Gondar — though AWH Essential outperformed Her Spaces across four outcomes, and AWH Comprehensive across two outcomes, at the second follow-up there. Impacts for the AWH Essential arm were somewhat more wide-ranging in East Hararghe (three outcomes, and AWH Essential outperformed AWH Comprehensive there across three

⁴³ Note that the second follow-up survey in South Gondar happened later than in East Hararghe, and longer after the end of community-level engagement activities, so it makes sense that there is a smaller number of additional positive coefficients there than in East Hararghe.



different outcomes) and in marginalised communities (six outcomes) at the first follow-up, although no differences from the control group were detected by the second follow-up. The AWH Comprehensive intervention had no impacts at either follow-up in non-marginalised sites and improved only one outcome in South Gondar and two outcomes in East Hararghe at the first follow-up (and none by the second follow-up). As with the other treatment arms, impacts for the AWH Comprehensive arm were somewhat more wideranging in marginalised communities (four outcomes) at the first follow-up, although by the second follow-up girls in these communities performed worse on outcomes for physical health and nutrition, and menstrual practice, than girls in AWH Essential communities. Finally, for the AWH Comprehensive+ intervention, girls in these communities had no improved outcomes compared to those in control communities in East Hararghe, but one improved outcome in non-marginalised communities, four in South Gondar and five in marginalised communities at the first follow-up. Again, by the second follow-up, no impacts were detected in any site compared to the control group.

To summarise the quantitative findings of this paper, we rely most heavily on the summary evidence on girls' outcomes from Table 9 – which considers both statistically significant differences between each intervention arm and the control group, and differences between increasingly intensive intervention layers – as well as the impacts detected for boys presented in Table 7. We consider impacts across the set of six adolescent capability areas previously defined (education, bodily integrity, physical health and nutrition, psychosocial outcomes, voice and agency and economic empowerment) as well as two main cross-cutting categories (attitudes and knowledge).

This evidence shows that in highly marginalised environments, adolescent-centric interventions across a range of intensity levels (from involving girls only to additionally including peers, caregivers, community members, and transfers) can improve adolescent girls' outcomes in the short term (across five of the eight outcome sets we explore). In terms of net positive statistically significant effects on girls' outcomes, the set of interventions that performed the best in marginalised environments was the AWH Essential model, which included curriculum-based group meetings for girls and boys as well as touchpoints for their caregivers; this intervention set also had the highest percentage of positive estimated treatment coefficients (100%), and outperformed the less-intensive (Her Spaces) and more-intensive (AWH Comprehensive) for selected boy outcomes. Yet the intervention arms with higher or lower intensity were not far behind, particularly in terms of a number of statistically significant positive impacts across the girls' outcomes studied. Importantly, no impacts on girls' outcomes were detected for any of these intervention intensities (including AWH Essential) after another one to two additional years had passed, and the proportion of positive estimated treatment coefficients had fallen for all intervention arms (by 14-31 percentage points). That said, we note positive impacts on boys' outcomes related to knowledge, gender-equitable attitudes, mental distress, and support networks from the AWH Essential treatment at the second follow-up. So, there is some evidence of an advantage to the model incorporating girls, boys and caregivers, over the most basic intervention (only interacting with girls) in marginalised contexts.

In non-marginalised environments, the quantitative analysis did not detect any differences on girls' outcomes between intervention arms and the control group (with one exception – see Table 9), or across increasing layers of intervention intensity. So, in non-marginalised environments, there was little evidence of improvements in girls' outcomes regardless of programme intensity.

In South Gondar, an environment with a richer history of youth- and women-centred work and where community reception for adolescent-centric programming was more positive, a highly intensive set of interventions that included curriculum-based meetings for boys and girls, touchpoints with parents, community-level work, and asset transfers to girls (AWH Comprehensive+) can have some (but more limited) beneficial impact on girls in the short term, across voice and agency, economic empowerment, gender consciousness and curriculum knowledge. In the medium term, however, nearly all impacts fade out – though there is some suggestive evidence that an intermediate multi-level model including girls, boys and caregivers (AWH Essential) outperforms the more- and less-intensive interventions both for girls' outcomes related to



economic empowerment, service knowledge and accessibility, as well as boys' outcomes related to gender-equitable attitudes and peer violence.

For East Hararghe, the results are somewhat different. This zone was characterised by somewhat more conservative gender norms, where less gender-focused work had been conducted previously, and community reception to the girl-focused programming was less enthusiastic. In East Hararghe, AWH Essential produced the highest number of positive and statistically significant outcomes (across three outcome sets of the eight we study) at the 10-month follow-up, closely followed by the AWH Comprehensive programming (two outcome sets). Although AWH Essential appears to have outperformed the more intensive AWH Comprehensive programme at the 10-month follow-up (at least across violence, health, and economic empowerment outcomes), recall that the community component of the AWH Comprehensive intervention was lagging there, and reorganised and restarted following the pandemic closures. We do not detect statistically significant differences between any intervention arm and the control group (or for any but one test of increasing intensity layers) by the second follow-up, up to two years later.

In sum, we conclude from the quantitative findings of this study that in highly marginalised areas, girl-focused programming of any intensity level can improve girls' outcomes across numerous capability domains in the short term. Furthermore, although we do not see improvements in girls' outcomes over a longer timeframe in these areas, we do see improvements in gender-focused outcomes of male peers in sites where boys and caregivers were also included. Across a broader range of sites, multi-level programming in the short term improves some girls' outcomes, and outperforms more basic, girl-only programming. However, the multi-level programming that we evaluate did not have enduring impacts outside of marginalised areas. The qualitative findings also underscore that although there have been important shifts in some girls' knowledge and increased opportunities for voice and agency, adolescents' trajectories are still significantly shaped by broader structural constraints. These include limited shifts in gender attitudes and behaviours among parents and the wider community, as well as enduring poverty, a dearth of income-generating opportunities in rural and conflict-affected settings, and inadequate investment in adolescent-friendly and gender-sensitive education, health, psychosocial and justice/policing services. In other words, programming that aims to shift gender attitudes and norms can support change at the level of the individual and, to a lesser degree, the family and community, but without complementary efforts to scale up and improve investments in services and support for young people, changes are likely to be limited and seldom transformative.



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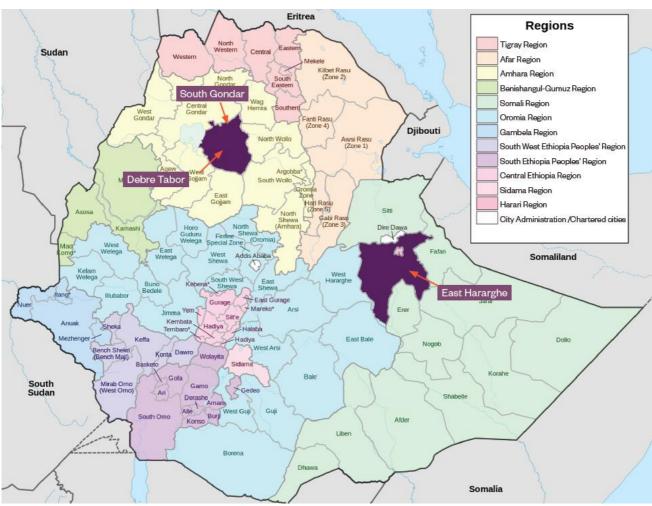
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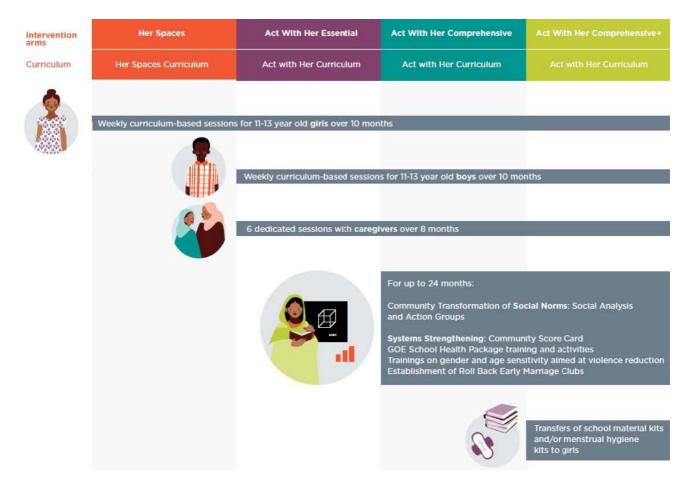
Figure 1. Gage impact evaluation research sites



Notes: Locations (administrative zones) in dark purple are those where the GAGE impact evaluation analyzed in this paper was conducted. These include South Gondar Zone (Amahara Region) and East Hararghe Zone (Oromia Region).



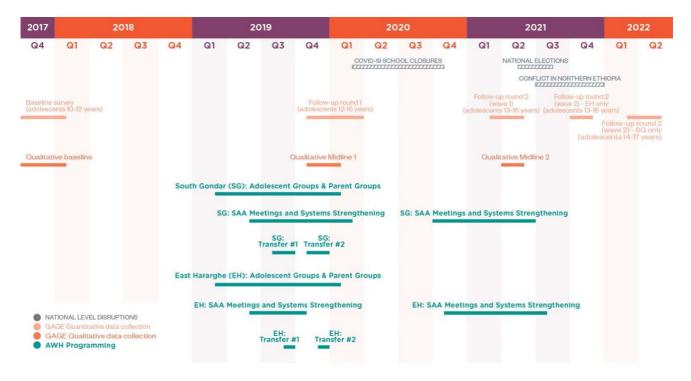
Figure 2. Gage impact evaluation research sites



Notes: Although curriculum-based programming for adolescents provided by Pathfinder and CARE was available for all adolescents living in a study site who were aged 10-13 at time of enrollment, our analysis focuses only on the subset of adolescents who were randomly selected from a project-specific census style household listing, and who were aged 11-13 at the time the adolescent groups were launched.



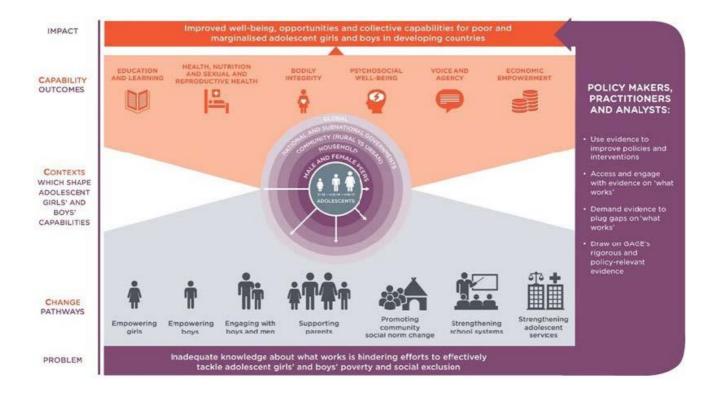
Figure 3. Timeline for evaluation



Notes: This figure illustrates the timeline of the AWH programming, GAGE evaluation data collection, and relevant events in Ethiopia.



Figure 4. GAGE conceptual framework





Abstract

Adolescence is a window for interventions to improve current and longer-term well-being, yet it is also a time when girls face an array of restrictive gender norms, reinforced by peers, families, communities and institutions. Without norms change at each of these levels, it may be difficult to improve girls' outcomes in a sustainable way. This study analyzes data from a cluster randomized controlled trial in Ethiopia to evaluate near-term impacts of multi-level adolescent-centric interventions aimed at gender norms transformation— layered to include girls, boys, their families and communities—on the empowerment of approximately 2,300 young adolescent girls (10-14). We find that gender-focused programming can improve a broad range of girls' capabilities after one year, though we don't detect sustained improvements after an additional 1-2 years of follow-up. In locations where there is strong community-level support and where interventions are implemented well, there are improvements in girls' capabilities as a result of the most comprehensive programming, and these improvements are more wide-ranging, more sustainable (at least up to 2.5 years). Impacts are weaker (and sometimes even negative) where support and implementation are less consistent, suggesting the need for tailored and well-monitored implementation approaches in different contexts. Analysis of data collected one year after programme launch suggests that, in more marginalised sites, any genderfocused programming can improve a broad range of girls' outcomes in the short term; we do not detect sustained improvements in these sites on girls' outcomes after an additional 1-2 years of follow-up, although there is evidence of improvements in gender- focused outcomes of male peers in the medium term. More broadly, in locations where there is strong community-level support and where interventions are implemented well, there are improvements in girls' outcomes as a result of the most intensive programming, these improvements are more wide-ranging and more sustainable (at least up to 2.5 years), and include boys' gender-focused outcomes when interactions with boys and parents are included. Yet, impacts are weaker (and sometimes even negative) without such community support and where implementation is less consistent, which suggests the need for tailored and well-monitored implementation approaches in different contexts.

Keywords: Gender, Very Young Adolescents, Capabilities, Gender Norms, Ethiopia, RCT, Mixed-Methods

JEL codes: O15, O12, I25, I15, I32

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1 Introduction

Adolescence (age 10–19 years) is recognised as a 'critical period' for development, akin to the first 1,000 days of life (Bundy et al., 2017). As such, it is considered a key window of opportunity for interventions to improve contemporaneous, longer-term and intergenerational economic and social well-being (Bundy et al., 2017; Sheehan et al., 2017; Steinberg, 2015) – reaping the 'triple dividend' (Patton et al., 2016). This is especially relevant in low- and middle-income countries (LMICs), where (as of 2019) nearly 90% of adolescents live (United Nations, 2019).

Adolescence is also a time when gender norms and expectations – reinforced by families, communities and institutions – are keenly felt and internalised, determining what young people do and expectations around appropriate behaviour (Chung and Rimal, 2016). This transitional time is particularly fraught for adolescent girls in LMICs as many face an array of restrictive gender norms that ultimately reinforce disadvantage (Duflo, 2012; Jayachandran, 2015). Adolescent girls in these contexts are often kept home from school and face mobility restrictions in their community; they rarely have access to formal employment, yet face disproportionate care, and domestic and paid work burdens. In many contexts, girls are required to leave school and marry early, abandoning not only their educational and occupational plans but also their peer support systems (International Center for Research on Women, 2016). Ultimately, many adolescent girls in LMICs have few routes to economic empowerment and limited voice and agency within their homes, schools and communities (Kabeer, 2018).

This is certainly the case in Ethiopia, the context for our study. School dropout rates are high for girls and boys alike, with only 73% of girls and 77% of boys completing grade 6 and net enrolment ratios at around 33% in secondary school (grades 9-12; Ministry of Education, 2023). Yet girls are substantially more disadvantaged than boys across a range of economic, social and health outcomes. Eighteen percent of girls aged 15–19 years were not in education, employment or training in 2021 (compared to 9% of boys), and in 2016 nearly half of young women aged 20-24 in rural areas were married before the age of 18 (UNICEF, 2024).

Because restrictive gender norms surrounding adolescent behaviour are often reinforced by peers, families, communities and the broader institutional structures that surround them, it stands to reason that interventions that lack involvement and gender norms change at each of these levels are unlikely to lead to sustained improvements in girls' outcomes (GAGE consortium, 2019). Moreover, given that poverty is a key driver of adolescent outcomes (Bergstrom and Özler, 2023), economic support is likely another key factor for impact.

Following a detailed pre-analysis plan registered prior to the launch of follow-up data collection (Jones et al., 2020a), this analysis uses mixed-methods data (including quantitative data from nearly 4,000 adolescents, and qualitative data from a subset of these adolescents as well as from caregivers and other key informants in study communities) to evaluate the short- and medium-term impacts of multi-level adolescent-centric interventions designed to transform gender norms and empower young adolescents (aged 11–13 years), as well as provide economic support—interventions which are layered, allowing us to disentangle added value of specific programme components at different levels. Partnering with Pathfinder, CARE Ethiopia, and others in the Act With Her consortium, we conducted a cluster randomised control trial (cRCT) across two rural zones in Ethiopia. In these zones, 155 communities (kebeles) were randomly allocated to: (1) curriculum-based group meetings for girls only; (2) curriculum-based group meetings for girls, for boys, and for parents, plus community-level engagement; (4) curriculum-based group meetings for girls, for boys, and for parents, and the community-level engagement, with the addition of in-kind transfers to girls; and (5) control sites. We describe these interventions in detail in Section 4. Interventions were implemented during 2019 and 2020, and we evaluate impacts at two different time points – late 2019 / early 2020 and again in late 2020 / early 2021.



This evaluation fills critical evidence gaps around the potential value of beginning interventions with Very Young Adolescents (VYA), as well as around the added value of specific components of complex interventions, such as targeting boys alongside girls, community-level involvement and systems-strengthening, and in-kind asset transfers. The study also moves beyond simply measuring gains in education, health and/or incomegenerating activities, and instead provides a more comprehensive measure of adolescent well-being across six domains: education; bodily integrity, which includes freedom from violence and child marriage; physical health, nutrition and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. We include both quantitative and qualitative measures to understand programme impacts.

The increasing recognition that adolescence – as with the first 1,000 days of life – is a critical period of transition suggests that interventions that tackle the multitude of disadvantages that girls face—even if only for a limited duration—may lead to transformative change. Our evaluation is, to the best of our knowledge, the first to provide causal mixed-methods evidence of the effectiveness of multi-level programming during early adolescence that also unpacks the contributions of different components to better inform future programming and policy.



2 Literature review

Well-identified, causal research on the impacts of programmes seeking to improve the lives of adolescent girls in LMICs has expanded rapidly in recent years. Most of the interventions studied focus on provision of knowledge, skills and/or financial support for girls, though some explore alleviation of supply-side constraints such as access to schooling or job opportunities, or girl-focused policy change (Bergstrom and Özler, 2023). These studies typically examine impacts on (some subset of) a core set of outcomes, often related to education, sexual and reproductive health, or bodily integrity (most commonly, early marriage). Existing evidence suggests that some interventions, such as those that provide cash or in-kind transfers or information on returns to education, can improve educational outcomes, especially enrolment and attendance, as well as delay marriage and pregnancy (Baird et al., 2011 in Malawi; Jensen, 2012 in India), and, to some extent, test scores (Baird et al., 2011). The evidence on technical and vocational education and training (TVET) programmes, which typically target out-of-school adolescents, remains mixed (Blattman and Ralston, 2015; Chakravarty et al., 2015), but Chakravarty and colleagues (2015) conclude that for girls, the most promising programmes take place in girl-only or girl-friendly settings, providing a combination of information on sexual and reproductive health and complementary training and assets.

An increasing number of adolescent- or girl-focused programmes seek to improve girls' life skills (soft skills), sometimes packaged with other elements such as knowledge, vocational skills, and/or educational or financial support for girls and their families. At present, evidence from evaluations of these interventions on girls' education, marriage and fertility timing is mixed. In some settings, the well-known Empowerment and Livelihood for Adolescents (ELA) program - which provides life skills and vocational training to adolescents through safe spaces (single-sex adolescent clubs) - has been found to delay teen marriage and pregnancy (Bandiera et al., 2020 and 2023), while in other settings it has been shown to have no impact on or even worsen these outcomes (Buehren et al., 2017a; Buehren et al., 2017b). A life-skills intervention for out-of-school girls in India lowered early marriage there (Pande et al., 2006), while a life-skills intervention for in-school girls elsewhere in India had no such impact (Edmonds et al., 2021). A programme providing negotiation training to girls in Zambia improved educational outcomes but did not affect teen fertility (Ashraf et al, 2020), while a different program which provided curriculum-based safe spaces for Zambian girls as well as facilitated access to health and financial services had no impact on educational or fertility outcomes (Austrian et al, 2020). An intervention including hard and soft skills for girls in addition to information on gender rights through safe spaces improved education and early marriage outcomes in Bangladesh (Amin et al., 2016), and a similar programme in Bangladesh that included hard and soft skills, empowerment, and in-kind transfers improved education, marriage and teen fertility (Buchmann et al., 2018).

Yet programmes that are not multi-level, that do not actively attempt to address the entrenched norms within families, communities and broader institutions that restrict women's and girls' opportunities, are unlikely to lead to sustained change for women and girls (Palmer, 2010; Chandra-Mouli et al., 2017; Levy et al., 2020). Because unequal gender norms and power dynamics are often reinforced by adolescents' peers, families, communities and the broader institutional structures that surround them, it stands to reason that without change in gender attitudes and norms at each of these levels, improved adolescent outcomes are much less likely to be sustained.

Although many of the programmes discussed above focus on adolescent girls, gender norms are, for the most part, not at the centre of programming. Initially the interest in gender norms was largely centred on adults (Beaman et al., 2009; Jensen and Oster, 2009; La Ferrara et al., 2012), but there is an increasing interest in the specific role of gender norms during adolescence (see, for example, Dhar et al., 2022), and in programmes that target gender norm change more broadly at the parent or community level, including Gender Equity Movement in Schools (GEMS) in India (Achyut et al., 2016) and TESFA in Ethiopia (Edmeades et al., 2014). Our study seeks to contribute to the evidence base in this area by evaluating the impacts of adolescent programming that takes a complex, multi-level approach.



There is a growing literature that highlights the importance of working with adolescent girls to tackle the deep-rooted effects of discriminatory gender norms and to support their individual and collective empowerment (Harper et al., 2018). Working with adolescent boys, before gendered attitudes and behaviours are firmly cemented, is also likely to be critical. Because gender is a relational concept, this work is important not only in terms of the space it opens for girls but also in terms of impacts on boys' own lives (Kato-Wallace et al., 2016). Rigid gender norms place pressure on boys to prove their masculinity, and can drive them to engage in harmful behaviours such as violence towards girls and other boys, unsafe sex and substance abuse. Indeed, interpersonal violence is a leading cause of mortality for adolescent boys globally, second only to road injuries (World Health Organization, 2014).

Families and communities also often perpetuate inequitable gender norms. Parents, siblings and broader communities both directly and tacitly communicate collectively-held expectations and beliefs about how girls and boys, and women and men, should behave and interact in specific social settings at specific stages of their lives. Parents and other adult family members also often make decisions that affect girls' healthy transitions (e.g., school dropout, child marriage) and impact girls' mobility. Through social pressures and standards, communities either inhibit or foster progress toward gender equality.

Finally, institutional structures can further drive gender inequality and reinforce other structural drivers of girls' constrained choices and unhealthy outcomes as they transition through adolescence. Formal laws and policies, such as those that allow or prevent child marriage or deny girls' inheritance rights, often uphold and promote unequal treatment of women and girls. Furthermore, services that are critical for girls to positively transition through adolescence, such as education, health and psychosocial services, and sexual and gender-based violence (SGBV) prevention and response, are often limited in coverage, of poor quality, do not address gender equity, and are not responsive to the needs of adolescents. To have the most sustained impact, institutional structures (including education, health, justice and social protection) must be well coordinated and work cohesively to support girls and women. When this is not the case, advances made by one system are less effective than they could be if supported by other institutional structures.



3 Study setting

This study was conducted in two rural zones of Ethiopia: South Gondar zone in Amhara region, and East Hararghe zone in Oromia region (see Figure 1). Oromia and Amhara are Ethiopia's two most populous regional states at 38% and 22% of the national population, respectively, according to 2023 projections (Ethiopian Statistical Service, 2023). Zones were selected on the basis of two criteria: programming capacity on the part of the implementing partners, the non-governmental organizations (NGOs) Pathfinder (in Amhara) and CARE (in Oromia)¹; and key vulnerability criteria, including high child marriage rates (a proxy for conservative gender norms) and high levels of food insecurity (a proxy for household economic distress).²

On the one hand, Amhara and Oromia share some similarities; their economies are centred around agriculture, and both have seen fewer improvements recently in tackling poverty than the country as a whole (Beyene et al., 2020). However, similarities begin to fade on closer examination. Regional differences are especially marked in terms of gender outcomes, with girls and women in Amhara broadly advantaged over their peers in Oromia.³ Recent macro-level events, including the Covid-19 pandemic, drought and ethnic conflict, have further contributed to regional divergence – we discuss these in more detail below.

In Amhara, as of 2016 (the year of the most recent full Demographic and Health Survey), 26% of the population lived below the national poverty line, with the rural poverty rate effectively unchanged since 2011 (Beyene et al., 2020). Food poverty was even more common than monetary poverty, and at 31%, Amhara's rate was the second highest in Ethiopia (UNICEF, 2022a). With the caveat that figures pre-date a recent drought that impacted Oromia more than Amhara, Oromia has made faster progress on poverty reduction than Amhara. As of 2016, 24% of the Oromia region's population lived below the national poverty line with declines in the rate of food poverty in Oromia – from 33% in 2011 to 21% in 2016 – the largest in the country (Beyene et al., 2020; UNICEF, 2022b).

On nearly every other indicator, however, Amhara performs better than Oromia. For example, the Ministry of Education (2023) reports that for the 2021/2022 school year, the net secondary enrolment rate in Amhara was 40%, compared to 27% in Oromia. Girls in Amhara were especially advantaged in that they were more likely to be enrolled in secondary school (45%) than boys in their own region (35%), boys in Oromia (29%) and girls in Oromia (26%). Findings from the Gender and Adolescence: Global Evidence (GAGE) research programme, the same study that underpins this analysis, which has been collecting longitudinal data on adolescents in both regions since 2017, help explain this patterning. GAGE data suggest that girls' educational advantage in Amhara is driven by boys' engagement in paid agricultural labour, and that boys' educational advantage in Oromia is primarily shaped by parents' under-investment in girls' education, especially in relation to demands on girls' time and a growing trend of adolescent-driven child marriage (Presler-Marshall et al., 2020a).

Higher rates of girls' education in Amhara are also accompanied by lower rates of child marriage and adolescent pregnancy. Although historically, girls in Amhara were more at risk of child marriage than girls in Oromia, UNICEF (2022a, 2022b) reports that this is no longer the case. Of women aged 20–24 years, 43% of those in Amhara and 48% of those in Oromia were married before the age of 18. Driven by their higher likelihood of child marriage – and by Oromia's lower uptake of modern contraceptives (28% versus 47% in Amhara for all married women aged 15–49 years) – the 2016 Ethiopian Demographic and Health Survey reports that girls aged 15–19 in Oromia were more than twice as likely to have begun childbearing as those in Amhara (17% versus 8%) (CSA and ICF, 2017). Findings from GAGE add nuance to these broader patterns. Not

 $^{^{}m 1}$ Key capacity criteria included operational presence and experience, and absence of security concerns.

² According to the 2016 Ethiopia Demographic and Health Survey, women aged 20–24 years in Oromia have a median age at first marriage of 17.4 years, and women aged 20–24 years in Amhara have a median age at first marriage of 16.2 years.

³ Prior adolescent girl-focused work in South Gondar included a CARE-implemented program focused on improving economic empowerment and sexual and reproductive health of ever-married adolescent girls during 2011-2013 (Edmeades et al., 2014). Follow-up research was conducted on this programming in 2017, shortly before the GAGE research project began.



only is the risk of child marriage declining for girls in Amhara (especially in early adolescence), but married girls are supported to use contraception to delay their first pregnancy until their body is mature (Presler-Marshall et al., 2020b, 2020c). This is not the case in Oromia, where adolescent-driven marriages are pushing up the incidence of child marriage, and where contraception is strictly forbidden until girls have demonstrated their fertility. Recent GAGE research found that 79% of married girls in South Gondar (Amhara) had ever used a form of modern contraception, compared to only 7% of their peers in East Hararghe (Oromia) (Presler-Marshall et al., 2020b).

Girls and women in Amhara are also less likely than those in Oromia to have undergone female genital mutilation or cutting (FGM/C). The most recent Demographic and Health Survey reports that of women aged 15–49 years, 62% of those in Amhara compared to 76% of those in Oromia had undergone the procedure (CSA and ICF, 2017). Recent GAGE research suggests an even larger gap at the zonal level among adolescent girls: 32% had undergone FGM/C in South Gondar (Amhara) compared to 73% in East Hararghe (Oromia) (Presler-Marshall et al., 2022a). Qualitative research findings highlight that the regional government of Amhara has worked especially hard to eliminate FGM/C through awareness-raising activities in schools and in the community; those findings also highlight that FGM/C is seen as a prerequisite for marriage in East Hararghe (Presler-Marshall et al., 2022b).

The more advantageous position of girls in Amhara is evident in the region's economic outcomes too. For example, 21% of married women aged 15–49 in Amhara have a bank account, compared to only 8% in Oromia (CSA and ICF, 2017). Compared to their peers in Oromia, married women in Amhara are also less likely to report that their husband has primary control over women's earnings (3% compared to 10%) and more likely to individually or jointly own land (51% compared to 37%) (ibid.). GAGE's research with adolescents extends these findings – recent data finds that 12–14-year-old girls in East Hararghe were four times as likely as their peers in South Gondar to have worked for pay in the past year (20% versus 5%) – and twice as likely as boys in either region (10%) – primarily because girls in East Hararghe become responsible for paying for their own clothing (and school supplies if they are still enrolled) in early adolescence (Presler-Marshall et al., 2021). It also found that although girls in East Hararghe (Oromia) are more likely to have their own savings than girls in South Gondar (Amhara) (72% compared to 32% for 17–19-year-olds), they not only save informally – because they lack access to formal financial services – but often save secretly, hiding their savings from parents and husbands who might appropriate them.

The national and international events that have unfolded over the past few years have had myriad and diverse impacts on adolescent girls and boys in Amhara and Oromia, that are important to keep in mind when analysing program effectiveness from 2020 and beyond. Pandemic-related school closures in spring 2020, for example, knocked students in both regions off their educational trajectories. GAGE research found that although 73% of rural adolescents tried to keep learning while schools were closed, two-thirds (69%) depended entirely on self-study because other options were not available (Jones et al., 2022). Of the three-quarters of previously enrolled students who returned to formal education when classrooms re-opened in fall 2020, those in Amhara were far more likely to be offered catch-up classes (74%) than those in Oromia (24%) (ibid.).

A drought that began in late 2020 has also further disadvantaged adolescents in Oromia. ACAPS (2023) reports that the drought (the worst in at least a decade) affected nearly 3.5 million people in that region, and GAGE research found especially devastating impacts on girls' access to education due to increased demands on their time for collecting water (Presler-Marshall et al., 2022c).

Furthermore, the waves of ethnic violence that have roiled Ethiopia in recent years have impacted adolescents in both regions, albeit at different times and in different ways. Young people living in Amhara experienced spillover violence from the conflict that started in Tigray in late 2020 and later on spread to North Wollo and parts of South Gondar (Center for Preventive Action, 2023; Human Rights Watch, 2022). GAGE research has found that violence impacted adolescents' access to education, especially at secondary and tertiary levels, and that community-level violence tended to increase the violence that adolescents experienced inside the home



as well (Woldehanna et al., 2024). Young people living in Oromia have also been impacted by inter-ethnic violence, which was intense in 2017 and 2018 (Harter, 2023).

These distinct economic, social and cultural settings provide an interesting backdrop for our study, which seeks to understand the impacts of programming designed to transform gender norms in order to improve adolescent girls' outcomes.



4 Interventions

In this section, we detail the set of multi-level, layered interventions that we study in this paper. Figure 2 provides a summary. ⁴ These interventions were implemented in South Gondar zone by Pathfinder International, and in East Hararghe zone by CARE.

Her Spaces is a safe spaces programme pioneered in Ethiopia in which young adolescent girls aged 11–13 participate in 10 months of weekly curriculum-based, mentor-led group sessions (40 sessions in total) (Pathfinder International, 2020).^{5,6} The curriculum covers a range of topics, including nutrition, puberty and menstrual health, relationships, negotiation skills, harassment and safety in the community, community services (health, justice and financial), financial management and creating an aspirational plan; there is some emphasis on discussion of attitudes and norms related to gender equality among boys and girls. The group leaders (mentors) are young women, typically from the local area or nearby in their early 20s. A small number of sessions invite male relatives to join, but other interactions with the family and community are fairly light-touch, consisting of a small number of community sensitisation meetings held during implementation to raise awareness of and familiarity with the programme (ibid.).

The intervention that we call Act With Her Essential (AWH Essential) builds on and expands the Her Spaces model, adding a gender synchronization component. ^{7,8} Girls aged 11–13 participate in 10 months of weekly curriculum-based, mentor-led sessions (again, 40 in total), but there are also separate curriculum-based groups for boys of the same age, as well as for the primary caregivers of the girls and the boys. Boys' groups meet approximately twice a month (for a total of 18 sessions), covering topics that are temporally aligned with the girls' groups. Four sessions bring the boys and girls together for interactions that are specifically designed to delve deeper into topics around gender equality. Building on the Her Spaces curriculum, the Act With Her curriculum was designed by Pathfinder International in collaboration with the Government of Ethiopia, CARE International and the GAGE research consortium, with funding from the Bill & Melinda Gates Foundation. It includes many of the same topics as Her Spaces, but goes into more depth on several issues – particularly sexual and reproductive health, sexual and gender-based violence and harmful traditional practices. Act With Her also places much more emphasis on changing attitudes and norms around gender equality. ⁹ Six caregiver sessions are held over the 10-month period to orient parents to topics covered in the adolescent curricula, and to help them create a supportive home environment for the adolescent. ¹⁰ The global versions of the Act With Her curriculum and key tools are open-access and freely available at

https://www.pathfinder.org/publications/act-with-her-program-package.

⁴ The set of interventions we study here also included adolescent-focused systems-strengthening work at the district level and above, which entailed strategically engaging key stakeholders across multiple sectors at the woreda (district), regional, and national levels, with the objective of raising the visibility, prioritization and subsequent improvement of adolescent-responsive systems and services (particularly those related to health, education, sexual and gender-based violence and child protection). Because this systems-strengthening work focused on broader institutional structures at the national and subnational levels, it potentially impacts all of our study sites (control and intervention alike) and we cannot disentangle impacts of it here.

⁵ The Her Spaces curriculum was developed through a collaboration between the Ethiopian Federal Ministry of Health and the international non-profit organization, Girl Effect. It was piloted with approximately 2,000 girls in four regions of Ethiopia (including our study regions) prior to the launch of the present study (IPE Global, 2019).

⁶ Note that Her Spaces and Act With Her programming attempted to include all adolescents of the relevant gender aged 10–13 in programme sites. However, our evaluation focuses only on adolescents aged 11–13 at the time of programme launch, as this was the group for which baseline data were collected. Throughout this report we refer to programming as including those aged 11–13 years to avoid confusion.

⁷ In earlier descriptions of this study, we referred to this treatment arm as "Act With Her (curriculum only)".

⁸ Gender synchronization refers to the practice of working with boys and girls (or men and women) in an "intentional and mutually reinforcing way that challenges gender norms, catalyzes the achievement of gender equality, and improves health" (Greene and Levack, 2010).

⁹ We will not be able to differentiate the impacts of the Act With Her curriculum itself from the inclusion of boys and parents in the programming. We consider any differences we find between the Her Spaces treatment arm and the AWH Essential treatment arm as a combined impact of an enriched curriculum as well as the inclusion of male adolescents and caregivers.

¹⁰ Caregiver sessions are not segregated by the gender of the parent, but sessions are held separately for the parents of adolescent boys and girls.



The intervention that we call Act With Her Comprehensive (AWH Comprehensive) includes all of the activities in the AWH Essential model, but adds a two-pronged community-level component.¹¹ This community-level work is operationalised by: (1) a social norms change component that brings together key decision-makers and stakeholders from the community for regular, structured meetings led by trained facilitators to establish locally-led mechanisms for discussing social norms in ways that initiate shifts over time; ¹² and (2) a local-level systems strengthening approach that enhances community-level capacity for social accountability through increased participation, accountability and transparency between service users, providers and decisionmakers.¹³ The systems strengthening component focuses on: (1) supporting multi-stakeholder, cross-sector action in the public sector; (2) enhancing social accountability structures via community scorecards; (3) offering gender and age sensitivity training with a focus on school-related gender-based violence; (4) strengthening implementation of the national School Health and Nutrition Package; (5) improving menstrual health and hygiene management in schools; and (6) establishing 'Roll Back Early Marriage' clubs for girls at school. The social norms change community group meetings and the local system strengthening efforts were launched in AWH Comprehensive sites approximately 2 months after the first adolescent groups started, and continued for approximately 2 years (though implementation was disrupted for several months due to Covid-19 pandemic-related closures and restrictions).

The final intervention variation, which we refer to as AWH Comprehensive Plus Transfers (AWH Comprehensive+), implements the full AWH Comprehensive programme but with in-kind transfers to the participating girls. Girls in eligible communities were allowed to choose among three equal-value (approximately US\$115, in 2019 prices) supply package options: one including school supplies, one including personal hygiene supplies, and one that is a combination of the first two. ¹⁴ Each girl chose the package she wanted to receive within the first weeks of the group meetings (those who did not choose were assigned the combination package), and received three deliveries of that package over the course of the 10-month adolescent group meeting intervention.

 $^{^{11}}$ In earlier descriptions of this study, we referred to this intervention arm as "Act With Her".

¹² Work on catalyzing shifts in social norms is primarily focused on applying CARE's well-known Social Analysis and Action (SAA) approach to gender and social transformation, which seeks to enable communities to identify for themselves the linkages between social factors and well-being, and then determine what actions will help improve them (Mekuria et al., 2018). Groups meet monthly to discuss harmful socio-cultural norms relevant to their local community, and to devise an action plan as to how they can be tackled.

¹³ Strengthening local capacity for social accountability is approached through the implementation of CARE's Community Score Card (CSC) intervention. Used throughout CARE's programming, the Community Score Card offers a way to increase participation, accountability and transparency between service users, providers and decision-makers. In Act With Her, particular attention is paid to ensuring that adolescent girls and boys directly participate in the Score Card processes, with the objective of improving local stakeholders' ability to hold providers of key services for adolescents accountable for optimal access and quality.

¹⁴ The school supplies package included pens, pencil, crayon or colored pencil, ruler, eraser, exercise books, backpack/bag, compass, solar lantern and English and math reference books. The personal hygiene package contained water purification tablets or bottled water purification, cloth to make sanitary pads, body lotion or Vaseline, hair oil and body soap. The combination package contained exercise books, solar lantern, water purification tablets or bottled water purification, pens and cloth to make sanitary pads.



5 Research design

5.1 Experimental design

In order to study and contrast the impacts of these layers of adolescent-centric programming, we employ a multi-arm parallel cluster randomised controlled trial (cRCT) in 155 communities across the two rural zones of Ethiopia (South Gondar and East Hararghe). This section summarises our research design; for more detail, please refer to our registered pre-analysis plan (Jones et al., 2020a).

Five woredas (districts) were purposely selected within each zone on the basis of implementing partner programming capacity and key vulnerability criteria (including high child marriage rates as a proxy for conservative gender norms, and high levels of food insecurity as a proxy for household economic distress); these criteria are described in more detail in Section 3. Within these 10 woredas, all kebeles (communities) were characterised into one of three groups: (1) unsafe for data collection and programming; (2) marginalised (lack of programming, isolated from key services and road/transport infrastructure); and (3) less marginalised (in terms of access to services and to the main woreda town). Kebeles identified by local officials as a high security concern fell into this first group and were excluded from consideration. Among the remaining eligible sites, 16 kebeles (6 marginalised, 10 less marginalised) in each woreda were randomly selected to be included in the study. Prior to any quantitative data collection, these 155 communities were stratified (by woreda, and kebele marginalisation status) and then within each strata were randomised into one of five study arms: (1) pure control; (2) curriculum-based programming for girls only (Her Spaces); (3) curriculum-based programming for girls, boys and parents (AWH Essential); (4) curriculum-based programming for girls, boys and parents as well as community-level work (AWH Comprehensive); and (5) curriculum-based programming for girls, boys and parents, with community-level work plus in-kind transfers for girls (AWH Comprehensive+). 15 Randomisation within each woreda and by kebele marginalisation status ensured balance on these two critical observables; we discuss balance across intervention groups further in Section 5.8 below.

5.2 Enrolment of study participants

Within each of our sampled kebeles, the population of age-eligible adolescents was identified through a census-style household listing. The listing was conducted by GAGE survey enumerators, who started at a standardised location within each kebele and moved in a standardised fashion from there, stopping at each household along the way to record age-eligible adolescents living there until a pre-designated number of households was reached (see Jones et al., 2020a for more details). A total of 15 girls and 11 boys aged 10-12 (in late 2017) were randomly sampled from this census list in each kebele, and the final quantitative study sample includes 3,991 adolescents (2,294 girls and 1,697 boys). Recruitment for quantitative data collection also included female primary caregivers of adolescents (a total of 3,218 women), and a randomly selected subset of male primary caregivers. Power calculations conducted during study inception suggested that this adolescent sample size would be able to detect small-to-medium effect sizes on girl and boy outcomes in the quantitative analysis, reasonable in the context of the existing literature (see Jones et al., 2020a for more details).

Table 1 provides key adolescent and household characteristics at baseline (in late 2017 and early 2021) from the sample of female adolescents and their households. Across both zones, approximately 30% of households had received support from Ethiopia's Productive Safety Net Programme (PSNP), which targets food-insecure households (Table 1, Panel A). Yet the household-level Food Insecurity Experience Scale (FIES), developed by

¹⁵ In South Gondar, we allocated 19 communities to control and 14 communities per treatment arm; in East Hararghe, there were 20 communities allocated to control and 15 communities per treatment arm.

¹⁶ If the household had more than one eligible adolescent, one adolescent was randomly selected to be the designated eligible adolescent; thus, the evaluation includes only one adolescent per household. We include a control for multi-adolescent household in analysis



the Food and Agriculture Organization as a metric to capture the experience of constrained access to food (Cafiero et al., 2018), suggests higher levels of food insecurity in East Hararghe (5.0 out of 8) compared to South Gondar (2.9). Furthermore, girls in East Hararghe reported substantially higher rates of hunger (26% report feeling hungry in the past 4 weeks due to lack of food) compared to those in South Gondar (12%); and far fewer were enrolled in school in early adolescence (70% in East Hararghe versus 97% in South Gondar, Table 1, Panel B).

While both zones are characterised by strongly conservative gender norms and attitudes, and high rates of harmful traditional practices – which is why they were included in the GAGE study – they differ significantly in terms of cultural factors. As described in Section 3, girls in Amhara typically marry later than those in East Hararghe (where adolescent-driven marriages are currently on the rise). Although marriage rates at baseline (when girls were aged 10-12) show only a marginally statistically significant difference across the zones, with South Gondar slightly worse off (0.6% versus 0.2% in East Hararge; Table 1, Panel B). Furthermore, FGM/C is practiced at different times and in different forms across the two zones. In Amhara, it is practiced in infancy, and is Type 1 (partial or total removal of the clitoris); in our South Gondar sample, one-quarter of girls reported having experienced this by aged 10-12. In Oromia, FGM/C is often carried out in early adolescence, and is Type 2 (partial or total removal of the clitoris and labia) or 3 (sewing the labia together); in our East Hararghe sample, more than a third of girls reported having experienced FGM/C by the time they were aged 10–12.

Panel C of Table 1 summarises attitudes toward gender equality elicited from primary female caregivers of the adolescent girls in our sample at study baseline. Across a range of statements related to gender equality across men and women and boys and girls in the household, female caregivers in both zones display conservative attitudes; for instance, 73% of female caregivers in South Gondar and 82% in East Hararghe agree that 'a man should have the final word on decisions in his home'. Yet attitudes in East Hararghe in somewhat more conservative than in South Gondar. For example, 83% of female caregivers in South Gondar agree that 'girls and boys should share household tasks equally', though only 60% of female caregivers in East Hararghe agree with this statement.

Table 1 Qualitative sample

Respondent Type	Sex	Location			
		Rural		Urban	Total
		South Gondar	East Hararghe	Debre Tabor	
Adolescents	Girls	56 (90)	11 (27)	9	76 (126)
	Boys	50 (81)	12 (29)	6	68 (116)
Total		106 (171)	23 (56)	15	144 (242)
Young adults	Females	13 (22)	8(16)	8	29 (46)
	Males	13(25)	6(12)	11	30 (48)
Total		26 (47)	14 (28)	19	59 (94)
Sub-sample of those with disability		5 (11)	-	3	8 (14)
Sub-sample of girls married <18		5 (8)	2	2	9 (12)
Sub-sample of IDPs		4 (16)	-		4 (16)
Parents/Caregivers	Mothers	10 (58)	6 (35)	3 (18)	19 (111)
	Fathers	10 (56)	5 (34)	3 (18)	18 (108)
Total		20 (114)	11 (69)	6 (36)	37 (219)
Key informants		99 (125)	32 (63)	10	14 (198)
TOTAL		265 (492)	82 (218)	55 (85)	402 (795)

For qualitative data collection, adolescents were purposefully chosen at baseline from the census lists created for the quantitative sample in 5 kebeles in a single woreda (district) per zone (1 site per study arm). Adolescents were selected for inclusion in the qualitative data collection to ensure a mix of ages, male versus



female household heads and inclusion of the most disadvantaged (i.e. young people with disabilities, already married, out of school) in order to capture the voices of those at risk of being 'left behind' – for a total of 224 adolescents in 10 study sites across the two zones. At the second follow-up data collection, two additional sites (where quantitative data was already being collected) were added from a different zone in each woreda, in order to expand the qualitative data collection sample.

5.3 Research data collection and programme implementation

Figure 3 shows the timeline of the study, including the timing of intervention components, quantitative and qualitative data collections and overarching national and international events.

Recruitment of adolescent participants and baseline data collection on adolescents, their caregivers and their communities were conducted between November 2017 and January 2018. In total, 3,962 adolescents (99% of the sample) completed a baseline quantitative interview. At baseline, 86% of adolescent girls in our sample were enrolled in school, though absenteeism was frequent (affecting 27% of school days in the two weeks preceding the survey). Health was generally poor, with 51% of adolescent girls reporting at least one of 14 common health ailments (such as fever, headache or cough) in the two weeks preceding the survey.

Programme implementation (of Her Spaces and all variations of Act With Her) by Pathfinder (in South Gondar) and CARE (in East Hararghe) began about one year after the completion of baseline data collection, in February 2019.17 Mentors, women and men aged 17-24 with an 8-10th grade literacy level, were recruited from the local areas through open postings. Adolescent recruitment was done separately from the research study recruitment, but also used a household listing methodology aiming to locate all adolescent girls and boys (where appropriate for the intervention arm) aged 10–13. Staff implementing the programme aimed to include as many eligible adolescents from each community as possible—including the entire research sample, and so most communities had two girls' groups and two boys' groups (where applicable), with up to 35 members each. Approximately 84% of girls (and 81% of boys) in the research sample living in treatment communities in South Gondar enrolled in programming. Recruitment rates among the research sample in East Hararghe were somewhat lower, with 64% of girls (68% of boys) enrolled.¹⁸ As noted earlier, enrolment rates among the research sample were substantially lower in East Hararghe than in South Gondar. Average attendance rates among those who did enrol also differed across the two zones: average attendance across girls' sessions (among all girls enrolled in the programme) in South Gondar was 93%, and in East Hararghe was 79%; for boys' groups, the corresponding rates were 89% and 77%. 19 Perhaps more anecdotally from our implementing partners' records, reasons cited for girls dropping out of the groups after enrolment were very different across the zones: in South Gondar, almost three quarters of recorded dropouts were reportedly moving, while in East Hararghe, just 15% of recorded dropouts cited migration as the reason, while another 77% cited lack of interest

¹⁷ The time lag between baseline data collection and programme implementation may raise concerns of non-compliance with treatment group assignment, particularly if adolescents move between communities in the intervening period. Note that study participants are assigned to trial groups in the analysis on the basis of their residential location at the time of the household listing activity, not at the time of programme implementation.

¹⁸ We also note interesting enrolment differences across programme arms. For South Gondar, 90% of girls from the research sample in Her Spaces communities enrolled in programming, while 80%–83% of girls in Act With Her (all variations) communities were enrolled. For East Hararghe, 57% of girls from the research sample in Her Spaces communities enrolled in programming, while 82% of girls in AWH Essential sites, 66% of girls in AWH Comprehensive sites, and 51% of girls in AWH Comprehensive+ sites were enrolled. We see a similar trend for boys. In South Gondar, 74% of boys in AWH Essential sites, 79% of boys in AWH Comprehensive sites, and 89% of boys in AWH Comprehensive+ sites were enrolled. In East Hararghe, 82% of boys in AWH Essential sites, 71% of boys in AWH Comprehensive sites, and 54% of boys in AWH Comprehensive+ sites were enrolled. Given that programme enrolment rates were not 100% and varied across treatment arms, we provide results from a treatment on the treated (TOT) analysis in the appendix to this paper.

¹⁹ Attendance rates across treatment arms (among all adolescents participating in the programming) was as follows: for South Gondar girls, Her Spaces attendance averaged 93%, AWH Essential averaged 90%, AWH Comprehensive was 93%, and AWH Comprehensive+ was 93%. For South Gondar boys, AWH Essential attendance averaged 88%, AWH Comprehensive was 89%, and AWH Comprehensive+ was 90%. For East Hararghe girls, Her Spaces attendance averaged 73%, AWH Essential averaged 81%, AWH Comprehensive was 77%, and AWH Comprehensive+ was 85%. For East Hararghe boys, AWH Essential attendance averaged 77%, AWH Comprehensive was 76%, and AWH Comprehensive+ was 78%.



or family objection for the reason they dropped out. Mentor turnover was also higher in East Hararghe than in South Gondar.

Weekly adolescent group meetings began in March 2019 and continued for 10 months. Meetings were required to be held in a private, safe place located less than one hour's walk from adolescent homes; in practice, meetings were held on school grounds, thus many were outdoors. Parent group meetings started shortly thereafter. Community-level Social Analysis and Action (SAA) meetings and systems strengthening activities began by June 2019. Although this component was meant to continue for 24 months, in practice there was disruption for a number of months due to pandemic-related closures, as illustrated in Figure 3.²⁰ The adolescent and parent group meetings were completed by January 2020, so were not affected by those closures.

Our own data collection efforts, as well as information provided by our NGO partners, confirm that programming in East Hararghe was potentially more challenging and did not run as smoothly as in South Gondar. Implementation was abandoned prior to programme launch in two communities in East Hararghe – one due to internal conflict that led to security issues and the other due to religious backlash to the program within the community (though the curriculum does not include religion). Work in five communities in the zone were discontinued approximately two-thirds of the way through the 40 weeks of adolescent group meetings – three due to religious backlash and two because mentors left and were not replaced. And boys' group meetings were suspended in an additional two sites in East Hararghe, one due to religious backlash and the other due to male mentors' perceived inequality between boys and girls groups. And so nine (out of 60 total programme kebeles in East Hararghe) did not receive the full intervention they were assigned. Furthermore, community-level interventions in all AWH Comprehensive communities in East Hararghe were suspended shortly before the pandemic was declared, to be re-organised and started from the beginning after services reopened in late 2020.

We note that although our main quantitative discussion focuses on intention-to-treat results (ITT, where we estimate the impact of community-level assignment to a particular set of program layers – and all communities are included, regardless of whether programming was abandoned or discontinued prior to program end), we present quantitative results from treatment on the treated analysis (TOT) – at its core an estimate of the treatment effect for those that took up treatment. These findings are shown in Appendix C.

In both study zones, delivery of the supply packages for girls in the AWH Comprehensive+ treatment arm happened later than originally intended. The original design was to provide the transfers at 3 timepoints spread across the 10-month group meetings. However, due to procurement and supply delays, the first delivery was provided approximately 4–6 months into the 10-month period, and the second and third transfers were provided in tandem towards the end of the scheduled adolescent group meetings. Information given to us by our implementing partners illustrates that girls were much more likely to have chosen the educational supplies package (84% of packages delivered) rather than the personal hygiene package (12%) or the combination package (3%). This gap was even more pronounced in East Hararghe (where 94% of girls requested the education package and 6% requested the hygiene package) than in South Gondar (where 71%

²⁰ Community meetings and systems-strengthening activities were impacted by the onset of the pandemic in early 2020, but did continue on to the extent that was possible.

²¹ One issue that did arise in South Gondar is that in two communities, the treatment arms were switched during implementation (one was an AWH Essential community, and the other was an AWH Comprehensive community). We use assigned treatment status for these communities in the analysis presented in this paper.

²² One community was assigned to the Her Spaces intervention, and the other was assigned to the AWH Comprehensive+intervention.

²³ These communities were spread across three of the four treatment arms – 2 Her Spaces, 1 AWH Essential, and 2 AWH Comprehensive.

²⁴ One community was assigned to the AWH Essential treatment arm, and the other was assigned to the AWH Comprehensive+.



of girls requested an education package, 21% the hygiene package and 8% requested the combination package).

The first round of follow-up quantitative follow-up data collection (Round 2) was conducted by the research team from November 2019 to March 2020. In South Gondar, the bulk of interviews took place starting in week 36 of the 40-week adolescent girls' groups, when girls had covered nearly the full AWH curriculum save for a session focusing on exercise, a session focusing on village savings and loan associations, and a joint session with the boys involving a community mapping and safety activity. In East Hararghe, the bulk of Round 2 interviews took place starting in week 32 of the 40-week adolescent girls' groups, and so in addition to the last four sessions above, these girls would likely not yet have reached a second joint session with the boys' groups (focusing on a continuation of discussions of gender roles) as well as some remaining topics on health (anaemia) and financial empowerment (model women in the community). At the time of data collection, all parent meetings across both zones had been finished for at least a month. The second asset transfer (which contained the equivalent of two packages per girl) was made during data collection in both zones.

Round 2 data collection round provides evidence on the 10-month impacts of layered programming. ²⁵ All sampled adolescents and their caregivers were sought for re-interview, and attempts were made to track adolescents no longer living at their baseline residence. Follow-up survey data was collected for 87% of girls (89% of the adolescent sample overall); refusal rates were low (2.6% of girls), and most of those who were not interviewed were simply unable to be found (8.5% of girls, most likely due to migration). We explore survey attrition formally in Appendix A.

A second round of follow-up data collection (Round 3) was conducted in two waves, from March to May 2021 and October 2021 to May 2022. At this time, all interventions had been finished for over a year, with the exception of the community-level work in AWH-Comprehensive and AWH-Comprehensive Plus sites (which, as we explain above, had a prolonged stoppage due to the COVID-19 pandemic). Figure 3 shows the timing of the second follow-up data collection waves in relation to the community-level work. With regard to quantitative data collection logistics, the research sample was prospectively randomly divided into these two waves in expectation of work stoppages around a national election that was scheduled for mid-2021, with approximately 35% of the sample randomly sampled for data collection prior to the election, and the remaining sample randomised for data collection afterwards. Furthermore, a two-stage tracking methodology was implemented in this data collection round to minimise survey attrition.²⁶ Round 3 data collection provides evidence on the 24-to-36-month impacts of layered programming. ²⁷ As before, all sampled adolescents were sought for re-interview (across the two survey waves), and attempts were made to track adolescents no longer living at their baseline residence. Follow-up survey data was collected for 94% of girls (88% of the full adolescent sample); refusal rates were low (3.7% of girls), and most of those who were not interviewed were simply unable to be found (2.3% of girls, again, most likely due to migration). We explore survey attrition formally in Section 5.9, below.

5.4 Ethics

The GAGE research design and tools were approved by the George Washington University Committee on Human Research Institutional Review Board (071721), the Overseas Development Institute Research Ethics Committee (02438), the Ethiopian Policy Studies Institute (EDRI/DP/00689/10), the Addis Ababa University College of Health Sciences Institutional Review Board (113/17/Ext) and the Amhara and Oromia regional

²⁵ The pre-analysis plan for this study specifies that near-term impacts will be measured at 8 months post-programme launch; data collection was actually conducted over a 2-month period, so 8–10 months post-programme launch. We refer to the 10-month end point of the follow-up data collection here for brevity.

²⁶ See Baird et al. (2016) for further details on this methodology.

²⁷ This second follow-up data collection was later than specified in the pre-analysis plan, due to delays resulting from the Covid-19 pandemic, the 2021 national election in Ethiopia, and armed conflict that erupted within the country around this time.



Bureaus of Health ethics committees. Consent was obtained from caregivers and married adolescents; assent was obtained for all unmarried adolescents under the age of 18. There was also a robust protocol for referral to services, tailored to the different realities of the diverse research sites.

5.5 Outcome measures

Following the GAGE conceptual framework (Figure 4), which is explained in more detail in Jones et al. (2020), baseline and follow-up survey data includes rich information on outcomes across six adolescent capability domains: education; bodily integrity; physical health, nutrition, and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. The data also includes cross-cutting information on attitudes and knowledge. In the pre-analysis plan registered before the launch of follow-up data collection (Jones et al., 2020a), we defined 14 primary outcomes to analyse for adolescent girls at the time of the first follow-up, and 19 primary outcomes to analyse for adolescent girls at the time of the second follow-up. These primary outcomes include 1–2 measures per capability domain and an additional set of crosscutting measures of knowledge, attitudes, and support network. Several of the measures are indices, intended to capture a key construct of the domain.²⁸ We discuss the measures in detail in Section 6, below.²⁹

5.6 Quantitative empirical specification

We use regression analysis to quantitatively estimate the impacts of the layered programme treatment arms described above on our pre-specified set of outcomes by each follow-up data collection round. Our main analysis focuses on the intention-to-treat (ITT) programme impacts, separately by round, across all research sites and also separately for South Gondar and East Hararghe, using the following reduced form linear model:

$$\begin{aligned} y_{ic} &= \alpha_1 + \beta_1 \text{HerSpaces}_c + \beta_2 \text{AWHEssential}_c + \beta_3 \text{AWHComprehensive}_c + \\ \beta_4 \text{AWHComprehensivePlus}_c + X'_{ic} \gamma_1 + \epsilon_{ic} \end{aligned} \tag{1}$$

where y_{ic} is the outcome of interest for individual i in community c, $HerSpaces_c$ is a binary indicator for living in a Her Spaces community, $AWHEssential_c$ is a binary indicator for living in an Act With Her Essential community, $AWHComprehensive_c$ is a binary indicator for living in an AWH Comprehensive community and $AWHComprehensivePlus_c$ is a binary indicator for living in an AWH Comprehensive+ community (where community residence is assigned at study baseline). Regressions include all adolescent girls (or boys) surveyed during the follow-up data collection round. The standard errors ε_{ic} are clustered at the kebele level, which accounts for both the design effect of the kebele-level treatment and the heteroskedasticity inherent in the linear probability model (for binary outcomes). X_{ic} includes both a 'basic' and 'rich' set of controls. The 'basic' controls consist of block indicators used in the randomisation (where blocks combine woreda and marginalisation status), adolescent age (in years) and an indicator for whether there were multiple eligible adolescents in the household. The 'rich' set of controls include: household size; an indicator for household head literate; an indicator for female-headed household; a household asset index; an indicator for household receives PSNP benefits; and survey month indicators. Sampling weights are used to make the results representative of the target population in the study area. We utilise linear probability models in the case of binary outcomes. We provide estimates from TOT analysis in Appendix C.

Our study aims to evaluate the short- and medium-term impacts of a set of layered adolescent-centric interventions, in isolation and in comparison, to each other. For the first goal, we examine the size and

²⁸ To construct indices, we employed the following procedure: (1) for each index component, create a normalised measure by subtracting the control group mean and then dividing by the control group standard deviation; (2) construct the index by calculating the raw mean across all normalised component variables; and (3) create the normalized index value by subtracting the control group mean of the index and then dividing by the control group standard deviation of the index.

²⁹ Furthermore, we defined a set of secondary outcomes for each group, largely composed of primary outcome index components; see Jones et al. (2020) for more details on these.

³⁰ We are unable to use ANCOVA analysis, due to lack of baseline data on several components of the primary outcome indices.

³¹ For the second follow-up, we additionally include an indicator for survey wave assignment and year of survey as controls.



statistical significance of the estimated β 's from equation (1). For the second goal, we test a set of hypotheses that the estimated β 's from increasing layers of adolescent-centric programming are not equal to each other (i.e. we test $\beta_1 \neq \beta_2$, $\beta_2 \neq \beta_3$, and $\beta_3 \neq \beta_4$).³² To be conservative, given the number of hypothesis tests and primary outcomes we pre-specify here, we construct FDR q-values, as described in Anderson (2008). This multiple-hypothesis testing is conducted across the primary outcomes for each hypothesis and sample separately.

5.7 Qualitative methods and analysis

The 3 rounds of quantitative survey data were complemented by in-depth longitudinal qualitative research with adolescent programme participants (163) and non-participants (85), parents (208), mentors and supervisors (30), service providers and government officials (77), to better understand some of the emerging patterns and mixed findings painted by the survey findings. Qualitative tools, which are also available online (Jones et al., 2018; Jones et al., 2019), consisted of an array of interactive activities, including object-based interviews, worries exercises, vignette-based discussions, social norm and body mappings and timelines. Tools were used in individual and group interviews conducted by researchers (of the same sex and from the same region as the respondent) who had been trained to communicate effectively and sensitively with adolescents. Preliminary data analysis took place during daily and site-wide debriefings with the research team, and findings were used to develop a thematic codebook that was informed by the GAGE multi-capability conceptual framework (GAGE consortium, 2019). All interviews were transcribed and translated by native speakers of either Afaan Oromo or Amharic, then coded using a qualitative software package, MAXQDA, according to the codebook, but with flexibility to incorporate local specificities. This deductive coding process was quality assured through weekly debriefing sessions with the coding team and double-coding of a subsample of transcripts. The use of quotes presented in the results section is illustrative.

5.8 Balance testing

Our baseline balance tests, in essence, a confirmation of the success of the randomization, are presented in Appendix Table A2 and discussed in the text of Appendix A. Overall, we interpret the evidence presented in these tables to suggest that there is little imbalance across baseline household characteristics ('rich controls', which we include in our primary regression specification in any case), and weak evidence that any intervention group was better or worse off in a broad sense (across a range of baseline measures of outcome variables) than any other intervention group.

5.9 Follow-up survey attrition

The quantitative follow-up survey data collections involved locating thousands of adolescent girls in the rural study sites (or wherever they had moved) one to three years after initial study recruitment. Survey enumerator teams were well-trained in tracking methods, and where necessary worked in concert with locals and the qualitative research team to successfully survey more than 87% of girls in each follow-up round. While there is evidence of small differential attrition across treatment arms (Appendix A), given low overall rates this is unlikely to impact findings.

³² As secondary analysis, we conduct treatment on the treated (TOT) analysis for the primary outcomes, using detailed individual-level information on programme enrolment. This analysis is performed by running separate regressions for each treatment group (where the sample included in the regression is that treatment group as well as the control group), using treatment group assignment to instrument for an adolescent-level measure of recruitment into that programme. Results of this analysis are provided in Appendix C.



6 Analysis

In this section, we describe results from the analysis detailed in Section 5.6 on a set of pre-specified outcomes for adolescent girls and boys.

For girls, we pre-specified a set of 19 primary outcomes across six different adolescent capability areas (education; voice and agency; bodily integrity; psychosocial; economic empowerment; and physical health, nutrition and sexual and reproductive health) as well as a group of cross-cutting outcomes (knowledge, attitudes toward gender equality, supportive network). Table 2 provides results for the full sample of girls; Tables 3 and 4 summarise results for the subsamples with baseline residence in South Gondar and East Hararghe respectively; and Tables 5 and 6 summarise results for the subsamples with baseline residence in marginalised and less marginalised communities (across both administrative zones). For each table, the Panel A presents results at the time of the first follow-up data collection round (approximately 10 months after programme launch, when adolescent groups were roughly 80% complete, parent meetings had ended, the second asset transfer packages were being distributed, and community work was ongoing – and prior to covid-19 pandemic-related disruptions), and Panel B presents results at the time of the second follow-up data collection round (approximately 24-to-36 months post program launch, over a year after all adolescent and parent groups and asset transfers had been completed, but while the community-level and broader systemsstrengthening work was still ongoing, and there had been disruption to the latter work as a result of the covid-19 pandemic, national elections and the flare of conflict in northern Ethiopia). Outcome measures of interest are listed as column titles, and for each outcome and programme variation (treatment group), we present the coefficient estimate, standard error (in parenthesis), and FDR adjusted q-value across all outcomes tested for that single hypothesis (in brackets).³³ We also present FDR adjusted q-values testing the set of hypotheses that the estimated β 's from increasing layers of adolescent-centric programming are not equal to each other (i.e. we test $\beta_1 \neq \beta_2$, $\beta_2 \neq \beta_3$, and $\beta_3 \neq \beta_4$) – the q-values show adjustments from testing across all primary outcomes within a particular hypothesis test. Appendix B provides regression results for the full set of secondary outcomes listed in our pre-analysis plan; secondary outcomes include components of the primary outcome indices, as well as a small set of additional outcomes of interest. Appendix C provides TOT regression results for all primary and secondary outcomes.

For boys, we prespecified a smaller set of 6 primary outcomes, focusing on a subset of the cross-cutting outcomes we explore for girls (knowledge, attitudes, supportive network), violence and mental distress. Table 7 provides results for the full sample as well as separately by zone and baseline residential location marginalization status. For the boy analysis, Appendix B provides results on all pre-specified secondary outcomes.

6.1 Girls' Outcomes

6.1.1 Girls' knowledge

Panel A of Tables 2-6 displays findings from the first follow-up round of data collection. We find large, positive 10-month impacts (on the order of a 0.27-0.32 standard deviation improvement, q-value<0.03) across all programming variations (Her Spaces, AWH Essential, AWH Comprehensive and AWH Comprehensive Plus) on an index of knowledge that includes topics covered in the Act With Her girls' group curriculum, related to sexual and reproductive health, nutrition, bodily integrity, economic empowerment and gender roles (Table 2).³⁴ Knowledge gains appear across multiple topics, including menstruation frequency, legal age of marriage,

³³ Results for the treatment on the treated (TOT) analysis, which incorporates actual programme participation among adolescent girls in treatment sites, are included in Appendix Figures A1–A5.

³⁴ Note that a subset of these topics was also covered in the Her Spaces curriculum. Appendix B lists the components of this index, which are covered in the Act With Her versus Her Spaces curricula.



risks of FGM/C and places to seek help if experiencing violence (Appendix Table B1). ³⁵ Findings for the knowledge index outcome are similar in magnitude across region, though after multiple hypothesis testing correction, gains in South Gondar are most robust among those in AWH Comprehensive+ (q=0.019) sites, and gains in East Hararghe are concentrated in AWH Essential (q=0.096) and AWH Comprehensive (q=0.69) sites (Tables 3-4). Across marginalization status, gains are strong across all programming iterations in marginalised communities (and substantial, on the order of 0.33-0.56 standard deviations; Table 5), but not in non-marginalised communities (Table 6). We do not detect statistically significant differences across increasingly intensive programme layers.

Short-term gains in knowledge were also echoed in the qualitative findings. The most powerful set of messages was around menstrual health. Messaging focused on the fact that menstruation is a natural phenomenon and not a curse or something to hide, and how to manage the menstrual cycle so that girls' daily activities, especially schooling, did not need to be disrupted. The programme gave out reusable sanitary pads to participants and taught them—as well as their mothers—how to use them: as one Act with Her Comprehensive + mentor in South Gondar noted:

We train them menstruation is a natural for all women and the indication of girls reached to give birth. We also taught to care for their daughter when they start seeing menstruation. As we know menstruation may stay 3 to 5 days monthly, and we told parents advise daughters dress panties and use sanitation pad to protect the flow of menstruation, and also, we advised them daughters not to do much work at home.

In terms of stigma, girls emphasised that the programme had helped them to become aware that menstruation was a natural part of maturation rather than something to be ashamed of. A girl in South Gondar participating in an Act with Her Comprehensive + community explained: 'They told us menstruation cycle is not something to be ashamed of and if men asks us about it they told us to tell them that it's nature's gift'. The knowledge gained from the Act With Her clubs was also evident in the interviews with boys and parents. For example, an adolescent boy participating in the programme in an Act with Her Comprehensive site in South Gondar noted that: 'We used to perceive menstruation as something wrong and we used to laugh at girls when they had their period. But I am no longer laughing at girls as I understood it is a normal process.' Similarly, a mentor from an AWH Comprehensive + site in South Gondar explained that some girl participants were also passing on to their mothers the knowledge they had gained about the need to shift social norms around menstruation: 'A young girl said that one day I saw my mother prohibit my older sister from preparing coffee for the family, since my older sister was on her time of menstruation... The young girl then explained to her mother that menstruation is not a demonic event.' It is important to note, however, that while girls spoke in some detail about menstrual hygiene management and feeling empowered by this knowledge, because of the programme's focus on very young adolescents, the knowledge was still theoretical for many girls, at least at the time of the first qualitative follow-up data collection. The extent to which this would be reflected in girls' actual school-going could only be determined in subsequent data collection rounds (see below), as this reflection from a girl in an AWH Comprehensive site in East Hararghe attests:

The mentors told us that we have to change the menstrual pads every hour and that we do not have to miss school because of that... But now since there are very few female students, no one misses school. For example, there are only two girls in grade 4. But in the past, they used to feel afraid and miss classes... Though we know a lot about menstruation, none of us has experienced it yet... They instructed us how we should manage the cycle... and then when it got soaked that we change another one and wash this one... There is nothing we are afraid of now...

The qualitative findings also indicate improved knowledge in terms of awareness of the risks of sexual and gender-based violence, how to mitigate those risks, and how to report violence, although it was more frequently reported in South Gondar, possibly because of the widely perceived (among study communities) risk of sexual assault by strangers en route to school or the market. A girl participant from an AWH

³⁵ The knowledge gains relating to menstrual health literacy are explored more deeply in Baird et al. (2022).



Comprehensive+ site in South Gondar explained that they had learned about how best to protect themselves from possible attacks: 'We take different paths if we sense any danger and we also go to school in groups... If we get into trouble, screaming out loud.' Another girl in another AWH Essential site in South Gondar said:

First, they try to smoothly talk to you... They hold our hands and say they like us... Then we try to respond positively and smoothly also. But if they don't listen to our 'No' we threaten them that we are going to tell the police or we have an older brother. Then they will leave us alone.

Other respondents commented on the medical and judicial recourse options available to sexual violence survivors: 'They told us that they'll give her a pill right away and they'll make sure the offender gets proper punishment too. If a girl is raped, they told us that she has to take examinations at the clinic' (girl, Her Spaces site in South Gondar). By contrast, in East Hararghe, the knowledge that girls reported having gained tended to be linked to the risks of participating in the adolescent-only cultural dance, shegoye, where girls may be at risk of sexual harassment, assault and abduction for the purpose of early marriage. A key informant from an AWH Comprehensive+ site explained how knowledge from the sessions had led to community and parental action against these spaces:

Girls were getting pregnant while they were going to the dance... We stopped the dance. Religious leaders stopped the dance... After Act With Her, the dance stopped, rape was stopped. Parents advised and stopped their children from going to the dance.

The qualitative interviews suggest that knowledge gains related to sexual and reproductive health beyond menstrual health appeared to be much more uneven. Some girls – almost exclusively in South Gondar, where attitudes towards contraception were already more accepting prior to programme launch³⁶ – spoke openly and accurately about pregnancy prevention options:

If a girl who starts to see monthly period has sexual intercourse with a man, she might get pregnant... To prevent this, she can use contraceptive methods like injections... There is also a natural method that involves counting the date of the monthly period as well... after her period comes, the next 14 days it is safe to have sexual intercourse, but after that it's risky (Participant in focus group discussion with qirls, AWH Comprehensive+ site).

In East Hararghe, by contrast, where attitudes towards contraceptives are much less accepting (including among some programme mentors), the messaging that existed seemed to be around abstinence only (Jones et al., 2019; Presler-Marshall, 2021d). A girl participating in the Act With Her sessions noted that the mentors 'educated us not to have sexual intercourse during the age of puberty'. In other cases, there was considerable misinformation. A girl in one AWH Essential site, for instance, noted that:

If a girl wears pants of a male person and if there is sperm on the pants of that person, that girl can become pregnant'. Another girl from a Her Spaces site reported that they had learned in the sessions 'Not to hang out with males on the days one has a period... They told us that the bleeding increases if we don't stop doing that. We haven't asked them more explanation on this.

Similarly, given that FGM/C in Ethiopia is prohibited by law, some participants knew that circumcisers could be fined and imprisoned for carrying out the practice. A girl in one AWH Comprehensive+ site in East Hararghe noted that:

People may report to 'hadaa garee' or women's group leader about the circumciser and also the circumcised girl. And the circumciser may be put in prison for a maximum of 3–5 months... There is also a fine but we don't know how much. Since then, we have not seen any girl undergoing circumcision.

In one Act with Her Essential community in South Gondar, a mentor also reported that as a result of the training several girls had proactively sought to intervene to prevent an impending circumcision:

³⁶ GAGE formative and baseline research found a strong contrast in attitudes towards and accessibility of contraception for unmarried girls between South Gondar and East Hararghe.



When I was taking the training to become a mentor, I watched the video while a girl was circumcised, by then I get shocked and cried. However, after we teach these girls one of the participants was my younger sister and she explained for our relatives how female genital mutilation affects their daughter's health and life as well and then they stopped their preparation to circumcise their daughter.... When my mother and my younger sister heard, they were going to circumcise their daughter, they got upset, and opposed them fiercely. Particularly my younger sister explained them the effect of FGM based on what she learned in the training...My mother also explained them the effect of FGM on their daughter's health, and later life.

Another participant in the same community also explained that she had intervened to stop a relative's circumcision as a result of what she had learned in the training which had reinforced messaging from her science class at school:

I first told my father then they told my aunt. He told her that it is a harmful practice. Then my older sister also told them that this is something she learned in science class and that it is unhealthy for the girl. Then they broke the razor blade.

However, others admitted that while they had learned about the risk of excessive bleeding at the time of circumcision, this did not align with what they knew about girls needing to be circumcised in order to be deemed marriageable, as one girl in an AWH Comprehensive site in East Hararghe explained:

Yes, they [Act With Her mentors] have told us not to undergo circumcision... We learned that it has impacts... that it causes too much bleeding... But in the community, the boys will not marry you if you are uncircumcised. You cannot get married if you are not circumcised... We have not seen a girl who married without undergoing circumcision in our community.

In other words, although the programme curriculum covered negotiation and discussions on gender norms in general, it did not tailor the discussions so that participants were able to think through the implications of the legal ban on FGM/C and be supported – along with parents and community members – to negotiate and challenge entrenched norms that perpetuate the harmful practice. Moreover, in order to resonate with girls' realities, the curriculum would need to be nuanced to take into account the different ages at which girls are at risk of FGM – in early infancy in Amhara versus in middle childhood and early/mid adolescence in East Hararghe. In other words, in Amhara any awareness raising with girls on FGM would have to be about their attitudes towards their own children or persuading parents to avoid cutting any new-born children, whereas in East Hararghe it is possible that some girls in the groups would still be uncut but at risk up until the point of marriage.

Interestingly, the quantitative research does not detect any knowledge gains by the second follow-up round of data collection, across any intervention or site group (Tables 2-6). This may be explained at least in part by ageing of the study sample and/or diffusion of knowledge. For instance, at the first follow-up, 47% of girls in control sites could correctly identify menstruation frequency, while 82% could identify this by the second follow-up; findings were similar for identifying the legal age of marriage for girls (14% could correctly name this at the first follow-up, and 38% at second). In fact, knowledge improved among the control group across every single item we study between the first and second rounds of data collection (Appendix Table A1).

In addition to increasing levels of knowledge among adolescents as they age – through more years of schooling, exposure to media and role models, among others – the qualitative interviews also revealed varied levels of programme participation and implementation fidelity, which might also explain why knowledge gains were not consistently sustained over time. In some cases, the club dynamic was conducive to learning. For example, a female mentor from an AWH Essential site in South Gondar noted that:

What makes me happier is children laughing and getting happier due to the training. They never want to go home even after we complete... our sessions. Always I remember children's happiness during the training.



However, these sentiments were not universal. Some adolescents noted that not all participants found the content engaging. An adolescent girl from a Her Spaces site in South Gondar explained that 'They [some participants] quit the class because they don't think the lessons are relevant.' Others (especially girls) had patchy attendance at the sessions due to competing demands on their time, as a girl from an AWH Comprehensive site in East Hararghe observed: 'They may miss one class for looking after livestock. They may repeat such absence over time and quit it permanently ultimately.' Mentors also noted that even in cases where they did household visits to discuss and try to resolve poor participant attendance, parents were sometimes reluctant due to need for adolescent support with livestock and household chores:

One mother forbade her daughter to continue participating in the sessions. We went to her to talk to her and convince her to send her daughter to the training... However, she got upset and even she shouted at us, saying that; take her daughter if we can be her mother... She told me that she is alone; no one helps her in keeping cattle. She also explained us that, she has sheep, and even she is not in good health and no one help her in keeping her sheep except her daughter, so that she forbade her daughter to participate in the training.

Also, a sizeable number of adolescents were expecting material benefits from participating, which (except in the AWH Comprehensive+ arm) were not part of the programme design: 'It has no benefit, they are giving us false promises to give us solar lamp and 300 birr and school bag... We wait for a long time then we stop attending the session, they are cheating us' (participant in focus group discussion with girls, AWH Comprehensive site in East Hararghe). A mentor from an Act with Her Essential community in East Hararghe painted a similar picture in terms of the negative implications of the targeted material support on wider programme attendance:

All of the boys dropped out.... Children need some small support...If you told them as there is a smaller support as little as chewing gum, they will come.... Within two months they become absent totally. Before that they were decreasing in number. Such decline in number exhibited after the solar lamp was provided for others [in a neighbouring community]. They were asking us and we were also convincing them as it will be given for them, since officials told us as it will be given for them. Then finally all of them became absent.... Boys dropped out first then girls follow them. Girls were attending class after boys dropped out. Then after both of them dropped out.

In communities where the material transfers were part of the design, there were also widespread complaints from non-participants' caregivers who accused the programme implementers of nepotism, leading to tensions within the community and negative perceptions of the programme and its messaging. One mentor explained the dynamic as follows:

There are parents of children's who never participated in Act with Her complained and some parents tried to quarrel with us for why their children excluded not to participate in Act with her. We tried to convince them as we received children who are registered previously for the membership. However, they talked as we did this in favour of our relatives inappropriately. ... They also complained over the issue of the solar lamps. Look, there were 33 solar that we were given to distribute. Out of the 33 solar we gave 1 for the woreda and distributed 32 for trainees. We distributed the solar and other materials according to each trainee's choice. There were teaching aids, exercise books, the solar lamp, pens and pencils. There are also washable sanitation pad, lotions and creams for girls. When allowing them to choose the material, older adolescents preferred teaching aids, and those younger girls preferred the lotion and creams.... However, the material was not enough to reach to all. After the distribution parents complained on the distribution and some parents quarrelled with us.

A lack of community buy-in to the programme in some locales in East Hararghe also led to high levels of disillusionment by mentors who felt isolated within the community and without adequate support and guidance from the supervisors who lived in the regional capital (more than two hours by vehicle) and seldom visited during programme implementation:

Our morale broke down. When we went and talked to the children, they refused to accept us. When we talked to their families, our words did not get acceptance... I myself decided to quit from such work.



I quit and considered myself as I am out of the work. This is because while I am exerting my efforts when the people do not recognise your efforts. Such work is not making us happy. This is because students are not properly attending the education, we deliver them and there is high drop out. Previously we were striving though there was dropout as far as we were working for our people and as far as such children got awareness, we were willing to strive. At the beginning when we started the work, we started it just for the sake of supporting students. We did not consider it as a means of livelihood. ... We started the work to improve our community. When they disappeared finally, I felt much.

6.1.2 Girls' education

In terms of educational outcomes, the quantitative survey findings revealed no statistically significant impacts for any intervention at either follow-up, either on an index of education participation (which was only measured at second follow-up) or on aspirations to attain higher than a secondary school degree (Tables 2-6). We also do not detect any statistically significant differences across increasingly intensive layers of programming. Yet the qualitative interviews pointed to important shifts in attitudes about the value of girls' education in some communities. A participant in a focus group discussion with parents in East Hararghe explained that their children were more motivated to attend school, and to study after school, since joining the AWH programme:

Our children give more attention to their education, they study well after school. Those that did not attend AWH are not like them, they may think of going to honeymoon, playing shegoye... Before AWH they were not focusing on education, they did not understand well what the teacher advises them. Now their focus is on their education, they do not want to attend honeymoon celebrations, they stay at home. They stay at home and study. Those who did not attend AWH... are learning from AWH participants. Since AWH students have good rank in school, the other girls are following them.

Some adolescents also reported that parents had shifted their attitudes towards girls' chores and, in some cases, were actively supporting girls to fit in study time. For example, a girl from an AWH Comprehensive site in South Gondar noted:

We discuss that all parents should send their children to school. They should not give their children too much work and allow them to study. If they have chores to do, then they cannot do their homework or study. They say parents should advise their children to use their time wisely and have a timetable to do chores and some studying... Now we only do a few chores and go back to studying.

Changes were also reflected in some girls' educational aspirations, which were often linked to achieving economic independence, as one girl in a focus group discussion in that same site reflected:

I want to finish school first... I will never get married until I see the end of my education... Some parents say they will send us to school even if we get married. They promise to do that. But it does not happen. You cannot go to school while you are married... You have a lot of responsibilities... There is a lot of work to do in the house that you do not get the time to study or go to school... I want to finish 12th grade... I want to support my family first and repay my debt to them for raising me. I want to have money before I get married. If you get divorced and you do not have money, people talk behind your back and disgrace you. If I have money, I can support myself and do not have to wait for my ex. If you do not have money, you have to rely on your ex-husband and you live a pathetic and sad life.

Adolescents noted that changes in girls' and parents' attitudes towards the value of education and delaying girls' marriage was reinforced by follow-up by teachers – one girl in a focus group discussion said:

In the past, there were very few girls in the school as they got married early. Now... some girls are even attending in grade 9. Even the teachers are making good follow-ups on the girls who discontinue their education... Some younger girls still get married with interest. They marry at 13, 14 and 15 years of age... In the past, some friends were involved as brokers and take your money. They will take you to



their parents' place. But now the community has boosted its knowledge about the importance of education. (AWH Comprehensive+ site in South Gondar)

In some AWH programming localities in South Gondar the mentors together with local community leaders played an active role in cancelling child marriages. A mentor of a girls' group from an Act with Her Comprehensive site explained how one participant admitting that she was at risk of an imminent arranged marriage led to the identification then cancellation of 18 intended marriages of very young adolescents in a single community:

18 early marriage cases have been banned in this locality. One of these 18 girls exposed her case to us. 8 of these girls are my trainees, and 10 are Fasika's trainees. A girl who exposed her case for us was previously bashful and timid hut she is very young...One day I took her outside of the training room and I asked her in the office whether she has any problem which may makes her worry. She told me all her problems. She told me that her parents are arranging her for marriage, and she told me all what she is thinking about. She said that; "I spend my time thinking and worrying about my marriage with a man whom I have never seen him yet. I am losing my hope, even I ask myself why I am here in the school, because I can't continue my schooling once after I get married, whom can I talk to my worries?" By this time, I feel sorry, I tried to make her calm. Then I continued asking her further to dig out if there are other girls who have such problems. Then within a few days we got 18 girls with similar case of early marriage arranged by parents. 8 of them were my trainees and 10 girls were [the other instructor's] trainees...We reported to the kebele administrator and other kebele officials who are working with us. He came here and began to discuss with other concerned bodies including the woreda's women, and children affair office. We also informed to the coordinator to hurry up since parents has been completing their preparation for their daughters' marriage. Then all they worked together quickly and the marriage these girls stopped, and they continued their schooling.... Later all parents of the trainee girls signed not to coerce daughters for marriage and also not to make daughters dropout of school due to early marriage. Then parents changed their idea and the early marriage arranged for these girls banned within a short period of time. These girls are still attending schooling.

However, even in cases where there was active buy-in from the school community and local government officials, both girls and key informants recognised that there were limits to the extent to which norms around girls' education and age at marriage could shift. In another AWH Comprehensive site in South Gondar, an adolescent girl pointed out that club participants were encouraged to intervene and report cases of child marriage, but only when the girl in question wanted support to resist pressures to marry, as some girls saw early marriage as a preferable option for future advancement:

If a girl is about to get married, we report that to our school principal. The teachers and the school principal will talk to the parents and stop the marriage. If you learn about child marriage and you hear about a girl that is going to get married, first you need to talk to the girl and report it. If she does not want it to be reported and is ok with the marriage, we do not report it. If she wants us to tell the school principal and for the school to intercept the wedding, we do so... If she wants it, the parents come together and arrange the marriage... There are girls who want to get married... Maybe it is because they think they will get some property when they get married... or the husband is from the town and they want to live there... If we report on them without their consent, they deny everything.

Similarly, a key informant from an AWH Comprehensive+ site in South Gondar explained that even with close cooperation between the community and district-level women's bureau officials, it is often not possible to cancel an impending child marriage – even those of very young adolescents, aged 12 to 15 years – on account of parental and community resistance, and uneven buy in across sectors to tackling the problem:

But the community is still practicing early marriage even though we are working in cooperation with police and the women's affairs office. For example, three students are getting married already after we work hard in convincing the parents to cancel the marriage. And there is one student who hid from her parents on her wedding day and came to us, and after talking to her we communicated with the police, and finally she was transferred to the woreda women's affairs office. But her parents were mad



at her when she returned home and they told her to stop learning or if she wants to learn she must get out of their house, which was really hard. This year, three students' weddings were cancelled but three students got married. It was not easy, but comparing to past years, currently things are getting better... We get the information from the students. We consider the students might be afraid to tell it directly to us, so we prepared a comment box and the students write down the problem and place the paper in the comment box. Three of them were grade 6 students and we can't save those students from marriage, and one student was grade 4, the rest were grade 7 students. They were on average 12–15 years... We reported the cases to higher offices, including women affairs, but there is nothing done. We told everything by phone and face-to-face at an annual discussion session, but nothing is done. Currently the students are dropouts from school.

6.1.3 Girls' voice and agency

In the quantitative analysis, we find large, positive impacts of all programming variations on an index of voice and agency (a 0.18 to 0.28 standard deviation improvement) across all research sites at the 10-month follow-up (Table 2). This index encompasses girls' participation in decision-making at home and at school, comfort having discussions with friends, caregivers and elders and mobility outside of the household. These impacts are driven by increased participation in decision-making at home and school, increased comfort discussing various issues with girls' caregivers (female and male), and increased sense of voice at home, among their peers, and in the community – although there are no detected changes to girls' mobility (Appendix Table B1). These improvements in voice and agency are somewhat larger for girls in AWH communities in South Gondar (ranging from 0.21 to 0.36 standard deviations), particularly for aspects of voice and comfort speaking with a female caregiver (Table 2, Appendix Table B2). In contrast, for girls living in East Hararghe, we only detect statistically significant improvements in voice and agency among those who received the AWH Comprehensive treatment (Table 3, Appendix Table B3). As with the knowledge index, impacts are much larger for girls living in marginalised communities than those living in less marginalised communities (Tables 4 and 5). Once again, we cannot reject the hypothesis of no statistically significant differences across increasingly intensive program layers, either in the full sample or in any subsample that we study.

These short-run positive effects on adolescent voice and agency were echoed in the qualitative findings, although there was not the same level of differentiation across sites as indicated by the quantitative survey data. Adolescent girls, parents and key informants alike noted that girls participating in the programme often developed greater self-confidence and were more willing to ask questions and to engage in conversation with adults. A key informant from an AWH Comprehensive site in South Gondar emphasised that this was a key gain, and that the effects endured even after the adolescent sessions had been phased out:

Students developed a self-confident personality and don't get ashamed to forward their question as well as to have a discussion with others... We are receiving good feedback from parents. Students are interested to continue the discussion habit once the project is phased out.

Girls in some communities also noted that they were encouraged to identify and learn from positive role models outside their families. In an AWH Comprehensive+ site in South Gondar, for instance, a participant in a girls' focus group discussion explained that:

We have discussed inspiring role model women in the community... When we say inspiring women, for example, a single woman who doesn't see herself as inferior to others just because she doesn't have a husband. She is empowered and she provides for herself.

Girls in the Her Spaces communities also underscored that the community visits to key services had helped them feel more empowered about seeking support if they were to need it in future. A girl from a Her Spaces site in South Gondar emphasised that as a result of her group's visit to the community health centre, she would now feel more confident to visit the centre and seek out services:



If we're in some kind of trouble or want to check up on our health, we can visit the centre. In the previous times I used to be shy to talk to them, but now that they give us a grand tour and give us so much advice, I'm not afraid of them anymore.

By the second follow-up round of quantitative data collection, these impacts on voice and agency were not as apparent (with q-values well over 0.1) in any site or treatment arm grouping (Tables 2-6). Furthermore, there is suggestive evidence that point estimates for the AWH Comprehensive Plus programming arm became negative and were statistically significantly different from the AWH Comprehensive layer (q=0.05 in South Gondar, q=0.129 in East Hararghe) by two or more years post programme launch, and this was particularly true for marginalised sites (q=0.129). Results from qualitative interviews suggest that boys in AWH Comprehensive+ research sites felt some anger that they were not given some type of transfer packages as well. As a boy from such a site in South Gondar noted: 'Why did they make a gap between the females and the males? We were feeling very angry. Everybody felt angry when they gave solar lamps to the females.' Similarly, in East Hararghe, a male mentor from a AWH Comprehensive+ site noted that the uneven support for girls compared to boys in the community was a source of discontent and also contributed to the limited traction of messages:

The education is intended for the whole community members. But we only target sixty boys and sixty girls. We are ordered to educate only such children. But the complaint from the community is the reason why they are excluded from that. For the future it should expand and the participation of all young people should be ensured.... For those children that we teach, exercise books and pen was given only one round. Such materials are quickly depleted and worn-out.... The children who are enrolled in the program have got only one round of support just for one time. But it would have been better if they were sustainably supported.... Most importantly, the gifts of exercise books, pens, solar lamps were for girls but the education messages would have been better received by the community if boys received these too — at least they can learn with it and feel motivated to participate in the changes the programme wants.

One hypothesis could be that this discontent resulted in a decreased sense of voice and agency among girls in these sites. This explanation seems plausible for East Hararghe, as there, the estimated treatment impact for the transfers arm even at first follow-up was close to zero (and lower than the AWH Comprehensive arm, q-value=0.127, Table 4). Girls in AWH Comprehensive+ sites in East Hararghe were less likely to report being comfortable expressing themselves with agemates or elders, were less likely to agree that they could ask adults for help if they needed it, and reported decreased mobility (Appendix Table B3); no such findings were apparent in South Gondar (Appendix Table B2). The qualitative findings underscore important gains in girls' voice and agency in South Gondar over time even in the AWH Comprehensive+ sites. A key informant from one such site in South Gondar noted:

Most of the time outside meetings used to be held only with men, but after taking the discussion with Act With Her project, a lot of girls and women are in the front chairs attending and giving directions. Currently, girls can talk with boys freely since they are their brothers and friends, but previously this was unacceptable.

Another key informant, also from that site, explained that:

The girls participating in the Act With Her activities have now developed open discussion with others – for instance, they don't hesitate to raise any personal matters. At school level, they are the ones who report to the school about any early marriage arrangement.



6.1.4 Girls' psychosocial well-being and social connectedness

We next explore impacts on girls' psychosocial well-being, across three key measures: resilience, mental distress, and self-esteem (the latter was measured only at the second follow-up).³⁷ We note that adolescent girls in our study sites display low levels of depression on average; at the first follow-up, girls in control sites had an average score of 26.4 (out of 27) on the mental distress scale (where higher values indicate less mental distress, Appendix Table A1). Girls demonstrate moderate-high levels of resilience – with a score of 31.3 in the control group, on a scale from 12–36 where higher levels indicate more resilience – and self-esteem (scoring 30 in the control group on a scale from 0-40).

At the 10-month follow-up, regression analysis reveals positive point estimates across all treatment arms in the full sample of girls for resilience and (less) mental distress (Table 2). These impacts are wholly driven by girls living in marginalised communities – with improvements estimated at 1.5–2 points on the resilience scale, and up to 0.4 points on the mental distress scale across the Her Spaces, AWH Essential and AWH Comprehensive communities (Table 5). By the second follow-up, point estimates are smaller and none are statistically different from zero at standard levels of confidence, and point estimates on the resilience measure have become negative for girls in Her Spaces and AWH Essential sites in marginalised communities (not statistically significant). We measured self-esteem in the second follow-up only, but do not detect any differences between the intervention groups and the control group. We cannot reject the null hypothesis of no statistically significant differences across any of these measures of psychosocial well-being from increasing layers of intervention intensity, either.

The qualitative findings suggest that there are several change pathways throughout the AWH programme that shaped some aspects of adolescent resilience. The curriculum content around short- and long-term goal setting was widely recalled and appreciated by adolescents as it helped them to think about their future (and future goals) in a more systematic way, and to make plans, especially for their education. A mentor from an AWH site in South Gondar provided an example from participants in her group:

The girls told me their short- and long-term goals. For example, their short-term goal is focusing on schooling and learning properly and scoring high in the grade they are attending this year because short-term goal is prepared for less than a year... Studying hard, doing what they can do only, not to do things over their capacity, focusing on their schooling until they complet^e 12th grade, and succeeding in their future aspiration. They also explained their long-term goal as they want to be famous, knowledgeable, to be trustworthy by others, to be self-reliant and to be supportive.

Some participants noted that a focus on goal-setting and on communication and negotiation skills in the curriculum helped them to have greater self-confidence and control over their lives. A girl from an AWH Comprehensive+ site in South Gondar, for instance, explained: 'Ever since I started this class, I've seen visible changes in myself. Now I'm able to have a conversation with my parents and convince them about things.' However, for some adolescent girls, it was evident that the changes in girls' opportunities they were learning about were not realistic in their current environment and that in practice, much more would be needed to overcome structural barriers. A girl from that same site explained the situation as follows:

There is not really any change in the environment... The boys don't help in the house equally with us... Even though they took the training [these actions] aren't really appreciated by the community... There needs to be education given to the older people at the church by priests, and also more training to the boys in the school would also help a lot.

³⁷ For details on the resilience, depression, and self-esteem scales used, see Appendix D. Note that we have signed these scales so that higher values indicate improvements (i.e. higher resilience, less mental distress, more self-esteem).

³⁸ It should be noted that although Ethiopia was affected by both the Covid-19 pandemic and a months-long internal armed conflict between the first and second follow-up data collections, we do not see worsening of depression or resilience among control communities between these two time periods for our sample overall, or by region. Thus, we do not think that these findings reflect pandemic or conflict impacts, but we will attempt to explore this more rigorously in future work.



Another girl from an AWH Comprehensive site in East Hararghe similarly emphasised that while they are learning about equality for girls and boys in the Act With Her sessions, community perceptions are still lagging, which is discouraging:

They told us that a boy and a girl are equal... They have also said there is no need for division of labour... But if you give a work of a girl to a boy, he may say 'no' thinking that he is not a girl... Although mostly the boys look after the livestock, many of the girls also engage in it, usually after school. I also do that work... People say that a girl cannot reach a higher level after education... 'we have not seen a successful girl because of education, rather a girl who marries after being educated'... This perception of the community highly demoralises a girl who wants to pursue her education.

These findings suggest that the disconnect between the content of the Act With Her sessions and girls' daily lived realities might, at least in part, explain why the programme has had limited impacts on resilience and mental well-being. It is also the case that the programme was not designed to provide young people facing mental health challenges with referrals or linkages to service providers, and thus it is not surprising that the findings reveal limited change in terms of improvements in adolescents' psychosocial well-being.

We next turn to an index of supportive networks, which includes measures of having trusted female peers, male peers and adults. At the first quantitative follow-up survey, nearly two-thirds of girls in control communities reported having a trusted female friend, 4% reported having a trusted male friend, and 58% reported having a trusted adult in their life (Appendix Table A1). Table 2 suggests little statistically significant impact to this index for any variation of programming, other than the AWH Comprehensive+ group (q=0.123) when considering the full sample, and this impact was not detected by the second follow-up survey. Yet these results once again mask substantial heterogeneity – girls in Her Spaces, AWH Essential and AWH Comprehensive+ communities in marginalised sites showed fairly substantial improvements in support networks, at least at the first follow-up. By the second follow-up, we do not detect any statistically significant differences in supportive networks between any intervention group and the control, nor across any of the increasingly intensive intervention layers.

The qualitative research found limited evidence that the programme had helped young people improve relationships with trusted adults. A few girls noted that their parents appeared to appreciate them more, as indicated by increased spend on material support; for example, a girl from a Her Spaces site in South Gondar noted that 'They didn't used to buy me clothes before.' Others also said that they had learned better communication skills, and this had decreased tensions with parents. A girl from an AWH Essential site in South Gondar explained: 'Our teacher on Sunday taught us how to live peacefully with our parents. She advised us to avoid conflict.'

There was more evidence of shifts in relationships with peers, with girls commonly reporting that they had learned about how to strengthen friendships through trust and respect for confidentiality, as a girl from a Her Spaces site in East Hararghe highlighted:

They [mentors] taught us that good friendship involves keeping secret, respecting, motivating and loving each other. We didn't have such awareness previously... We didn't have the understanding of friendship... Previously, I would share the secret of a friend of mine with others. Now, I don't do so... I may quarrel with a friend if I share her secret with others. I have become able to prevent such potential conflicts.

Several key informants also noted that in some communities, Act With Her participants were encouraging peers to persevere with their education. An official from the Bureau of Women's Affairs in East Hararghe noted how:

The change is visible within the students and the community. If girls are absent from school, they – the students participating in the Act With Her activities – will go and bring the girls to school... I have seen with my [own] eyes when such girls tried to bring their peers who did not come to school on one school day. So, sustaining this good experience has to be the responsibility of every person...



6.1.5 Girls' risk of age- and gender-based violence

Next, we turn to an index of violence, which measures exposure to physical and emotional violence from peers and household members as well as sexual violence; we sign this index such that higher values represent less violence. We note that rates of self-reported peer violence and sexual violence were not high at the time of our first quantitative follow-up survey – 12% of girls living in control sites reported experiencing violence from their peers in the previous 12 months, and 2% reported having experienced sexual violence (Appendix Table A1). Moreover, exposure to peer violence actually lessened over the whole sample by the second follow-up; at that point, fewer than 8% of girls living in control sites reported having experienced peer violence in the previous 12 months. However, it should be noted that adolescents likely had less exposure to peers during that period, as the second follow-up data collection took place soon after schools reopened having been closed for some months during pandemic-related lockdowns. Interestingly, reported rates of experience of violence within the household (either own experience of or witnessing a female caregiver experience violence) also decreased among the control group between the two follow-up surveys, with 43% of girls reporting such violence in the 12 months preceding the first follow-up survey, and 36% reporting in the 12 months preceding the second follow-up (Appendix Table A1).

The results in Table 2 suggest an improvement (if 0.13 standard deviations) in the violence index among girls living in AWH Comprehensive+ sites (q=0.106) at the time of the first follow-up. These improvements are strongest in East Hararghe (though only among the AWH Essential sites, q=0.096), and are driven by reductions in peer violence, rather than household or sexual violence (Table 4, Appendix Table B3). And note that violence in AWH Essential sites is significantly less than in AWH Comprehensive sites (q=0.055). By the time of the second follow-up, we fail to detect statistically significant improvements in violence between any treatment arm and the control group, or across layers of increasing programme intensity.

Improvements in awareness about violence were reported in the qualitative interviews, but while boys discussed changes in the risk of peer violence, for adolescent girls the focus was predominantly on the risk of sexual and gender-based violence and how best to report it. This difference may be partly because in some communities, largely in East Hararghe, the risk of such violence towards girls is more frequently from male peers in the context of the shegoye cultural dance (as noted earlier). As a girl from an AWH Comprehensive+ site in East Hararghe emphasised: 'Boys [participating together in the shegoye] may try to stop a girl and influence her to begin a sexual relationship with a boy, whereas the interest of the girl is going further in her education'.

By contrast, in South Gondar, girls perceived the risk of sexual assault by strangers as much more likely. A participant from a focus group discussion with girls in an AWH Comprehensive+ site explained that:

Boys are threatening us, try to rape or sexually assault us... Anywhere outside the house, usually girls above 15 years old are exposed to these actions. Mostly older boys are doing that to the girls... For example, last October, there was a girl who was about to be raped while she was heading home from school.

Across communities, many girls had gained awareness about the importance of reporting harassment and assault, and the different options for reporting. A girl from a Her Spaces site in East Hararghe explained:

If boys harass us while we are moving in the locality, the mentors advised us not to fuel the dispute and to report them [to the authorities] instead so that they will face justice. They told us that the boys will be held responsible for their misbehaviour... They advised us that the case will be dealt with by the legal system. We are told to report to school teachers if we face harassment while going to school. We will report to our parents if we face harassment in the neighbourhood... If it is beyond the capacity of teachers and parents, we should tell our parents and our parents will report to the legal bodies such as kebele administrator, police militia. And to sheiks.



Another girl from that site, however, emphasised that although the Her Spaces sessions had helped raise their awareness about how to mitigate the risk of sexual assault, and advised girls to report any incidents to the formal justice system, reliance on informal or traditional justice routes largely persists:

We don't go out alone. We usually go out in groups... The mentor of the ... group told us how to take care of ourselves... But girls don't talk freely to families and friends when someone tried to rape us... because it brings conflict between families... [Girls] don't go to the police station... The families prefer to handle this by themselves.

Nonetheless, there were reports from several communities that in addition to the awareness sessions provided to girls (as well as to boys and parents), the Social Analysis and Action groups had taken collective community action to minimise risky environments for girls and women. A key informant from an AWH Comprehensive site in South Gondar noted that the community had come together and hired guards to police the main roads to the market and school so as to deter predatory male behaviour:

We want a high school to be built here... Our girls have to walk long distances to get to school. There are many young men who give them a hard time on the road... they get raped. So, they are always afraid to go to school. If they had school close to their home, they can easily commute... But we have now hired a guard to protect us on the road... It is not just the girls. We could not also go to the market without having trouble... and on market days now the guards work in shifts to make sure everyone is safe.

In the case of an AWH Comprehensive+ site in East Hararghe, community stakeholders and religious leaders elected to intervene and discourage participation of both girls and boys in the shegoye dance so as to protect girls from rape and abduction:

Gender-based violence stopped after AWH... Girls were getting pregnant while they were going to the shegoye dance, we stopped the dance. Religious leaders stopped the dance. After AWH and the dance stopped, rape stopped... Abduction and rape stopped after the religious leaders set punishment for parents that send children to dance... Parents in turn advised and stopped children from going to the dance... The religious leader and kebele leaders... supervise the area and identify those who are not working to stop the practices... When girls and boys are found outside home at night, their parents are punished, they pay 1,000 birr and more than that, the dance stopped by those measures... There was also a broker that was facilitating marriage, he was found and punished. The religious leader refused to approve the marriage, and then the community stopped the practices... (Community key informant).

6.1.6 Girls' ideal age of marriage and first child

The quantitative research asked girls about their ideal age of marriage (at both follow-ups), and their ideal age to have their first child (at the second follow-up only). Quoted ideal age for marriage was high (especially in comparison to local average age of marriage for women and girls) among control group girls at the first follow-up, when girls were aged 12-15 – girls in South Gondar averaged an ideal age of 23.4, and girls in East Hararghe averaged an ideal age of 21.3 (Appendix Table A1). Interestingly, by the second follow-up survey when girls were aged 13-17, ideal age of marriage among the control group fell across both zones, to 22.7 in South Gondar and 19.7 in East Hararghe – perhaps coming down to get closer in line with actual marriage ages. We detect little in the way of statistically significant increases in reported desired age at marriage in the full sample or in any subsample, although ages reported by girls in the AWH Comprehensive group are marginally significantly higher than the control group (by 1.7 years, q=0.140) in South Gondar at the first follow-up, and ages reported by girls in the AWH Essential group are marginally significantly higher than that reported by girls in the Her Spaces group (by 0.4 years, q=0.145) in East Hararghe at the second follow-up.

Information of ideal age of first child was only collected at the second follow-up, when girls were aged 13-17. Among the control group, reported age was again higher than girls will realistically start having children, at 25.6 in South Gondar and 21.0 in East Hararghe. For this outcome, we do not detect any differences either between any intervention arm and the control group, or across intervention layers.



In terms of the qualitative findings, girls in South Gondar programming sites appeared to have more articulate responses about child marriage being a violation of girls' rights. A 15-year-old girl in an Act with Her Essential site explained:

When we get married before 18 without our interest it impacts our future life. When parents arrange us marriage, we have to report it to school principal. We also report the case to health extension worker and discuss with her. We also report marriage to a policeman who is assigned to and works in our village.

However, we hypothesise that this is likely because in South Gondar marriages are typically arranged by families and so the violation of a girl's rights is more obvious, in contrast to East Hararghe where many girls get married because there are very constrained alternative options (see Jones et al., 2020b for further discussion).

6.1.7 Girls' economic empowerment

Next, we turn to an index of economic empowerment, which includes measures of control over money, savings and time use. At the first quantitative follow-up, 16% of girls in the control group reported having money they control, 53% reported having some savings of their own, and they reported having (on average) 28% of their time devoted to school, studying and leisure (Appendix Table A1). Although all treatment coefficients on the economic empowerment index were positive at the time of the first follow-up for the sample as a whole, only the girls in the AWH Comprehensive+ group (who received packages containing educational and/or menstrual health supplies) were better off than the control group at near-traditional levels of confidence (q=0.123, Table 2). However, there is a great deal of regional heterogeneity in these findings. In South Gondar, girls living in AWH Comprehensive and AWH Comprehensive+ communities were substantially better off than the control group, on the order of 0.4 standard deviations (q=0.054 and q=0.019, respectively, Table 3). These findings are driven by an increase in the likelihood of having money they control as well as savings for the future (Appendix Table B2). In East Hararghe sites (Table 4), girls living in AWH Comprehensive communities were actually worse off than the control group (by close to 0.3 standard deviations, q=0.087) and worse off than the AWH Essential group (q=0.055), driven by a lower likelihood of having money they control (Appendix Table B3).

By the time of the second follow-up, girls living in AWH Comprehensive communities in East Hararghe were no longer disadvantaged compared to the control group (Table 4), while there is some evidence that girls in AWH Essential and AWH Comprehensive sites in South Gondar had higher economic empowerment than girls living in control communities (q=0.094 and q=0.149, respectively) – and compared to girls living in Her Spaces communities (q=0.080) – on the order of 0.3 to 0.4 standard deviations (Table 3). This was driven by higher likelihood of having money they control as well as savings for the future (Appendix Table B2).

The qualitative findings indicate that the curriculum module on savings encouraged girls, both individually and collectively, to save small amounts of money (primarily given to them by their parents) in order to invest in income-generating activities such as buying chickens and selling eggs, or rope-making. A girl from East Hararghe explained the Her Spaces curriculum messaging as follows:

We should save and use money wisely for the purposes of pen, exercise book, shoes and clothes... We could buy macaroni and other food... They gave us awareness that we shouldn't waste it arbitrarily... They advised us that we shouldn't spend all the money we get on consumption... They advised us that we should use 0.50 cents for food and 0.50 cents for some other beneficial stuff if our father gives us 1 birr, for example.

Another girl explained that the curriculum had encouraged her to develop entrepreneurial thinking:

I bought a chicken... My mother and father gave me 20 and 10 birr. I bought some snacks with 5 birr and saved the remaining 25 birr. I saved even more by making and selling ropes and by saving little money that my father gave me at different times. I bought chicken with the savings ultimately... It was after I learned from the programme of Her Space.



Girls noted that they used the money to help cover the costs of school materials or to address urgent challenges. A girl from an AWH Essential site in South Gondar explained that 'It is good for emergency and urgent problems. For instance, if our parents lack money to buy exercise books at the beginning of the year. In this case, I will use the money I deposited.' In some communities, girls also reported that they pooled the savings and then purchased school supplies, basic sanitary supplies and clothing so that they could support their friends and peers from poorer households to stay in school:

We contribute 5 birr every week we meet. And we buy soap, sanitary pads and shiti [traditional cloth] with the money. So, there is no one missing school now...This also helps you not to miss exams if you are menstruating on that day...The teacher told us if we can, [to] contribute 1 birr only but we insisted we can contribute 5 birr... We also support poor children who cannot buy exercise books and pens... You know many students do not come to school just for lacking a pen... We are 52 and we contribute 260 birr... You know, we have been in school because of this and now this contribution has benefited us a lot. We also thought that it is good to contribute at least 1 birr for those poor children so that they can get exercise books and pens. (Participant in focus group discussion with girls, South Gondar AWH Comprehensive+ site)

The quantitative data collections compiled information on girls' economic aspirations, including aims of skilled and/or professional, or self-employment, work as an adult. Aspirations for such work were high in South Gondar (93% and 99%, respectively, among the control group at the first follow-up), but comparatively lower in East Hararghe (at 81% and 92%, respectively) (Appendix Table A1). Yet, no statistically significant improvement in economic aspirations was detected across any intervention arm for any site grouping (Tables 2-6). The qualitative interviews also suggest mixed impacts on aspirations. Some adolescent girls spoke about wanting to follow in the footsteps of powerful role models from the same ethnic heritage. For example, girls in a focus group discussion in East Hararghe identified male politicians from Oromia as a source of inspiration:

When the educators asked us what we want to achieve in our education, we told them that we want to be like Dr Abiy Ahmed [Ethiopian Prime Minister], to be a doctor, to be like Lemma Megersa [former President of Oromia region], to be an engineer, and others... They advised us to set a goal and continue to study hard and complete our homework at home after carrying out some domestic activities.

For others, however, the curriculum content on savings had a limited impact on their economic aspirations, as they were unable to overcome the larger challenges facing rural adolescents, in securing higher education and eventually gainful employment. A girl in an AWH Comprehensive+ site summed up the problem in South Gondar as follows:

The boys want to go to Sudan or Metema [lowlands where there are agricultural plantations] and the girls want to go to the town to work as a home maid or something. Because the families can't afford their education anymore and since they have to focus on basic daily needs...some Act With Her students think that way and there is a member who got married too and gave up on education.

6.1.8 Girls' physical health and nutrition

The quantitative index of physical health and nutrition includes self-reported measures of health, protein intake and hunger due to lack of food. Across our control sites, 90% of adolescent girls reported 'good' health, though just 4% of their meals contained protein, while 14% reported hunger due to lack of food in the month preceding the survey (Appendix Table A1). We did not find quantitative evidence of any improvements in adolescent girls' physical health and nutrition outcomes for any of the programming variations in South Gondar at the time of the first follow-up survey, though there is suggestive evidence that girls in AWH Comprehensive communities there were actually worse off than their control group counterparts (q=0.149) and their AWH Comprehensive+ counterparts (q=0.050) by the time of the second follow-up survey (Table 3), driven by higher rates of reported hunger (Appendix Table B2). This is a surprising finding which we think is unlikely to be actually connected to the programming itself, but we do plan to investigate in future work. The situation in East Hararghe seems quite different, however, with positive impacts detected for girls in AWH Essential



communities compared to the control group at the 10-month follow-up at near standard levels of statistical significance (q=0.102), though these impacts are no longer detected by the second follow-up.

The qualitative findings provide further evidence of these very limited changes in physical health and nutrition. Adolescent girls were able to report on different food groups and why they are important to good health and nutrition, but also acknowledged that what they learned in Act With Her sessions largely reinforced what they learned in human biology classes at school, but often provided less detail. 'Some topics from AwH are similar with what we learn at school...like body change, nutrition...but we did not learn about menstruation and about it not being shameful at school' (14-year-old girl, South Gondar Act with Her Essential site).

6.1.9 Girls' menstrual hygiene management

The quantitative research collected information on girls' menstrual hygiene management (MHM), including questions on whether normal activities are affected by menstruation, whether modern sanitary products (such as a sanitary pad or re-usable pad) are used, and if appropriate disposal of sanitary products is practiced at home. Despite substantial differences across residential zone at the first follow-up – 95% of girls in South Gondar reported that their normal activities were not affected versus 79% in East Haraghe, 47% of girls in South Gondar reported using a modern sanitary product versus fewer than 20% in East Haraghe (Appendix Table A1) – we do not detect statistically significant improvements in MHM for girls across any intervention arm in either residential zone (Tables 3 and 4). That said, girls in marginalised sites living in AWH Comprehensive+ communities (so who received an in-kind transfer) did have improved MHM both in comparison to the control group (q=0.004) and in comparison, to their peers in AWH Comprehensive sites (q=0.118, Table 5). By the second quantitative data collection – when girls were aged 13-17 – MHM measures had improved greatly across both South Gondar and East Haraghe (even in the control group, Appendix Table A1), and regression estimates suggest gains only among AWH Essential girls (in comparison to Her Spaces girls, q=0.028, Table 2) in South Gondar.

While the qualitative findings did not identify key differences among programming sites in terms of menstrual health awareness and awareness-raising regarding the importance of not stigmatising girls as a result of menstruation and instead regarding it as a natural phenomenon, there was a notable difference to the control site, where there was not the same openness by girls and boys regarding menstruation. The following quote from a 14-year-old boy in a Comprehensive AWH site underscores the important change that programming had helped to instil in the community:

An astonishing change is about the awareness made with regard to female menstrual periods. Previously, females were not aware of the menstruation and got shocked when the menstruation approached them unexpectedly. Lots of females dropped out of the school due to the shock and surprising experience of menstruation. Males would abuse females and used to be sarcastic about it as if it's somehow females' fault. But now, sufficient awareness has been made and male students are even cooperative to help females in the situation not to be frightened and shocked of the incident. The male students would comfort their female friends by telling them that it's a natural cycle; but not a curse.... Females are no more humiliated nor do male students laugh at her; but instead share her feelings and attempt to help her in that situation.

6.1.10 Girls' gender attitudes and consciousness

Because the AWH curriculum includes substantial discussion of attitudes and norms related to gender, we explore an index of attitudes toward gender equality. This index combines the Global Early Adolescent Study (GEAS) Index of Gender Stereotypical Traits (for example, 'girls are expected to be humble') and the GEAS Index of Gender Stereotypical Roles (for example, 'girls and boys should share household tasks equally'). ³⁹ The index is constructed such that attitudes in favour of gender equality receive higher values. We discussed the stark contrast in attitudes toward gender roles in the two different contexts of our study in Section 2 'Study setting', but here we highlight a few of the measures included in our index. East Hararghe performs somewhat

³⁹ For more information on the GEAS, see geastudy.org.



worse on the Index of Gender Stereotypical Traits. For instance, 71% of girls in control communities in East Hararghe agreed that 'girls should avoid raising their voice' at the first follow-up, compared to only 58% of comparable girls in South Gondar (Appendix Table A1). Similarly, 82% of girls in control communities in East Hararghe agreed that 'it is important for boys to show they are tough', compared to 73% of comparable girls in South Gondar. East Hararghe also performs somewhat worse on the Index of Gender Stereotypical Roles. For instance, 65% of girls in control communities in East Hararghe agreed that 'girls and boys should share household tasks equally' at the first follow-up, compared to 80% of comparable girls in South Gondar. Similarly, 85% of girls in control communities in East Hararghe agreed that 'a man should have the final word on decisions in his home', compared to 58% of comparable girls in South Gondar.

Because there were stark differences in attitudes toward gender across the two regions, we proceed directly to the regional heterogeneity. In South Gondar, there is a large positive impact of the AWH Comprehensive programme on attitudes toward gender equality compared to girls in control group sites at the first follow-up (0.245 standard deviations improvement, q=0.110, Table 3). This finding is driven by an improvement in the Index of Gender Stereotypical Roles – in fact, girls in every intervention arm were more likely than girls in control sites to agree that 'girls and boys should share household tasks equally', and girls in AWH Comprehensive sites were less likely to agree with 'it is okay to tease a girl who acts like a boy' or 'it is okay to tease a boy who acts like a girl' compared to their peers living in control sites (p<0.05) and girls living in AWH Essential or AWH Comprehensive+ sites (Appendix Table B2). These differences are no longer detected at the time of the second follow-up survey. It is important to note, however, that of the 16 items we consider across this Gender Equitable Attitudes Index, 13 of them moved in a positive (more gender equal) direction for control group individuals in South Gondar between the first and second follow-ups (Appendix Table A1).

For East Hararghe, where (as we describe in section 3, above) attitudes are somewhat more conservative, there is little evidence of any differences in gender-equitable attitudes between treatment and control communities at the first or second follow-up in the aggregate index. Of the 16 items we consider across this Gender Equitable Attitudes Index, 11 of them changed in a positive (more gender equal) way for control group individuals in East Hararghe between the first and second follow-ups (Appendix Table A1).

Perhaps an important point to note is found in the analysis across marginalised versus non-marginalised communities. In non-marginalised communities, we find no statistically significant differences between any intervention and the control group, nor differences across intervention layers, at either the 10-month or the 24- to 36-month follow-up (Table 6). In marginalised communities, however, we do detect some differences at the first follow-up (Table 5). At this time point, attitudes appeared to be less gender-equal in Her Spaces and AWH Comprehensive+ sites as compared to the control group (on the order 0.2 to 0.3 standard deviations; q=0.088 and q-0.004, respectively), and attitudes in AWH Comprehensive+ sites were somewhat less genderequal than in AWH Comprehensive sites (q=0.118).

The final outcome related to perceptions of gender that we explore through regression analysis is an index of gender consciousness. This index measures concepts like 'I think about how boys' and girls' roles differ from each other', and 'I think it is possible to change how people react to my being a girl'. We find increased gender consciousness among girls living in AWH Comprehensive+ communities in South Gondar (q=0.032) at the first follow-up round, and suggestive evidence that girls in Her Spaces and AWH Comprehensive communities showed increased gender consciousness compared to girls in AWH Essential communities at the second follow-up (q=0.001 and q=0.020, respectively). These findings hold both for items such as 'I'm very aware of people's reactions to my being a girl' and 'I think it is possible to change people's reaction to my gender.'

In East Hararghe, we do not detect statistically significant differences between any intervention arm and the control group at either time point, though there is suggestive evidence that girls in AWH Essential sites displayed increased gender consciousness compared to girls in Her Spaces sites at the second follow-up (q=0.083).

The qualitative findings on gender attitudes and norms are perhaps more positive in that many girls in both zones – and also parents and key informants – talked about their awareness of the gender division of labour in the household and the importance of changing this so that men and boys would be more supportive of



women and girls, and take on a fairer share of domestic chores. For example, one girl participating in a focus group discussion in a Her Spaces site in East Hararghe explained that:

They taught us that there shouldn't be division of labour between male and female in household activities... In previous times, women have been confined to some activities and some other roles are left for men. The educators taught us that such division of labour is wrong. Men and women should carry out all activities by helping each other. A husband should pound pepper if the wife is cleaning the homestead. In previous times, boys used to go to school earlier. Girls, however, would go to school after undertaking some indoor activities. The educators denounced such practice. They educated us that we should handle the activities by helping each other with our brothers and go to school together... They educated us that our right should be equal with boys in carrying out household activities and going to school.

Similarly, a girl from an AWH Comprehensive site in South Gondar explained that 'We learned how females and males have equal role and responsibility in managing household jobs... Girls are equal with boys such that boys have to take similar responsibilities with their female counterparts.'

However, some girls acknowledged that shifting attitudes did not necessarily translate to changes in practice. As one girl participating in a focus group discussion in an AWH Comprehensive+ site in East Haraghe noted:

They taught us that males and females can play all roles equally. But males refrain from going to the mill house, collecting firewood, washing clothes and others by explaining that these aren't roles for males... They haven't changed... It is we, females, who beg them to support us when we are much overloaded... We have been educated that males should support us in domestic chores but they haven't begun to do so.

Furthermore, the qualitative interviews also underscored that gender equality was predominantly narrowly equated with the equal distribution of domestic tasks and was not expanded to other domains of life, especially outside the family. A girl from an AWH Comprehensive site in South Gondar explained that there was a need to shift attitudes about girls' roles beyond marriage and family life:

All girls need to get education and train them on the importance of school... They need to be advised on how they should envision their life... There are also parents who want us to be like them and get married... They need to be advised not to marry off their children... But they don't talk about this in the community discussions [Community Score Card meetings].

6.1.11 Girls' knowledge and beliefs about service accessibility

The final set of outcomes we explore in the quantitative analysis relate to girls' knowledge and beliefs about service availability and accessibility, which we collected only at the second follow-up when girls were aged 13-17. We construct an Index of Service Knowledge, using a set of questions measuring whether girls can correctly name a place where an adolescent in their woreda could go to seek support (beyond family and friends) for the following: substance addiction, mental health, pregnancy prevention, legal abortion, experience of violence, or injustice under the law. Three of these topics were discussed in the AWH curriculum (pregnancy prevention, violence and other injustices under the law); the other three were not discussed explicitly (abortion, substance abuse and mental health), but we include these as important services for adolescents that systems strengthening work might touch on.⁴⁰ We also construct an Index of Service Accessibility, using a set of questions to measure whether girls think that an adolescent like them (who lives in their kebele) could actually access the place that they named (whether right or wrong) for such support.

Among the control group, knowledge related to where services for these types of issues are provided is low (Appendix Table A1). Among control group girls in South Gondar, half could name a place to get pregnancy

⁴⁰ For pregnancy prevention, the AWH curriculum focuses primarily on abstinence, but also discusses speaking to a health worker for more options. For experience of violence (including any type of violence, but particularly focusing FGMC, early marriage, sexual or other physical violence, or even unwanted attention from the opposite gender) or other types of injustice under the law, the curriculum mentions speaking with a trusted female teacher, a community leader, a member of the Anti-Harmful Traditional Practices task force, the police, or the girls' club mentor.



prevention, but only between a quarter and a half of girls could name a place to get help with legal abortion, experience of violence, or injustice under the law, and just over 10% could name a place to seek help for substance abuse and mental health (Appendix Table A1). In East Hararghe, the rates are substantially lower in almost every case; just 13% of girls could name a place to get support for pregnancy prevention, 15% for injustice under the law, and fewer than 10% for legal abortion, substance abuse, or mental health. On just one margin – experience of violence – were girls in East Hararghe more likely to be able to correctly name a place to get support (at 34%). Regression analysis suggests that service knowledge was higher for AWH Essential girls in South Gondar, compared to Her Spaces and (surprisingly) Act With Her Comprehensive girls (q=0.100 and q=0.083, respectively), though no different than the control group (Table 3). We did not detect any statistically significant differences either between intervention arms and the control group, or across increasingly more intensive intervention layers, in East Hararghe (Table 4).

Regardless of whether the place they had named was a 'correct' answer in terms of a place one could seek support for the given issue, we next asked the girls if they felt an adolescent like them from their kebele could actually access that support if they wanted to. Again, responses among control group girls in South Gondar were more favourable than among their peers in East Hararghe (Appendix Table A1). Among control group girls in South Gondar, half could name a place to get pregnancy prevention, but only between a quarter and a half of girls could name a place to get help with legal abortion, experience of violence, or injustice under the law, and just over 10% could name a place to seek help for substance abuse and mental health (Appendix Table A1). In East Hararghe, the rates are substantially lower in almost every case; just 13% of girls could name a place to get support for pregnancy prevention, 15% for injustice under the law, and fewer than 10% for legal abortion, substance abuse, or mental health. On just one margin – experience of violence – were girls in East Hararghe more likely to be able to correctly name a place to get support (at 34%). Regression analysis suggests that service knowledge was higher for AWH Essential girls in South Gondar, compared to Her Spaces and (surprisingly) Act With Her Comprehensive girls (q=0.100 and q=0.083, respectively), though no different than the control group.

The qualitative findings found similarly limited knowledge about public services that adolescents could access to find support with gender-based violence, substance abuse or mental health concerns. The focus of the discussions around protection against violence was predominantly on girls needing to avoid walking in forests or at night by themselves and asking friends or relatives to accompany them to mitigate against risks of assault. As a 15-year-old boy from an AWH Essential site in South Gondar explained:

We also learned that girls should not go alone in the dark place or crossing the forest since they may face rape or abduction. We learned that we should warn girls not to go alone somewhere in the darkness or through the forest, and that girls should keep themselves from being violated by boys/men and one of the mechanisms that girls can protect themselves from being raped or abducted is not going alone to somewhere they want crossing the forest or in the darkness, ...and that they should go with their friends or men/boys they know.

In the Her Spaces sites, adolescent girls reported valuing the opportunity to visit the local police station but nevertheless did not have a lot of actionable information on how to report cases of gender or sexual-based violence. From the participants' responses it seems that more support could have been provided to girls to orient their questions as to how they could get support for example if a friend, relative or they themselves were a survivor of violence. For example, a 12-year-old girl from a Her Spaces site in East Hararghe reported on her visit to a police station as follows:

We also learned that males should be held responsible if they abuse us. In relation to this, we have learned the information of the time at which offices including police station are opened for services and closed...We visited a police station as a part of the education. When we made the visit, we asked the workers the time at which the station is opened and closed. They gave us the answer that it is opened at 6:00am in the morning and closed at 12:00pm in the evening. Furthermore, we asked them the punishment of the male criminal in case they rape a female and people who practice FGM.



However, in terms of access to abortion services while these are available in the district towns and were openly talked about by Bureau of Health staff – especially in terms of providing services to secondary school students – none of the participants mentioned that these had been discussed in the Act with Her sessions.

In the case of mental health and substance abuse services girls did not mention any discussion on these or any awareness about services.

6.2 Boys' Outcomes

We present results of the ITT analysis of boys' outcomes in Table 7 (primary outcomes) and Appendix Tables B6 (secondary outcomes). Recall that for boys, we focus on six primary outcomes, encompassing knowledge, attitudes related to gender, support networks, violence and mental distress.

6.2.1 Boys' knowledge

We measure boys' knowledge by constructing an index of knowledge similar to the one constructed for girls, but focusing on the subset of outcomes that also appeared in the boys' AWH curriculum (particularly related to sexual and reproductive health and gender roles; see Appendix Tables B6 for included elements). In the full sample of sites, we do not detect statistically significant differences in knowledge between any treatment group and the control sites, or across increasing layers of programming, at the time of the first follow-up; this holds for results disaggregated by zone and by marginalization status as well. By the second follow-up, there is evidence of increased knowledge among boys in AWH Comprehensive+ sites compared to control sites (0.169 standard deviations higher, q=0.086), driven by East Hararghe. AWH Essential boys in marginalised sites also have more knowledge compared to control at this later follow-up (0.19 standard deviations, q=0.058).

The qualitative interviews echo the survey findings that boys across programming sites in both regions had more detailed knowledge about the difference between sex and gender, sexual and reproductive health issues, about pubertal changes and about menstruation being a natural phenomenon. A 13-year-old boy from a AWH Comprehensive site in East Hararghe explained that in his boys' group they had learned about gender roles and the implications of this in their daily lives:

We learned about supporting each other...about gender and sex: in previous times, males had been embarrassed to take on the roles which belong to females. We have begun to support the female since this project came. For example, we clean house when she prepares breakfast. We support her and she supports us...Sex is fixed characteristics; it cannot be changed. For example, a woman can conceive but a man cannot. This is called sex. Gender is something that can be changed.

Similarly, a 15-year-old boy in a AWH Comprehensive site in South Gondar underscored that they had learned in detail about the way in which gender roles are socially constructed and because of this they can be changed to better support women and girls:

I learned that sex is natural and can't be changed. It is the nature of being male and female. Sex includes those differences on male and female like, the ability to get pregnant, give birth, and breast feeding all which are natural and can't be changes. I also learned that gender is the society's perception toward for being male and female and division of roles and house chores based on sex.... We also learned that these divisions of house chores and other tasks for female and male are manmade and should be changed. Nowadays, I and other boys who attended session with AWH, have started helping our sisters and mothers by doing different house chores like fetching water, washing plates, collecting fire wood, and even making stew and preparing coffee for our parents etc. Sessions we attended with AWH changed our mind on these gendered divisions of house chores and these divisions of chores and rules for male and female can be changed through education and training.

For some boys this increased knowledge about gender roles and the ways that boys could support their female peers also extended to enhanced awareness about the risks of child marriage for girls and the responsibility that boys have in also reporting pending cases to authorities. A 13-year-old boy from an AwH Comprehensive



site in South Gondar explained this own personal case where as a result of the discussions in the AwH group he reported his parents' intention to marry off his younger sister:

We also learned that if we witnessed child marriage practice, we can report the case to our mentors, the school principal and school teachers then they will report to the woreda so that the child marriage will be arranged.... while I was attending sessions with AWH and learning about child marriage, my parents have been arranging child marriage for my younger sister.... The first thing I tried was, trying to convince my parents to cancel the marriage they arranged.... When I knew the case, I was too upset and I told my father what he was doing is criminal and against my sister's rights. I mentioned him all what I learned in sessions of the AWH including its effects and what would happen to her, but he was not willing to listen to me, and to cancel the marriage.... When they refused, I reported it to my teacher and the teacher told the case to the school principal, and then the school principal talked to my parents over the phone, and he warned them he would report them to the woreda Women's and Social Affairs Office and others... finally they cancelled the marriage they planned. ...My sister was 14 years old at the time, and she was attending 4th grade. She was not even aware about what was going on. ... My father is illiterate, he knew nothing about child marriage and its effects, so that when the principal talked to him He stopped preparations he had started for the wedding. Nowadays my sister is learning in this school and she is attending 6th grade....

More common were reports from boys that they had gained knowledge about girls' menstruation, the menstrual cycle and what it meant in terms of pregnancy and also that stigmatization of menstruation is wrong and that boys instead need to support their sisters and female peers during her period. A 15-year-old boy in an Act with Her Essential site in South Gondar explained what they had learned as follows:

We learned about menstruation. I learned that menstruation is natural for girls/women and girls should be helped when they menstruate and they shouldn't be teased and mocked by boys/men including their parents.

Another boy of 14 years from an Act with Her Comprehensive site in East Hararghe emphasised that they had been taught things clearly and in detail which was different to biology classes in school:

We learned that after girls first see their menstruation, they can become pregnant when she had an intercourse with a man. The menstruation cycle may come every 26 days or once a month and when girls have sexual intercourse during the middle of the cycle, she can become pregnant.

Others underscored that parents are often reluctant to talk about sex and reproductive health issues with them and that the sessions were helpful in addressing these topics. As a 15-year-old boy also from the same East Hararghe community added:

Some of the boys did not inform their parents about the content of the sessions because some of the issues are sensitive. For example, the topic on sexual relationships is sensitive and difficult to talk to parents about this event though we know that children are the products of sexual intercourse. Parents know that they produce children after having sexual relationships, but they do not want their children to talk about it.

In some cases, boys also reported that they learned about HIV and HIV prevention approaches. Boys attending sessions in an Act with Her Essential site in South Gondar noted:

In sessions we attended with AWH, we also learned the ways that HIV can be transmitted and also ways HIV can't be transmitted from an infected person to uninfected one. We learned that HIV is transmitted through sexual intercourse, sharing sharp materials, blood contamination etc. We also learned that HIV can't be transmitted by working and learning together with infected person, handshake with infected person, living together, etc. Besides, we also learned how to protect ourselves and others using preventative ways like abstaining [from sex], using condoms, having sex only with a marriage partner.



6.2.2 Boys' gender attitudes and consciousness

We construct an index of attitudes toward gender equality, and an index of gender consciousness, both identical to the ones we constructed for girls (see section 6.1.10). Once again, because of the stark differences in attitudes toward gender across the two regions, we proceed directly to the regional heterogeneity.

In South Gondar, interestingly, we find at the first follow-up that boys have less gender-equitable attitudes across three of the treatment arms in comparison to the control group (excluding the AWH Comprehensive sites), and this difference is statistically significant for Her Spaces boys in comparison to the control group (0.296 standard deviations less, q=0.046; Table 7). This may be explained by the fact that girls in Her Spaces sites received programming, while boys in Her Spaces sites did not. Furthermore, AWH Essential boys have less gender-equitable attitudes than AWH Comprehensive boys (by more than 0.25 standard deviations, q=0.137) – which again may be attributed to the imbalance in programming provided for boys and girls, as the girls' groups in AWH sites met twice as often as the boys' groups. 41 The finding that the AWH Comprehensive programme had positive impacts (if small and not statistically significant compared to the control) on boys' attitudes toward gender equality aligns with the finding above that girls' attitudes in South Gondar sites improved as well, although for boys the impact is driven by an improvement in the Index of Gender Stereotypical Traits rather than in the Index of Gender Stereotypical Roles. Boys in AWH Comprehensive sites were more likely to agree that 'boys should be able to show their feelings' and less likely to agree that 'boys who behave like girls are weak' (Appendix Table B7). Although the finding of changes in attitudes among some girls in South Gondar had disappeared by the second follow-up, we find that changes in boys' attitudes toward gender equality actually strengthened for all AWH treatment arms by the second follow-up, and became highly statistically significant compared to the control group for the AWH Comprehensive arm (0.319 standard deviations improvement, q=0.013; Table 7). We do not detect substantial change in the index of gender consciousness at either follow-up across any treatment arm in South Gondar.

In East Hararghe, we see a similar general trend in the direction of impacts at both the first and second follow-ups. At the first follow-up, coefficient estimates suggest negative impacts of all treatment arms on boys' attitudes toward gender equality, particularly for AWH Essential boys (0.253 standard deviations less equitable compared to the control group, q=0.049, Table 7). By the second follow-up, all coefficient estimates have become positive except for the Her Spaces treatment arm, though none are statistically significantly different from zero at standard levels of confidence. AWH Comprehensive+ boys score 0.345 standard deviations lower on the index of gender consciousness at the first follow-up in comparison to the control group (q=0.023) and in comparison, to the AWH Comprehensive group (q=0.007) – but this difference disappears by the second follow-up.

From the qualitative interviews, boys across both regions did not report major shifts in gender attitudes in consciousness besides the three key issues discussed in the preceding section on shifts in attitudes towards the gendered division of labour in the household, towards menstruation and girls' rights to be free from child marriage. In a few cases, more reflective boys in South Gondar made the link between changing attitudes towards menstruation and greater mobility and agency for girls. For example, a 15-year-old boy in an Act with Her Comprehensive site in South Gondar explained:

In sessions I attended with AWH, I learned that menstruation is natural and God's gift for girls/women. Before I attended sessions, I have been mocking girls when I saw blood of menstruation on their clothes and I have been teasing them, and insulting them... when we were on our way to and from school. However nowadays I learned that menstruation is the natural gift for girls and I started helping them and treating them if I knew a girl is menstruating I will help her by advising her not to get worried and frustrated and even to go to the MHM room prepared in the school separately and use the sanitary pad...Currently no one teases the girl and girls are not ashamed about menstruation because they learn it is a gift and that they can do anything, and move around freely, even when are on menstruation.

⁴¹ Girls' groups in AWH Comprehensive and AWH Comprehensive+ sites also met twice as often as the boys' groups.



6.2.3 Boys' experience and perception of peer violence

Whereas for girls our quantitative analysis of violence focused on an index of experience of peer, household, and sexual violence, for boys we construct an index that measures both perpetration toward and victimization by peers (signed so that higher values indicate less violence). In the full sample, we do not detect any statistically significant differences across any treatment arm and the control group, nor across increasingly intensive layers of programming, at either follow-up round (Table 7). There is some suggestive evidence of regional heterogeneity, with the AWH Essential arm performing better than the Her Spaces arm (on the order of 0.2 standard deviations, q=0.16 at the first follow-up and q=0.078 at the second follow-up, driven by improvements in victimization) in South Gondar (Table 7 and Appendix Table B7), and the AWH Essential arm performing worse than the Her Spaces arm (on the order of 0.3 standard deviations, q=0.049 at the first follow-up only, driven by worsening in both victimization and perpetration) in East Hararghe (Table 7 and Appendix Table B8).

The qualitative findings suggest that there was some discussion of the risks of peer violence and links to substance abuse in boys' groups, but that the knowledge was more general about identifying this as a social problem rather than providing detailed information about how to tackle it. For example, a 13-year-old boy from an Act with Her Essential site in South Gondar noted:

Some boys and youths also violate people especially on Saturday since Saturday is the market day in this locality. Youths and boys drink alcohol or 'Tella' [local drink] on Saturday and then after they get drunk, they will try to rob or loot people who came from different rural areas for marketing. This situation is aggravated especially after the conflict since many youths got guns from different battle. Nowadays people in this locality do not move freely and situations are threatening. Boys and youths also conflict each other after they get drunk, they conflict with each other over minor reasons even. Mostly they are boys who are out school who conflict each other and who rob others. They rob people during the nighttime when people are on their way home after trading in the marketplace.

Similarly, a 15-year-old boy from an Act with Her Comprehensive site in East Hararghe explained:

They fight about farm issues or when livestock of one person damages crop of the other person! For example, a guy may hit a younger boy when their crops are damaged for the boy couldn't keep the livestock properly. The brother of the young boy may come up grabbing a machete to attack the guy who hit his brother. The other guy may also come up with machete and they attack each other...This happened recently in this locality – the victim was injured in the head and taken to the health facility...It was also reported to the police.... Fights don't happen in the school compound...it isn't permitted.... They attack each other when they go out of the school compound for there may be no one to intervene and stop them.

6.2.4 Boys' mental distress and support network

In the quantitative analysis, we measure boys' mental distress using the same index that we constructed for girls. We do not detect statistically significant changes in distress in the full sample at either time point, though coefficients on all treatment arms are negative at the first follow-up (Table 7). This overview ignores some suggestive regional heterogeneity, however. In South Gondar, the results are as in the full sample – no significant changes in distress were detected. Yet in East Hararghe, we find negative impacts of AWH Comprehensive+ in comparison to the control group (by nearly 0.5 standard deviations lower, q=0.105) at the first follow-up (Table 7). This effect disappears by the next interview, 1–2 years later.

We also measure whether boys have a supportive adult in their life. In the full sample, we do not detect any differences in likelihood of having a supportive adult across any treatment arm at the first follow-up, but boys in all treatment groups except for AWH Essential are more likely to report such a person by the second follow-up, in comparison to the control group (Table 7) — a finding driven by East Hararghe and marginalised sites.



The qualitative interviews did not identify any key effects from the programme in terms of psychosocial well-being. Because boys in general have greater mobility than their female peers the groups did not function in the same way as a safe space that they did for girls who have fewer opportunities to meet outside of school settings. There also appeared to be more criticisms by some of the boys of some of the male mentors who did not attend sessions regularly or act as a strong role model. For example, a 15-year-old boy in an Act with Her Essential site in East Hararghe noted:

The discussion was not attractive for the boys, and many boys could read the manual and they could not understand. Some of them even could not write from the blackboards. This is the major reason because if they could not understand, it is wastage to come to the sessions. Students hated the session because the mentors were not motivated to teach the students. They had their own farm work and they were not motivated to teach us, and this was the major reason for the dropout.

However, several boys emphasised that they had been advised in the AwH sessions to surround themselves with educated and well-behaved peers and to seek out positive role models to guide their behaviour. A boy from an Act with Her Comprehensive + site explained that the messaging had been as follows:

They educate to be friends with people who have education background. To be friends with persons who have interest in education, who keep their hygiene but not with bad mannered individuals...To be friend with educated persons is also an opportunity for learning. One is able to learn basic numeracy skills from friends for example....Educated persons can support us if we approach and request them. This in turn helps to be motivated in one's education and perform well by easily understanding teachers' lectures. ... They advised us that it is very important to be companions with others who are educated. We will get motivated to continue our education if we pass most of our time with educated people. But, we will be discouraged if we pass our time with bad people. They discourage us not to go to school by undermining education. They may also cause conflict between us and others.



4 Discussion and conclusion

In this paper, we explore impacts of layered adolescent-centric interventions implemented in two zones of rural Ethiopia on the outcomes of approximately 2,300 very young adolescent girls, as well as on a set of gender-focused outcomes of their male peers. We study impacts on girls across six different capability areas, including: education; bodily integrity; health, nutrition and sexual and reproductive health; psychosocial well-being; voice and agency; and economic empowerment. We also explore impacts on a range of cross-cutting outcomes related to girls' knowledge, attitudes, and supportive networks. In total, we examine 19 different pre-specified outcomes for girls across these themes (14 at the first follow-up). We also explore a smaller set of gender-focused outcomes for boys (6), in order to understand any changes that were taking place in the contexts in which the girls live. We study whether outcomes are statistically different in intervention versus control sites, and also compare and contrast outcomes across increasingly intensive layers of programming – programming that includes girls only; girls, boys, and caregivers; girls, boys, caregivers, and their broader communities; and the latter plus the addition of in-kind transfers provided to girls.

One useful way to succinctly summarise the many quantitative findings on girls from our study (across 14 outcomes for the 10-month follow-up, and 19 outcomes for the 24- to 36-month follow-up) is to count – by residential zone, treatment group assignment and survey round – the number of positive coefficients, and the number of positive and statistically significant coefficients, compared to outcomes of girls in control sites. ⁴² We first note that there are very few statistically significant negative impacts for any treatment arm compared to the control group – none for the full sample, South Gondar, or for non-marginalised sites; only one statistically significant negative impact for girls in East Hararghe (the index of economic empowerment among girls assigned to the AWH Comprehensive treatment), and two for marginalised sites (the Index of Gender Equitable Attitudes among girls in Her Spaces and AWH Comprehensive+ sites). Thus, no set of programme layers was harmful to girls' capabilities in a broad sense, compared to the status quo.

Table 8 displays counts of positive coefficient estimates across treatment arm, residential location, and survey round (ignoring statistical significance). Across the 14 outcomes we explore in the full sample at the first follow-up, 13 (93%) are positive in AWH Essential sites, 12 (86%) are positive in Her Spaces and AWH Comprehensive sites, and 9 (64%) are positive in AWH Comprehensive+ sites. At the second follow-up, 17 (89%) are positive (out of 19) in AWH Essential sites, 13 (68%) are positive in AWH Comprehensive sites, 12 (63%) are positive in AWH Comprehensive+ sites, and 11 (58%) are positive in Her Spaces sites. As we look across sites and rounds, AWH Essential sites consistently have the highest number of positive coefficients (except for in non-marginalised sites in the first follow-up), ranging from 74% to 100% of outcomes – something that is unlikely to occur by chance. The lowest number of positive coefficients primarily switches back and forth between Her Spaces sites (concentrated at the second follow-up) and AWH Comprehensive+ sites (concentrated at the first follow-up, and in East Hararghe and marginalised sites) – unsurprising as Her Spaces is the intervention arm that offered the lightest touch, and we provide evidence in Section 6.1 that some AWH Comprehensive+ sites may have experienced a higher degree of negativity due to the more intense perceived imbalance between what girls and boys received.

A final point of interest in Table 8 is to explore, for each intervention arm, the change in fraction of positive coefficients between the 10-month and 24- to 36-month follow-up surveys. For the AWH Comprehensive arm, the fraction of positive coefficients rose across both South Gondar (by 1 percentage point) and East Hararghe (by 11 percentage points). Since community engagement activities in this treatment arm continued through the second follow-up, and we know that in East Hararghe these activities were actually restarted from the beginning after the first follow-up round and persisted until almost the start of the second follow-up round,

⁴² This method equally weights each of the 19 pre-specified primary outcomes for girls. Another way to do this would be to weight the six capability areas equally – by counting whether any outcome in a given capability area was positive and statistically significant (for a total of 6 outcome sets) – and then to provide perhaps a knowledge and an attitudes category as well. Our takeaways would be identical using this method instead.



this suggests that ongoing community work may extend benefits. ⁴³ In contrast, in Her Spaces and AWH Essential communities, the fraction of positive coefficients fell between the first and second follow-up survey rounds everywhere except in non-marginalised sites. And, puzzlingly, the fraction of positive coefficients also fell between the first and second follow-ups in AWH Comprehensive+ communities in every type of location, by between 6 and 31 percentage points; this is perplexing since AWH Comprehensive+ communities also received the community-level engagement (as in the AWH Comprehensive sites). We seek to disentangle this surprising result in future work.

Table 9 summarises statistically significant results only, using the standard cutoff of adjusted q-values ≤ 0.10. Each cell in the table displays impacts on girls' primary outcomes by direction and statistical significance, both between each intervention arm and the control group (+/- noted in cell indicates pos/neg coefficient that is statistically significant), and across increasing intensity of intervention layers (a cell border indicates that the intervention arm is statistically significantly different from the intervention layer to the left, with a thick solid border indicating an increase from the previous layer, and a hashed border indicating a decrease from the previous layer).

We first consider findings summarised in Table 9 separately by region and marginalization status. At the 10month follow-up in South Gondar, the AWH Comprehensive+ arm was the most impactful compared to control sites (four significant positive impacts across domains of voice and agency, economic empowerment, knowledge and gender consciousness), compared to only one in the AWH Essential and AWH Comprehensive arms, and none in the Her Spaces arm. In East Hararghe the AWH Essential arm had the most positive and wide-ranging impacts compared to the control group at the first follow-up (three significant positive impacts across domains of knowledge, bodily integrity, and psychosocial well-being) compared to two statistically significant and positive impacts in AWH Comprehensive sites (but an additional impact was statistically significant and negative) and none in Her Spaces and AWH Comprehensive+ sites. Moving to the marginalised versus non-marginalised site comparison at the first follow-up, we see that there were no improved girls' capabilities in non-marginalised sites due to any intervention intensity, with the exception of one positive and statistically significant impact on knowledge in the AWH Comprehensive+ treatment arm. In marginalised sites, in contrast, all treatment arms had numerous positive impacts compared to control communities (six outcomes in AWH Essential sites, five in Her Spaces and AWH Comprehensive+ sites – though there were also two negative impacts in each of these intervention arms – and four in AWH Comprehensive sites). As discussed in section 6.1, girls' voice and agency and AWH curriculum knowledge were improved by all intervention arms in the full sample, and these impacts were largely driven by improvements in marginalised study sites. But by the second follow-up, there are no statistically significant impacts across any treatment arm and site combination, except for a positive impact on the index of economic empowerment in AWH Essential sites in South Gondar (as compared to control sites).

Next, we consider the findings in Table 9 by each programming arm, additionally factoring in statistical tests of differences across increasing layers of programming intensity. Her Spaces had no statistically significant impacts (compared to the control group) on any outcome at the first or second follow-up in South Gondar, East Hararghe, or non-marginalised sites. In marginalised sites (where we noted above that all interventions had a substantial number of impacts), Her Spaces had a significantly positive impact on five outcomes at the first follow-up (and a negative impact on one outcome), and none at the second follow-up. The AWH Essential intervention had no impacts at either follow-up in non-marginalised sites, and improved only one outcome at the first follow-up and one (different) outcome at the second follow-up in South Gondar — though AWH Essential outperformed Her Spaces across four outcomes, and AWH Comprehensive across two outcomes, at the second follow-up there. Impacts for the AWH Essential arm were somewhat more wide-ranging in East Hararghe (three outcomes, and AWH Essential outperformed AWH Comprehensive there across three

⁴³ Note that the second follow-up survey in South Gondar happened later than in East Hararghe, and longer after the end of community-level engagement activities, so it makes sense that there is a smaller number of additional positive coefficients there than in East Hararghe.



different outcomes) and in marginalised communities (six outcomes) at the first follow-up, although no differences from the control group were detected by the second follow-up. The AWH Comprehensive intervention had no impacts at either follow-up in non-marginalised sites and improved only one outcome in South Gondar and two outcomes in East Hararghe at the first follow-up (and none by the second follow-up). As with the other treatment arms, impacts for the AWH Comprehensive arm were somewhat more wideranging in marginalised communities (four outcomes) at the first follow-up, although by the second follow-up girls in these communities performed worse on outcomes for physical health and nutrition, and menstrual practice, than girls in AWH Essential communities. Finally, for the AWH Comprehensive+ intervention, girls in these communities had no improved outcomes compared to those in control communities in East Hararghe, but one improved outcome in non-marginalised communities, four in South Gondar and five in marginalised communities at the first follow-up. Again, by the second follow-up, no impacts were detected in any site compared to the control group.

To summarise the quantitative findings of this paper, we rely most heavily on the summary evidence on girls' outcomes from Table 9 – which considers both statistically significant differences between each intervention arm and the control group, and differences between increasingly intensive intervention layers – as well as the impacts detected for boys presented in Table 7. We consider impacts across the set of six adolescent capability areas previously defined (education, bodily integrity, physical health and nutrition, psychosocial outcomes, voice and agency and economic empowerment) as well as two main cross-cutting categories (attitudes and knowledge).

This evidence shows that in highly marginalised environments, adolescent-centric interventions across a range of intensity levels (from involving girls only to additionally including peers, caregivers, community members, and transfers) can improve adolescent girls' outcomes in the short term (across five of the eight outcome sets we explore). In terms of net positive statistically significant effects on girls' outcomes, the set of interventions that performed the best in marginalised environments was the AWH Essential model, which included curriculum-based group meetings for girls and boys as well as touchpoints for their caregivers; this intervention set also had the highest percentage of positive estimated treatment coefficients (100%), and outperformed the less-intensive (Her Spaces) and more-intensive (AWH Comprehensive) for selected boy outcomes. Yet the intervention arms with higher or lower intensity were not far behind, particularly in terms of a number of statistically significant positive impacts across the girls' outcomes studied. Importantly, no impacts on girls' outcomes were detected for any of these intervention intensities (including AWH Essential) after another one to two additional years had passed, and the proportion of positive estimated treatment coefficients had fallen for all intervention arms (by 14-31 percentage points). That said, we note positive impacts on boys' outcomes related to knowledge, gender-equitable attitudes, mental distress, and support networks from the AWH Essential treatment at the second follow-up. So, there is some evidence of an advantage to the model incorporating girls, boys and caregivers, over the most basic intervention (only interacting with girls) in marginalised contexts.

In non-marginalised environments, the quantitative analysis did not detect any differences on girls' outcomes between intervention arms and the control group (with one exception – see Table 9), or across increasing layers of intervention intensity. So, in non-marginalised environments, there was little evidence of improvements in girls' outcomes regardless of programme intensity.

In South Gondar, an environment with a richer history of youth- and women-centred work and where community reception for adolescent-centric programming was more positive, a highly intensive set of interventions that included curriculum-based meetings for boys and girls, touchpoints with parents, community-level work, and asset transfers to girls (AWH Comprehensive+) can have some (but more limited) beneficial impact on girls in the short term, across voice and agency, economic empowerment, gender consciousness and curriculum knowledge. In the medium term, however, nearly all impacts fade out – though there is some suggestive evidence that an intermediate multi-level model including girls, boys and caregivers (AWH Essential) outperforms the more- and less-intensive interventions both for girls' outcomes related to



economic empowerment, service knowledge and accessibility, as well as boys' outcomes related to gender-equitable attitudes and peer violence.

For East Hararghe, the results are somewhat different. This zone was characterised by somewhat more conservative gender norms, where less gender-focused work had been conducted previously, and community reception to the girl-focused programming was less enthusiastic. In East Hararghe, AWH Essential produced the highest number of positive and statistically significant outcomes (across three outcome sets of the eight we study) at the 10-month follow-up, closely followed by the AWH Comprehensive programming (two outcome sets). Although AWH Essential appears to have outperformed the more intensive AWH Comprehensive programme at the 10-month follow-up (at least across violence, health, and economic empowerment outcomes), recall that the community component of the AWH Comprehensive intervention was lagging there, and reorganised and restarted following the pandemic closures. We do not detect statistically significant differences between any intervention arm and the control group (or for any but one test of increasing intensity layers) by the second follow-up, up to two years later.

In sum, we conclude from the quantitative findings of this study that in highly marginalised areas, girl-focused programming of any intensity level can improve girls' outcomes across numerous capability domains in the short term. Furthermore, although we do not see improvements in girls' outcomes over a longer timeframe in these areas, we do see improvements in gender-focused outcomes of male peers in sites where boys and caregivers were also included. Across a broader range of sites, multi-level programming in the short term improves some girls' outcomes, and outperforms more basic, girl-only programming. However, the multi-level programming that we evaluate did not have enduring impacts outside of marginalised areas. The qualitative findings also underscore that although there have been important shifts in some girls' knowledge and increased opportunities for voice and agency, adolescents' trajectories are still significantly shaped by broader structural constraints. These include limited shifts in gender attitudes and behaviours among parents and the wider community, as well as enduring poverty, a dearth of income-generating opportunities in rural and conflict-affected settings, and inadequate investment in adolescent-friendly and gender-sensitive education, health, psychosocial and justice/policing services. In other words, programming that aims to shift gender attitudes and norms can support change at the level of the individual and, to a lesser degree, the family and community, but without complementary efforts to scale up and improve investments in services and support for young people, changes are likely to be limited and seldom transformative.



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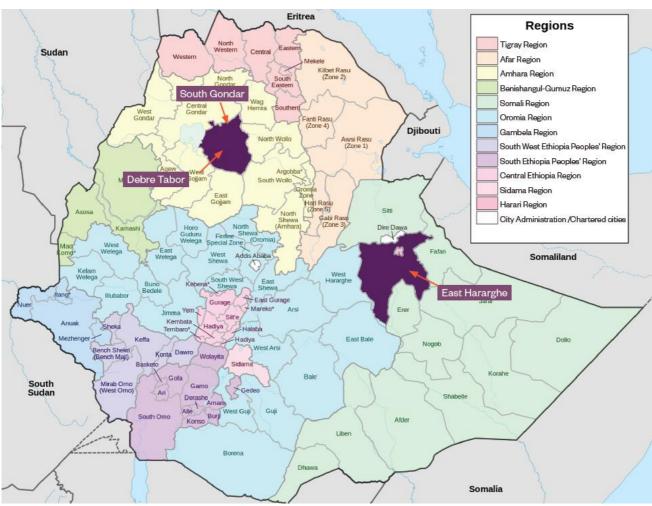
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Figure 1. Gage impact evaluation research sites



Notes: Locations (administrative zones) in dark purple are those where the GAGE impact evaluation analyzed in this paper was conducted. These include South Gondar Zone (Amahara Region) and East Hararghe Zone (Oromia Region).



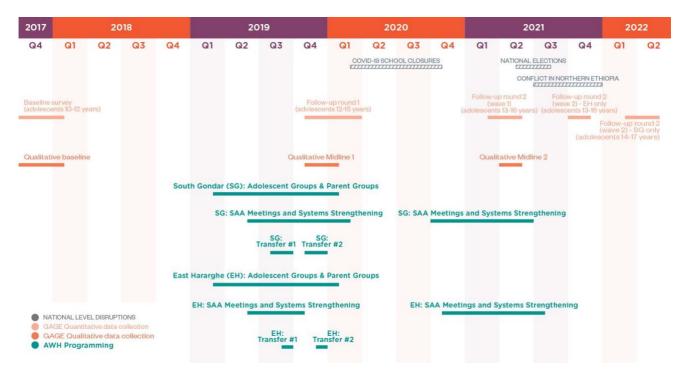
Figure 2. Gage impact evaluation research sites



Notes: Although curriculum-based programming for adolescents provided by Pathfinder and CARE was available for all adolescents living in a study site who were aged 10-13 at time of enrollment, our analysis focuses only on the subset of adolescents who were randomly selected from a project-specific census style household listing, and who were aged 11-13 at the time the adolescent groups were launched.



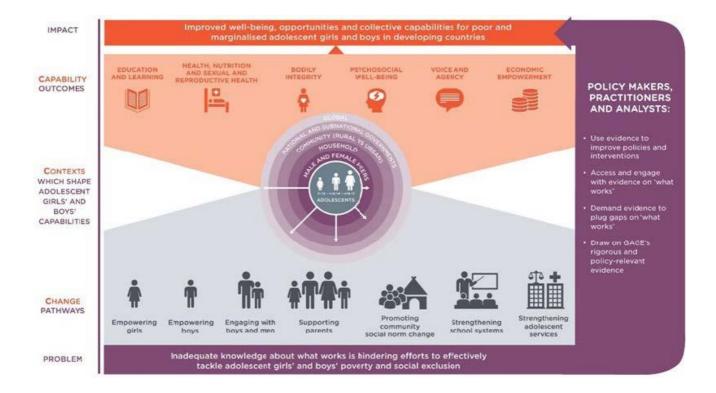
Figure 3. Timeline for evaluation



Notes: This figure illustrates the timeline of the AWH programming, GAGE evaluation data collection, and relevant events in Ethiopia.



Figure 4. GAGE conceptual framework



Appendix A: Summary Statistics, Balance, and Attrition

Balance testing

Appendix Table A2 provides the results of balance tests using the quantitative baseline data among the sample of girls' households. The first panel presents results for all sites combined, and the following two panels present results separately by region. Each column is a regression, where the outcome is an indicator for the treatment group specified in the column title (i.e., comparing each intervention group to the control sites (columns 1-8), or each intervention group to the next layer of intervention (columns 9-14)). Controls are classified into three groups. All regressions include controls related to the impact evaluation design ("evaluation controls")—including adolescent age at baseline, an indicator for households with multiple age-eligible adolescents, and a series of randomization block indicators—as well as a series of indicators for baseline survey month. Additionally, all regressions include the rich set of controls used in our main analysis regressions (specified in equation 1, "rich controls"), including household size, decile of household asset index, and indicators for household head female, household head literate, and household ever received support from the Ethiopian federal Productive Safety Net Program (PSNP). Evennumbered columns additionally include a subset of primary and secondary outcomes from our main analysis, for which we have baseline measures ("baseline outcomes"). The final row of each panel contains p-values from the F-test of joint significance across all controls (excluding survey month indicators).

Focusing on the first panel of Appendix Table A2 where we consider all research sites together, results suggest no statistically significant baseline imbalance detected when including the evaluation controls and the rich controls, between any treatment group and the control group (columns 1, 3, 5, and 7 – where the minimum p-value from a joint F-test across controls is p=0.386), and likewise no statistically significant baseline imbalance detected between treatment arms and the next intervention layer (columns 9, 11, and 13 – though the p-value on column 13 is 0.107). Once we additionally include the "baseline outcome" control set to this specification (evennumbered columns), there are a few instances of p-values falling below the standard cutoff of p=0.1. In particular, column (3) suggests that girls in the AWH Essential sites were more likely to have witnessed or experienced violence at home at baseline than girls in control sites (and columns 10 and 12 suggest that these same AWH Essential girls were also more likely to have experienced or witnessed violence at home than girls in Her Spaces and girls in AWH Comprehensive sites). Yet this does not mean that girls in AWH Essential sites were disadvantaged across all margins in comparison to girls in other sites - girls in AWH Essential sites were better off than their counterparts in Her Spaces sites in terms of say in the household, not needing permission to go places, and feel safe walking in the community at night (and similarly on this last item for AWH Essential girls being better off than girls in AWH Comprehensive sites).

We see a similar pattern in Appendix Tables A3 and A4, for South Gondar and East Hararghe, respectively. Again, results suggest little statistically significant baseline imbalance detected when including the evaluation controls and the rich controls, between any treatment group and the control group (for South Gondar, columns 1, 3, 5 and East Hararghe columns 1, 3, 5, and 7; for column 7 in South Gondar, the p-value from a joint F-test across controls is p=0.016). Likewise, there is little statistically significant baseline imbalance detected between treatment arms and the next intervention layer in South Gondar (columns 9 and 11; the p-value from a joint F-test across

controls is p<0.01), though for East Hararghe controls are jointly significant (p<0.01) in both columns 9 and 11 (but not 13). Across the even columns, which contain the "baseline outcome" control set, the joint F-test does indicate statistical significance for sites in South Gondar and in East Hararghe, but again with advantage alternating across the treatment and control (or treatment and additional layers) for particular measures.

Overall, we interpret the evidence presented in these tables to suggest that there is little imbalance across baseline household characteristics ("rich controls", which we include in our primary regression specification in any case), and weak evidence that any intervention group was better or worse off in a broad sense (across a range of baseline measures of outcome variables) than any other intervention group.

Attrition

The quantitative follow-up survey data collections involved locating thousands of adolescent girls in the rural study sites (or wherever they had moved) one to three years after initial study recruitment. Survey enumerator teams were well-trained in tracking methods, and where necessary worked in concert with locals and the qualitative research team to successfully survey more than 87% of girls in each follow-up round. While there is evidence of small differential attrition across treatment arms (Appendix A), given low overall rates this is unlikely to impact findings.

Appendix Table A5 presents results of detailed survey attrition analysis, across each follow-up data collection round and across all study sites as well as broken out by study zone. Each column is a separate regression of an indicator for interviewed at follow-up on the full set of treatment group indicators as well as our basic and rich controls. The even columns additionally include interactions between these controls and the treatment group indicators.

At the 10-month follow-up survey, 87.2% of girls were successfully surveyed. Refusal rates were low (2.6%) and most girls who were not surveyed were unable to be found (8.6%), most likely because they had moved somewhere they could not be tracked during the allotted survey data collection period (although there were attempts to locate individuals who had left their baseline residential location). Appendix Table A5, Panel A, presents results of a detailed attrition analysis for the first follow-up round. Across the full sample of study sites in column (1), there is no evidence of differential attrition between any treatment arm and the control group, though we do detect differential attrition between some treatment arms—AWH Essential girls were 7-8 percentage points (p.p.) more likely than Her Spaces or AWH Comprehensive girls to be surveyed (p=0.024 and p=0.030, respectively), on a base of 86% surveyed in the control group. Column (2) adds interactions between all controls and treatment group indicators, and detects strengthened differences across groups while some additional differences between the treatment and control groups are found (once again favouring AWH Essential girls over girls in control, Her Spaces, and AWH Comprehensive communities) – though these differences are wholly accounted for by regional differences in tracking (which we discuss next).

Columns (3) and (4) of Appendix Table A5 repeat this detailed attrition analysis, focusing on girls in South Gondar sites only. Tracking was somewhat more successful in South Gondar, where 93.5% of girls were surveyed. Refusal rates were extremely low (0.7%), and just 5.5% of the sample was unable to be located (primarily due to migration). The simple specification (column 3) suggests that Her Spaces girls in South Gondar were 5.6 p.p. more likely that girls in control sites to be surveyed, but there are no other statistically significant differences across treatment and control arms, or between treatment arms. Adding in interactions highlights that girls in AWH Comprehensive and AWH Comprehensive + communities were somewhat less likely to be found than girls in control communities.

Tracking rates in East Hararghe for this first follow-up data collection were lower than in South Gondar, with 81.1% of girls surveyed. This is partially due to higher refusals (4.5%) and also due to higher numbers of girls unable to be located (11.6%). In contrast to what we found in South Gondar, fewer than half of these unfound girls in East Hararghe were known to have migrated – many were just unable to be traced. Columns (5) and (6) of Appendix Table A5 provides results of our detailed attrition analysis for girls in these sites. We find that girls in Her Space sites in East Hararghe there were somewhat less likely to be resurveyed than girls in control sites (by nearly 14 p.p.), and some statistically significant differences across treatment groups (which drive the results we detected in column (1) for the full sample). More substantial differences detected in the full interacted model.

The effective survey rate for the second follow-up survey (24- to 36-months after baseline data collection) was 93.6%. Recall that this round of data collection followed a two-stage tracking methodology in order to limit survey attrition, which was a larger concern as time from the baseline data collection grew (see Section 5.3, above). Refusal rates were slightly higher in the second follow-up than they were in the first (3.7%). Appendix Table A5, Panel B, presents results of a detailed attrition analysis for this second follow-up round. Across the full sample of study sites in column (1), there is no evidence of differential attrition between any treatment arm and the control group, either between the control group and any treatment group, or across treatment groups. Column (2) adds interactions between all controls and treatment group indicators, and detects some evidence of differences across groups (as before, favouring AWH Essential girls over girls in Her Spaces and AWH Comprehensive communities).

Columns (3) and (4) of Appendix Table A5, panel B, repeat this detailed attrition analysis for the second follow-up survey, focusing on girls in South Gondar sites only. As before, tracking was somewhat more successful in South Gondar, where 96.9% of girls were surveyed. Refusal rates were extremely low (0.6%), and just 2.1% of the sample was unable to be located (primarily due to migration). The simple specification (column 3) suggests that Her Spaces girls in South Gondar were 6.9 p.p. more likely that girls in control sites to be surveyed, but there are only marginally significant differences between treatment control arms. Adding in interactions highlights that girls in AWH Comprehensive and AWH Comprehensive + communities were somewhat less likely to be found than girls in control communities – as in the first follow-up.

Tracking rates in East Hararghe for this second follow-up data collection were again lower than in South Gondar (with 90.5% of girls surveyed) – though still a very high tracking rate for this

rural sample of adolescents. This lower survey rate in mainly due to higher refusals in East Hararghe (6.6%). Columns (5) and (6) of Appendix Table A5, Panel B provides results of our detailed attrition analysis for girls in these sites at the second follow-up. We find that girls in Her Space sites in East Hararghe there were somewhat less likely to be resurveyed than girls in control sites (by nearly 13 p.p.), though there are no statistically significant differences across treatment groups. More substantial differences detected in the full interacted model.

Table A1. Control group means for girls' outcome measures

		Follow-up	#1	Follow-up #2			
		South	East		South	East	
	All	Gondar	Hararghe	All	Gondar	Hararghe	
Education and Learning Outcomes							
Index of education (standardized) ^				0.000	0.320	-0.382	
=1 if enrolled in school	0.790	0.986	0.592	0.725	0.858	0.586	
Share school days attended in last 2 weeks (0 if not enrolled)	0.698	0.882	0.507	0.639	0.809	0.438	
=1 if did not miss >1 consecutive week of school in last 12	0.715	0.919	0.508	0.611	0.691	0.526	
months (0 if not enrolled)							
=1 if aspires to attain at least a secondary school degree	0.956	0.979	0.932	0.931	0.944	0.917	
Highest grade attended (not including kindergarten)	4.745	5.477	4.002	5.863	6.748	4.919	
=1 if ever enrolled in secondary school				0.096	0.164	0.023	
Bodily Integrity Outcomes							
Index of violence (standardized, higher=less violence)	0.000	-0.040	0.042	0.000	-0.095	0.106	
Peer violence scale (0-6, higher=less violence)	5.659	5.630	5.688	5.814	5.793	5.835	
=1 if did not experience violence in household, or witness	0.573	0.560	0.585	0.637	0.596	0.680	
violence against female caregiver, in last 12 months							
=1 if did not experience sexual violence in last 12 months	0.981	0.977	0.986	0.979	0.972	0.986	
Ideal age of marriage	22.435	23.414	21.363	21.316	22.744	19.675	
=1 if did not experience peer violence in last 12 months	0.881	0.863	0.900	0.922	0.888	0.959	
=1 if did not witness/experience corporal punishment in school in	0.106	0.121	0.079	0.305	0.319	0.283	
last 12 months (among enrolled)							
=1 if did not perpetrate peer violence in last 12 months	0.900	0.926	0.874	0.950	0.956	0.944	
=1 if never married	0.937	0.954	0.921	0.888	0.916	0.859	
Physical Health, Nutrition, and Sexual and Reproductive Health						7.027	
Index of health and nutrition (standardized)	0.000	0.177	-0.179	0.000	0.051	-0.053	
=1 if self-reported health (very) good	0.899	0.883	0.916	0.916	0.886	0.948	
Proportion meals yesterday with meat/chicken/fish/egg (0 if no	0.038	0.052	0.024	0.023	0.016	0.029	
meals)							
=1 if never hungry because of lack of food in last 4 weeks	0.865	0.960	0.769	0.882	0.964	0.796	
Index of menstrual health practices (among those who have	0.000	0.353	-0.183	0.000	0.116	-0.096	
reached menarche, standardized)	0.000	0.000	0,100	0.000	0.110	0.000	
=1 if normal activities not affected by menstruation	0.831	0.952	0.785	0.859	0.841	0.876	
Index of improved menstrual hygiene (0-2)	0.733	0.929	0.632	1.100	1.320	0.918	
=1 if uses modern sanitary product (i.e., re-usable pad,	0.269	0.466	0.195	0.445	0.549	0.356	
sanitary pad)	0.207	0.400	0.175	0.773	0.547	0.550	
=1 if appropriate disposal of menstrual product at home	0.396	0.463	0.361	0.590	0.682	0.515	
Ideal age of first child ^	0.570			23.48	25.61	21.01	
=1 if not ever pregnant (zero if never had sex) ^				0.931	0.974	0.862	
Desired fertility ^				4.99	3.89	6.21	
Psychosocial Wellbeing Outcomes				4.99	3.09	0.21	
Rosenberg Self-Esteem Scale score (0-40) ^				29.891	28.465	31.565	
Patient Health Questionnaire-9 score (0-27, higher=better mental	26.412	 26.496	26.322	26.534	26.581	26.485	
health)	20.412	20.490	20.322	20.554	20.361	20.403	
Child and Youth Resilience Scale score (12-36, higher=more	31.310	33.014	20 222	21 565	32.471	30.638	
resilience)	31.310	33.014	29.323	31.565	32.4/1	30.038	
	0.973	0.986	0.959	0.983	0.004	0.072	
=1 if PHQ-9 detects little sign of depression	0.9/3	0.780	0.333	0.983	0.994	0.972	

Table A1. Control group means for girls' outcome measures (continued)

		Follow-up	#1	Follow-up #2			
		South	East		South	East	
	All	Gondar	Hararghe	All	Gondar	Hararghe	
Voice and Agency Outcomes							
Index of voice and agency (standardized)	0.000	0.080	-0.092	0.000	-0.015	0.017	
Index of participation in decision-making (standardized)	0.000	0.113	-0.124	0.000	0.041	-0.045	
=1 if has a leadership role at school (among enrolled)	0.212	0.207	0.221	0.230	0.237	0.219	
Index of say in household (0-8)	3.924	4.528	3.254	4.154	4.266	4.031	
Index of comfort expressing oneself (standardized)	0.000	0.203	-0.206	0.000	0.038	-0.040	
=1 if comfortable expressing opinion with agemates	0.764	0.778	0.750	0.805	0.801	0.809	
=1 if comfortable expressing opinion with elders	0.384	0.526	0.240	0.453	0.489	0.416	
Index of has discussed issues with mother (0-7)	2.579	2.991	2.113	3.171	3.512	2.776	
Index of has discussed issues with father (0-6)	2.209	2.659	1.735	2.570	2.792	2.323	
Index of voice (standardized)	0.000	0.183	-0.184	0.000	0.087	-0.092	
"My parents ask for my opinion on things" (0-2)	1.107	1.153	1.059	1.178	1.185	1.170	
"My parents listen when I share opinions" (0-2)	1.312	1.443	1.180	1.454	1.556	1.345	
"My friends ask me for advice" (0-2)	1.069	1.263	0.873	1.233	1.347	1.113	
"I can talk to someone if I see something wrong" (0-2)	0.974	1.187	0.756	1.143	1.267	1.011	
"I can speak up in class" (among enrolled, 0-2)	1.345	1.349	1.339	1.394	1.332	1.492	
"I can speak up when I see someone being hurt" (0-2)	1.144	1.276	1.009	1.220	1.319	1.113	
"I can ask adults for help when I need it" (0-2)	1.111	1.172	1.049	1.147	1.121	1.175	
Index of mobility (standardized)	0.000	-0.273	0.292	0.000	-0.167	0.181	
=1 if has left kebele in last 3 months	0.213	0.172	0.255	0.247	0.194	0.304	
Index doesn't need permission to go places (0-4)	1.088	0.905	1.274	0.566	0.561	0.571	
=1 if doesn't need permission to go to market	0.117	0.088	0.148	0.101	0.102	0.100	
=1 if doesn't need permission to go to home of a friend or relative	0.275	0.203	0.348	0.121	0.117	0.126	
=1 if doesn't need permission to go to religious place	0.337	0.291	0.385	0.234	0.257	0.210	
=1 if doesn't need permission to go to public space with	0.314	0.323	0.303	0.107	0.085	0.129	
friend							
Index of places adolescent goes (0-4)	2.782	2.842	2.720	3.088	3.160	3.012	
=1 if goes to market	0.694	0.717	0.670	0.722	0.778	0.663	
=1 if goes to home of a friend or relative	0.914	0.877	0.951	0.931	0.884	0.979	
=1 if goes to religious meeting place	0.703	0.688	0.719	0.894	0.909	0.879	
=1 if goes to public space with friend	0.507	0.560	0.448	0.543	0.591	0.494	
=1 if feels safe walking in community during day	0.937	0.926	0.949	0.953	0.932	0.976	
=1 if feels safe walking in community during night	0.368	0.162	0.583	0.488	0.355	0.632	
Index of collective action (standardized) ^				0.000	-0.004	0.004	
=1 if talked to others about serious problem in community ^				0.110	0.144	0.075	
=1 if took action about a serious problem in community ^				0.049	0.024	0.075	
Economic Empowerment Outcomes							
Index of economic empowerment (standardized)	0.000	-0.006	0.007	0.000	0.145	-0.153	
=1 if had money she controls in last 12 months	0.161	0.112	0.212	0.115	0.110	0.121	
=1 if has savings for future	0.526	0.349	0.707	0.202	0.161	0.245	
Proportion of time spent in leisure/school/study	0.284	0.331	0.231	0.475	0.587	0.357	
Index of economic aspirations (standardized)	0.000	0.200	-0.208	0.000	0.191	-0.199	
=1 if aspires to skilled/professional work when adult	0.871	0.934	0.806	0.803	0.890	0.713	
=1 if aspires to (self)employment when adult	0.952	0.988	0.915	0.928	0.959	0.896	
• • • • •							

Table A1. Control group means for girls' outcome measures (continued)

		Follow-up	#1	Follow-up #2			
		South	East		South	East	
	All	Gondar	Hararghe	All	Gondar	Hararghe	
=1 if in school, training, or studying	0.814	0.984	0.620	0.726	0.853	0.593	
Proportion of time in school, training, or studying	0.237	0.296	0.170	0.428	0.538	0.313	
Proportion of time in paid work ^				0.000	0.000	0.000	
=1 if any paid work in last 12 months ^				0.066	0.049	0.083	
Wages in last 7 days ^				0.039	0.028	0.051	
Cross-Cutting Outcomes							
Index of gender equitable attitudes (standardized)	0.000	0.246	-0.254	0.000	0.263	-0.282	
GEA Index of Gender Stereotypical Traits (standardized)	0.000	0.121	-0.125	0.000	0.140	-0.149	
=1 if agrees 'Girls should avoid raising voice'	0.644	0.577	0.712	0.496	0.510	0.480	
=1 if agrees 'Boys should be able to show feelings'	0.876	0.887	0.866	0.817	0.864	0.768	
=1 if agrees 'Girls are expected to be humble'	0.831	0.823	0.838	0.841	0.731	0.958	
=1 if agrees 'Important for boys to show they are tough'	0.774	0.733	0.816	0.699	0.715	0.682	
=1 if agrees 'Boys who behave like girls are weak'	0.541	0.513	0.570	0.428	0.389	0.469	
=1 if agrees 'Girls need protection more than boys'	0.796	0.774	0.818	0.754	0.683	0.828	
=1 if agrees 'Boys should defend themselves'	0.756	0.768	0.744	0.734	0.792	0.672	
=1 if agrees 'Boys should be raised tough'	0.830	0.813	0.846	0.784	0.783	0.786	
GEA Index of Gender Stereotypical Roles (standardized)	0.000	0.261	-0.263	0.000	0.279	-0.295	
=1 if agrees 'Women should have same chance to work	0.851	0.893	0.808	0.857	0.890	0.821	
outside home as men'							
=1 if agrees 'Girls and boys should share hh tasks equally'	0.728	0.803	0.652	0.746	0.830	0.657	
=1 if agrees 'Women's most important role is home'	0.831	0.822	0.840	0.845	0.782	0.911	
=1 if agrees 'Man should have final word'	0.712	0.577	0.849	0.656	0.543	0.775	
=1 if agrees 'Woman should obey her husband'	0.857	0.839	0.875	0.869	0.773	0.971	
=1 if agrees 'Boy should have final say with girlfriend'	0.785	0.727	0.845	0.773	0.724	0.824	
=1 if agrees 'Ok to tease a girl who acts like boy'	0.347	0.335	0.359	0.253	0.282	0.223	
=1 if agrees 'Ok to tease a boy who acts like a girl'	0.326	0.321	0.331	0.260	0.301	0.216	
Index of gender consciousness (standardized)	0.000	0.116	-0.123	0.000	-0.015	0.017	
=1 if agrees 'Our culture makes it hard for girls to achieve goals'	0.438	0.510	0.365	0.486	0.439	0.536	
=1 if agrees 'I'm aware of reactions to my gender'	0.280	0.326	0.232	0.719	0.694	0.745	
=1 if agrees 'I think about gender roles'	0.305	0.315	0.295	0.636	0.631	0.642	
=1 if agrees 'Possible to change people's reaction to my gender'	0.352	0.358	0.346	0.606	0.670	0.537	
Index of gendered attitudes toward education (standardized)	0.000	0.354	-0.364	0.000	0.154	-0.162	
=1 if agrees 'If family can afford for one child to go to secondary school, it should be the boy only'	0.307	0.158	0.459	0.249	0.131	0.373	
=1 if agrees 'Only boys should learn about science, technology, and math'	0.181	0.098	0.264	0.134	0.081	0.189	
=1 if agrees 'Girls should be sent to school only if they aren't needed to help at home'	0.345	0.228	0.466	0.206	0.222	0.190	
=1 if agrees 'A gir's marriage can wait until she has completed senior secondary school'	0.876	0.887	0.866	0.817	0.864	0.768	
=1 if agrees 'It is appropriate to take boys out of school for	0.290	0.202	0.379	0.160	0.177	0.142	
work' Index of attitudes toward violence (standardized)	0.000	0.200	0.200	0.000	0.142	0.152	
Index of attitudes toward violence (standardized)	0.000	0.390	-0.398 0.757	0.000	0.143	-0.153	
=1 if agrees 'It is acceptable for a man to hit his wife'	0.528	0.302	0.757	0.366	0.321	0.414	
=1 if agrees 'A man using violence is a private matter'	0.499	0.389	0.612	0.518	0.430	0.612 0.640	
=1 if agrees 'A woman should tolerate violence'	0.694	0.611	0.778	0.630	0.621	0.040	

Table A1. Control group means for girls' outcome measures (continued)

	Follow-up #1				#2	
		South	East		South	East
	All	Gondar	Hararghe	All	Gondar	Hararghe
Index of supportive network (standardized)	0.000	0.035	-0.035	0.000	-0.178	0.188
=1 if has trusted female friend	0.638	0.635	0.641	0.633	0.588	0.680
=1 if has trusted male friend	0.040	0.009	0.070	0.059	0.015	0.104
=1 if has trusted adult	0.576	0.688	0.463	0.559	0.521	0.599
Index of service knowledge (standardized) ^				0.000	0.286	-0.321
=1 if knows where to get services for addiction				0.060	0.107	0.007
=1 if knows where to get services for mental health				0.080	0.122	0.035
=1 if knows where to get services for pregnancy prevention				0.330	0.506	0.133
=1 if knows where to get services for abortion				0.200	0.317	0.068
=1 if knows where to get services for violence				0.339	0.336	0.341
=1 if knows where to get services for injustice under law				0.211	0.266	0.153
Index of service accessibility (standardized) ^				0.000	0.269	-0.301
=1 if believes an adolescent could get services for addiction				0.059	0.105	0.007
=1 if believes an adolescent could get services for mental health				0.069	0.101	0.035
=1 if believes an adolescent could get services for pregnancy prevention				0.279	0.438	0.101
=1 if believes an adolescent could get services for abortion				0.142	0.243	0.029
=1 if believes an adolescent could get services for violence				0.287	0.283	0.290
=1 if believes an adolescent could get services for injustice under				0.172	0.208	0.134
law						
Knowledge Index	0.000	0.270	-0.281	0.000	0.181	-0.195
=1 knows girls reach puberty first (in AWH curr only)	0.504	0.287	0.725	0.623	0.413	0.845
=1 knows menstruation frequency	0.469	0.584	0.351	0.824	0.899	0.745
=1 knows menarche allows pregnancy	0.699	0.810	0.586	0.769	0.864	0.668
=1 knows early pregnancy bad for health (in AWH curr only)	0.669	0.699	0.638	0.774	0.774	0.773
Index correctly names iron-rich foods (0-4) (in AWH curr only)	2.148	2.443	1.849	2.263	2.417	2.100
=1 knows number meals that is healthy	0.916	0.985	0.847	0.932	0.974	0.888
=1 knows legal age marriage for girls (in AWH curr only)	0.139	0.210	0.068	0.377	0.603	0.139
=1 knows legal age marriage for boys (in AWH curr only)	0.047	0.050	0.044	0.154	0.216	0.089
=1 knows FGMC has risks	0.333	0.510	0.157			
=1 knows where to get help for violence	0.281	0.269	0.292	0.337	0.334	0.341
=1 knows where to keep money	0.812	0.887	0.734	0.965	0.993	0.934
=1 knows what constitutes negotiation skills	0.214	0.162	0.266	0.454	0.349	0.564
=1 knows boys not biologically smarter	0.536	0.583	0.489	0.515	0.481	0.550
=1 knows gender roles can be changed (in AWH curr only)	0.463	0.442	0.485	0.574	0.579	0.569

Notes for Table A1: This table displays control group means for all pre-specified girls' outcome measures. Italics indicate the measures pre-specified as primary outcomes; italicized measures indicated with ^ are those that were pre-specified for analysis in the second follow-up round only. For more details on variable construction, see Jones et al., 2020. The Knowledge Index is constructed of items that are included in the AWH curriculum (a subset of which are also included in the Her Spaces curriculum).

Table A2. Balance tests across treatment arms, all sites

	•			Essential		Compre-	AWH Compre-		
	vs Co			ontrol		s Control		vs Control	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Household size	0.020**	0.018*	0.004	-0.001	0.008	0.009	0.024**	0.022**	
	(0.010)	(0.009)	(0.009)	(0.009)	(0.009)	(0.010)	(0.010)	(0.011)	
=1 if household head is female	0.111***	0.089**	0.009	0.030	0.017	0.031	0.100**	0.103**	
	(0.038)	(0.040)	(0.046)	(0.044)	(0.043)	(0.042)	(0.040)	(0.042)	
=1 if household head is literate	0.052	0.037	0.031	0.024	-0.017	-0.012	0.011	0.031	
	(0.044)	(0.051)	(0.038)	(0.044)	(0.031)	(0.035)	(0.035)	(0.040)	
Household asset index	-0.013	-0.010	-0.000	0.000	-0.013	-0.013	0.005	0.008	
	(0.011)	(0.011)	(0.011)	(0.012)	(0.011)	(0.011)	(0.011)	(0.011)	
=1 if household ever received	0.028	0.025	0.004	-0.006	-0.083*	-0.071	-0.022	-0.030	
PSNP support	(0.046)	(0.047)	(0.042)	(0.044)	(0.048)	(0.053)	(0.039)	(0.040)	
=1 if enrolled in school		-0.069		-0.024		-0.046		-0.022	
		(0.070)		(0.056)		(0.068)		(0.077)	
Highest grade attended (not		-0.002		0.017		0.008		-0.008	
including kindergarten)		(0.015)		(0.012)		(0.014)		(0.016)	
Aspiration for highest grade (0-		-0.001		-0.003		-0.011		-0.007	
15)		(0.006)		(0.006)		(0.008)		(0.008)	
Peer violence experience scale		0.001		0.019		-0.005		-0.015	
score in last 12 months (0-6,		(0.019)		(0.015)		(0.020)		(0.017)	
higher is less violence)		, , ,		, ,		, ,		, , ,	
=1 of has not		-0.039		-0.122**		-0.027		0.047	
experienced/witnessed violence		(0.061)		(0.054)		(0.052)		(0.054)	
at home in last 12 months		,		, ,		, ,		, ,	
=1 if self-reported health is		0.014		0.016		0.087*		-0.024	
(very) good		(0.042)		(0.052)		(0.046)		(0.050)	
GHQ-12 score (0-12, inverted so		0.017		0.010		0.003		0.011	
higher is less distress)		(0.010)		(0.011)		(0.011)		(0.013)	
Self Esteem Scale (10-40, higher		-0.001		0.009		-0.001		0.014**	
is more)		(0.006)		(0.007)		(0.006)		(0.006)	
Index of say in hh decisions (0-		-0.004		0.011		-0.008		0.010	
6)		(0.013)		(0.012)		(0.013)		(0.013)	
=1 if does not need permission		-0.133		0.034		-0.051		-0.108	
to go places		(0.082)		(0.072)		(0.090)		(0.077)	
=1 if feels safe walking in		-0.037		-0.046		0.155*		-0.008	
community during day		(0.068)		(0.060)		(0.088)		(0.083)	
=1 if feels safe walking in		-0.082*		0.048		-0.010		0.010	
community at night		(0.042)		(0.040)		(0.040)		(0.039)	
=1 if has had paid work in last		0.070		0.114		0.050		0.006	
12 months		(0.078)		(0.095)		(0.085)		(0.081)	
Number of observations	1009	925	1005	912	994	899	1005	900	
p-value from joint F-test	[0.506]	[0.157]	[0.988]	[0.001]	[0.563]	[0.182]	[0.386]	[0.113]	
1 J J	[0.500]	[0.13/]	[0.700]	[0.001]	[0.505]	[0.102]	[0.500]	[0.113]	

Table A2. Balance tests across treatment arms, all sites (continued)

			AV	VH	Compreh	ensive+ vs
	AWH Ess	sential vs.	Compreh	ensive vs	AV	VH
	Her S	paces	AWH E	Essential	Compre	ehensive
	(9)	(10)	(11)	(12)	(13)	(14)
Household size	-0.010	-0.013	-0.001	0.005	0.016	0.015*
	(0.010)	(0.011)	(0.009)	(0.010)	(0.010)	(0.009)
=1 if household head is female	-0.098**	-0.074	0.002	0.015	0.089*	0.088*
	(0.049)	(0.052)	(0.048)	(0.055)	(0.048)	(0.049)
=1 if household head is literate	-0.032	-0.029	-0.021	0.001	0.028	0.029
	(0.038)	(0.041)	(0.031)	(0.032)	(0.036)	(0.038)
Household asset index	0.010	0.006	-0.009	-0.013	0.019*	0.020*
	(0.013)	(0.012)	(0.012)	(0.012)	(0.011)	(0.011)
=1 if household ever received	0.022	0.006	-0.094*	-0.064	0.080	0.050
PSNP support	(0.049)	(0.052)	(0.047)	(0.048)	(0.056)	(0.057)
=1 if enrolled in school		-0.009		-0.038		0.025
		(0.084)		(0.085)		(0.068)
Highest grade attended (not		0.010		-0.020		-0.010
including kindergarten)		(0.013)		(0.014)		(0.018)
Aspiration for highest grade (0-		-0.009		-0.001		0.001
15)		(0.007)		(0.007)		(0.007)
Peer violence experience scale		0.014		-0.017		-0.011
score in last 12 months (0-6,		(0.019)		(0.016)		(0.019)
higher is less violence)						
=1 of has not		-0.104*		0.108**		0.119**
experienced/witnessed violence		(0.062)		(0.048)		(0.054)
at home in last 12 months						
=1 if self-reported health is		0.027		0.117**		-0.115**
(very) good		(0.057)		(0.054)		(0.048)
GHQ-12 score (0-12, inverted so		0.007		-0.017		0.013
higher is less distress)		(0.014)		(0.013)		(0.014)
Self Esteem Scale (10-40, higher		0.004		-0.004		0.010
is more)		(0.007)		(0.007)		(0.008)
Index of say in hh decisions (0-		0.026**		-0.009		0.023
6)		(0.013)		(0.012)		(0.015)
=1 if does not need permission		0.167*		-0.119		-0.056
to go places		(0.084)		(0.094)		(0.088)
=1 if feels safe walking in		0.005		0.155		-0.198*
community during day		(0.067)		(0.095)		(0.115)
=1 if feels safe walking in		0.122**		-0.086**		-0.011
community at night		(0.052)		(0.038)		(0.049)
=1 if has had paid work in last		0.096		-0.145		-0.045
12 months		(0.081)		(0.094)		(0.092)
Number of observations	854	779	839	753	839	741
p-value from joint F-test	[0.981]	[0.081]	[0.849]	[0.037]	[0.107]	[0.002]

Notes for Tables A2-A4: This table presents results from regressions of treatment group indicators (listed in the column titles) on a set of controls for the full sample of adolescent girls indicated in the table title (all sites, South Gondar sites, East Hararghe sites, sites in marginalized communities, and sites in non-marginalized communities). The controls fall into three groups. All regressions contain controls related to the evaluation design, including adolescent age at baseline, an indicator for households with multiple adolescents eligible for study recruitment, and a series of randomization block indicators. Additionally, all regressions include a series of indicators for baseline survey month. Additionally, all regressions include the rich set of controls used in main analysis regressions - household size, decile of household asset index, and indicators for household head female, household head literate, and household ever recieved support from the federal Productive Safety Net Program. Even columns additionally include a subset of primary and secondary outcomes from our main analysis, for which we have baseline measures. The last row contains p-values from the F-test of joint significance across all controls (excluding survey month indicators).

Table A3. Balance tests across treatment arms, South Gondar

		Spaces ontrol				Compre- vs Control	AWH Compre- hensive+ vs Control	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Household size	0.019	0.021	-0.014	-0.016	0.015	0.018	0.053**	0.061***
Troubenoru bize	(0.018)	(0.018)	(0.014)	(0.013)	(0.016)	(0.019)	(0.021)	(0.021)
=1 if household head is female	0.145**	0.156**	0.028	0.067	0.021	0.053	0.218***	0.265***
	(0.065)	(0.064)	(0.075)	(0.070)	(0.062)	(0.062)	(0.069)	(0.071)
=1 if household head is literate	0.070	0.033	-0.011	-0.053	-0.061	-0.071	0.015	0.022
	(0.062)	(0.070)	(0.049)	(0.062)	(0.051)	(0.054)	(0.047)	(0.053)
Household asset index	-0.026*	-0.020	0.005	0.002	-0.017	-0.022	-0.012	-0.011
	(0.014)	(0.015)	(0.013)	(0.014)	(0.015)	(0.015)	(0.012)	(0.012)
=1 if household ever received	0.035	0.036	0.021	-0.005	-0.035	0.026	-0.048	-0.048
PSNP support	(0.063)	(0.069)	(0.069)	(0.074)	(0.064)	(0.076)	(0.056)	(0.059)
=1 if enrolled in school		0.011		-0.094		-0.090		-0.157
		(0.151)		(0.105)		(0.155)		(0.133)
Highest grade attended (not		0.027		0.018		0.062***		0.029
including kindergarten)		(0.020)		(0.016)		(0.014)		(0.023)
Aspiration for highest grade (0-		-0.012		-0.016		-0.041***		-0.030*
15)		(0.015)		(0.014)		(0.015)		(0.016)
Peer violence experience scale		-0.056*		-0.027		-0.060**		-0.079***
score in last 12 months (0-6,		(0.029)		(0.022)		(0.027)		(0.024)
higher is less violence)								
=1 of has not		-0.048		-0.123*		-0.003		0.104
experienced/witnessed violence		(0.088)		(0.071)		(0.074)		(0.075)
at home in last 12 months								
=1 if self-reported health is		0.011		-0.006		0.086		-0.062
(very) good		(0.057)		(0.075)		(0.063)		(0.065)
GHQ-12 score (0-12, inverted so		0.031**		0.032***		0.025		0.051***
higher is less distress)		(0.012)		(0.011)		(0.015)		(0.018)
Self Esteem Scale (10-40, higher		-0.005		-0.007		-0.004		0.015**
is more)		(0.005)		(0.006)		(0.008)		(0.007)
Index of say in hh decisions (0-		-0.014		0.037**		-0.005		0.006
6)		(0.020)		(0.017)		(0.021)		(0.017)
=1 if does not need permission		-0.320**		-0.030		0.139		-0.089
to go places		(0.145)		(0.112)		(0.101)		(0.086)
=1 if feels safe walking in		-0.072		-0.071		0.215		0.099
community during day		(0.090)		(0.098)		(0.129)		(0.113)
=1 if feels safe walking in		-0.068		0.061		-0.035		0.007
community at night		(0.054)		(0.072)		(0.073)		(0.051)
=1 if has had paid work in last		0.043		-0.007		0.002		-0.008
12 months		(0.119)		(0.107)		(0.159)		(0.140)
Number of observations	491	440	494	437	486	425	493	429
p-value from joint F-test	[0.133]	[0.000]	[0.694]	[0.000]	[0.331]	[0.000]	[0.016]	[0.000]

Table A3. Balance tests across treatment arms, South Gondar (continued)

		sential vs. Spaces		AWH Comprehensive vs AWH Essential		prehensive+ mprehensive
_	(9)	(10)	(11)	(12)	(13)	(14)
Household size	-0.031*	-0.028	0.011	0.003	0.041**	0.053***
	(0.017)	(0.021)	(0.012)	(0.013)	(0.017)	(0.015)
=1 if household head is female	-0.070	-0.060	-0.058	-0.078	0.231***	0.248***
	(0.057)	(0.070)	(0.056)	(0.074)	(0.049)	(0.068)
=1 if household head is literate	-0.090*	-0.096*	-0.039	0.001	0.099*	0.094
	(0.048)	(0.051)	(0.038)	(0.055)	(0.051)	(0.060)
Household asset index	0.028	0.018	-0.022	-0.029	0.008	0.011
	(0.017)	(0.017)	(0.016)	(0.017)	(0.015)	(0.014)
=1 if household ever received	-0.009	-0.030	-0.064	-0.002	-0.005	-0.046
PSNP support	(0.075)	(0.083)	(0.060)	(0.061)	(0.054)	(0.069)
=1 if enrolled in school		-0.088		0.007		-0.083
		(0.128)		(0.116)		(0.173)
Highest grade attended (not		-0.020		0.011		-0.010
including kindergarten)		(0.018)		(0.017)		(0.026)
Aspiration for highest grade (0-		-0.008		0.002		0.010
15)		(0.011)		(0.010)		(0.015)
Peer violence experience scale		0.002		-0.020		0.001
score in last 12 months (0-6,		(0.030)		(0.020)		(0.031)
higher is less violence)						
=1 of has not		-0.067		0.073		0.152**
experienced/witnessed violence		(0.072)		(0.070)		(0.074)
at home in last 12 months						
=1 if self-reported health is		0.032		0.089		-0.141**
(very) good		(0.069)		(0.055)		(0.061)
GHQ-12 score (0-12, inverted so		0.013		-0.002		0.023
higher is less distress)		(0.018)		(0.016)		(0.026)
Self Esteem Scale (10-40, higher		-0.011		0.004		0.015
is more)		(0.007)		(0.006)		(0.010)
Index of say in hh decisions (0-		0.058***		-0.012		0.015
6)		(0.016)		(0.016)		(0.022)
=1 if does not need permission		0.250*		0.162		-0.184*
to go places		(0.141)		(0.133)		(0.091)
=1 if feels safe walking in		0.051		0.073		-0.126
community during day		(0.094)		(0.144)		(0.189)
=1 if feels safe walking in		0.110		-0.125**		0.004
community at night		(0.071)		(0.060)		(0.091)
=1 if has had paid work in last		0.039		-0.031		-0.054
12 months		(0.134)		(0.060)		(0.197)
Number of observations	417	371	412	356	411	348
p-value from joint F-test	[0.405]	[0.000]	[0.819]	[0.358]	[0.000]	[0.000]

Table A4. Balance tests across treatment arms, East Hararghe

	Her S	spaces ontrol		Essential ontrol		Compre- s Control	AWH Compre- hensive+ vs Control		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Household size	0.020*	0.018*	0.017*	0.010	-0.000	0.001	0.009	0.004	
Household Size	(0.010)	(0.010)	(0.010)	(0.010)	(0.011)	(0.011)	(0.008)	(0.004)	
=1 if household head is female	0.010)	0.044	-0.048	-0.037	0.026	0.032	0.026	-0.018	
i ii nousenoid nead is iemaie	(0.047)	(0.046)	(0.032)	(0.042)	(0.053)	(0.052)	(0.046)	(0.047)	
=1 if household head is literate	0.031	0.023	0.062	0.077	0.040	0.063	0.036	0.063	
i ii nousenora neua is merate	(0.056)	(0.065)	(0.059)	(0.066)	(0.030)	(0.042)	(0.053)	(0.069)	
Household asset index	0.003	0.001	-0.006	-0.006	-0.007	-0.004	0.017	0.017	
110 40 0110 14 40000 1114011	(0.016)	(0.015)	(0.018)	(0.019)	(0.017)	(0.016)	(0.018)	(0.019)	
=1 if household ever received	0.008	-0.003	0.001	-0.011	-0.151**	-0.166**	-0.027	-0.030	
PSNP support	(0.061)	(0.062)	(0.052)	(0.053)	(0.069)	(0.070)	(0.055)	(0.058)	
=1 if enrolled in school	(*****)	-0.060	(****=)	-0.004	(0100)	-0.040	(*****)	-0.003	
		(0.070)		(0.058)		(0.071)		(0.083)	
Highest grade attended (not		-0.018		0.023		-0.016		-0.032*	
including kindergarten)		(0.019)		(0.017)		(0.018)		(0.018)	
Aspiration for highest grade (0-		0.004		0.004		0.003		0.002	
15)		(0.006)		(0.006)		(0.007)		(0.008)	
Peer violence experience scale		0.043*		0.063***		0.045**		0.040**	
score in last 12 months (0-6,		(0.024)		(0.019)		(0.019)		(0.018)	
higher is less violence)		,		,		, ,		,	
=1 of has not		0.007		-0.089		-0.016		0.012	
experienced/witnessed violence		(0.080)		(0.074)		(0.050)		(0.072)	
at home in last 12 months		. ,		, ,		, ,		, ,	
=1 if self-reported health is		-0.035		0.025		0.127**		0.068	
(very) good		(0.054)		(0.062)		(0.054)		(0.060)	
GHQ-12 score (0-12, inverted so		0.006		-0.006		-0.026*		-0.033*	
higher is less distress)		(0.016)		(0.018)		(0.014)		(0.019)	
Self Esteem Scale (10-40, higher		0.008		0.027**		0.006		0.017	
is more)		(0.010)		(0.010)		(0.010)		(0.011)	
Index of say in hh decisions (0-		0.013		-0.009		-0.017		-0.010	
6)		(0.015)		(0.014)		(0.017)		(0.018)	
=1 if does not need permission		-0.066		0.039		-0.167		-0.176	
to go places		(0.108)		(0.097)		(0.121)		(0.119)	
=1 if feels safe walking in		0.100		-0.068		0.089		-0.111	
community during day		(0.067)		(0.057)		(0.079)		(0.085)	
=1 if feels safe walking in		-0.101		0.037		0.015		0.004	
community at night		(0.062)		(0.041)		(0.040)		(0.048)	
=1 if has had paid work in last		0.097		0.206		0.119		0.062	
12 months		(0.100)		(0.124)		(0.116)		(0.110)	
Number of observations	518	485	511	475	508	474	512	471	
p-value from joint F-test	[0.433]	[0.001]	[0.190]	[0.000]	[0.165]	[0.018]	[0.817]	[0.000]	

Table A4. Balance tests across treatment arms, East Hararghe (continued)

	AWH Essential vs.		AWH Com	prehensive	AWH Comprehensive+		
	Her S	paces	vs AWH	Essential	vs AWH Co	mprehensive	
	(9)	(10)	(11)	(12)	(13)	(14)	
Household size	0.008	0.003	-0.020*	-0.003	0.005	0.003	
	(0.011)	(0.011)	(0.011)	(0.012)	(0.011)	(0.010)	
=1 if household head is female	-0.162**	-0.105	0.136*	0.139*	-0.021	-0.018	
	(0.073)	(0.080)	(0.067)	(0.071)	(0.073)	(0.072)	
=1 if household head is literate	0.029	0.060	0.014	0.008	-0.045	-0.037	
	(0.054)	(0.053)	(0.047)	(0.046)	(0.044)	(0.042)	
Household asset index	-0.016	-0.016	0.013	0.006	0.025	0.027	
	(0.019)	(0.019)	(0.019)	(0.018)	(0.017)	(0.017)	
=1 if household ever received	0.026	0.006	-0.198***	-0.179**	0.151	0.138	
PSNP support	(0.062)	(0.059)	(0.067)	(0.066)	(0.091)	(0.083)	
=1 if enrolled in school		0.024		-0.012		0.034	
		(0.094)		(0.092)		(0.072)	
Highest grade attended (not		0.027		-0.034*		-0.004	
including kindergarten)		(0.017)		(0.017)		(0.023)	
Aspiration for highest grade (0-		-0.009		0.003		-0.004	
15)		(0.008)		(0.008)		(0.009)	
Peer violence experience scale		0.032		-0.011		-0.032	
score in last 12 months (0-6,		(0.023)		(0.026)		(0.022)	
higher is less violence)							
=1 of has not		-0.116		0.120		0.085	
experienced/witnessed violence		(0.089)		(0.073)		(0.080)	
at home in last 12 months							
=1 if self-reported health is		-0.018		0.141		-0.095	
(very) good		(0.085)		(0.092)		(0.056)	
GHQ-12 score (0-12, inverted so		-0.007		-0.027		0.016	
higher is less distress)		(0.018)		(0.019)		(0.016)	
Self Esteem Scale (10-40, higher		0.014		-0.007		-0.001	
is more)		(0.012)		(0.014)		(0.013)	
Index of say in hh decisions (0-		-0.017		-0.010		0.030	
6)		(0.015)		(0.021)		(0.022)	
=1 if does not need permission		0.094		-0.214*		0.050	
to go places		(0.103)		(0.108)		(0.129)	
=1 if feels safe walking in		-0.241**		0.201**		-0.260**	
community during day		(0.092)		(0.091)		(0.109)	
=1 if feels safe walking in		0.146*		-0.059		-0.035	
community at night		(0.074)		(0.058)		(0.065)	
=1 if has had paid work in last		0.154		-0.116		-0.025	
12 months		(0.093)		(0.112)		(0.105)	
Number of observations	437	408	427	397	428	393	
p-value from joint F-test	[0.021]	[0.000]	[0.000]	[0.000]	[0.137]	[0.000]	

Table A5. Analysis of survey attrition

	All	Sites	South	Gondar	East H	ararghe
	(1)	(2)	(3)	(4)	(5)	(6)
Panel A: 10-month Follow-up Survey						
Her Spaces	-0.040	-0.045**	0.056***	0.005	-0.135**	-0.152***
	(0.036)	(0.023)	(0.018)	(0.012)	(0.063)	(0.029)
AWH Essential	0.042	0.037**	0.036	0.007	0.050	-0.033*
	(0.029)	(0.017)	(0.022)	(0.015)	(0.050)	(0.018)
AWH Comprehensive	-0.031	-0.035**	0.037	-0.073***	-0.094	-0.052**
	(0.035)	(0.017)	(0.025)	(0.015)	(0.062)	(0.021)
AWH Comprehensive+	0.020	0.023	0.025	-0.033***	0.020	-0.111***
	(0.027)	(0.017)	(0.022)	(0.012)	(0.047)	(0.021)
p-value on HS vs AWH-E	[0.024]	[0.000]	[0.322]	[0.904]	[0.004]	[0.000]
p-value on AWH-E vs AWH-C	[0.030]	[0.000]	[0.977]	[0.000]	[0.015]	[0.362]
p-value on AWH-C vs AWH-C+	[0.117]	[0.000]	[0.620]	[0.005]	[0.056]	[0.011]
Interactions between treatment indicators & all controls	No	Yes	No	Yes	No	Yes
p-value on joint F-test for HS interaction terms		[0.000]		[0.146]		[0.450]
p-value on joint F-test for AWH-E interaction terms		[0.000]		[0.981]		[0.573]
p-value on joint F-test for AWH-C interaction terms		[0.000]		[0.653]		[0.414]
p-value on joint F-test for AWH-C+ interaction terms		[0.000]		[0.082]		[0.282]
p-value on HS interactions vs AWH-E interactions		[0.714]		[0.469]		[0.899]
p-value on AWH-E interactions vs AWH-C interactions		[0.008]		[0.887]		[0.248]
p-value on AWH-C interactions vs AWH-C+ interactions		[0.000]		[0.043]		[0.446]
Control group mean	0.861	0.861	0.904	0.904	0.821	0.821
Number of observations	2294	2294	1113	1113	1181	1181

Table A5. Analysis of survey attrition (continued)

	All	Sites	South	Gondar	East H	ararghe
	(1)	(2)	(3)	(4)	(5)	(6)
Panel B: 24- to 36-month Follow-up Survey						
Her Spaces	-0.036	-0.044**	0.069**	0.031	-0.132**	-0.152***
	(0.040)	(0.022)	(0.027)	(0.029)	(0.065)	(0.025)
AWH Essential	0.013	0.008	0.023	-0.046	-0.000	-0.047***
	(0.040)	(0.018)	(0.033)	(0.036)	(0.071)	(0.017)
AWH Comprehensive	-0.036	-0.046**	0.032	-0.072**	-0.098	-0.040**
	(0.041)	(0.019)	(0.037)	(0.031)	(0.071)	(0.020)
AWH Comprehensive+	-0.038	-0.024	-0.033	-0.154***	-0.035	-0.151***
	(0.034)	(0.020)	(0.034)	(0.034)	(0.055)	(0.028)
p-value on HS vs AWH-E	[0.298]	[0.011]	[0.105]	[0.001]	[0.112]	[0.000]
p-value on AWH-E vs AWH-C	[0.281]	[0.002]	[0.790]	[0.290]	[0.234]	[0.704]
p-value on AWH-C vs AWH-C+	[0.976]	[0.246]	[0.099]	[0.000]	[0.398]	[0.000]
Interactions between controls and treatment indicators	No	Yes	No	Yes	No	Yes
p-value on joint F-test for HS interaction terms		[0.002]		[0.175]		[0.022]
p-value on joint F-test for AWH-E interaction terms		[0.245]		[0.587]		[0.101]
p-value on joint F-test for AWH-C interaction terms		[0.186]		[0.674]		[0.200]
p-value on joint F-test for AWH-C+ interaction terms		[0.000]		[0.184]		[0.970]
p-value on HS interactions vs AWH-E interactions		[0.509]		[0.987]		[0.517]
p-value on AWH-E interactions vs AWH-C interactions		[0.159]		[0.445]		[0.076]
p-value on AWH-C interactions vs AWH-C+ interactions		[0.357]		[0.427]		[0.108]
Control group mean	0.866	0.866	0.913	0.913	0.825	0.825
Number of observations	2055	2055	984	984	1071	1071

Notes for Table A5: This table presents coefficients (standard errors) from OLS regressions of an indicator for female adolescent interviewed at GAGE follow-up survey (10-month follow-up in Panel A, and the 24- to 36 month follow-up in Panel B) on the full set of treatment group indicators, as well as basic and rich controls. The basic control set includes adolescent age at the time of listing, an indicator for households with multiple eligible adolescents, and sampling block fixed effects; in panel B we additionally include an indicator for randomly assigned to second wave of surveying. The rich controls include household size, an indicator for households residing in East Hararge (for the first two columns), an indicator for household head literate, an indicator for female-headed household, a household asset index, and an indicator for household receives PSNP benefits. All controls are demeaned, and the even columns additionally include interactions between the demeaned baseline controls and the treatment measures. Joint F-tests on interaction terms do not include interaction terms between the treatment group indicator and residential blocks used in the initial treatment assignment randomization. * indicates statistical significance at p<0.1, ** at p<0.05, and *** and p<0.001.

Appendix B: Impacts on Boys' Secondary Outcomes

Table B1. ITT regressions for girls' secondary outcomes, all study sites

	Education and Learning										
	Index of Education Participation (1)	=1 if Enrolled in School (2)	Share of School Days Attended in Last Two Weeks (3)	=1 if Did Not Miss More Than One Consecutive Week of School in Last 12 Months (4)	=1 if Aspires to Attain ≥ Secondary School Degree (5)	Highest Grade Attended ¹ (6)	=1 if Ever Enrolled in Secondary School (7)				
Panel A: 10-month impacts	()				,						
Her Spaces		-0.017	-0.032	-0.015	-0.001	-0.061					
		(0.037)	(0.037)	(0.035)	(0.014)	(0.187)					
AWH Essential		0.019	0.014	0.035	-0.011	0.103					
		(0.036)	(0.038)	(0.038)	(0.023)	(0.198)					
AWH Comprehensive		0.008	0.002	0.006	0.009	0.099					
		(0.037)	(0.037)	(0.038)	(0.016)	(0.193)					
AWH Comprehensive Plus		0.044	0.027	0.018	-0.010	-0.127					
		(0.035)	(0.040)	(0.037)	(0.016)	(0.203)					
p-value on HS /= AWH-E		[0.358]	[0.264]	[0.204]	[0.695]	[0.467]					
p-value on AWH-E /= AWH-C		[0.779]	[0.763]	[0.486]	[0.461]	[0.987]					
p-value on AWH-C /= AWH-C+		[0.351]	[0.560]	[0.772]	[0.272]	[0.335]					
Control Mean		0.790	0.698	0.715	0.956	4.745					
Number of Observations		2005	1960	2000	1952	2004					
Panel B: 24- to 36-month impacts											
Her Spaces	-0.023	-0.042	-0.007	-0.027	0.010	0.106	0.031				
	(0.101)	(0.044)	(0.045)	(0.045)	(0.021)	(0.206)	(0.022)				
AWH Essential	0.096	0.041	0.039	0.065	0.015	0.122	0.025				
	(0.105)	(0.043)	(0.046)	(0.044)	(0.021)	(0.219)	(0.026)				
AWH Comprehensive	0.048	0.008	0.004	0.063	0.017	0.013	0.019				
	(0.102)	(0.044)	(0.043)	(0.045)	(0.021)	(0.209)	(0.021)				
AWH Comprehensive Plus	0.046	0.009	0.010	0.038	-0.000	-0.017	0.045				
	(0.093)	(0.041)	(0.041)	(0.039)	(0.021)	(0.235)	(0.028)				
p-value on HS /= AWH-E	[0.300]	[0.073]	[0.340]	[0.064]	[0.785]	[0.947]	[0.833]				
p-value on AWH-E /= AWH-C	[0.670]	[0.459]	[0.447]	[0.975]	[0.926]	[0.649]	[0.821]				
p-value on AWH-C /= AWH-C+	[0.984]	[0.979]	[0.889]	[0.554]	[0.375]	[0.902]	[0.391]				
Control Mean	0.000	0.725	0.639	0.611	0.931	5.863	0.096				
Number of Observations	1777	1923	1779	1921	1917	1902	1902				

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Bodily Integrity										
	Index of Violence (higher= less violence) (8)	Peer Violence Scale (0-6, higher= less violence) (9)	=1 if No Exposure to Household Violence Against Self, Female Caregiver in Last 12 Months (10)	of Sexual	Ideal Age at Marriage (years) (12)	=1 if No Peer Violence Victimizatio n in Last 12 months (13)	=1 if No Exposure to Corporal Punishment at School in Last 12 Months (14)	=1 if Did Not Perpetrate Peer Violence in Last 12 Months (15)	=1 if Never Married (16)		
Panel A: 10-month impacts	(0)	(*)	(20)	(11)	()	(10)	()	(10)	(10)		
Her Spaces	0.085 (0.062)	0.122*** (0.046)	0.030 (0.038)	-0.004 (0.009)	0.139 (0.530)	0.020 (0.020)	0.041 (0.031)	0.020 (0.019)	0.025* (0.013)		
AWH Essential	0.091 (0.061)	0.069 (0.055)	0.022 (0.039)	0.001 (0.008)	0.071 (0.582)	-0.012 (0.019)	0.087** (0.037)	-0.003 (0.020)	0.013 (0.019)		
AWH Comprehensive	-0.047 (0.078)	0.008 (0.070)	-0.025 (0.037)	-0.007 (0.010)	0.217 (0.617)	-0.020 (0.026)	0.056 (0.039)	-0.011 (0.024)	0.008 (0.018)		
AWH Comprehensive Plus	0.129** (0.065)	0.096* (0.053)	0.044 (0.039)	0.004 (0.007)	-0.233 (0.568)	-0.013 (0.019)	0.067** (0.031)	0.007 (0.019)	0.015 (0.014)		
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.919]	[0.271] [0.355]	[0.859]	[0.616] [0.448]	[0.899]	[0.177]	[0.263]	[0.251] [0.707]	[0.489]		
p-value on AWH-C /= AWH-C+	[0.031]	[0.190]	[0.083]	[0.270]	[0.413]	[0.816]	[0.801]	[0.417]	[0.718]		
Control Mean Number of Observations	0.000 1928	5.659 2002	0.573 1943	0.981 1991	22.435 1911	0.881 1858	0.106 1600	0.900 2003	0.946 2005		
Panel B: 24- to 36-month impacts	0.115	0.035	0.044	0.015	0.420	0.001	-0.041	0.010	0.001		
Her Spaces	(0.085)	(0.047)	(0.039)	(0.009)	-0.429 (0.401)	(0.020)	(0.048)	(0.013)	(0.030)		
AWH Essential	0.048 (0.077)	0.029 (0.043)	0.040 (0.036)	0.001 (0.011)	0.272 (0.395)	0.016 (0.015)	-0.012 (0.044)	0.005 (0.015)	0.026 (0.030)		
AWH Comprehensive	0.110 (0.069)	0.019 (0.033)	0.038 (0.041)	0.012 (0.010)	-0.257 (0.466)	-0.002 (0.018)	0.006 (0.049)	-0.002 (0.014)	0.012 (0.029)		
AWH Comprehensive Plus	0.077 (0.085)	0.011 (0.033)	0.068* (0.036)	-0.006 (0.016)	0.099 (0.343)	0.000 (0.017)	-0.047 (0.048)	-0.004 (0.013)	-0.003 (0.025)		
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.454] [0.417]	[0.903] [0.830]	[0.915] [0.957]	[0.222] [0.318]	[0.093] [0.261]	[0.413] [0.259]	[0.508]	[0.672] [0.681]	[0.447] [0.680]		
p-value on AWH-C /= AWH-C+	[0.731]	[0.801]	[0.434]	[0.357]	[0.404]	[0.886]	[0.261]	[0.862]	[0.589]		
Control Mean Number of Observations	-0.000 1699	5.814 1917	0.637 1869	0.979 1753	21.304 1717	0.922 1851	0.305 1393	0.950 1920	0.886 1923		

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Physical Health, Nutrition, and Sexual and Reproductive Health									
	Index of Physical Health & Nutrition (17)	=1 Physical Health Is Good (18)	Proportion of Meals Yesterday Containing Meat, Chicken, Fish, or Egg (19)	=1 if Has Not Ever Been Hungry Because Not Enough Food in Last 4 Weeks (20)	Index of Menstrual Practices (21)	=1 if Normal Activities Are Not Affected by Menstruation (Among Post- Menarche) (22)	Index of Improved Menstrual Hygiene Practices (0- 2, Among Post- menarche) (23)	=1 if Improved Menstrual Hygiene Management (Among Postmenarche) (24)	=1 if Practices Appropriate Menstrual Product Disposal at Home (Among Post- menarche) (25)	
Panel A: 10-month impacts										
Her Spaces	0.083	0.025	0.013	-0.007	0.015	0.010	0.125	0.110	-0.039	
	(0.080)	(0.021)	(0.011)	(0.027)	(0.265)	(0.069)	(0.196)	(0.079)	(0.104)	
AWH Essential	0.140**	0.027	0.017	0.016	0.213	-0.042	0.495**	0.299***	0.191*	
	(0.069)	(0.019)	(0.010)	(0.025)	(0.265)	(0.074)	(0.190)	(0.089)	(0.108)	
AWH Comprehensive	-0.065	-0.051*	0.010	-0.008	0.200	0.053	0.200	0.169*	0.006	
	(0.087)	(0.027)	(0.013)	(0.023)	(0.251)	(0.073)	(0.203)	(0.097)	(0.107)	
AWH Comprehensive Plus	-0.070	-0.004	0.002	-0.044*	0.454**	-0.034	0.627***	0.309***	0.259***	
	(0.069)	(0.022)	(0.008)	(0.025)	(0.196)	(0.062)	(0.173)	(0.084)	(0.091)	
p-value on HS /= AWH-E	[0.479]	[0.910]	[0.759]	[0.387]	[0.494]	[0.443]	[0.058]	[0.020]	[0.039]	
p-value on AWH-E /= AWH-C	[0.014]	[0.003]	[0.655]	[0.303]	[0.966]	[0.202]	[0.179]	[0.207]	[0.132]	
p-value on AWH-C /= AWH-C+	[0.953]	[0.108]	[0.535]	[0.087]	[0.310]	[0.199]	[0.037]	[0.163]	[0.015]	
Control Mean	-0.000	0.899	0.038	0.865	0.000	0.831	0.809	0.269	0.472	
Number of Observations	2003	2005	2005	2003	241	294	241	293	241	
Panel B: 24- to 36-month impacts										
Her Spaces	-0.072	-0.003	-0.005	-0.021	-0.071	-0.011	0.022	0.052	-0.007	
	(0.087)	(0.017)	(0.008)	(0.029)	(0.124)	(0.042)	(0.114)	(0.054)	(0.059)	
AWH Essential	0.033	0.022	0.003	-0.015	0.217**	0.041	0.156	0.103*	0.085	
	(0.078)	(0.017)	(0.010)	(0.022)	(0.098)	(0.039)	(0.101)	(0.055)	(0.054)	
AWH Comprehensive	-0.126	-0.013	-0.005	-0.040*	0.081	0.044	0.060	0.065	0.017	
	(0.082)	(0.019)	(0.011)	(0.022)	(0.113)	(0.040)	(0.109)	(0.058)	(0.057)	
AWH Comprehensive Plus	0.037	0.007	0.011	-0.019	0.094	0.015	0.158	0.107*	0.058	
	(0.079)	(0.018)	(0.010)	(0.021)	(0.116)	(0.033)	(0.111)	(0.059)	(0.062)	
p-value on HS /= AWH-E	[0.231]	[0.119]	[0.383]	[0.844]	[800.0]	[0.155]	[0.198]	[0.326]	[0.099]	
p-value on AWH-E /= AWH-C	[0.060]	[0.053]	[0.495]	[0.282]	[0.169]	[0.942]	[0.332]	[0.498]	[0.198]	
p-value on AWH-C /= AWH-C+	[0.063]	[0.249]	[0.210]	[0.362]	[0.909]	[0.353]	[0.378]	[0.485]	[0.509]	
Control Mean	0.000	0.916	0.023	0.882	-0.000	0.859	1.100	0.445	0.590	
Number of Observations	1898	1923	1898	1923	802	896	803	897	803	

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	S	al Wellbeing					
	Ideal Age at First Child (years) (26)	=1 if Not Ever Pregnant (27)	Desired Fertility (number of children) (28)	Self-Esteem Score (0-40, higher= more self-esteem) (29)	Mental Distress Score (0-27, higher= less distress) (30)	Resilience Score (12-36, higher= more resilience) (31)	=1 if Minimal Depression Detected (32)
Panel A: 10-month impacts							
Her Spaces					0.077	0.615*	-0.003
					(0.151)	(0.327)	(0.011)
AWH Essential					0.396***	0.646	0.026**
					(0.148)	(0.392)	(0.010)
AWH Comprehensive					0.305**	0.562*	0.017
					(0.153)	(0.312)	(0.011)
AWH Comprehensive Plus					0.081	0.330	0.008
					(0.195)	(0.311)	(0.013)
p-value on HS /= AWH-E					[0.011]	[0.941]	[0.015]
p-value on AWH-E /= AWH-C					[0.416]	[0.840]	[0.439]
p-value on AWH-C /= AWH-C+					[0.197]	[0.504]	[0.533]
Control Mean					26.412	31.310	0.973
Number of Observations					1866	1711	1866
Panel B: 24- to 36-month impacts							
Her Spaces	-0.491	0.005	0.531**	-0.135	0.018	-0.405	-0.002
	(0.386)	(0.021)	(0.229)	(0.263)	(0.078)	(0.388)	(0.008)
AWH Essential	-0.260	0.013	-0.060	-0.003	0.040	0.245	0.003
	(0.425)	(0.018)	(0.188)	(0.251)	(0.093)	(0.368)	(0.008)
AWH Comprehensive	-0.348	0.006	-0.126	-0.204	-0.016	0.170	0.005
	(0.463)	(0.023)	(0.153)	(0.249)	(0.090)	(0.359)	(0.007)
AWH Comprehensive Plus	-0.119	0.009	0.110	0.010	-0.056	-0.296	-0.008
	(0.434)	(0.017)	(0.165)	(0.251)	(0.090)	(0.337)	(0.010)
p-value on HS /= AWH-E	[0.572]	[0.749]	[0.014]	[0.630]	[0.818]	[0.106]	[0.630]
p-value on AWH-E /= AWH-C	[0.853]	[0.780]	[0.695]	[0.451]	[0.597]	[0.844]	[0.830]
p-value on AWH-C /= AWH-C+	[0.640]	[0.900]	[0.100]	[0.417]	[0.701]	[0.173]	[0.195]
Control Mean	23.492	0.931	4.985	29.891	26.534	31.565	0.983
Number of Observations	1791	1365	1888	1734	1923	1874	1923

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

Voice and Agency (part 1)

							1 '6		
			=1 if Has			=1 if	=1 if Comfortable		
			Leadership	Index of Say		-1 II Comfortable		Index of	Index of
		Index of	Role in	in Household	Index of	Expressing	Opinion	Issues	Issues
	Index of	Participation	School	Decisions	Comfort	Opinion	With Those	Discussed	Discussed
	Voice &	in Decision	(Among	Related to	Expressing	With	Who Are	with Mother	with Father
	Agency	Making	Enrolled)	Self (0-8)	Oneself	Agemates	Older	(0-8)	(0-7)
	(33)	(34)	(35)	(36)	(37)	(38)	(38)	(39)	(40)
Panel A: 10-month impacts									
Her Spaces	0.189***	0.242***	0.069**	0.469**	0.037	0.007	0.021	0.324**	0.117
ATTILLE III I	(0.070)	(0.091)	(0.034)	(0.202)	(0.082)	(0.034)	(0.040)	(0.127)	(0.113)
AWH Essential	0.275***	0.167*	0.082**	0.203	0.099	0.013	0.062*	0.448***	0.293**
AWILC 1 ·	(0.073) 0.269***	(0.087)	(0.038)	(0.204) 0.767***	(0.077) 0.159**	(0.031)	(0.034) 0.099**	(0.169) 0.539***	(0.140)
AWH Comprehensive		0.201** (0.097)	-0.028			0.022			0.181
AWH Comprehensive Plus	(0.072) 0.178**	0.208**	(0.038) 0.031	(0.234) 0.568***	(0.069) 0.026	(0.033) -0.001	(0.038) 0.022	(0.141) 0.767***	(0.122) 0.317***
AWII Comprehensive I ius	(0.075)	(0.081)	(0.031)	(0.189)	(0.020)	(0.034)	(0.022)	(0.137)	(0.121)
p-value on HS /= AWH-E	[0.209]	[0.358]	[0.716]	[0.168]	[0.474]	[0.853]	[0.314]	[0.449]	[0.204]
p-value on AWH-E /= AWH-C	[0.929]	[0.690]	[0.006]	[0.011]	[0.418]	[0.801]	[0.356]	[0.596]	[0.435]
p-value on AWH-C /= AWH-C+	[0.211]	[0.936]	[0.118]	[0.333]	[0.060]	[0.530]	[0.069]	[0.127]	[0.281]
Control Mean	-0.000	0.000	0.212	3.924	-0.000	0.764	0.384	2.579	2.209
Number of Observations	1836	1897	1598	1900	2005	2005	2005	1757	1627
Panel B: 24- to 36-month impacts									
Her Spaces	0.151*	0.165*	0.039	0.269	0.014	-0.002	0.015	0.076	0.042
	(0.077)	(0.089)	(0.042)	(0.180)	(0.068)	(0.027)	(0.036)	(0.144)	(0.111)
AWH Essential	0.156**	0.108	0.058	0.039	0.052	0.029	0.005	0.416***	0.146
	(0.075)	(0.092)	(0.036)	(0.179)	(0.073)	(0.028)	(0.036)	(0.141)	(0.113)
AWH Comprehensive	0.137*	0.123	0.026	0.221	-0.074	-0.052	0.005	0.328**	0.128
	(0.071)	(0.093)	(0.040)	(0.180)	(0.078)	(0.031)	(0.040)	(0.142)	(0.117)
AWH Comprehensive Plus	-0.112*	-0.054	-0.059*	-0.057	-0.119	-0.019	-0.072*	0.008	-0.084
	(0.066)	(0.077)	(0.032)	(0.169)	(0.075)	(0.031)	(0.037)	(0.133)	(0.109)
p-value on HS /= AWH-E	[0.953]	[0.582]	[0.666]	[0.232]	[0.562]	[0.258]	[0.776]	[0.023]	[0.378]
p-value on AWH-E /= AWH-C	[0.808]	[0.883]	[0.449]	[0.349]	[0.098]	[0.010]	[0.990]	[0.567]	[0.884]
p-value on AWH-C /= AWH-C+	[0.001]	[0.061]	[0.030]	[0.140]	[0.574]	[0.347]	[0.048]	[0.039]	[0.100]
Control Mean	-0.000	-0.000	0.230	4.154	-0.000	0.805	0.453	3.171	2.570
Number of Observations	1823	1873	1394	1873	1922	1922	1922	1731	1647

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

Voice and Agency (part 2)

					Index for "If			
				Index for	I See			
			Index for	"My Friends	Something		Index for "I	
		Index For	"My Parents	Ask My	Wrong, I Feel		Can Speak	Index for "I
		•	Listen When I			Can Speak	Up If I See	Can Ask
		Ask for My	Share My	They Have a	Talk To	Up in Class"	Someone	Adults for
	Index of	Opinions on		`	Someone" (0-	(among	Being Hurt"	Help When I
	Voice	Things" (0-2)		2)	2)	enrolled, 0-2)	(0-2)	Need It" (0-2)
	(41)	(42)	(43)	(44)	(45)	(46)	(47)	(48)
Panel A: 10-month impacts								
Her Spaces	0.234***	0.005	0.080	0.031	0.124**	0.174***	0.131**	0.116**
	(0.072)	(0.049)	(0.050)	(0.047)	(0.055)	(0.050)	(0.050)	(0.045)
AWH Essential	0.352***	0.132**	0.090*	0.129***	0.176***	0.179***	0.201***	0.135***
	(0.082)	(0.053)	(0.051)	(0.043)	(0.066)	(0.048)	(0.051)	(0.047)
AWH Comprehensive	0.310***	0.176***	0.119**	0.134***	0.111*	0.123**	0.147***	0.106**
	(0.087)	(0.044)	(0.057)	(0.051)	(0.058)	(0.062)	(0.055)	(0.050)
AWH Comprehensive Plus	0.317***	0.158***	0.128***	0.161***	0.173***	0.126***	0.168***	0.111**
	(0.066)	(0.042)	(0.043)	(0.047)	(0.051)	(0.045)	(0.047)	(0.049)
p-value on HS /= AWH-E	[0.164]	[0.039]	[0.866]	[0.047]	[0.400]	[0.924]	[0.184]	[0.687]
p-value on AWH-E /= AWH-C	[0.655]	[0.443]	[0.642]	[0.924]	[0.297]	[0.357]	[0.333]	[0.585]
p-value on AWH-C /= AWH-C+	[0.936]	[0.708]	[0.886]	[0.595]	[0.262]	[0.963]	[0.684]	[0.928]
Control Mean	-0.000	1.107	1.312	1.069	0.974	1.345	1.144	1.111
Number of Observations	1989	1997	1995	2002	1999	1600	2001	2004
Panel B: 24- to 36-month impacts								
Her Spaces	0.167***	0.085*	0.022	0.082*	0.090*	0.046	0.100*	0.020
	(0.061)	(0.047)	(0.041)	(0.048)	(0.046)	(0.064)	(0.051)	(0.049)
AWH Essential	0.217***	0.112**	0.069	0.061	0.115**	0.031	0.178***	0.085**
	(0.065)	(0.048)	(0.046)	(0.043)	(0.047)	(0.051)	(0.052)	(0.042)
AWH Comprehensive	0.130*	0.061	0.022	0.019	0.015	0.059	0.135***	0.067
	(0.067)	(0.045)	(0.042)	(0.045)	(0.049)	(0.061)	(0.048)	(0.045)
AWH Comprehensive Plus	-0.017	-0.034	-0.020	0.032	-0.051	0.075	0.036	-0.067
	(0.067)	(0.045)	(0.046)	(0.054)	(0.039)	(0.048)	(0.047)	(0.050)
p-value on HS /= AWH-E	[0.493]	[0.637]	[0.308]	[0.651]	[0.637]	[0.822]	[0.184]	[0.233]
p-value on AWH-E /= AWH-C	[0.261]	[0.356]	[0.313]	[0.334]	[0.081]	[0.657]	[0.428]	[0.711]
p-value on AWH-C /= AWH-C+	[0.068]	[0.067]	[0.397]	[0.817]	[0.186]	[0.762]	[0.069]	[0.018]
Control Mean	-0.000	1.178	1.454	1.233	1.143	1.394	1.220	1.147
Number of Observations	1909	1908	1909	1915	1912	1393	1907	1914

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

Voice and Agency (part 3)

	Index of Mobility (Standardize d) (49)	=1 if Has Left Kebele in Last 3 Months (50)	Index of Not Needing Permission to Go Places (0-4) (51)	Index of Different Places Visited in Last 3 Months (0-4) (52)	=1 if Feels Safe in Community in Daytime (53)	•	Index of Collective Action (0-2) (55)	=1 if Talked with Others About a Serious Problem in the Community (56)	=1 if Took Action with Others About a Serious Problem in the Community (57)
Panel A: 10-month impacts									
Her Spaces	-0.038	0.031	-0.056	0.095	-0.025	-0.058			
	(0.084)	(0.034)	(0.081)	(0.103)	(0.019)	(0.036)			
AWH Essential	0.037	0.025	-0.133	0.149	-0.000	-0.009			
	(0.074)	(0.035)	(0.084)	(0.094)	(0.017)	(0.037)			
AWH Comprehensive	-0.018	0.031	-0.205**	0.263**	-0.034*	-0.033			
	(0.074)	(0.028)	(0.080)	(0.116)	(0.021)	(0.038)			
AWH Comprehensive Plus	-0.147**	-0.010	-0.031	0.066	-0.057**	-0.055			
	(0.074)	(0.032)	(0.098)	(0.102)	(0.027)	(0.033)			
p-value on HS /= AWH-E	[0.355]	[0.885]	[0.358]	[0.605]	[0.175]	[0.195]			
p-value on AWH-E /= AWH-C	[0.467]	[0.866]	[0.402]	[0.313]	[0.089]	[0.524]			
p-value on AWH-C /= AWH-C+	[0.087]	[0.201]	[0.088]	[0.096]	[0.425]	[0.537]			
Control Mean	-0.000	0.213	1.088	2.782	0.937	0.368			
Number of Observations	1954	1997	2003	2003	2001	1965			
Panel B: 24- to 36-month impacts									
Her Spaces	-0.006	0.032	0.077	-0.049	-0.026*	0.006	0.037	-0.006	0.018
	(0.077)	(0.039)	(0.081)	(0.068)	(0.014)	(0.040)	(0.069)	(0.021)	(0.014)
AWH Essential	-0.003	0.022	-0.060	0.045	-0.010	0.033	0.038	0.016	0.003
	(0.075)	(0.033)	(0.063)	(0.071)	(0.014)	(0.038)	(0.066)	(0.022)	(0.013)
AWH Comprehensive	0.051	0.007	0.144**	-0.022	-0.017	0.036	0.103	0.027	0.019
	(0.077)	(0.036)	(0.066)	(0.071)	(0.017)	(0.040)	(0.073)	(0.023)	(0.014)
AWH Comprehensive Plus	-0.127*	-0.046	-0.067	-0.029	-0.019	0.007	-0.021	-0.003	-0.005
	(0.076)	(0.034)	(0.066)	(0.064)	(0.018)	(0.037)	(0.060)	(0.020)	(0.012)
p-value on HS /= AWH-E	[0.971]	[0.801]	[0.127]	[0.189]	[0.280]	[0.472]	[0.991]	[0.325]	[0.286]
p-value on AWH-E /= AWH-C	[0.446]	[0.678]	[0.005]	[0.382]	[0.687]	[0.942]	[0.379]	[0.647]	[0.275]
p-value on AWH-C /= AWH-C+	[0.019]	[0.194]	[0.005]	[0.923]	[0.893]	[0.456]	[0.081]	[0.215]	[0.082]
Control Mean	-0.000	0.247	0.566	3.088	0.953	0.488	0.000	0.110	0.049
Number of Observations	1875	1922	1921	1922	1919	1875	1921	1922	1921

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

1	Index of Economic Empowerm ent (58)	=1 if Had Money Under Own Control in Last 12 Months (59)	=1 if Has Savings for the Future (60)	Proportion of Time Spent in Leisure, School, and Study on a Typical Weekday (61)	Index of Economic Aspirations (62)	=1 if Aspires to Be Employed in Skilled or Professional Work Someday (63)		=1 if In School, Training, or Studying (65)	Proportion of Time Spent In School, Training, or Studying (66)
Panel A: 10-month impacts	` ′				` ,				
Her Spaces	0.150	0.092**	0.041	-0.012	0.043	0.002	0.015	-0.022	-0.010
	(0.107)	(0.036)	(0.030)	(0.012)	(0.095)	(0.032)	(0.020)	(0.036)	(0.012)
AWH Essential	0.058	0.023	0.032	-0.002	0.002	0.008	-0.004	0.013	0.001
	(0.093)	(0.033)	(0.033)	(0.008)	(0.095)	(0.027)	(0.021)	(0.032)	(0.009)
AWH Comprehensive	0.123	0.040	0.045	-0.002	0.009	0.021	-0.010	0.006	0.007
	(0.104)	(0.035)	(0.034)	(0.012)	(0.106)	(0.030)	(0.024)	(0.037)	(0.012)
AWH Comprehensive Plus	0.188*	0.029	0.083**	0.006	-0.008	0.016	-0.013	0.036	0.006
	(0.103)	(0.035)	(0.036)	(0.009)	(0.089)	(0.027)	(0.019)	(0.033)	(0.010)
p-value on HS /= AWH-E	[0.370]	[0.052]	[0.779]	[0.392]	[0.640]	[0.850]	[0.291]	[0.343]	[0.367]
p-value on AWH-E /= AWH-C	[0.524]	[0.616]	[0.699]	[0.984]	[0.942]	[0.655]	[0.805]	[0.841]	[0.639]
p-value on AWH-C /= AWH-C+	[0.578]	[0.781]	[0.317]	[0.525]	[0.854]	[0.842]	[0.883]	[0.404]	[0.987]
Control Mean	0.000	0.161	0.526	0.284	0.000	0.871	0.952	0.814	0.237
Number of Observations	1777	2004	2004	1777	1973	1973	1973	1777	1777
Panel B: 24- to 36-month impacts									
Her Spaces	0.061	0.048*	0.002	-0.012	0.022	-0.032	0.031	-0.025	-0.007
	(0.074)	(0.025)	(0.029)	(0.027)	(0.102)	(0.045)	(0.022)	(0.041)	(0.027)
AWH Essential	0.194**	0.053**	0.063*	0.011	0.116	0.027	0.036**	0.030	0.014
ANTA C	(0.092)	(0.027)	(0.036)	(0.027)	(0.076)	(0.035)	(0.018)	(0.040)	(0.028)
AWH Comprehensive	0.249**	0.074***	0.088**	0.004	0.123	0.030	0.037**	0.025	0.005
ANTA G	(0.096)	(0.027)	(0.034)	(0.025)	(0.081)	(0.035)	(0.018)	(0.044)	(0.026)
AWH Comprehensive Plus	0.144*	0.040*	0.069**	-0.008	0.011	-0.018	0.017	-0.001	-0.003
1 HG / ANH E	(0.083)	(0.024)	(0.035)	(0.026)	(0.081)	(0.031)	(0.021)	(0.040)	(0.026)
p-value on HS /= AWH-E	[0.138]	[0.862]	[0.080]	[0.450]	[0.319]	[0.201]	[0.792]	[0.190]	[0.481]
p-value on AWH-E /= AWH-C	[0.609]	[0.538]	[0.531]	[0.816]	[0.919]	[0.931]	[0.934]	[0.901]	[0.765]
p-value on AWH-C /= AWH-C+	[0.333]	[0.303]	[0.648]	[0.650]	[0.142]	[0.139]	[0.293]	[0.561]	[0.752]
Control Mean Number of Observations	-0.000 1920	0.115 1920	0.202 1921	0.475 1922	0.000 1857	0.803 1857	0.928 1857	0.726 1922	0.428 1922

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Ec Empowerment (part 2) Cross-Cutting Outcomes (part 1)									
	De Em	powerment (I	, · -)			01055 040	ang outcomes	(pur v 1)		
							=1 if Agrees		=1 if	
							"Boys Should			=1 if
						=1 if Agrees	Be Able to	=1 if	Agrees "It's	
						"Girls Should	Show Their			Agrees
		=1 if Any		Index of	GEA Index		Feelings	Agrees	for boys to	"Boys who
	Duanautian	Paid Work	Wagasin	Gender		Raising Their				
	of Time in	in Last 12	Wages in Past 7	Equitable	Stereotypic	_	of Being	be	Are	considered
	Paid Work	Months	Days	Attitudes	al Traits	Lady Like"	Teased"	humble"	Tough"	weak"
			-			=			_	
Danal A. 10 month impacts	(67)	(68)	(69)	(70)	(71)	(72)	(73)	(74)	(75)	(76)
Panel A: 10-month impacts				-0.086	-0.178***	0.007	-0.001	0.081***	0.050*	-0.042
Her Spaces										
AWII Essential				(0.067)	(0.061) -0.053	(0.031) 0.038	(0.020)	(0.025)	(0.028) 0.033	(0.029) -0.058**
AWH Essential				0.060			-0.031	0.018		
AWIL Commelousing				(0.069)	(0.063)	(0.031) 0.056*	(0.020)	(0.021)	(0.027)	(0.028)
AWH Comprehensive				0.052	-0.136*		-0.044**	0.081***	-0.002	-0.025
AWIL Commelousing Dlug				(0.086)	(0.072)	(0.031)	(0.021)	(0.026)	(0.032)	(0.037)
AWH Comprehensive Plus				-0.081	-0.149**	0.033	-0.016	0.068***	0.040	-0.027
1 HG / AWH F				(0.078)	(0.065)	(0.028)	(0.021)	(0.023)	(0.026)	(0.034)
p-value on HS /= AWH-E				[0.025]	[0.049]	[0.331]	[0.139]	[0.007]	[0.561]	[0.549]
p-value on AWH-E /= AWH-C				[0.927]	[0.276]	[0.589]	[0.530]	[0.012]	[0.293]	[0.345]
p-value on AWH-C /= AWH-C+				[0.155]	[0.865]	[0.444]	[0.215]	[0.594]	[0.210]	[0.944]
Control Mean				0.000	0.000	0.644	0.876	0.831	0.774	0.541
Number of Observations				1967	1977	2000	2004	1998	2004	1992
Panel B: 24- to 36-month impacts	0.004**	0.020	0.004	0.027	0.020	0.022	0.017	0.001	0.044	0.020
Her Spaces	0.004**	-0.020	-0.004	0.027	-0.028	0.032	0.017	-0.001	0.044	-0.039
(TTT 1	(0.002)	(0.016)	(0.013)	(0.076)	(0.070)	(0.031)	(0.024)	(0.027)	(0.029)	(0.039)
AWH Essential	0.002**	-0.012	-0.003	0.046	-0.009	0.002	0.009	0.017	0.012	-0.020
	(0.001)	(0.015)	(0.013)	(0.081)	(0.078)	(0.032)	(0.025)	(0.024)	(0.032)	(0.040)
AWH Comprehensive	0.001	-0.003	0.012	-0.002	-0.058	0.025	0.022	0.050**	0.056*	-0.050
	(0.001)	(0.017)	(0.016)	(0.077)	(0.075)	(0.034)	(0.026)	(0.022)	(0.032)	(0.039)
AWH Comprehensive Plus	0.002*	0.006	-0.003	0.090	0.018	0.026	0.023	0.039*	0.037	-0.085**
	(0.001)	(0.018)	(0.014)	(0.065)	(0.068)	(0.038)	(0.025)	(0.021)	(0.030)	(0.039)
p-value on HS /= AWH-E	[0.225]	[0.544]	[0.901]	[0.819]	[0.799]	[0.377]	[0.750]	[0.531]	[0.283]	[0.638]
p-value on AWH-E /= AWH-C	[0.446]	[0.557]	[0.352]	[0.565]	[0.530]	[0.531]	[0.633]	[0.176]	[0.159]	[0.471]
p-value on AWH-C /= AWH-C+	[0.580]	[0.653]	[0.359]	[0.165]	[0.276]	[0.992]	[0.983]	[0.600]	[0.530]	[0.421]
Control Mean	0.000	0.066	0.039	-0.000	0.000	0.496	0.817	0.841	0.699	0.428
Number of Observations	1922	1923	1880	1907	1910	1920	1919	1919	1920	1913

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Cross-Cutting Outcomes (part 2)										
	=1 if Agrees "Girls need their parents' protection more than boys" (77)	=1 if Agrees "Boys Should Always defend themselves even if it means fighting" (78)	=1 if Agrees "Boys should be raised tough so they can overcome any difficulty" (79)	GEA Index of Gender	=1 if Agrees "Women should have the same chance to work outside of the home as men" (81)	=1 if Agrees "Girls and boys should share household tasks equally" (82)	=1 if Agrees "Women's most important role is to take care of her home and cook for her family" (83)	=1 if Agrees "A Man should have the final word on decisions in his home" (84)	=1 if Agrees " A Woman should obey her husband in all things" (85)		
Panel A: 10-month impacts	(11)	(1.5)	(.,,	(55)	()	(0-)	(00)	(8-1)	(32)		
Her Spaces	0.052* (0.027)	0.030 (0.028)	0.036* (0.021)	0.046 (0.067)	0.005 (0.024)	0.087*** (0.028)	-0.004 (0.026)	0.016 (0.033)	0.014 (0.020)		
AWH Essential	0.007 (0.030)	-0.012 (0.033)	-0.007 (0.023)	0.153** (0.066)	-0.011 (0.032)	0.090*** (0.032)	0.017 (0.024)	-0.053* (0.029)	0.004 (0.023)		
AWH Comprehensive	0.051 (0.031)	-0.009 (0.037)	-0.020 (0.025)	0.216** (0.085)	0.068**	0.104*** (0.029)	0.011 (0.030)	-0.053* (0.032)	0.021 (0.027)		
AWH Comprehensive Plus	0.055** (0.026)	-0.015 (0.031)	0.007 (0.020)	0.016 (0.077)	0.037 (0.027)	0.058** (0.028)	-0.001 (0.028)	-0.001 (0.028)	0.027 (0.022)		
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.139] [0.213]	[0.198]	[0.060]	[0.094]	[0.621] [0.024]	[0.926] [0.640]	[0.335] [0.825]	[0.039] [0.992]	[0.649]		
p-value on AWH-C /= AWH-C+ Control Mean	[0.902] 0.796	[0.883] 0.756	[0.319] 0.830	[0.030] 0.000	[0.297] 0.851	[0.093] 0.728	[0.700] 0.831	[0.092] 0.712	[0.840] 0.857		
Number of Observations	1997	1999	2002	1990	2003	2004	2004	2002	2003		
Panel B: 24- to 36-month impacts											
Her Spaces AWH Essential	-0.005 (0.030) 0.003	-0.002 (0.029) -0.008	0.039 (0.027) 0.009	0.067 (0.081) 0.088	-0.008 (0.028) 0.017	0.002 (0.033) 0.031	-0.038 (0.033) -0.040	0.016 (0.032) -0.042	-0.032 (0.026) 0.026		
AWH Comprehensive	(0.032) -0.005	(0.029) 0.019	(0.030)	(0.083) 0.058	(0.026) 0.009	(0.029) 0.034	(0.032) -0.057**	(0.032) -0.014	(0.028) -0.028		
AWH Comprehensive Plus	(0.031) 0.018	(0.031) -0.030	(0.029) -0.014	(0.075) 0.121	(0.024) -0.067**	(0.027) 0.020	(0.029) -0.086***	(0.030)	(0.020) 0.001		
p-value on HS /= AWH-E	(0.034) [0.828]	(0.029) [0.861]	(0.030) [0.310]	(0.077) [0.816]	(0.031) [0.394]	(0.025) [0.455]	(0.028) [0.940]	(0.029) [0.130]	(0.023) [0.022]		
p-value on AWH-E /= AWH-C p-value on AWH-C /= AWH-C+	[0.832] [0.522]	[0.387]	[0.765]	[0.717] [0.386]	[0.758] [0.011]	[0.435] [0.935] [0.644]	[0.627] [0.333]	[0.442] [0.831]	[0.022] [0.010] [0.160]		
Control Mean Number of Observations	0.754 1920	0.734 1918	0.784 1918	-0.000 1917	0.857 1918	0.746 1921	0.845 1921	0.656 1921	0.869 1919		

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Cross-Cutting Outcomes (part 3)										
	=1 if Agrees "A Boy should always have final say about decisions with girlfriend" (86)	is okay to tease a girl	is okay to tease a boy who acts	Index of Gender Consciousn ess (89)	=1 if Agrees "Our culture makes it harder for girls to achieve their goals than boys" (90)	=1 if Agrees "I'm very aware of people's reactions to my being a girl" (91)	=1 if Agrees "I think about how boys' and girls' roles differ from each other" (92)	=1 if Agrees "I think it is possible to change people's reaction to my gender" (93)	Index of gendered attitudes toward education (94)		
Panel A: 10-month impacts											
Her Spaces	0.030	-0.015	-0.018	0.107	0.028	0.018	0.010	0.070**	-0.033		
	(0.028)	(0.037)	(0.033)	(0.083)	(0.034)	(0.037)	(0.040)	(0.034)	(0.076)		
AWH Essential	-0.030	-0.058*	-0.036	0.084	0.006	0.064*	-0.018	0.048	0.111*		
	(0.030)	(0.035)	(0.029)	(0.076)	(0.031)	(0.033)	(0.039)	(0.037)	(0.065)		
AWH Comprehensive	-0.021	-0.043	-0.047	0.076	0.001	0.023	0.001	0.059	-0.057		
	(0.029)	(0.043)	(0.034)	(0.079)	(0.038)	(0.036)	(0.042)	(0.039)	(0.078)		
AWH Comprehensive Plus	0.010	0.020	0.026	0.210***	-0.004	0.097***	0.054	0.080**	-0.055		
	(0.029)	(0.035)	(0.034)	(0.067)	(0.032)	(0.029)	(0.034)	(0.036)	(0.076)		
p-value on HS /= AWH-E	[0.042]	[0.248]	[0.555]	[0.803]	[0.547]	[0.271]	[0.479]	[0.592]	[0.039]		
p-value on AWH-E /= AWH-C	[0.767]	[0.720]	[0.722]	[0.930]	[0.904]	[0.313]	[0.637]	[0.792]	[0.021]		
p-value on AWH-C /= AWH-C+	[0.278]	[0.140]	[0.041]	[0.087]	[0.910]	[0.044]	[0.146]	[0.647]	[0.983]		
Control Mean	0.785	0.347	0.326	-0.000	0.562	0.720	0.695	0.648	0.000		
Number of Observations	2000	1995	1995	1972	1997	1988	1988	1994	1995		
Panel B: 24- to 36-month impacts											
Her Spaces	-0.006	-0.007	-0.018	0.073	0.034	-0.009	0.037	0.033	-0.017		
	(0.032)	(0.036)	(0.036)	(0.072)	(0.038)	(0.032)	(0.034)	(0.036)	(0.081)		
AWH Essential	-0.027	0.006	0.002	0.045	-0.018	0.014	0.056*	0.009	0.030		
	(0.037)	(0.035)	(0.034)	(0.062)	(0.035)	(0.028)	(0.032)	(0.034)	(0.078)		
AWH Comprehensive	0.025	0.029	0.029	0.162***	0.038	0.044	0.061*	0.050	-0.023		
	(0.027)	(0.036)	(0.037)	(0.062)	(0.038)	(0.027)	(0.033)	(0.034)	(0.095)		
AWH Comprehensive Plus	-0.046	-0.040	-0.031	-0.004	-0.003	-0.012	0.042	-0.031	0.112		
	(0.034)	(0.032)	(0.032)	(0.064)	(0.036)	(0.025)	(0.030)	(0.033)	(0.080)		
p-value on HS /= AWH-E	[0.604]	[0.710]	[0.543]	[0.680]	[0.153]	[0.521]	[0.597]	[0.498]	[0.546]		
p-value on AWH-E /= AWH-C	[0.163]	[0.467]	[0.409]	[0.044]	[0.140]	[0.331]	[0.880]	[0.238]	[0.557]		
p-value on AWH-C /= AWH-C+	[0.044]	[0.021]	[0.046]	[0.007]	[0.305]	[0.064]	[0.564]	[0.016]	[0.139]		
Control Mean	0.773	0.253	0.260	-0.000	0.486	0.719	0.636	0.606	-0.000		
Number of Observations	1918	1919	1919	1904	1915	1916	1912	1916	1919		

Cross-Cutting Outcomes (part 4)

								=1 if Agrees "A
	=1 if Agrees "If		1.01	=1 if Agrees "A			1 .6	man using
	a family can afford for one	=1 if Agrees "Only boys	=1 if Agrees "Girls should	girl's marriage can wait until	=1 if Agrees "It is	Index of	=1 if Agrees "It	violence against his wife is a
	child to go to	should learn	be sent to	she has	appropriate	attitudes	agrees II	private matter
	secondary	about	school only if	completed	for parents to	toward	acceptable	
	school, it	science,	they are not	senior	take boys out	violence	for a man	be discussed
	should be the	technology,	needed at	secondary	of school for	(standardi	to hit his	outside the
	boy only"	and math"	home"	school"	work"	zed)	wife"	couple"
	(95)	(96)	(97)	(98)	(99)	(100)	(101)	(102)
Panel A: 10-month impacts				,	,	, ,	,	
Her Spaces	0.027	0.021	-0.046	-0.001	0.044	-0.011	0.082**	-0.007
	(0.035)	(0.025)	(0.033)	(0.020)	(0.035)	(0.065)	(0.036)	(0.034)
AWH Essential	-0.036	-0.005	-0.081***	-0.031	-0.066**	-0.041	0.043	0.046
	(0.025)	(0.024)	(0.030)	(0.020)	(0.031)	(0.064)	(0.033)	(0.037)
AWH Comprehensive	0.036	0.002	-0.010	-0.044**	-0.007	-0.018	0.056	0.013
	(0.031)	(0.028)	(0.039)	(0.021)	(0.038)	(0.075)	(0.036)	(0.040)
AWH Comprehensive Plus	0.040	-0.005	0.039	-0.016	-0.014	0.042	0.012	0.013
	(0.031)	(0.028)	(0.033)	(0.021)	(0.030)	(0.068)	(0.032)	(0.038)
p-value on HS /= AWH-E	[0.059]	[0.310]	[0.226]	[0.139]	[0.001]	[0.641]	[0.321]	[0.096]
p-value on AWH-E /= AWH-C	[0.014]	[0.799]	[0.050]	[0.530]	[0.090]	[0.769]	[0.756]	[0.362]
p-value on AWH-C /= AWH-C+	[0.902]	[0.812]	[0.224]	[0.215]	[0.851]	[0.437]	[0.281]	[0.995]
Control Mean	0.307	0.181	0.345	0.876	0.290	0.000	0.528	0.499
Number of Observations	2002	2002	1999	2004	2003	2001	2003	2001
Panel B: 24- to 36-month impacts								
Her Spaces	-0.006	0.015	0.022	0.017	0.008	-0.020	0.059	0.011
	(0.031)	(0.025)	(0.030)	(0.024)	(0.026)	(0.078)	(0.040)	(0.038)
AWH Essential	0.006	-0.030	0.033	0.009	-0.027	-0.008	0.029	0.008
	(0.032)	(0.023)	(0.035)	(0.025)	(0.027)	(0.078)	(0.035)	(0.032)
AWH Comprehensive	-0.006	0.003	0.035	0.022	0.017	0.064	0.004	-0.031
	(0.034)	(0.031)	(0.035)	(0.026)	(0.030)	(0.074)	(0.039)	(0.036)
AWH Comprehensive Plus	-0.012	-0.036	0.009	0.023	-0.061**	0.123*	-0.007	-0.038
	(0.030)	(0.028)	(0.032)	(0.025)	(0.024)	(0.071)	(0.033)	(0.034)
p-value on HS /= AWH-E	[0.730]	[0.041]	[0.748]	[0.750]	[0.216]	[0.881]	[0.460]	[0.938]
p-value on AWH-E /= AWH-C	[0.738]	[0.224]	[0.974]	[0.633]	[0.173]	[0.374]	[0.541]	[0.257]
p-value on AWH-C /= AWH-C+	[0.876]	[0.218]	[0.483]	[0.983]	[0.010]	[0.439]	[0.789]	[0.858]
Control Mean	0.249	0.134	0.206	0.817	0.160	-0.000	0.366	0.518
Number of Observations	1920	1920	1920	1919	1920	1917	1918	1918

	=1 if Agrees "A woman should tolerate violence to keep her family together" (103)
Panel A: 10-month impacts	(13)
Her Spaces	-0.058**
1	(0.029)
AWH Essential	-0.041
	(0.028)
AWH Comprehensive	-0.045
1	(0.032)
AWH Comprehensive Plus	-0.066**
•	(0.030)
p-value on HS /= AWH-E	[0.539]
p-value on AWH-E /= AWH-C	[0.898]
p-value on AWH-C /= AWH-C+	[0.553]
Control Mean	0.694
Number of Observations	2002
Panel B: 24- to 36-month impacts	
Her Spaces	-0.046
	(0.031)
AWH Essential	-0.026
	(0.040)
AWH Comprehensive	-0.034
	(0.034)
AWH Comprehensive Plus	-0.075**
	(0.036)
p-value on HS /= AWH-E	[0.586]
p-value on AWH-E /= AWH-C	[0.851]
p-value on AWH-C /= AWH-C+	[0.275]
Control Mean	0.630
Number of Observations	1919

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Cross-Cutting Outcomes (part 5)									
	Index of Supportive Network (104)	=1 if Has a Trusted Female Friend (105)	=1 if Has a Trusted Male Friend (106)	=1 if Has a Trusted Adult (107)	Index of Service Knowledge (108)	=1 if Knows Where Services Could be Received for Substance Addiction (109)	=1 if Knows Where Services Could be Received for Mental Health (110)	=1 if Knows Where Services Could be Received for Pregnancy Prevention (111)	=1 if Knows Where Services Could be Received for Abortion/ Adoption (112)	=1 if Knows Where Services Could be Received for Violence (113)
Panel A: 10-month impacts										
Her Spaces	0.014	-0.009	-0.001	0.024						
	(0.075)	(0.039)	(0.014)	(0.038)						
AWH Essential	0.055	0.031	-0.005	0.031						
	(0.069)	(0.033)	(0.014)	(0.030)						
AWH Comprehensive	0.023	0.031	-0.016	0.030						
	(0.077)	(0.029)	(0.015)	(0.041)						
AWH Comprehensive Plus	0.138*	0.045	0.017	0.038						
	(0.078)	(0.035)	(0.015)	(0.035)						
p-value on HS /= AWH-E	[0.597]	[0.332]	[0.713]	[0.849]						
p-value on AWH-E /= AWH-C	[0.699]	[0.999]	[0.379]	[0.973]						
p-value on AWH-C /= AWH-C+	[0.204]	[0.683]	[0.020]	[0.843]						
Control Mean	0.000	0.638	0.040	0.576						
Number of Observations	2005	2005	2005	2005						
Panel B: 24- to 36-month impacts										
Her Spaces	-0.076	-0.005	-0.020	-0.028	0.031	-0.001	-0.020	0.031	0.029	0.062
	(0.076)	(0.039)	(0.014)	(0.036)	(0.078)	(0.017)	(0.019)	(0.034)	(0.032)	(0.041)
AWH Essential	0.087	0.036	0.006	0.037	0.266**	0.029	0.054**	0.105**	0.102***	0.026
	(0.080)	(0.037)	(0.016)	(0.040)	(0.103)	(0.022)	(0.026)	(0.041)	(0.037)	(0.036)
AWH Comprehensive	0.034	0.040	-0.006	0.004	0.027	0.002	0.004	0.036	0.021	-0.010
	(0.084)	(0.036)	(0.021)	(0.040)	(0.083)	(0.020)	(0.021)	(0.040)	(0.032)	(0.033)
AWH Comprehensive Plus	-0.032	0.032	-0.012	-0.040	0.004	0.013	-0.008	0.026	0.002	0.009
	(0.089)	(0.039)	(0.015)	(0.043)	(0.084)	(0.019)	(0.020)	(0.040)	(0.029)	(0.036)
p-value on HS /= AWH-E	[0.049]	[0.279]	[0.109]	[0.121]	[0.023]	[0.202]	[0.006]	[0.057]	[0.061]	[0.389]
p-value on AWH-E /= AWH-C	[0.557]	[0.890]	[0.588]	[0.467]	[0.025]	[0.293]	[0.077]	[0.118]	[0.041]	[0.294]
p-value on AWH-C /= AWH-C+	[0.506]	[0.828]	[0.802]	[0.366]	[0.810]	[0.628]	[0.596]	[0.841]	[0.588]	[0.605]
Control Mean	0.000	0.633	0.059	0.559	-0.000	0.060	0.080	0.330	0.200	0.339
Number of Observations	1921	1922	1922	1921	1753	1756	1921	1756	1756	1918

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

	Cross-Cutting Outcomes (part 6)									
	=1 if Knows Where Services Could be Received for Injustice Under the Law (114)	Index of Service Accessibilit y (115)	Could Access	=1 if Believes Adolescent Could Access Services for Mental Health (117)	=1 if Believes Adolescent Could Access Services for Pregnancy Prevention (118)		=1 if Believes Adolescent Could Access Services for Violence (120)	=1 if Believes Adolescent Could Access Services for Injustice Under the Law (121)	=1 if Believes Adolescent Could Access Financial Services (122)	
Panel A: 10-month impacts										
Her Spaces										
AWH Essential										
AWH Comprehensive										
AWH Comprehensive Plus										
p-value on HS /= AWH-E										
p-value on AWH-E /= AWH-C										
p-value on AWH-C /= AWH-C+										
Control Mean										
Number of Observations										
Panel B: 24- to 36-month impacts										
Her Spaces	-0.051	0.014	-0.009	-0.029*	0.025	0.033	0.068*	-0.045		
	(0.031)	(0.082)	(0.016)	(0.017)	(0.037)	(0.032)	(0.041)	(0.028)		
AWH Essential	0.039	0.264**	0.011	0.047**	0.099**	0.102***	0.041	0.043		
ANTER CO. 1	(0.033)	(0.103)	(0.022)	(0.023)	(0.040)	(0.038)	(0.034)	(0.030)		
AWH Comprehensive	-0.017	0.016	-0.011	0.008	0.031	0.022	-0.008	-0.016		
ANTE COLUMN DI	(0.035)	(0.082)	(0.019)	(0.021)	(0.037)	(0.027)	(0.032)	(0.031)		
AWH Comprehensive Plus	-0.054*	0.010	0.007	-0.001	0.047	0.011	-0.013	-0.039		
1 HG / AWH F	(0.029)	(0.084)	(0.019)	(0.019)	(0.039)	(0.029)	(0.033)	(0.027)		
p-value on HS /= AWH-E	[0.005]	[0.015]	[0.353]	[0.001]	[0.054]	[0.081]	[0.505]	[0.004]		
p-value on AWH-E /= AWH-C	[0.112]	[0.016]	[0.363]	[0.129]	[0.085]	[0.025]	[0.139]	[0.074]		
p-value on AWH-C /= AWH-C+	[0.270]	[0.951]	[0.411]	[0.679]	[0.695]	[0.697]	[0.890]	[0.479]		
Control Mean Number of Observations	0.211	-0.000 1750	0.059	0.069	0.279	0.142	0.287	0.172		
INUITIDEL OF OUSELVALIOUS	1920	1750	1756	1921	1754	1756	1918	1919		

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued) **Cross-Cutting Outcomes (part 7)** =1 if Knowledge: =1 if =1 if Knowledge early **Knowledge:** Index (for **Knowledge:** =1 if pregnancy is index naming **AWH** girls girls reach =1 if **Knowledge:** bad for iron-rich curricula puberty first **Knowledge:** menarche health (in foods (0-4) (in AWH curr (maybe also **AWH curr** (in AWH menstruation allows HS)) frequency pregnancy curr only) only) only) (123)(124)(125)(128)(126)(127)0.272*** 0.137*** -0.000 0.032 0.025 0.044 (0.034)(0.027)(0.032)(0.085)(0.038)(0.072)0.307*** 0.017 0.077** 0.014 -0.012 0.043 (0.089)(0.035)(0.036)(0.028)(0.035)(0.080)0.298*** 0.180*** -0.001 -0.003 0.023 0.154* (0.077)(0.031)(0.038)(0.033)(0.037)(0.081)0.316*** 0.173*** 0.046 0.012 0.024 -0.015 (0.088)(0.087)(0.030)(0.035)(0.032)(0.037)[0.872] [0.712][0.683] [0.122][0.698] [0.982] [0.015] [0.602] [0.00 [0.642] [0.504] [0.047]

r	[***]	[]	L. 1	F		[
p-value on AWH-E /= AWH-C	[0.915]	[0.602]	[0.008]	[0.642]	[0.594]	[0.047]
p-value on AWH-C /= AWH-C+	[0.846]	[0.105]	[0.862]	[0.686]	[0.979]	[0.045]
Control Mean	0.000	0.504	0.469	0.699	0.669	2.148
Number of Observations	1900	2004	2000	2004	2003	1997
Panel B: 24- to 36-month impacts						
Her Spaces	-0.003	0.007	0.021	-0.011	-0.059*	-0.087
	(0.079)	(0.034)	(0.023)	(0.032)	(0.030)	(0.071)
AWH Essential	0.041	0.027	-0.010	0.016	-0.032	-0.002
	(0.080)	(0.033)	(0.022)	(0.028)	(0.032)	(0.068)
AWH Comprehensive	-0.016	0.027	0.007	-0.021	0.002	-0.081
	(0.071)	(0.034)	(0.025)	(0.043)	(0.032)	(0.066)
AWH Comprehensive Plus	0.003	0.084***	-0.011	-0.088***	-0.045	-0.032
	(0.074)	(0.030)	(0.029)	(0.034)	(0.034)	(0.061)
p-value on HS /= AWH-E	[0.583]	[0.613]	[0.196]	[0.345]	[0.413]	[0.271]
p-value on AWH-E /= AWH-C	[0.438]	[0.991]	[0.488]	[0.344]	[0.306]	[0.286]
p-value on AWH-C /= AWH-C+	[0.784]	[0.123]	[0.534]	[0.122]	[0.185]	[0.468]
Control Mean	0.000	0.623	0.824	0.769	0.774	2.263
Number of Observations	1900	1920	1921	1915	1919	1920

Panel A: 10-month impacts

Her Spaces

AWH Essential

AWH Comprehensive

AWH Comprehensive Plus

p-value on HS /= AWH-E

Table B1. ITT regressions for girls' secondary outcomes, all study sites (continued)

Cross-Cutting Outcomes (part 8)

		=1 if	=1 if						=1 if
	=1 if	Knowledge:	Knowledge:			=1 if		=1	Knowledge:
	Knowledge:	legal age of	legal age of		=1 if	Knowledge -		Knowledge:	gender roles
	number	marriage for	marriage for	=1 if	Knowledge:	safe place	=1 if	boys are not	can be
	meals	girls (in	boys (in	Knowledge:	where to get	where to keep	Knowledge:	biologically	changed (in
	healthy for	AWH curr	AWH curr	FGMC has	help for	money other	negotiation	smarter than	AWH curr
	adolescents	only)	only)	risks	violence	than home	skills	girls	only)
	(129)	(130)	(131)	(132)	(133)	(134)	(135)	(136)	(137)
Panel A: 10-month impacts									
Her Spaces	-0.010	0.057**	0.007	0.108**	0.133***	0.042	0.052	-0.011	0.034
	(0.014)	(0.026)	(0.017)	(0.046)	(0.046)	(0.028)	(0.033)	(0.028)	(0.041)
AWH Essential	0.003	0.080***	0.005	0.180***	0.079*	0.047	0.042	0.015	0.066*
	(0.018)	(0.025)	(0.017)	(0.044)	(0.044)	(0.038)	(0.033)	(0.031)	(0.038)
AWH Comprehensive	0.008	0.062**	0.015	0.170***	0.123***	0.086***	0.020	-0.009	-0.024
	(0.017)	(0.026)	(0.016)	(0.044)	(0.044)	(0.029)	(0.026)	(0.035)	(0.044)
AWH Comprehensive Plus	-0.022	0.056*	0.025	0.143***	0.060	0.070**	0.051*	0.015	0.005
	(0.022)	(0.030)	(0.020)	(0.043)	(0.048)	(0.028)	(0.027)	(0.029)	(0.040)
p-value on HS /= AWH-E	[0.446]	[0.419]	[0.948]	[0.131]	[0.276]	[0.881]	[0.795]	[0.425]	[0.457]
p-value on AWH-E /= AWH-C	[0.785]	[0.506]	[0.594]	[0.816]	[0.345]	[0.327]	[0.502]	[0.539]	[0.046]
p-value on AWH-C /= AWH-C+	[0.169]	[0.875]	[0.710]	[0.581]	[0.224]	[0.616]	[0.289]	[0.509]	[0.517]
Control Mean	0.916	0.139	0.047	0.333	0.281	0.812	0.214	0.536	0.463
Number of Observations	2005	2003	2004	1985	1990	1948	2005	2005	2003
Panel B: 24- to 36-month impacts									
Her Spaces	0.025*	0.034	-0.045*		0.064	0.014	0.000	0.012	-0.030
	(0.015)	(0.037)	(0.026)		(0.040)	(0.013)	(0.035)	(0.038)	(0.033)
AWH Essential	0.007	0.068*	-0.006		0.028	-0.002	0.029	0.053	-0.067**
	(0.017)	(0.037)	(0.025)		(0.036)	(0.014)	(0.041)	(0.038)	(0.029)
AWH Comprehensive	0.013	0.050	-0.018		-0.008	-0.004	0.002	0.046	-0.069*
	(0.015)	(0.034)	(0.025)		(0.033)	(0.015)	(0.035)	(0.038)	(0.040)
AWH Comprehensive Plus	0.021	0.086**	-0.033		0.011	-0.007	-0.011	0.073*	-0.035
	(0.015)	(0.037)	(0.028)		(0.036)	(0.017)	(0.033)	(0.038)	(0.026)
p-value on HS /= AWH-E	[0.302]	[0.364]	[0.112]		[0.391]	[0.236]	[0.476]	[0.345]	[0.285]
p-value on AWH-E /= AWH-C	[0.711]	[0.623]	[0.607]		[0.298]	[0.885]	[0.528]	[0.885]	[0.962]
p-value on AWH-C /= AWH-C+	[0.608]	[0.341]	[0.580]		[0.615]	[0.879]	[0.701]	[0.554]	[0.406]
Control Mean	0.932	0.377	0.154		0.337	0.965	0.454	0.515	0.574
Number of Observations	1923	1921	1921		1917	1910	1922	1921	1920

Notes for Tables B1-B5: These tables present intention to treat (ITT) results from regressions as specified in equation (1), on the full sample of adolescent girls surveyed in the first follow-up survey round (Panel A) and the second follow-up survey round (Panel B), for the sample indicated in the table title (all sites, South Gondar sites, East Hararghe sites, sites in marginalized communities, and sites in non-marginalized communities). For each outcome measure listed in the column titles, the coefficients (standard errors) for each of the four treatment group indicators are displayed. Outcomes are described in more detail in Appendix D. Regressions are OLS, and include basic and rich controls sets. The basic controls include adolescent age at the time of study recruitment as well as indicators for households with multiple eligible adolescents, sampling block, and survey month; regressions in Panel B additionally include indicators for survey year and randomly assigned survey wave. The rich set of controls for both panels include household size, a household asset index, and indicators for the household head being literate, the household head being female, and the household ever receiving PSNP benefits (by baseline survey). Missing values for controls are set to the mean value for the sample. Regressions are weighted to maintain initial population proportions, and standard errors are clustered by community (kebele).

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites

	Education and Learning										
	Index of Education Participation (1)	=1 if Enrolled in School (2)	Share of School Days Attended in Last Two Weeks (3)	=1 if Did Not Miss More Than One Consecutive Week of School in Last 12 Months (4)	=1 if Aspires to Attain ≥ Secondary School Degree (5)	Highest Grade Attended ¹ (6)	=1 if Ever Enrolled in Secondary School (7)				
Panel A: 10-month impacts											
Her Spaces		-0.057**	-0.065**	-0.033	-0.010	0.039					
		(0.022)	(0.028)	(0.029)	(0.015)	(0.163)					
AWH Essential		-0.046*	-0.038	-0.032	-0.015	0.121					
		(0.027)	(0.040)	(0.044)	(0.028)	(0.200)					
AWH Comprehensive		-0.032	-0.064**	-0.017	-0.001	0.235					
		(0.029)	(0.031)	(0.036)	(0.017)	(0.252)					
AWH Comprehensive Plus		-0.052**	-0.096**	-0.091**	-0.006	-0.228					
		(0.021)	(0.040)	(0.036)	(0.015)	(0.223)					
p-value on HS /= AWH-E		[0.742]	[0.550]	[0.985]	[0.847]	[0.652]					
p-value on AWH-E /= AWH-C		[0.683]	[0.525]	[0.730]	[0.603]	[0.656]					
p-value on AWH-C /= AWH-C+		[0.519]	[0.445]	[0.078]	[0.760]	[0.104]					
Control Mean		0.986	0.882	0.919	0.979	5.477					
Number of Observations		1040	1028	1039	1030	1039					
Panel B: 24- to 36-month impacts											
Her Spaces	-0.018	0.000	-0.021	0.003	-0.032	0.184	0.031				
	(0.127)	(0.054)	(0.057)	(0.064)	(0.028)	(0.188)	(0.034)				
AWH Essential	0.121	0.045	0.024	0.091	0.002	0.171	0.067				
	(0.103)	(0.044)	(0.042)	(0.059)	(0.027)	(0.258)	(0.045)				
AWH Comprehensive	0.089	0.026	-0.003	0.099	0.028	0.123	0.039				
	(0.135)	(0.058)	(0.059)	(0.067)	(0.027)	(0.286)	(0.036)				
AWH Comprehensive Plus	-0.021	-0.015	-0.036	0.033	-0.003	0.092	0.064				
	(0.119)	(0.055)	(0.052)	(0.058)	(0.025)	(0.299)	(0.048)				
p-value on HS /= AWH-E	[0.203]	[0.332]	[0.323]	[0.164]	[0.241]	[0.953]	[0.435]				
p-value on AWH-E /= AWH-C	[0.788]	[0.693]	[0.556]	[0.905]	[0.311]	[0.882]	[0.558]				
p-value on AWH-C /= AWH-C+	[0.388]	[0.475]	[0.533]	[0.318]	[0.203]	[0.928]	[0.614]				
Control Mean	0.320	0.858	0.809	0.691	0.944	6.748	0.164				
Number of Observations	937	951	938	950	949	947	947				

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

				I	Bodily Integrit	ty			
	Index of Violence (higher= less violence) (8)	Peer Violence Scale (0-6, higher= less violence) (9)	=1 if No Exposure to Household Violence Against Self, Female Caregiver in Last 12 Months (10)	of Sexual	Ideal Age at Marriage (years) (12)	=1 if No Peer Violence Victimizatio n in Last 12 months (13)	=1 if No Exposure to Corporal Punishment at School in Last 12 Months (14)	=1 if Did Not Perpetrate Peer Violence in Last 12 Months (15)	=1 if Never Married (16)
Panel A: 10-month impacts									
Her Spaces	0.104	0.092	0.053	0.001	0.777	0.003	0.059	0.017	0.036***
	(0.083)	(0.061)	(0.056)	(0.013)	(0.703)	(0.032)	(0.039)	(0.027)	(0.012)
AWH Essential	0.017	0.016	0.018	-0.002	0.956	-0.017	0.120**	0.009	0.012
	(0.098)	(0.083)	(0.063)	(0.012)	(0.884)	(0.027)	(0.054)	(0.027)	(0.024)
AWH Comprehensive	-0.045	-0.059	0.019	-0.006	1.686*	-0.026	0.074	0.023	0.029*
	(0.110)	(0.105)	(0.052)	(0.015)	(0.867)	(0.036)	(0.055)	(0.027)	(0.017)
AWH Comprehensive Plus	0.141	0.057	0.096*	0.003	0.131	-0.033	0.109**	0.016	0.013
	(0.104)	(0.076)	(0.050)	(0.013)	(0.771)	(0.031)	(0.043)	(0.031)	(0.016)
p-value on HS /= AWH-E	[0.382]	[0.337]	[0.613]	[0.736]	[0.832]	[0.581]	[0.300]	[0.772]	[0.309]
p-value on AWH-E /= AWH-C	[0.600]	[0.482]	[0.994]	[0.820]	[0.397]	[0.805]	[0.526]	[0.586]	[0.473]
p-value on AWH-C /= AWH-C+	[0.153]	[0.283]	[0.146]	[0.523]	[0.083]	[0.854]	[0.593]	[0.816]	[0.421]
Control Mean	-0.040	5.630	0.560	0.977	23.414	0.863	0.121	0.926	0.958
Number of Observations	1016	1039	1018	1039	1019	955	987	1039	1040
Panel B: 24- to 36-month impacts									
Her Spaces	0.085	-0.028	0.066	0.015	0.090	0.004	-0.065	-0.019	0.035
	(0.148)	(0.084)	(0.056)	(0.015)	(0.522)	(0.036)	(0.057)	(0.020)	(0.035)
AWH Essential	-0.023	-0.027	0.038	-0.006	0.096	0.022	0.003	-0.013	0.030
	(0.131)	(0.071)	(0.056)	(0.021)	(0.568)	(0.027)	(0.056)	(0.024)	(0.034)
AWH Comprehensive	0.178*	-0.009	0.129**	0.015	-0.746	0.016	0.039	-0.019	0.037
	(0.105)	(0.047)	(0.061)	(0.018)	(0.630)	(0.030)	(0.062)	(0.023)	(0.033)
AWH Comprehensive Plus	-0.019	-0.031	0.099*	-0.027	-0.151	0.007	-0.061	-0.016	0.031
	(0.144)	(0.052)	(0.050)	(0.031)	(0.499)	(0.029)	(0.059)	(0.019)	(0.029)
p-value on HS /= AWH-E	[0.521]	[0.996]	[0.614]	[0.369]	[0.991]	[0.595]	[0.188]	[0.800]	[0.882]
p-value on AWH-E /= AWH-C	[0.128]	[0.814]	[0.113]	[0.354]	[0.193]	[0.828]	[0.527]	[0.795]	[0.837]
p-value on AWH-C /= AWH-C+	[0.250]	[0.668]	[0.569]	[0.296]	[0.311]	[0.770]	[0.098]	[0.859]	[0.832]
Control Mean	-0.095	5.793	0.596	0.972	22.717	0.888	0.319	0.956	0.916
Number of Observations	858	949	925	883	897	904	832	949	951

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Physical Health, Nutrition, and Sexual and Reproductive Health										
	Index of Physical Health & Nutrition (17)	=1 Physical Health Is Good (18)	Proportion of Meals Yesterday Containing Meat, Chicken, Fish, or Egg (19)	=1 if Has Not Ever Been Hungry Because Not Enough Food in Last 4 Weeks (20)	Index of Menstrual Practices (21)	=1 if Normal Activities Are Not Affected by Menstruatio n (Among Post- Menarche) (22)	Index of Improved Menstrual Hygiene Practices (0- 2, Among Post- menarche) (23)	=1 if Improved Menstrual Hygiene Managemen t (Among Post- menarche) (24)	=1 if Practices Appropriate Menstrual Product Disposal at Home (Among Postmenarche) (25)	
Panel A: 10-month impacts	` '				` '			, ,		
Her Spaces	0.035	0.005	0.006	0.002	-0.092	0.033	-0.056	0.057	-0.214	
	(0.086)	(0.029)	(0.014)	(0.019)	(0.304)	(0.101)	(0.285)	(0.150)	(0.146)	
AWH Essential	0.025	0.015	0.000	-0.001	0.511	0.027	0.557	0.343*	0.208	
	(0.080)	(0.029)	(0.015)	(0.018)	(0.544)	(0.151)	(0.382)	(0.181)	(0.218)	
AWH Comprehensive	-0.137	-0.088**	0.017	-0.027	-0.304	-0.113	-0.099	0.030	-0.168	
	(0.125)	(0.040)	(0.023)	(0.022)	(0.347)	(0.118)	(0.332)	(0.152)	(0.200)	
AWH Comprehensive Plus	-0.127	-0.028	-0.007	-0.030	0.502	-0.094	0.782**	0.462***	0.298*	
	(0.089)	(0.036)	(0.013)	(0.023)	(0.406)	(0.120)	(0.301)	(0.156)	(0.154)	
p-value on HS /= AWH-E	[0.915]	[0.744]	[0.751]	[0.837]	[0.166]	[0.962]	[0.030]	[0.059]	[0.006]	
p-value on AWH-E /= AWH-C	[0.167]	[0.011]	[0.465]	[0.165]	[0.097]	[0.347]	[0.051]	[0.047]	[0.056]	
p-value on AWH-C /= AWH-C+	[0.932]	[0.182]	[0.266]	[0.907]	[0.089]	[0.896]	[0.005]	[0.012]	[0.004]	
Control Mean	0.177	0.883	0.052	0.960	0.342	0.952	0.977	0.466	0.511	
Number of Observations	1039	1040	1040	1039	86	93	86	92	86	
Panel B: 24- to 36-month impacts										
Her Spaces	-0.117	-0.017	-0.004	-0.031	-0.316*	-0.100*	-0.033	0.053	-0.032	
	(0.114)	(0.026)	(0.012)	(0.027)	(0.177)	(0.058)	(0.162)	(0.080)	(0.080)	
AWH Essential	-0.061	0.011	-0.014	-0.006	0.125	0.028	0.039	0.109	0.000	
	(0.095)	(0.029)	(0.011)	(0.020)	(0.150)	(0.054)	(0.140)	(0.078)	(0.072)	
AWH Comprehensive	-0.333**	-0.042	-0.031	-0.047**	0.047	0.082	-0.072	0.084	-0.102	
	(0.133)	(0.031)	(0.019)	(0.019)	(0.163)	(0.055)	(0.162)	(0.092)	(0.084)	
AWH Comprehensive Plus	0.078	-0.016	0.018	0.010	-0.041	-0.023	0.099	0.119	-0.000	
	(0.105)	(0.030)	(0.013)	(0.016)	(0.183)	(0.050)	(0.176)	(0.105)	(0.097)	
p-value on HS /= AWH-E	[0.604]	[0.316]	[0.353]	[0.381]	[0.003]	[0.026]	[0.546]	[0.356]	[0.610]	
p-value on AWH-E /= AWH-C	[0.037]	[0.113]	[0.326]	[0.084]	[0.574]	[0.287]	[0.336]	[0.733]	[0.123]	
p-value on AWH-C /= AWH-C+	[0.004]	[0.427]	[0.036]	[0.004]	[0.607]	[0.043]	[0.300]	[0.737]	[0.299]	
Control Mean	0.051	0.886	0.016	0.964	0.116	0.841	1.320	0.549	0.682	
Number of Observations	926	951	926	951	342	387	343	388	343	

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

	SRH (continued) Psychosocial Wellbeing									
	Ideal Age at First Child (years) (26)	=1 if Not Ever	Desired Fertility (number of children) (28)	Self-Esteem Score (0-40, higher= more self-esteem) (29)	Mental Distress Score (0-27, higher= less distress) (30)	5	=1 if Minimal Depression Detected (32)			
Panel A: 10-month impacts				, ,	, ,	` ,				
Her Spaces					0.096	0.311	-0.002			
					(0.152)	(0.297)	(0.013)			
AWH Essential					0.228	0.648**	0.017			
					(0.158)	(0.323)	(0.012)			
AWH Comprehensive					0.217	0.496*	0.017			
					(0.162)	(0.280)	(0.015)			
AWH Comprehensive Plus					-0.259	0.392	-0.020			
					(0.257)	(0.337)	(0.017)			
p-value on HS /= AWH-E					[0.387]	[0.337]	[0.154]			
p-value on AWH-E /= AWH-C					[0.935]	[0.618]	[0.989]			
p-value on AWH-C /= AWH-C+					[0.089]	[0.757]	[0.089]			
Control Mean					26.496	33.014	0.986			
Number of Observations					1025	942	1025			
Panel B: 24- to 36-month impacts										
Her Spaces	-0.004	0.023**	0.063	0.345	-0.178**	-0.275	-0.025*			
	(0.534)	(0.010)	(0.256)	(0.266)	(0.084)	(0.519)	(0.013)			
AWH Essential	-0.102	0.006	-0.157	0.049	-0.159	0.429	-0.015			
	(0.586)	(0.014)	(0.189)	(0.306)	(0.105)	(0.380)	(0.010)			
AWH Comprehensive	-0.356	0.014	-0.195	-0.078	-0.130	0.478	-0.004			
	(0.627)	(0.013)	(0.194)	(0.282)	(0.128)	(0.466)	(0.008)			
AWH Comprehensive Plus	-0.162	0.019*	-0.012	0.199	-0.133	0.170	-0.021			
	(0.516)	(0.011)	(0.214)	(0.333)	(0.151)	(0.419)	(0.017)			
p-value on HS /= AWH-E	[0.849]	[0.086]	[0.283]	[0.299]	[0.852]	[0.152]	[0.503]			
p-value on AWH-E /= AWH-C	[0.658]	[0.528]	[0.780]	[0.665]	[0.834]	[0.908]	[0.296]			
p-value on AWH-C /= AWH-C+	[0.699]	[0.649]	[0.215]	[0.372]	[0.984]	[0.489]	[0.305]			
Control Mean	25.632	0.974	3.890	28.465	26.581	32.471	0.994			
Number of Observations	929	799	949	880	951	922	951			

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Voice and Agency (part 1)

	Index of Voice & Agency	Index of Participation in Decision Making	=1 if Has Leadership Role in School (Among Enrolled)	Index of Say in Household Decisions Related to Self (0-8)	Index of Comfort Expressing Oneself	=1 if Comfortable Expressing Opinion With Agemates	Opinion With Those Who Are Older	Index of Issues Discussed with Mother (0-8)	Index of Issues Discussed with Father (0-7)
Panel A: 10-month impacts	(33)	(34)	(35)	(36)	(37)	(38)	(38)	(39)	(40)
Her Spaces	0.214**	0.323**	0.061	0.624**	0.024	0.002	0.017	0.555***	0.177
Her spaces	(0.098)	(0.128)	(0.043)	(0.281)	(0.119)	(0.047)	(0.059)	(0.133)	(0.151)
AWH Essential	0.363***	0.263**	0.043)	0.345	0.093	0.011	0.059	0.590**	0.131)
11//11 Essential	(0.088)	(0.125)	(0.044)	(0.262)	(0.125)	(0.049)	(0.058)	(0.237)	(0.207)
AWH Comprehensive	0.213**	0.196	-0.033	0.756**	0.052	-0.023	0.067	0.901***	0.399**
r	(0.091)	(0.128)	(0.041)	(0.308)	(0.110)	(0.052)	(0.063)	(0.172)	(0.161)
AWH Comprehensive Plus	0.301***	0.329***	0.053	0.693***	0.056	0.004	0.040	0.975***	0.354*
	(0.101)	(0.119)	(0.046)	(0.250)	(0.105)	(0.047)	(0.057)	(0.178)	(0.181)
p-value on HS /= AWH-E	[0.062]	[0.602]	[0.601]	[0.277]	[0.586]	[0.843]	[0.486]	[0.875]	[0.611]
p-value on AWH-E /= AWH-C	[0.043]	[0.519]	[0.003]	[0.119]	[0.703]	[0.493]	[0.898]	[0.176]	[0.561]
p-value on AWH-C /= AWH-C+	[0.300]	[0.183]	[0.036]	[0.796]	[0.964]	[0.572]	[0.685]	[0.706]	[0.797]
Control Mean	0.080	0.113	0.207	4.528	0.203	0.778	0.526	2.991	2.659
Number of Observations	1004	1019	985	1021	1040	1040	1040	967	871
Panel B: 24- to 36-month impacts									
Her Spaces	0.021	0.199	0.033	0.383	-0.002	0.004	-0.007	-0.009	0.004
	(0.115)	(0.135)	(0.051)	(0.295)	(0.096)	(0.036)	(0.055)	(0.212)	(0.146)
AWH Essential	0.187*	0.034	-0.010	0.086	0.110	0.039	0.040	0.651***	0.229
	(0.099)	(0.140)	(0.041)	(0.286)	(0.103)	(0.039)	(0.057)	(0.202)	(0.151)
AWH Comprehensive	0.145	0.107	-0.043	0.424	-0.028	-0.056	0.048	0.493**	0.104
	(0.091)	(0.135)	(0.039)	(0.288)	(0.126)	(0.051)	(0.062)	(0.202)	(0.189)
AWH Comprehensive Plus	-0.109	-0.113	-0.073*	-0.109	0.053	0.040	-0.007	0.003	-0.077
	(0.085)	(0.118)	(0.039)	(0.268)	(0.104)	(0.043)	(0.056)	(0.205)	(0.161)
p-value on HS /= AWH-E	[0.174]	[0.320]	[0.437]	[0.374]	[0.191]	[0.282]	[0.313]	[0.003]	[0.135]
p-value on AWH-E /= AWH-C	[0.669]	[0.652]	[0.431]	[0.293]	[0.229]	[0.041]	[0.878]	[0.478]	[0.520]
p-value on AWH-C /= AWH-C+	[0.005]	[0.130]	[0.401]	[0.090]	[0.505]	[0.068]	[0.290]	[0.037]	[0.393]
Control Mean	-0.015	0.041	0.237	4.266	0.038	0.801	0.489	3.512	2.792
Number of Observations	931	941	832	941	950	950	950	910	845

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Voice and Agency (part 2)

					Index for "If			
				Index for	I See			
			Index for	"My Friends	Something		Index for "I	
		Index For	"My Parents	Ask My	Wrong, I Feel		Can Speak	Index for "I
		•	Listen When I			Can Speak	Up If I See	Can Ask
		Ask for My	Share My	They Have a	Talk To	Up in Class"	Someone	Adults for
	Index of	Opinions on		,	Someone" (0-	(among	Being Hurt"	Help When I
	Voice	Things" (0-2)		2)	2)	enrolled, 0-2)	(0-2)	Need It" (0-2)
D 14 10 (1)	(41)	(42)	(43)	(44)	(45)	(46)	(47)	(48)
Panel A: 10-month impacts	0.262***	0.026	0.002	0.014	0.054	0.050***	0.15544	0.145444
Her Spaces	0.263***	-0.036	0.083	-0.014	0.054	0.258***	0.155**	0.145***
ATTI E 1	(0.087)	(0.068)	(0.053)	(0.063)	(0.065)	(0.059)	(0.061)	(0.052)
AWH Essential	0.404***	0.119*	0.106*	0.150***	0.117	0.238***	0.182***	0.174***
ATTER CO. I	(0.079)	(0.068)	(0.058)	(0.046)	(0.075)	(0.056)	(0.054)	(0.041)
AWH Comprehensive	0.347***	0.211***	0.135**	0.102	0.028	0.156*	0.168***	0.165**
ATTIL C	(0.109)	(0.067)	(0.061)	(0.072)	(0.076)	(0.085)	(0.056)	(0.063)
AWH Comprehensive Plus	0.384***	0.142***	0.123***	0.155***	0.134**	0.179***	0.190***	0.130**
	(0.067)	(0.044)	(0.041)	(0.048)	(0.061)	(0.057)	(0.051)	(0.054)
p-value on HS /= AWH-E	[0.134]	[0.068]	[0.686]	[0.001]	[0.410]	[0.750]	[0.665]	[0.572]
p-value on AWH-E /= AWH-C	[0.608]	[0.272]	[0.627]	[0.370]	[0.271]	[0.312]	[0.797]	[0.882]
p-value on AWH-C /= AWH-C+	[0.717]	[0.309]	[0.813]	[0.334]	[0.141]	[0.784]	[0.648]	[0.614]
Control Mean	0.183	1.153	1.443	1.263	1.187	1.349	1.276	1.172
Number of Observations	1031	1033	1033	1037	1037	987	1039	1039
Panel B: 24- to 36-month impacts								
Her Spaces	0.053	0.045	-0.021	0.021	0.012	0.014	0.005	0.062
	(0.066)	(0.077)	(0.056)	(0.055)	(0.052)	(0.078)	(0.061)	(0.056)
AWH Essential	0.240***	0.090	0.067	0.075	0.120*	0.057	0.156**	0.156***
	(0.086)	(0.065)	(0.048)	(0.061)	(0.068)	(0.065)	(0.063)	(0.056)
AWH Comprehensive	0.122	0.032	0.026	0.010	0.033	0.039	0.106**	0.099
	(0.091)	(0.072)	(0.061)	(0.065)	(0.060)	(0.079)	(0.053)	(0.064)
AWH Comprehensive Plus	-0.008	-0.106*	-0.053	0.067	-0.104**	0.093	0.056	-0.016
	(0.086)	(0.059)	(0.052)	(0.063)	(0.052)	(0.062)	(0.064)	(0.079)
p-value on HS /= AWH-E	[0.039]	[0.616]	[0.081]	[0.310]	[0.085]	[0.625]	[0.031]	[0.132]
p-value on AWH-E /= AWH-C	[0.276]	[0.484]	[0.454]	[0.332]	[0.200]	[0.841]	[0.418]	[0.402]
p-value on AWH-C /= AWH-C+	[0.228]	[0.076]	[0.190]	[0.398]	[0.011]	[0.469]	[0.422]	[0.200]
Control Mean	0.087	1.185	1.556	1.347	1.267	1.332	1.319	1.121
Number of Observations	945	945	946	948	946	831	947	947

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Voice and Agency (part 3)

	Index of Mobility (Standardize d) (49)	=1 if Has Left Kebele in Last 3 Months (50)	Index of Not Needing Permission to Go Places (0-4) (51)	Places Visited in Last 3	=1 if Feels Safe in Community in Daytime (53)	•	Index of Collective Action (0-2) (55)	=1 if Talked with Others About a Serious Problem in the Community (56)	=1 if Took Action with Others About a Serious Problem in the Community (57)
Panel A: 10-month impacts									
Her Spaces	-0.092	0.024	-0.026	0.013	-0.060**	-0.011			
	(0.117)	(0.047)	(0.103)	(0.146)	(0.026)	(0.040)			
AWH Essential	0.050	0.047	-0.049	0.087	-0.007	-0.002			
	(0.096)	(0.057)	(0.086)	(0.131)	(0.023)	(0.044)			
AWH Comprehensive	-0.094	-0.017	-0.166	0.259	-0.067**	-0.011			
	(0.109)	(0.043)	(0.101)	(0.186)	(0.029)	(0.041)			
AWH Comprehensive Plus	-0.119	0.032	-0.018	0.001	-0.055	-0.044			
	(0.085)	(0.049)	(0.099)	(0.136)	(0.034)	(0.035)			
p-value on HS /= AWH-E	[0.206]	[0.687]	[0.808]	[0.642]	[0.039]	[0.848]			
p-value on AWH-E /= AWH-C	[0.162]	[0.166]	[0.185]	[0.325]	[0.033]	[0.840]			
p-value on AWH-C /= AWH-C+	[0.795]	[0.273]	[0.167]	[0.158]	[0.741]	[0.323]			
Control Mean	-0.273	0.172	0.905	2.842	0.926	0.162			
Number of Observations	1034	1039	1040	1040	1039	1035			
Panel B: 24- to 36-month impact	s								
Her Spaces	-0.114	0.075	-0.006	-0.094	-0.051**	-0.045	-0.075	-0.044	0.004
	(0.104)	(0.062)	(0.078)	(0.103)	(0.023)	(0.061)	(0.087)	(0.030)	(0.017)
AWH Essential	0.037	0.069	-0.039	0.043	-0.019	0.058	0.084	0.034	0.007
	(0.106)	(0.049)	(0.080)	(0.087)	(0.023)	(0.056)	(0.090)	(0.036)	(0.016)
AWH Comprehensive	0.009	-0.000	0.102	-0.052	-0.032	0.062	0.161*	0.051	0.023
	(0.106)	(0.048)	(0.097)	(0.105)	(0.031)	(0.057)	(0.095)	(0.033)	(0.017)
AWH Comprehensive Plus	-0.161	0.028	-0.075	-0.059	-0.058*	-0.014	-0.073	-0.031	-0.004
	(0.118)	(0.049)	(0.080)	(0.085)	(0.032)	(0.059)	(0.078)	(0.033)	(0.012)
p-value on HS /= AWH-E	[0.155]	[0.930]	[0.705]	[0.160]	[0.241]	[0.066]	[0.067]	[0.021]	[0.863]
p-value on AWH-E /= AWH-C	[0.784]	[0.213]	[0.167]	[0.338]	[0.702]	[0.942]	[0.396]	[0.642]	[0.335]
p-value on AWH-C /= AWH-C+	[0.152]	[0.612]	[0.085]	[0.936]	[0.480]	[0.191]	[0.004]	[0.017]	[0.031]
Control Mean	-0.167	0.194	0.561	3.160	0.932	0.355	-0.004	0.144	0.024
Number of Observations	945	950	949	950	948	945	949	950	949

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

		Economic Empowerment (part 1)									
	Index of Economic Empowerme nt (58)	=1 if Had Money Under Own Control in Last 12 Months (59)	=1 if Has Savings for the Future (60)	Proportion of Time Spent in Leisure, School, and Study on a Typical Weekday (61)	Index of Economic Aspirations (62)	=1 if Aspires to Be Employed in Skilled or Professional Work Someday (63)	=1 if Aspires to Have Employment or Own a Business Someday (64)	=1 if In School, Training, or Studying (65)	Proportion of Time Spent In School, Training, or Studying (66)		
Panel A: 10-month impacts											
Her Spaces	0.201	0.130***	0.047	-0.016	-0.061	-0.020	-0.010	-0.049**	-0.019		
	(0.125)	(0.046)	(0.039)	(0.013)	(0.064)	(0.025)	(0.013)	(0.022)	(0.012)		
AWH Essential	0.105	0.090*	0.063	-0.020**	-0.100	-0.023	-0.024	-0.053**	-0.019**		
	(0.133)	(0.048)	(0.050)	(0.008)	(0.089)	(0.031)	(0.017)	(0.024)	(0.008)		
AWH Comprehensive	0.418***	0.188***	0.086**	-0.007	0.047	0.008	0.013	-0.039	-0.007		
	(0.139)	(0.049)	(0.043)	(0.014)	(0.083)	(0.034)	(0.013)	(0.028)	(0.014)		
AWH Comprehensive Plus	0.429***	0.159***	0.183***	-0.016*	-0.028	-0.005	-0.007	-0.013	-0.015*		
	(0.138)	(0.047)	(0.053)	(0.009)	(0.065)	(0.028)	(0.011)	(0.014)	(0.008)		
p-value on HS /= AWH-E	[0.479]	[0.372]	[0.738]	[0.808]	[0.640]	[0.925]	[0.460]	[0.902]	[0.992]		
p-value on AWH-E /= AWH-C	[0.024]	[0.031]	[0.644]	[0.298]	[0.113]	[0.362]	[0.036]	[0.658]	[0.337]		
p-value on AWH-C /= AWH-C+	[0.949]	[0.587]	[0.063]	[0.464]	[0.323]	[0.697]	[0.061]	[0.361]	[0.535]		
Control Mean	-0.006	0.112	0.349	0.331	0.200	0.934	0.988	0.984	0.296		
Number of Observations	975	1040	1040	975	1033	1033	1033	975	975		
Panel B: 24- to 36-month impacts	\$										
Her Spaces	0.066	0.038	-0.000	0.002	-0.029	-0.021	0.000	0.010	0.003		
	(0.106)	(0.032)	(0.029)	(0.037)	(0.133)	(0.049)	(0.031)	(0.056)	(0.038)		
AWH Essential	0.407***	0.080**	0.170***	0.025	0.043	0.004	0.017	0.050	0.028		
	(0.139)	(0.039)	(0.052)	(0.029)	(0.092)	(0.040)	(0.019)	(0.044)	(0.031)		
AWH Comprehensive	0.367**	0.091**	0.168***	-0.005	0.044	0.031	-0.000	0.029	-0.002		
	(0.143)	(0.043)	(0.049)	(0.033)	(0.116)	(0.047)	(0.024)	(0.058)	(0.036)		
AWH Comprehensive Plus	0.262*	0.037	0.189***	-0.028	-0.016	-0.013	0.001	-0.013	-0.025		
	(0.136)	(0.038)	(0.050)	(0.036)	(0.085)	(0.034)	(0.020)	(0.055)	(0.038)		
p-value on HS /= AWH-E	[0.013]	[0.311]	[0.001]	[0.495]	[0.570]	[0.606]	[0.570]	[0.413]	[0.456]		
p-value on AWH-E /= AWH-C	[0.810]	[0.834]	[0.978]	[0.291]	[0.990]	[0.556]	[0.447]	[0.663]	[0.333]		
p-value on AWH-C /= AWH-C+	[0.541]	[0.313]	[0.734]	[0.522]	[0.539]	[0.256]	[0.948]	[0.474]	[0.547]		
Control Mean	0.145	0.110	0.161	0.587	0.191	0.890	0.959	0.853	0.538		
Number of Observations	949	949	950	950	917	917	917	950	950		

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

	Ec Em	powerment ((part 2)			Cross-Cu	itting Outcome	es (part 1)		
	Proportion of Time in Paid Work (67)	=1 if Any Paid Work in Last 12 Months (68)	Wages in Past 7 Days (69)	Index of Gender Equitable Attitudes (70)	GEA Index of Gender Stereotypic al Traits (71)	=1 if Agrees "Girls Should Avoid Raising Their Voice to be Lady Like" (72)	=1 if Agrees "Boys Should Be Able to Show Their Feelings Without Fear of Being Teased" (73)	expected to	=1 if Agrees "It's Important for boys to Show They Are Tough" (75)	=1 if Agrees "Boys who behave like girls are considered weak" (76)
Panel A: 10-month impacts										
Her Spaces				-0.057	-0.158*	-0.008	0.041*	0.096***	0.087**	-0.076*
				(0.091)	(0.080)	(0.046)	(0.021)	(0.035)	(0.041)	(0.044)
AWH Essential				0.074	-0.055	0.010	-0.019	0.033	0.034	-0.086**
				(0.095)	(0.094)	(0.055)	(0.020)	(0.028)	(0.040)	(0.043)
AWH Comprehensive				0.245**	-0.011	-0.010	-0.051*	0.092**	0.002	-0.119***
				(0.100)	(0.089)	(0.047)	(0.026)	(0.039)	(0.046)	(0.043)
AWH Comprehensive Plus				-0.004	-0.148	0.034	0.024	0.112***	0.100***	-0.049
				(0.124)	(0.096)	(0.046)	(0.023)	(0.031)	(0.037)	(0.052)
p-value on HS /= AWH-E				[0.148]	[0.269]	[0.749]	[0.004]	[0.055]	[0.206]	[0.813]
p-value on AWH-E /= AWH-C				[0.077]	[0.659]	[0.701]	[0.197]	[0.097]	[0.484]	[0.379]
p-value on AWH-C /= AWH-C+				[0.039]	[0.180]	[0.313]	[0.006]	[0.612]	[0.039]	[0.154]
Control Mean				0.246	0.121	0.577	0.887	0.823	0.733	0.513
Number of Observations				1028	1032	1038	1039	1036	1039	1039
Panel B: 24- to 36-month impacts										
Her Spaces	0.004	-0.022*	-0.008	-0.048	-0.156	0.085*	0.009	0.063	0.077**	-0.055
	(0.003)	(0.013)	(0.012)	(0.119)	(0.097)	(0.049)	(0.030)	(0.043)	(0.031)	(0.051)
AWH Essential	0.003*	-0.021	-0.006	0.182	0.055	-0.029	-0.025	0.031	-0.011	-0.078
	(0.002)	(0.018)	(0.014)	(0.127)	(0.096)	(0.044)	(0.032)	(0.040)	(0.042)	(0.048)
AWH Comprehensive	0.002	-0.005	-0.004	-0.028	-0.156	0.041	0.026	0.106***	0.090**	-0.054
	(0.001)	(0.023)	(0.019)	(0.116)	(0.107)	(0.054)	(0.024)	(0.038)	(0.040)	(0.052)
AWH Comprehensive Plus	0.001	0.003	-0.003	0.081	-0.121	0.043	0.026	0.100***	0.060	0.017
-	(0.001)	(0.020)	(0.012)	(0.104)	(0.101)	(0.058)	(0.025)	(0.035)	(0.043)	(0.043)
p-value on HS /= AWH-E	[0.752]	[0.951]	[0.869]	[0.077]	[0.024]	[0.024]	[0.339]	[0.462]	[0.010]	[0.658]
p-value on AWH-E /= AWH-C	[0.444]	[0.471]	[0.924]	[0.118]	[0.046]	[0.220]	[0.110]	[0.063]	[0.018]	[0.658]
p-value on AWH-C /= AWH-C+	[0.810]	[0.766]	[0.961]	[0.260]	[0.746]	[0.972]	[0.995]	[0.842]	[0.491]	[0.164]
Control Mean	0.000	0.049	0.028	0.263	0.140	0.510	0.864	0.731	0.715	0.389
Number of Observations	950	951	935	948	948	948	948	948	948	948

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Cross-Cutting Outcomes (part 2)

	=1 if Agrees "Girls need their parents' protection more than boys" (77)	=1 if Agrees "Boys Should Always defend themselves even if it means fighting" (78)	"Boys should be raised tough	GEA Index of Gender Stereotypical Roles (80)	=1 if Agrees "Women should have the same chance to work outside of the home as men" (81)	=1 if Agrees "Girls and boys should share household tasks equally" (82)	=1 if Agrees "Women's most important role is to take care of her home and cook for her family" (83)	=1 if Agrees "A Man should have the final word on decisions in his home" (84)	=1 if Agrees " A Woman should obey her husband in all things" (85)
Panel A: 10-month impacts									
Her Spaces	0.025	0.044	0.067**	0.083	-0.018	0.101***	-0.060*	0.032	-0.014
	(0.040)	(0.038)	(0.032)	(0.091)	(0.021)	(0.033)	(0.033)	(0.051)	(0.029)
AWH Essential	-0.011	0.021	0.017	0.178*	0.016	0.103***	-0.003	-0.045	-0.014
	(0.040)	(0.045)	(0.035)	(0.096)	(0.029)	(0.037)	(0.033)	(0.047)	(0.033)
AWH Comprehensive	0.036	-0.064	-0.027	0.396***	0.037	0.125***	-0.044	-0.071	-0.036
ATTER A DI	(0.045)	(0.059)	(0.039)	(0.112)	(0.030)	(0.030)	(0.040)	(0.048)	(0.045)
AWH Comprehensive Plus	0.034	-0.057	0.020	0.140	0.010	0.094***	-0.040	-0.006	-0.002
	(0.040)	(0.046)	(0.031)	(0.124)	(0.029)	(0.032)	(0.041)	(0.051)	(0.035)
p-value on HS /= AWH-E	[0.382]	[0.523]	[0.143]	[0.243]	[0.239]	[0.959]	[0.081]	[0.122]	[0.997]
p-value on AWH-E /= AWH-C	[0.318]	[0.108]	[0.255]	[0.034]	[0.511]	[0.509]	[0.249]	[0.568]	[0.622]
p-value on AWH-C /= AWH-C+	[0.956]	[0.919]	[0.199]	[0.041]	[0.416]	[0.222]	[0.938]	[0.138]	[0.461]
Control Mean	0.774	0.768	0.813	0.261	0.893	0.803	0.822	0.577	0.839
Number of Observations	1036	1038	1039	1035	1039	1039	1039	1039	1039
Panel B: 24- to 36-month impact		0.021	0.040	0.070	0.010	0.017	0.050	0.007	0.012
Her Spaces	0.006	0.021	0.040	0.078	0.018	0.017	-0.052	0.005	-0.012
411/11 E 1	(0.042)	(0.037)	(0.033)	(0.125)	(0.023)	(0.028)	(0.056)	(0.041)	(0.040)
AWH Essential	0.002	-0.025	-0.020	0.238*	0.022	0.052**	-0.104*	-0.076*	0.039
AWILC	(0.047)	(0.044)	(0.041)	(0.139)	(0.028)	(0.025)	(0.058)	(0.043)	(0.039)
AWH Comprehensive	0.012	0.059*	-0.007	0.110	0.005	0.056**	-0.090*	0.011	-0.036
AHILI C. I DI	(0.046)	(0.032)	(0.039)	(0.115)	(0.022)	(0.026)	(0.052)	(0.042)	(0.035)
AWH Comprehensive Plus	0.038	-0.028	-0.027	0.251**	0.013	0.070***	-0.108**	-0.098**	0.014
1- IIC / AWII F	(0.054)	(0.042)	(0.043)	(0.119)	(0.024)	(0.024)	(0.051)	(0.041)	(0.039)
p-value on HS /= AWH-E	[0.941]	[0.333]	[0.177]	[0.262]	[0.896]	[0.307]	[0.401]	[0.078]	[0.216]
p-value on AWH-E /= AWH-C	[0.838]	[0.063]	[0.787]	[0.348]	[0.583]	[0.906]	[0.821]	[0.069]	[0.054]
p-value on AWH-C /= AWH-C+ Control Mean	[0.649] 0.683	[0.038] 0.792	[0.672] 0.783	[0.161] 0.279	[0.766] 0.890	[0.667] 0.830	[0.736] 0.782	[0.021]	[0.141] 0.773
Number of Observations	0.683 948	0.792 948	0.783 948	0.279 948	0.890 948	0.830 949	0.782 949	0.543 949	0.773 949
Number of Observations	940	940	940	948	940	747	747	949	949

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

	Cross-Cutting Outcomes (part 3)									
	=1 if Agrees "A Boy should always have final say about decisions with girlfriend" (86)	_	is okay to tease a boy who	Index of Gender Consciousness (89)	=1 if Agrees "Our culture makes it harder for girls to achieve their goals than boys" (90)	"I'm very aware of people's	=1 if Agrees "I think about how boys' and girls' roles differ from each other" (92)	=1 if Agrees "I think it is possible to change people's reaction to my gender" (93)		=1 if Agrees "If a family can afford for one child to go to secondary school, it should be the boy only" (95)
Panel A: 10-month impacts	(00)	(07)	(00)	(0)	(20)	(>1)	(>=)	(50)	(> .)	(50)
Her Spaces	0.054	-0.030	-0.028	0.208*	0.050	0.077	0.014	0.099*	-0.012	0.026
	(0.040)	(0.048)	(0.035)	(0.117)	(0.045)	(0.057)	(0.056)	(0.051)	(0.078)	(0.047)
AWH Essential	0.022	-0.044	-0.052	0.073	-0.022	0.073	-0.002	0.031	0.102	-0.049
	(0.044)	(0.041)	(0.033)	(0.113)	(0.049)	(0.054)	(0.050)	(0.056)	(0.069)	(0.030)
AWH Comprehensive	-0.001	-0.118**	-0.115***	-0.018	-0.027	0.027	-0.042	0.021	0.017	-0.041
	(0.049)	(0.056)	(0.034)	(0.129)	(0.050)	(0.059)	(0.062)	(0.061)	(0.079)	(0.037)
AWH Comprehensive Plus	0.030	-0.029	-0.045	0.261**	-0.043	0.161***	0.073	0.099*	-0.092	0.017
	(0.042)	(0.049)	(0.039)	(0.100)	(0.048)	(0.044)	(0.046)	(0.057)	(0.091)	(0.036)
p-value on HS /= AWH-E	[0.454]	[0.774]	[0.474]	[0.305]	[0.174]	[0.954]	[0.786]	[0.242]	[0.122]	[0.074]
p-value on AWH-E /= AWH-C	[0.629]	[0.131]	[0.041]	[0.507]	[0.926]	[0.469]	[0.484]	[0.885]	[0.213]	[0.757]
p-value on AWH-C /= AWH-C+	[0.531]	[0.109]	[0.075]	[0.024]	[0.806]	[0.017]	[0.036]	[0.271]	[0.246]	[0.105]
Control Mean	0.727	0.335	0.321	-0.116	0.490	0.674	0.685	0.642	0.354	0.158
Number of Observations	1038	1037	1036	1039	1039	1039	1039	1039	1038	1039
Panel B: 24- to 36-month impacts	0.007	0.011	0.010	0.252**	0.070	0.050	0.120444	0.070	0.017	0.000
Her Spaces AWH Essential	0.005	0.011	-0.019	0.252**	0.070	0.050	0.120***	0.070	0.017	-0.000
	(0.050)	(0.051)	(0.056)	(0.105)	(0.052)	(0.048)	(0.045)	(0.050)	(0.125)	(0.038)
	-0.038	-0.062	-0.031	-0.054	-0.028	-0.042	0.073	-0.071	0.101	-0.018
AWH Comprehensive	(0.062)	(0.057)	(0.058)	(0.087)	(0.048)	(0.041)	(0.048)	(0.048)	(0.110)	(0.037)
	0.022	0.001	0.025	0.180*	0.069	0.035	0.051	0.067	0.089	-0.014
	(0.040)	(0.055)	(0.056)	(0.091)	(0.054)	(0.043)	(0.044)	(0.052)	(0.127)	(0.039)
AWH Comprehensive Plus	0.026 (0.046)	-0.064 (0.050)	-0.051 (0.052)	0.038 (0.091)	-0.056 (0.046)	0.015 (0.039)	0.083** (0.040)	0.000 (0.047)	0.196* (0.117)	-0.033 (0.034)
p-value on HS /= AWH-E	[0.516]	[0.114]	[0.819]	[0.000]	[0.034]	[0.049]	[0.367]	[0.002]	[0.459]	[0.664]
p-value on AWH-E /= AWH-C	[0.313]	[0.189]	[0.248]	[0.001]	[0.049]	[0.081]	[0.655]	[0.005]	[0.918]	[0.925]
p-value on AWH-C /= AWH-C+	[0.921]	[0.089]	[0.031]	[0.057]	[0.008]	[0.618]	[0.447]	[0.173]	[0.370]	[0.641]
Control Mean	0.724	0.282	0.301	-0.015	0.439	0.694	0.631	0.670	0.154	0.131
Number of Observations	948	948	948	947	948	948	947	948	948	948

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Cross-Cutting Outcomes (part 4)

	=1 if Agrees "Only boys should learn about science, technology, and math" (96)	=1 if Agrees "Girls should be sent to school only if they are not needed at home" (97)	=1 if Agrees "A girl's marriage can wait until she has completed senior secondary school" (98)		Index of attitudes toward violence (standardiz ed) (100)	=1 if Agrees "It is acceptable for a man to hit his wife" (101)	=1 if Agrees "A man using violence against his wife is a private matter that should not be discussed outside the couple" (102)	=1 if Agrees "A woman should tolerate violence to keep her family together" (103)
Panel A: 10-month impacts								
Her Spaces	0.012	-0.023	0.041*	0.055	-0.013	0.135***	-0.038	-0.077*
	(0.025)	(0.031)	(0.021)	(0.040)	(0.086)	(0.049)	(0.044)	(0.041)
AWH Essential	0.014	-0.122***	-0.019	-0.011	0.011	0.055	0.004	-0.065*
	(0.027)	(0.033)	(0.020)	(0.031)	(0.081)	(0.043)	(0.044)	(0.038)
AWH Comprehensive	-0.008	-0.052	-0.051*	0.007	0.220**	-0.006	-0.104**	-0.120***
	(0.030)	(0.049)	(0.026)	(0.039)	(0.092)	(0.052)	(0.051)	(0.040)
AWH Comprehensive Plus	0.052	0.045	0.024	0.029	0.212**	-0.018	-0.061	-0.140***
	(0.036)	(0.041)	(0.023)	(0.032)	(0.105)	(0.050)	(0.051)	(0.048)
p-value on HS /= AWH-E	[0.920]	[0.002]	[0.004]	[0.096]	[0.780]	[0.114]	[0.284]	[0.760]
p-value on AWH-E /= AWH-C	[0.432]	[0.130]	[0.197]	[0.587]	[0.029]	[0.255]	[0.019]	[0.171]
p-value on AWH-C /= AWH-C+	[0.120]	[0.076]	[0.006]	[0.521]	[0.942]	[0.839]	[0.413]	[0.691]
Control Mean	0.098	0.228	0.887	0.202	0.390	0.302	0.389	0.611
Number of Observations	1039	1038	1039	1039	1039	1039	1039	1039
Panel B: 24- to 36-month impacts								
Her Spaces	0.024	-0.013	0.009	-0.025	0.098	0.003	-0.027	-0.074*
	(0.035)	(0.044)	(0.030)	(0.038)	(0.105)	(0.046)	(0.055)	(0.041)
AWH Essential	-0.023	-0.038	-0.025	-0.059	0.190*	-0.036	-0.082**	-0.073
	(0.030)	(0.042)	(0.032)	(0.043)	(0.106)	(0.051)	(0.039)	(0.057)
AWH Comprehensive	-0.004	-0.031	0.026	-0.028	0.198**	-0.036	-0.078	-0.086*
	(0.034)	(0.043)	(0.024)	(0.044)	(0.092)	(0.042)	(0.051)	(0.050)
AWH Comprehensive Plus	0.003	-0.072*	0.026	-0.102***	0.344***	-0.097**	-0.121***	-0.127**
	(0.040)	(0.041)	(0.025)	(0.035)	(0.104)	(0.046)	(0.046)	(0.052)
p-value on HS /= AWH-E	[0.115]	[0.578]	[0.339]	[0.414]	[0.434]	[0.481]	[0.297]	[0.995]
p-value on AWH-E /= AWH-C	[0.474]	[0.880]	[0.110]	[0.509]	[0.934]	[0.998]	[0.926]	[0.833]
p-value on AWH-C /= AWH-C+	[0.862]	[0.363]	[0.995]	[0.071]	[0.144]	[0.180]	[0.434]	[0.449]
Control Mean	0.081	0.222	0.864	0.177	0.143	0.321	0.430	0.621
Number of Observations	948	948	948	948	949	949	949	949

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

	Cross-Cutting Outcomes (part 5)										
	Index of Supportive Network (104)	=1 if Has a Trusted Female Friend (105)	=1 if Has a Trusted Male Friend (106)	=1 if Has a Trusted Adult (107)	Index of Service Knowledge (108)	=1 if Knows Where Services Could be Received for Substance Addiction (109)	=1 if Knows Where Services Could be Received for Mental Health (110)	=1 if Knows Where Services Could be Received for Pregnancy Prevention (111)	=1 if Knows Where Services Could be Received for Abortion/ Adoption (112)	=1 if Knows Where Services Could be Received for Violence (113)	
Panel A: 10-month impacts	` '				` '						
Her Spaces	0.019	-0.040	0.007	0.041							
	(0.080)	(0.054)	(0.009)	(0.047)							
AWH Essential	0.019	-0.004	0.012	-0.009							
	(0.089)	(0.044)	(0.011)	(0.042)							
AWH Comprehensive	-0.017	-0.012	-0.006	0.013							
	(0.087)	(0.043)	(0.007)	(0.058)							
AWH Comprehensive Plus	0.157*	0.021	0.019	0.076							
	(0.093)	(0.045)	(0.012)	(0.049)							
p-value on HS /= AWH-E	[1.000]	[0.504]	[0.665]	[0.286]							
p-value on AWH-E /= AWH-C	[0.696]	[0.841]	[0.050]	[0.672]							
p-value on AWH-C /= AWH-C+	[0.105]	[0.476]	[0.053]	[0.305]							
Control Mean	0.035	0.635	0.009	0.688							
Number of Observations	1040	1040	1040	1040							
Panel B: 24- to 36-month impacts											
Her Spaces	-0.027	-0.001	0.006	-0.038	-0.000	-0.014	-0.016	-0.010	0.040	0.077	
	(0.107)	(0.054)	(0.014)	(0.055)	(0.132)	(0.031)	(0.034)	(0.053)	(0.055)	(0.059)	
AWH Essential	0.177*	0.043	0.023	0.082	0.393**	0.057	0.103**	0.111*	0.127**	0.066	
	(0.092)	(0.052)	(0.016)	(0.056)	(0.179)	(0.042)	(0.049)	(0.061)	(0.062)	(0.056)	
AWH Comprehensive	0.141*	0.068	0.009	0.047	-0.053	0.016	0.017	-0.019	-0.008	0.002	
	(0.083)	(0.049)	(0.014)	(0.052)	(0.136)	(0.038)	(0.040)	(0.054)	(0.045)	(0.045)	
AWH Comprehensive Plus	0.203**	0.106**	0.010	0.070	-0.047	0.009	0.012	0.018	-0.035	-0.010	
	(0.094)	(0.050)	(0.013)	(0.055)	(0.145)	(0.036)	(0.038)	(0.061)	(0.051)	(0.052)	
p-value on HS /= AWH-E	[0.062]	[0.373]	[0.293]	[0.060]	[0.029]	[0.123]	[0.017]	[0.033]	[0.186]	[0.867]	
p-value on AWH-E /= AWH-C	[0.672]	[0.565]	[0.414]	[0.567]	[0.013]	[0.412]	[0.100]	[0.018]	[0.019]	[0.221]	
p-value on AWH-C /= AWH-C+	[0.488]	[0.356]	[0.930]	[0.714]	[0.969]	[0.873]	[0.923]	[0.534]	[0.553]	[0.826]	
Control Mean	-0.178	0.588	0.015	0.521	0.286	0.107	0.122	0.506	0.317	0.336	
Number of Observations	949	950	950	949	880	882	949	883	883	947	

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

				Cross-Cu	tting Outcom	es (part 6)			
	=1 if Knows Where Services Could be Received for Injustice Under the Law (114)	Index of Service Accessibility (115)	=1 if Believes Adolescent Could Access Services for Substance Addiction (116)	=1 if Believes Adolescent Could Access Services for Mental Health (117)	=1 if Believes Adolescent Could Access Services for Pregnancy Prevention (118)	=1 if Believes Adolescent Could Access Services for Abortion/ Adoption (119)	=1 if Believes Adolescent Could Access Services for Violence (120)	=1 if Believes Adolescent Could Access Services for Injustice Under the Law (121)	=1 if Believes Adolescent Could Access Financial Services (122)
Panel A: 10-month impacts									
Her Spaces									
AWH Essential									
AWH Comprehensive									
AWH Comprehensive Plus									
p-value on HS /= AWH-E									
p-value on AWH-E /= AWH-C									
p-value on AWH-C /= AWH-C+									
Control Mean									
Number of Observations									
Panel B: 24- to 36-month impact									
Her Spaces	-0.091*	0.007	-0.021	-0.029	-0.018	0.049	0.093	-0.057	
	(0.046)	(0.141)	(0.029)	(0.030)	(0.057)	(0.058)	(0.059)	(0.042)	
AWH Essential	0.038	0.432**	0.028	0.095**	0.117*	0.177***	0.080	0.061	
	(0.048)	(0.177)	(0.043)	(0.040)	(0.060)	(0.065)	(0.050)	(0.043)	
AWH Comprehensive	-0.114**	-0.043	-0.010	0.023	-0.001	0.013	-0.000	-0.084*	
	(0.050)	(0.143)	(0.038)	(0.039)	(0.058)	(0.043)	(0.044)	(0.046)	
AWH Comprehensive Plus	-0.114***	0.026	0.006	0.026	0.060	0.000	0.000	-0.073*	
	(0.041)	(0.151)	(0.036)	(0.035)	(0.062)	(0.052)	(0.054)	(0.038)	
p-value on HS /= AWH-E	[0.006]	[0.019]	[0.260]	[0.002]	[0.018]	[0.068]	[0.833]	[0.010]	
p-value on AWH-E /= AWH-C	[0.003]	[0.008]	[0.440]	[0.120]	[0.033]	[0.004]	[0.090]	[0.003]	
p-value on AWH-C /= AWH-C+	[1.000]	[0.675]	[0.710]	[0.950]	[0.312]	[0.770]	[0.991]	[0.809]	
Control Mean	0.266	0.269	0.105	0.101	0.438	0.243	0.283	0.208	
Number of Observations	949	879	882	949	882	883	947	949	

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

	Cross-Cutting Outcomes (part 7)										
	Knowledge Index (for AWH girls curricula (maybe also HS)) (123)	=1 if Knowledge: girls reach puberty first (in AWH curr only) (124)	=1 if Knowledge: menstruation frequency (125)	=1 if Knowledge: menarche allows pregnancy (126)		=1 if Knowledge: index naming iron-rich foods (0-4) (in AWH curr only) (128)					
Panel A: 10-month impacts											
Her Spaces	0.279**	0.022	0.176***	-0.040	0.035	-0.043					
	(0.113)	(0.038)	(0.046)	(0.035)	(0.044)	(0.095)					
AWH Essential	0.231**	0.059	0.103**	-0.057*	0.058	-0.013					
	(0.109)	(0.048)	(0.044)	(0.032)	(0.045)	(0.093)					
AWH Comprehensive	0.208**	-0.023	0.203***	-0.108***	-0.011	0.153					
	(0.103)	(0.039)	(0.044)	(0.036)	(0.045)	(0.101)					
AWH Comprehensive Plus	0.352***	0.063	0.217***	-0.076*	0.038	0.083					
	(0.105)	(0.039)	(0.038)	(0.041)	(0.042)	(0.119)					
p-value on HS /= AWH-E	[0.699]	[0.456]	[0.126]	[0.597]	[0.599]	[0.733]					
p-value on AWH-E /= AWH-C	[0.825]	[0.091]	[0.022]	[0.101]	[0.097]	[0.057]					
p-value on AWH-C /= AWH-C+	[0.262]	[0.027]	[0.726]	[0.422]	[0.191]	[0.510]					
Control Mean	0.270	0.287	0.584	0.810	0.699	2.443					
Number of Observations	1010	1040	1039	1040	1040	1038					
Panel B: 24- to 36-month impacts											
Her Spaces	-0.072	0.032	0.045*	-0.039	-0.032	-0.213**					
	(0.110)	(0.060)	(0.025)	(0.035)	(0.037)	(0.099)					
AWH Essential	0.033	0.044	-0.006	-0.045	-0.016	-0.052					
	(0.106)	(0.058)	(0.022)	(0.031)	(0.041)	(0.098)					
AWH Comprehensive	-0.068	0.056	-0.022	-0.100*	0.033	-0.095					
	(0.092)	(0.060)	(0.026)	(0.055)	(0.040)	(0.089)					
AWH Comprehensive Plus	-0.016	0.144***	0.014	-0.129***	0.045	-0.140					
	(0.087)	(0.049)	(0.030)	(0.045)	(0.038)	(0.085)					
p-value on HS /= AWH-E	[0.373]	[0.871]	[0.047]	[0.864]	[0.734]	[0.168]					
p-value on AWH-E /= AWH-C	[0.303]	[0.874]	[0.527]	[0.306]	[0.339]	[0.695]					
p-value on AWH-C /= AWH-C+	[0.480]	[0.176]	[0.237]	[0.645]	[0.797]	[0.644]					
Control Mean	0.181	0.413	0.899	0.864	0.774	2.417					
Number of Observations	943	949	950	947	948	950					

Table B2. ITT regressions for girls' secondary outcomes, South Gondar sites (continued)

Cross-Cutting Outcomes (part 8)

	=1 if Knowledge: number meals healthy for adolescents (129)	=1 if Knowledge: legal age of marriage for girls (in AWH curr only) (130)	=1 if Knowledge: legal age of marriage for boys (in AWH curr only) (131)	=1 if Knowledge: FGMC has risks (132)	=1 if Knowledge: where to get help for violence (133)	=1 if Knowledge - safe place where to keep money other than home (134)	=1 if Knowledge: negotiation skills (135)	=1 Knowledge: boys are not biologically smarter than girls (136)	=1 if Knowledge: gender roles can be changed (in AWH curr only) (137)
Panel A: 10-month impacts									
Her Spaces	-0.002	0.082**	0.034	0.077	0.170**	0.025	0.035	-0.042	0.123**
	(0.010)	(0.036)	(0.024)	(0.069)	(0.066)	(0.035)	(0.039)	(0.040)	(0.050)
AWH Essential	-0.028	0.105***	0.022	0.113*	0.106*	0.008	0.078**	-0.054	0.067
	(0.017)	(0.038)	(0.029)	(0.060)	(0.056)	(0.037)	(0.035)	(0.037)	(0.056)
AWH Comprehensive	-0.014	0.066*	0.022	0.123*	0.146**	0.053	0.018	-0.028	0.023
	(0.015)	(0.037)	(0.029)	(0.068)	(0.061)	(0.036)	(0.036)	(0.053)	(0.065)
AWH Comprehensive Plus	-0.005	0.078*	0.058*	0.157**	0.050	0.068**	0.051	0.004	0.042
	(0.012)	(0.043)	(0.035)	(0.068)	(0.062)	(0.032)	(0.033)	(0.036)	(0.055)
p-value on HS /= AWH-E	[0.136]	[0.603]	[0.703]	[0.584]	[0.326]	[0.686]	[0.293]	[0.764]	[0.349]
p-value on AWH-E /= AWH-C	[0.461]	[0.344]	[0.989]	[0.862]	[0.483]	[0.239]	[0.122]	[0.600]	[0.503]
p-value on AWH-C /= AWH-C+	[0.470]	[0.809]	[0.487]	[0.646]	[0.139]	[0.677]	[0.385]	[0.517]	[0.781]
Control Mean	0.985	0.210	0.050	0.510	0.269	0.887	0.162	0.583	0.442
Number of Observations	1040	1039	1040	1022	1035	1036	1040	1040	1040
Panel B: 24- to 36-month impacts									
Her Spaces	-0.002	0.040	-0.081*		0.079	-0.007	-0.018	0.044	-0.066
	(0.016)	(0.060)	(0.044)		(0.059)	(0.009)	(0.049)	(0.052)	(0.042)
AWH Essential	-0.004	0.105*	-0.000		0.069	-0.008	-0.012	0.057	-0.060
	(0.015)	(0.056)	(0.042)		(0.056)	(0.009)	(0.061)	(0.048)	(0.045)
AWH Comprehensive	0.005	0.080	-0.031		0.005	0.005	-0.025	0.061	-0.143**
	(0.015)	(0.051)	(0.046)		(0.045)	(0.008)	(0.052)	(0.051)	(0.055)
AWH Comprehensive Plus	-0.001	0.060	-0.050		-0.008	-0.001	-0.076*	0.110**	-0.050
	(0.018)	(0.051)	(0.053)		(0.052)	(0.008)	(0.040)	(0.053)	(0.035)
p-value on HS /= AWH-E	[0.885]	[0.265]	[0.031]		[0.874]	[0.910]	[0.925]	[0.811]	[0.907]
p-value on AWH-E /= AWH-C	[0.507]	[0.611]	[0.415]		[0.224]	[0.184]	[0.852]	[0.954]	[0.178]
p-value on AWH-C /= AWH-C+	[0.691]	[0.680]	[0.715]		[0.809]	[0.479]	[0.315]	[0.452]	[0.087]
Control Mean	0.974	0.603	0.216		0.334	0.993	0.349	0.481	0.579
Number of Observations	951	950	950		946	947	950	949	949

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

	Education and Learning										
	Index of Education Participation (1)	=1 if Enrolled in School (2)	Share of School Days Attended in Last Two Weeks (3)	=1 if Did Not Miss More Than One Consecutive Week of School in Last 12 Months (4)	=1 if Aspires to Attain ≥ Secondary School Degree (5)	Highest Grade Attended ¹ (6)	=1 if Ever Enrolled in Secondary School (7)				
Panel A: 10-month impacts	. ,	,			` /						
Her Spaces		0.034	0.006	0.008	0.010	-0.148					
		(0.076)	(0.072)	(0.067)	(0.025)	(0.371)					
AWH Essential		0.078	0.054	0.097	-0.007	0.044					
		(0.065)	(0.063)	(0.060)	(0.041)	(0.341)					
AWH Comprehensive		0.030	0.035	0.005	0.013	-0.130					
		(0.072)	(0.070)	(0.071)	(0.030)	(0.305)					
AWH Comprehensive Plus		0.134**	0.149**	0.123**	-0.014	-0.021					
		(0.065)	(0.061)	(0.060)	(0.029)	(0.329)					
p-value on HS /= AWH-E		[0.566]	[0.503]	[0.178]	[0.691]	[0.662]					
p-value on AWH-E /= AWH-C		[0.506]	[0.789]	[0.213]	[0.662]	[0.660]					
p-value on AWH-C /= AWH-C+		[0.143]	[0.102]	[0.112]	[0.366]	[0.777]					
Control Mean		0.592	0.507	0.508	0.932	4.002					
Number of Observations		965	932	961	922	965					
Panel B: 24- to 36-month impacts											
Her Spaces	-0.047	-0.093	0.001	-0.063	0.039	0.017	0.052**				
	(0.161)	(0.069)	(0.071)	(0.065)	(0.030)	(0.368)	(0.024)				
AWH Essential	-0.000	0.011	0.029	0.013	0.024	-0.007	-0.015				
	(0.190)	(0.072)	(0.084)	(0.064)	(0.031)	(0.363)	(0.020)				
AWH Comprehensive	-0.039	-0.025	-0.002	0.012	0.007	-0.134	0.018				
	(0.144)	(0.063)	(0.060)	(0.055)	(0.031)	(0.293)	(0.020)				
AWH Comprehensive Plus	0.089	0.015	0.046	0.032	-0.008	-0.135	0.026				
	(0.146)	(0.060)	(0.063)	(0.052)	(0.032)	(0.357)	(0.027)				
p-value on HS /= AWH-E	[0.821]	[0.184]	[0.760]	[0.312]	[0.605]	[0.955]	[0.039]				
p-value on AWH-E /= AWH-C	[0.841]	[0.617]	[0.706]	[0.978]	[0.626]	[0.724]	[0.193]				
p-value on AWH-C /= AWH-C+	[0.402]	[0.508]	[0.437]	[0.714]	[0.649]	[0.999]	[0.803]				
Control Mean	-0.382	0.586	0.438	0.526	0.917	4.919	0.023				
Number of Observations	840	972	841	971	968	955	955				

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

	Bodily Integrity									
	Index of Violence (higher= less violence) (8)	Peer Violence Scale (0-6, higher= less violence) (9)	=1 if No Exposure to Household Violence Against Self, Female Caregiver in Last 12 Months (10)	=1 if No Experience of Sexual Violence in Last 12 Months (11)	Ideal Age at Marriage (years) (12)	=1 if No Peer Violence Victimization in Last 12 months (13)	=1 if No Exposure to Corporal Punishment at School in Last 12 Months (14)	=1 if Did Not Perpetrate Peer Violence in Last 12 Months (15)	=1 if Never Married (16)	
Panel A: 10-month impacts										
Her Spaces	0.065	0.144**	0.003	-0.009	-0.402	0.042*	0.021	0.021	0.022	
	(0.092)	(0.068)	(0.047)	(0.013)	(0.756)	(0.022)	(0.043)	(0.026)	(0.026)	
AWH Essential	0.193***	0.136*	0.038	0.003	-0.755	-0.004	0.031	-0.006	0.012	
	(0.069)	(0.074)	(0.046)	(0.010)	(0.698)	(0.026)	(0.040)	(0.028)	(0.028)	
AWH Comprehensive	-0.057	0.079	-0.064	-0.014	-0.920	-0.016	0.022	-0.033	-0.015	
	(0.110)	(0.098)	(0.050)	(0.013)	(0.706)	(0.037)	(0.041)	(0.040)	(0.034)	
AWH Comprehensive Plus	0.139*	0.133*	0.001	0.005	-0.478	0.005	0.008	0.005	0.021	
	(0.079)	(0.075)	(0.059)	(0.008)	(0.827)	(0.023)	(0.038)	(0.024)	(0.023)	
p-value on HS /= AWH-E	[0.096]	[0.872]	[0.377]	[0.429]	[0.608]	[0.137]	[0.838]	[0.318]	[0.720]	
p-value on AWH-E /= AWH-C	[0.006]	[0.469]	[0.017]	[0.229]	[0.801]	[0.790]	[0.831]	[0.462]	[0.468]	
p-value on AWH-C /= AWH-C+	[0.038]	[0.512]	[0.257]	[0.142]	[0.537]	[0.609]	[0.729]	[0.293]	[0.274]	
Control Mean	0.042	5.688	0.585	0.986	21.363	0.900	0.079	0.874	0.935	
Number of Observations	912	963	925	952	892	903	613	964	965	
Panel B: 24- to 36-month impacts										
Her Spaces	0.164**	0.109**	0.028	0.016*	-0.909	0.001	-0.001	0.038***	-0.013	
	(0.076)	(0.049)	(0.051)	(0.009)	(0.557)	(0.022)	(0.077)	(0.014)	(0.043)	
AWH Essential	0.138*	0.091**	0.044	0.009	0.340	0.012	-0.034	0.019	0.019	
	(0.072)	(0.040)	(0.043)	(0.008)	(0.494)	(0.016)	(0.069)	(0.015)	(0.047)	
AWH Comprehensive	0.042	0.045	-0.046	0.009	0.292	-0.024	-0.061	0.015	-0.028	
	(0.082)	(0.048)	(0.045)	(0.009)	(0.646)	(0.021)	(0.075)	(0.015)	(0.047)	
AWH Comprehensive Plus	0.192**	0.066	0.051	0.015*	0.355	-0.001	-0.024	0.011	-0.021	
	(0.091)	(0.044)	(0.052)	(0.008)	(0.461)	(0.017)	(0.082)	(0.016)	(0.038)	
p-value on HS /= AWH-E	[0.665]	[0.629]	[0.758]	[0.135]	[0.021]	[0.551]	[0.643]	[0.135]	[0.546]	
p-value on AWH-E /= AWH-C	[0.169]	[0.241]	[0.033]	[0.932]	[0.937]	[0.042]	[0.699]	[0.736]	[0.387]	
p-value on AWH-C /= AWH-C+	[0.105]	[0.645]	[0.064]	[0.314]	[0.911]	[0.254]	[0.595]	[0.789]	[0.886]	
Control Mean	0.106	5.835	0.680	0.986	19.675	0.959	0.283	0.944	0.855	
Number of Observations	841	968	944	870	820	947	561	971	972	

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

			Physica	l Health, Nutr	ition, and Sex	cual and Reprod	uctive Health		
	Index of Physical Health & Nutrition (17)	=1 Physical Health Is Good (18)	Proportion of Meals Yesterday Containing Meat, Chicken, Fish, or Egg (19)	=1 if Has Not Ever Been Hungry Because Not Enough Food in Last 4 Weeks (20)	Index of Menstrual Practices (21)	=1 if Normal Activities Are Not Affected by Menstruation (Among Post- Menarche) (22)	Index of Improved Menstrual Hygiene Practices (0- 2, Among Post- menarche) (23)	=1 if Improved Menstrual Hygiene Management (Among Postmenarche) (24)	=1 if Practices Appropriate Menstrual Product Disposal at Home (Among Post- menarche) (25)
Panel A: 10-month impacts	. ,				` '				
Her Spaces	0.149	0.040	0.026**	-0.016	0.065	0.003	0.198	0.130	0.025
	(0.128)	(0.026)	(0.013)	(0.055)	(0.391)	(0.087)	(0.284)	(0.099)	(0.146)
AWH Essential	0.236**	0.042*	0.028**	0.030	0.008	-0.078	0.430*	0.261**	0.152
	(0.107)	(0.023)	(0.014)	(0.047)	(0.297)	(0.084)	(0.233)	(0.105)	(0.130)
AWH Comprehensive	-0.057	-0.017	-0.007	0.001	0.359	0.113	0.242	0.184	0.016
	(0.117)	(0.037)	(0.011)	(0.040)	(0.323)	(0.086)	(0.262)	(0.125)	(0.136)
AWH Comprehensive Plus	-0.041	0.012	0.009	-0.060	0.371	0.004	0.438*	0.199*	0.181
	(0.104)	(0.025)	(0.010)	(0.044)	(0.239)	(0.075)	(0.230)	(0.100)	(0.121)
p-value on HS /= AWH-E	[0.459]	[0.923]	[0.889]	[0.411]	[0.879]	[0.328]	[0.417]	[0.182]	[0.413]
p-value on AWH-E /= AWH-C	[0.010]	[0.105]	[0.017]	[0.483]	[0.290]	[0.012]	[0.512]	[0.553]	[0.403]
p-value on AWH-C /= AWH-C+	[0.873]	[0.440]	[0.103]	[0.091]	[0.970]	[0.119]	[0.466]	[0.902]	[0.253]
Control Mean	-0.179	0.916	0.024	0.769	-0.177	0.785	0.722	0.195	0.452
Number of Observations	964	965	965	964	155	201	155	201	155
Panel B: 24- to 36-month impacts									
Her Spaces	-0.003	0.007	0.002	-0.015	0.067	0.022	0.100	0.077	0.025
	(0.136)	(0.021)	(0.012)	(0.050)	(0.152)	(0.046)	(0.146)	(0.069)	(0.077)
AWH Essential	0.173	0.037*	0.022	-0.011	0.267**	0.036	0.271**	0.120*	0.158**
	(0.121)	(0.019)	(0.015)	(0.040)	(0.121)	(0.041)	(0.125)	(0.070)	(0.068)
AWH Comprehensive	-0.004	0.015	0.012	-0.055	0.083	0.013	0.126	0.050	0.087
	(0.120)	(0.020)	(0.016)	(0.041)	(0.140)	(0.043)	(0.130)	(0.069)	(0.066)
AWH Comprehensive Plus	0.065	0.026	0.013	-0.033	0.174	0.028	0.230*	0.117*	0.111
	(0.119)	(0.018)	(0.013)	(0.041)	(0.142)	(0.036)	(0.132)	(0.068)	(0.073)
p-value on HS /= AWH-E	[0.200]	[0.104]	[0.148]	[0.943]	[0.185]	[0.740]	[0.288]	[0.589]	[0.122]
p-value on AWH-E /= AWH-C	[0.124]	[0.161]	[0.561]	[0.293]	[0.189]	[0.583]	[0.315]	[0.379]	[0.332]
p-value on AWH-C /= AWH-C+	[0.542]	[0.394]	[0.933]	[0.610]	[0.546]	[0.686]	[0.457]	[0.345]	[0.741]
Control Mean	-0.053	0.948	0.029	0.796	-0.096	0.876	0.918	0.356	0.515
Number of Observations	972	972	972	972	460	509	460	509	460

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

		RH (continue		Psychosocial Wellbeing					
	Ideal Age at First Child (years)	=1 if Not Ever Pregnant	Desired Fertility (number of children)	Self-Esteem Score (0-40, higher= more self-esteem)	Mental Distress Score (0-27, higher= less distress)	Resilience Score (12-36, higher= more resilience)	=1 if Minimal Depression Detected		
Panel A: 10-month impacts	(26)	(27)	(28)	(29)	(30)	(31)	(32)		
Her Spaces					0.052	0.981	-0.004		
T WE WAR					(0.281)	(0.686)	(0.020)		
AWH Essential					0.595**	0.571	0.035**		
					(0.250)	(0.765)	(0.017)		
AWH Comprehensive					0.467*	0.463	0.019		
T					(0.277)	(0.638)	(0.019)		
AWH Comprehensive Plus					0.606**	0.157	0.049***		
T					(0.241)	(0.553)	(0.015)		
p-value on HS /= AWH-E					[0.011]	[0.636]	[0.078]		
p-value on AWH-E /= AWH-C					[0.476]	[0.900]	[0.435]		
p-value on AWH-C /= AWH-C+					[0.326]	[0.654]	[0.094]		
Control Mean					26.322	29.323	0.959		
Number of Observations					841	769	841		
Panel B: 24- to 36-month impacts									
Her Spaces	-1.051*	-0.003	1.042***	-0.927**	0.193*	-0.499	0.021**		
	(0.530)	(0.044)	(0.349)	(0.401)	(0.113)	(0.560)	(0.010)		
AWH Essential	-0.667	0.002	0.096	-0.313	0.235*	0.047	0.022*		
	(0.600)	(0.036)	(0.328)	(0.390)	(0.128)	(0.618)	(0.012)		
AWH Comprehensive	-0.324	-0.036	-0.084	-0.197	0.061	-0.122	0.012		
-	(0.678)	(0.051)	(0.230)	(0.385)	(0.111)	(0.531)	(0.011)		
AWH Comprehensive Plus	-0.100	0.018	0.359	-0.418	0.045	-0.795	0.004		
-	(0.707)	(0.040)	(0.244)	(0.363)	(0.088)	(0.520)	(0.010)		
p-value on HS /= AWH-E	[0.518]	[0.914]	[0.022]	[0.131]	[0.751]	[0.376]	[0.964]		
p-value on AWH-E /= AWH-C	[0.651]	[0.471]	[0.564]	[0.781]	[0.219]	[0.788]	[0.475]		
p-value on AWH-C /= AWH-C+	[0.798]	[0.278]	[0.064]	[0.563]	[0.883]	[0.185]	[0.499]		
Control Mean	21.010	0.862	6.210	31.565	26.485	30.638	0.972		
Number of Observations	862	566	939	854	972	952	972		

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Voice and Agency (part 1) =1 if =1 if Has =1 if Comfortable Index of Say **Comfortable Expressing** Leadership Index of Index of Index of Role in in Household Index of **Expressing Opinion** Issues Issues Index of **Participation** School **Decisions** Comfort **Opinion** With Those Discussed Discussed with Mother with Father Voice & in Decision (Among Related to Expressing With Who Are Older Agency Making Enrolled) **Self (0-8)** Oneself Agemates (0-8)(0-7)(33)(34)(35)(36)(37)(38)(38)(39)(40)Panel A: 10-month impacts 0.115 0.092* 0.007 0.017 0.006 0.034 Her Spaces 0.140 0.177 0.033 (0.103)(0.119)(0.054)(0.270)(0.106)(0.047)(0.050)(0.222)(0.173)AWH Essential 0.023 0.104 0.067* 0.178 0.071 0.104 0.012 0.269 0.281 (0.111)(0.119)(0.066)(0.302)(0.087)(0.040)(0.035)(0.219)(0.175)**AWH** Comprehensive 0.322*** 0.213 0.027 0.635 0.254*** 0.059 0.129*** 0.040 -0.178(0.110)(0.150)(0.073)(0.389)(0.039)(0.047)(0.167)(0.137)(0.089)0.487*** AWH Comprehensive Plus 0.010 0.060 0.010 0.387 -0.018-0.0150.004 0.234 (0.107)(0.105)(0.056)(0.278)(0.091)(0.049)(0.034)(0.184)(0.162)p-value on HS /= AWH-E [0.739] [0.696] [0.857] [0.556] [0.547][0.931] [0.333] [0.299] [0.185]p-value on AWH-E /= AWH-C [0.256] [0.312][0.331][0.111][0.148][0.277][0.247][0.276][0.003]p-value on AWH-C /= AWH-C+ [0.008][0.223][0.803][0.494][0.013][0.155][0.020][0.014][0.004]-0.092 Control Mean -0.1240.221 3.254 -0.2060.750 0.240 2.113 1.735 832 Number of Observations 878 613 879 965 965 965 790 756 Panel B: 24- to 36-month impacts 0.262*** 0.097 0.034 0.069 0.006 -0.013 0.022 0.142 0.064 Her Spaces (0.093)(0.106)(0.071)(0.193)(0.088)(0.043)(0.037)(0.177)(0.169)AWH Essential 0.117 0.143 0.146** -0.073 -0.0060.016 -0.0240.142 0.086 (0.099)(0.107)(0.058)(0.200)(0.089)(0.038)(0.036)(0.171)(0.159)**AWH** Comprehensive 0.169* 0.172 0.145** 0.061 -0.075 -0.031 -0.022 0.106 0.121 (0.099)(0.191)(0.112)(0.071)(0.170)(0.081)(0.035)(0.045)(0.139)AWH Comprehensive Plus -0.150* -0.019-0.032-0.068-0.340*** -0.093** -0.158*** -0.019-0.090(0.088)(0.088)(0.054)(0.194)(0.078)(0.038)(0.040)(0.151)(0.145)p-value on HS /= AWH-E [0.183] [0.702][0.143][0.492] [0.897] [0.521][0.243] [0.999] [0.897] p-value on AWH-E /= AWH-C [0.821][0.981] [0.495][0.466] [0.234] [0.955][0.827][0.661] [0.855]p-value on AWH-C /= AWH-C+ [0.013] [0.006][0.085][0.017][0.474][0.004][0.118][0.498][0.160]Control Mean 0.017 -0.0450.219 0.809 0.416 2.776 2.323 4.031 -0.040892 932 932 972 972 821 Number of Observations 562 972 802

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Voice and Agency (part 2)

	Index of Voice	Ask for My Opinions on Things" (0-2)	ŕ	They Have a Problem" (0- 2)	Talk To Someone" (0- 2)	Index for "I Can Speak Up in Class" (among enrolled, 0-2)	Index for "I Can Speak Up If I See Someone Being Hurt" (0-2)	Index for "I Can Ask Adults for Help When I Need It" (0-2)
Panel A: 10-month impacts	(41)	(42)	(43)	(44)	(45)	(46)	(47)	(48)
Her Spaces	0.183	0.058	0.074	0.075	0.188**	-0.006	0.103	0.074
Her spaces	(0.119)	(0.071)	(0.095)	(0.072)	(0.092)	(0.072)	(0.079)	(0.074)
AWH Essential	0.317**	0.159*	0.076	0.109	0.232**	0.080	0.230***	0.110
AWII Essentiat	(0.147)	(0.085)	(0.086)	(0.072)	(0.104)	(0.077)	(0.086)	(0.087)
AWH Comprehensive	0.290**	0.160***	0.098	0.162**	0.185**	0.046	0.132	0.069
AWII Comprehensive	(0.139)	(0.060)	(0.103)	(0.074)	(0.087)	(0.079)	(0.096)	(0.077)
AWH Comprehensive Plus	0.240**	0.160**	0.131	0.163*	0.188**	0.041	0.157*	0.100
111111 Comprehensive I tus	(0.118)	(0.075)	(0.079)	(0.085)	(0.086)	(0.063)	(0.080)	(0.084)
p-value on HS /= AWH-E	[0.359]	[0.272]	[0.986]	[0.702]	[0.659]	[0.301]	[0.152]	[0.653]
p-value on AWH-E /= AWH-C	[0.868]	[0.984]	[0.853]	[0.536]	[0.633]	[0.692]	[0.336]	[0.634]
p-value on AWH-C /= AWH-C+	[0.718]	[0.996]	[0.775]	[0.998]	[0.973]	[0.945]	[0.799]	[0.683]
Control Mean	-0.184	1.059	1.180	0.873	0.756	1.339	1.009	1.049
Number of Observations	958	964	962	965	962	613	962	965
Panel B: 24- to 36-month impacts	700	70.	, o <u>-</u>	700	702	010		700
Her Spaces	0.313***	0.118**	0.052	0.181**	0.187***	0.137	0.207***	-0.003
T. T	(0.095)	(0.053)	(0.060)	(0.070)	(0.071)	(0.105)	(0.076)	(0.078)
AWH Essential	0.222**	0.116	0.070	0.071	0.127*	0.031	0.208**	0.020
	(0.097)	(0.072)	(0.079)	(0.059)	(0.066)	(0.084)	(0.085)	(0.060)
AWH Comprehensive	0.151	0.095*	0.017	0.037	0.000	0.067	0.170**	0.049
1	(0.097)	(0.057)	(0.057)	(0.063)	(0.077)	(0.093)	(0.080)	(0.063)
AWH Comprehensive Plus	-0.004	0.033	0.014	0.016	0.009	0.070	0.021	-0.121*
1	(0.103)	(0.066)	(0.075)	(0.085)	(0.056)	(0.076)	(0.068)	(0.061)
p-value on HS /= AWH-E	[0.409]	[0.975]	[0.802]	[0.110]	[0.483]	[0.238]	[0.999]	[0.788]
p-value on AWH-E /= AWH-C	[0.530]	[0.773]	[0.445]	[0.551]	[0.172]	[0.681]	[0.697]	[0.674]
p-value on AWH-C /= AWH-C+	[0.203]	[0.365]	[0.976]	[0.802]	[0.925]	[0.962]	[0.091]	[0.020]
Control Mean	-0.092	1.170	1.345	1.113	1.011	1.492	1.113	1.175
Number of Observations	964	963	963	967	966	562	960	967

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Voice and Agency (part 3)

	Index of Mobility (Standardized) (49)	=1 if Has Left Kebele in Last 3 Months (50)	Index of Not Needing Permission to Go Places (0-4) (51)	Index of Different Places Visited in Last 3 Months (0-4) (52)	=1 if Feels Safe in Community in Daytime (53)	=1 if Feels Safe in Community in Nighttime (54)	Index of Collective Action (0-2) (55)	=1 if Talked with Others About a Serious Problem in the Community (56)	=1 if Took Action with Others About a Serious Problem in the Community (57)
Panel A: 10-month impacts									
Her Spaces	0.039	0.040	-0.100	0.205*	0.023	-0.114*			
	(0.120)	(0.049)	(0.126)	(0.120)	(0.023)	(0.066)			
AWH Essential	0.010	-0.006	-0.189	0.179	0.005	-0.013			
	(0.115)	(0.039)	(0.142)	(0.124)	(0.024)	(0.056)			
AWH Comprehensive	0.034	0.058*	-0.161	0.144	-0.001	-0.039			
	(0.103)	(0.034)	(0.126)	(0.120)	(0.030)	(0.064)			
AWH Comprehensive Plus	-0.182	-0.055	-0.022	0.110	-0.061	-0.062			
	(0.125)	(0.035)	(0.167)	(0.143)	(0.041)	(0.060)			
p-value on HS /= AWH-E	[0.812]	[0.401]	[0.510]	[0.837]	[0.431]	[0.108]			
p-value on AWH-E /= AWH-C	[0.827]	[0.128]	[0.847]	[0.765]	[0.852]	[0.663]			
p-value on AWH-C /= AWH-C+	[0.079]	[0.002]	[0.416]	[0.797]	[0.196]	[0.729]			
Control Mean	0.292	0.255	1.274	2.720	0.949	0.583			
Number of Observations	920	958	963	963	962	930			
Panel B: 24- to 36-month impacts		2.2.2			2.22		0.106		
Her Spaces	0.087	0.012	0.107	-0.002	0.001	0.032	0.106	0.021	0.023
	(0.095)	(0.045)	(0.113)	(0.082)	(0.014)	(0.043)	(0.111)	(0.028)	(0.025)
AWH Essential	-0.053	-0.021	-0.151	0.079	0.008	-0.013	-0.007	0.001	-0.003
	(0.086)	(0.041)	(0.101)	(0.105)	(0.013)	(0.048)	(0.100)	(0.025)	(0.021)
AWH Comprehensive	0.134	0.018	0.180**	0.000	0.010	0.030	0.004	-0.007	0.006
	(0.090)	(0.048)	(0.088)	(0.095)	(0.011)	(0.047)	(0.105)	(0.028)	(0.023)
AWH Comprehensive Plus	-0.118	-0.111**	-0.083	0.004	0.014	0.008	0.023	0.026	-0.01
1 MG / AWW F	(0.087)	(0.043)	(0.106)	(0.094)	(0.011)	(0.039)	(0.091)	(0.021)	(0.022)
p-value on HS /= AWH-E	[0.122]	[0.449]	[0.071]	[0.448]	[0.661]	[0.331]	[0.288]	[0.469]	[0.245]
p-value on AWH-E /= AWH-C	[0.028]	[0.398]	[0.003]	[0.503]	[0.825]	[0.397]	[0.917]	[0.771]	[0.684]
p-value on AWH-C /= AWH-C+	[0.002]	[0.008]	[0.015]	[0.967]	[0.659]	[0.603]	[0.846]	[0.199]	[0.500]
Control Mean	0.181	0.304	0.571	3.012	0.976	0.632	0.004	0.075	0.075
Number of Observations	930	972	972	972	971	930	972	972	972

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

	Economic Empowerment (part 1)								
	Index of Economic Empowerm ent (58)	=1 if Had Money Under Own Control in Last 12 Months (59)	=1 if Has Savings for the Future (60)	Proportion of Time Spent in Leisure, School, and Study on a Typical Weekday (61)	Index of Economic Aspirations (62)	=1 if Aspires to Be Employed in Skilled or Professional Work Someday (63)	=1 if Aspires to Have Employmen t or Own a Business Someday (64)	=1 if In School, Training, or Studying (65)	Proportion of Time Spent In School, Training, or Studying (66)
Panel A: 10-month impacts									
Her Spaces	0.131	0.062	0.044	-0.009	0.239	0.050	0.059	0.015	0.001
	(0.170)	(0.048)	(0.043)	(0.022)	(0.190)	(0.062)	(0.039)	(0.084)	(0.025)
AWH Essential	-0.000	-0.042	0.003	0.016	0.082	0.030	0.012	0.079	0.023
	(0.114)	(0.039)	(0.041)	(0.015)	(0.166)	(0.044)	(0.039)	(0.061)	(0.017)
AWH Comprehensive	-0.281**	-0.114***	0.003	-0.005	-0.063	0.028	-0.042	0.024	0.013
	(0.118)	(0.040)	(0.047)	(0.021)	(0.204)	(0.051)	(0.048)	(0.076)	(0.021)
AWH Comprehensive Plus	-0.111	-0.106**	-0.028	0.029*	0.007	0.032	-0.017	0.089	0.030
	(0.131)	(0.044)	(0.035)	(0.016)	(0.166)	(0.044)	(0.038)	(0.067)	(0.019)
p-value on HS /= AWH-E	[0.390]	[0.038]	[0.341]	[0.253]	[0.327]	[0.734]	[0.150]	[0.417]	[0.354]
p-value on AWH-E /= AWH-C	[0.011]	[0.073]	[0.991]	[0.307]	[0.407]	[0.957]	[0.203]	[0.438]	[0.609]
p-value on AWH-C /= AWH-C+	[0.185]	[0.859]	[0.464]	[0.111]	[0.689]	[0.931]	[0.560]	[0.379]	[0.434]
Control Mean	0.007	0.212	0.707	0.231	-0.208	0.806	0.915	0.620	0.170
Number of Observations	802	964	964	802	940	940	940	802	802
Panel B: 24- to 36-month impacts									
Her Spaces	0.030	0.040	0.006	-0.025	0.084	-0.031	0.059*	-0.072	-0.019
	(0.085)	(0.033)	(0.039)	(0.039)	(0.147)	(0.073)	(0.030)	(0.059)	(0.039)
AWH Essential	-0.030	0.028	-0.039	-0.014	0.168	0.045	0.047*	-0.015	-0.012
	(0.103)	(0.032)	(0.044)	(0.044)	(0.111)	(0.055)	(0.028)	(0.066)	(0.046)
AWH Comprehensive	0.118	0.071**	-0.003	0.001	0.132	0.014	0.052**	0.008	0.004
	(0.097)	(0.031)	(0.035)	(0.036)	(0.109)	(0.054)	(0.024)	(0.063)	(0.036)
AWH Comprehensive Plus	-0.007	0.027	-0.047	0.006	0.082	-0.014	0.046	-0.007	0.009
	(0.082)	(0.024)	(0.040)	(0.037)	(0.123)	(0.050)	(0.032)	(0.057)	(0.037)
p-value on HS /= AWH-E	[0.547]	[0.791]	[0.257]	[0.809]	[0.526]	[0.310]	[0.616]	[0.393]	[0.880]
p-value on AWH-E /= AWH-C	[0.212]	[0.271]	[0.336]	[0.725]	[0.683]	[0.569]	[0.806]	[0.749]	[0.737]
p-value on AWH-C /= AWH-C+	[0.221]	[0.174]	[0.233]	[0.906]	[0.625]	[0.606]	[0.800]	[0.813]	[0.895]
Control Mean	-0.153	0.121	0.245	0.357	-0.199	0.713	0.896	0.593	0.313
Number of Observations	971	971	971	972	940	940	940	972	972

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

	Ec Empowerment (part 2)				Cross-Cutting Outcomes (part 1)						
	Proportion of Time in Paid Work (67)	=1 if Any Paid Work in Last 12 Months (68)	Wages in Past 7 Days (69)	Index of Gender Equitable Attitudes (70)	GEA Index of Gender Stereotypic al Traits (71)	Raising Their	Feelings		for boys to	=1 if Agrees "Boys who behave like girls are considered weak" (76)	
Panel A: 10-month impacts											
Her Spaces				-0.060	-0.158	0.014	-0.053	0.057*	-0.006	-0.018	
				(0.096)	(0.099)	(0.042)	(0.033)	(0.033)	(0.034)	(0.034)	
AWH Essential				0.047	-0.049	0.064**	-0.046	0.000	0.028	-0.035	
				(0.097)	(0.087)	(0.027)	(0.034)	(0.033)	(0.041)	(0.036)	
AWH Comprehensive				-0.179	-0.275**	0.127***	-0.041	0.066*	-0.016	0.063	
				(0.129)	(0.105)	(0.034)	(0.031)	(0.035)	(0.043)	(0.056)	
AWH Comprehensive Plus				-0.145	-0.132	0.021	-0.052	0.024	-0.025	-0.014	
				(0.095)	(0.090)	(0.028)	(0.034)	(0.032)	(0.034)	(0.044)	
p-value on HS /= AWH-E				[0.218]	[0.243]	[0.187]	[0.815]	[0.066]	[0.426]	[0.637]	
p-value on AWH-E /= AWH-C				[0.072]	[0.032]	[0.038]	[0.882]	[0.055]	[0.378]	[0.093]	
p-value on AWH-C /= AWH-C+				[0.778]	[0.168]	[0.001]	[0.753]	[0.192]	[0.842]	[0.213]	
Control Mean				-0.254	-0.125	0.712	0.866	0.838	0.816	0.570	
Number of Observations				939	945	962	965	962	965	953	
Panel B: 24- to 36-month impacts											
Her Spaces	0.004**	-0.003	0.010	0.080	0.074	-0.017	0.030	-0.044*	0.012	-0.026	
	(0.002)	(0.024)	(0.019)	(0.089)	(0.094)	(0.039)	(0.037)	(0.024)	(0.049)	(0.061)	
AWH Essential	0.001	0.009	0.011	-0.113	-0.095	0.032	0.048	0.020	0.031	0.048	
	(0.001)	(0.019)	(0.016)	(0.082)	(0.106)	(0.043)	(0.037)	(0.021)	(0.048)	(0.056)	
AWH Comprehensive	0.001	0.005	0.022	0.044	0.097	-0.012	0.020	-0.012	0.019	-0.065	
	(0.001)	(0.026)	(0.024)	(0.100)	(0.097)	(0.039)	(0.045)	(0.019)	(0.048)	(0.057)	
AWH Comprehensive Plus	0.002	0.012	0.002	0.091	0.132	0.011	0.018	-0.007	0.014	-0.183***	
	(0.002)	(0.024)	(0.021)	(0.081)	(0.080)	(0.052)	(0.045)	(0.019)	(0.043)	(0.052)	
p-value on HS /= AWH-E	[0.153]	[0.599]	[0.959]	[0.019]	[0.085]	[0.243]	[0.577]	[0.034]	[0.687]	[0.221]	
p-value on AWH-E /= AWH-C	[0.708]	[0.865]	[0.637]	[0.104]	[0.083]	[0.327]	[0.509]	[0.204]	[0.797]	[0.056]	
p-value on AWH-C /= AWH-C+	[0.343]	[0.812]	[0.480]	[0.615]	[0.682]	[0.665]	[0.969]	[0.838]	[0.915]	[0.037]	
Control Mean	0.000	0.083	0.051	-0.282	-0.149	0.480	0.768	0.958	0.682	0.469	
Number of Observations	972	972	945	959	962	972	971	971	972	965	

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Cross-Cutting Outcomes (part 2)

	=1 if Agrees "Girls need their parents' protection more than boys" (77)	=1 if Agrees "Boys Should Always defend themselves even if it means fighting" (78)	=1 if Agrees "Boys should be raised tough so they can overcome any difficulty" (79)	GEA Index of Gender Stereotypical Roles (80)	=1 if Agrees "Women should have the same chance to work outside of the home as men" (81)	=1 if Agrees "Girls and boys should share household tasks equally" (82)	=1 if Agrees "Women's most important role is to take care of her home and cook for her family" (83)	=1 if Agrees "A Man should have the final word on decisions in his home" (84)	=1 if Agrees " A Woman should obey her husband in all things" (85)
Panel A: 10-month impacts									
Her Spaces	0.075**	-0.001	-0.008	0.055	0.036	0.078	0.048	-0.012	0.052*
	(0.033)	(0.041)	(0.023)	(0.092)	(0.045)	(0.048)	(0.037)	(0.039)	(0.027)
AWH Essential	0.028	-0.048	-0.028	0.129	-0.045	0.065	0.031	-0.064*	0.018
	(0.045)	(0.046)	(0.028)	(0.085)	(0.055)	(0.052)	(0.032)	(0.035)	(0.030)
AWH Comprehensive	0.064	0.053	0.004	-0.012	0.085*	0.053	0.052	-0.031	0.079***
	(0.043)	(0.038)	(0.030)	(0.116)	(0.048)	(0.049)	(0.045)	(0.044)	(0.030)
AWH Comprehensive Plus	0.075**	0.032	-0.012	-0.100	0.059	0.010	0.033	-0.007	0.059**
	(0.032)	(0.040)	(0.027)	(0.083)	(0.046)	(0.044)	(0.034)	(0.029)	(0.023)
p-value on HS /= AWH-E	[0.277]	[0.357]	[0.487]	[0.405]	[0.168]	[0.801]	[0.585]	[0.216]	[0.286]
p-value on AWH-E /= AWH-C	[0.493]	[0.060]	[0.371]	[0.216]	[0.039]	[0.813]	[0.610]	[0.498]	[0.060]
p-value on AWH-C /= AWH-C+	[0.790]	[0.649]	[0.665]	[0.442]	[0.626]	[0.350]	[0.666]	[0.589]	[0.449]
Control Mean	0.818	0.744	0.846	-0.263	0.808	0.652	0.840	0.849	0.875
Number of Observations	961	961	963	955	964	965	965	963	964
Panel B: 24- to 36-month impacts									
Her Spaces	-0.002	-0.025	0.037	0.047	-0.038	0.011	-0.013	0.036	-0.043
	(0.041)	(0.045)	(0.044)	(0.092)	(0.051)	(0.058)	(0.027)	(0.047)	(0.027)
AWH Essential	0.014	0.006	0.039	-0.074	0.010	0.012	0.027	-0.001	0.026
	(0.042)	(0.037)	(0.042)	(0.076)	(0.043)	(0.050)	(0.021)	(0.038)	(0.016)
AWH Comprehensive	-0.033	-0.042	0.001	-0.015	-0.005	0.010	-0.027	-0.045	-0.022
	(0.035)	(0.049)	(0.046)	(0.092)	(0.039)	(0.046)	(0.021)	(0.037)	(0.021)
AWH Comprehensive Plus	0.007	-0.024	-0.005	0.002	-0.140***	-0.017	-0.055**	0.058*	-0.005
	(0.039)	(0.040)	(0.041)	(0.087)	(0.049)	(0.041)	(0.024)	(0.033)	(0.022)
p-value on HS /= AWH-E	[0.737]	[0.374]	[0.965]	[0.185]	[0.333]	[0.983]	[0.216]	[0.492]	[0.012]
p-value on AWH-E /= AWH-C	[0.283]	[0.240]	[0.401]	[0.487]	[0.676]	[0.968]	[0.036]	[0.329]	[0.025]
p-value on AWH-C /= AWH-C+	[0.300]	[0.665]	[0.881]	[0.856]	[0.003]	[0.606]	[0.275]	[0.011]	[0.511]
Control Mean	0.828	0.672	0.786	-0.295	0.821	0.657	0.911	0.775	0.971
Number of Observations	972	970	970	969	970	972	972	972	970

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

	Cross-Cutting Outcomes (part 3)									
	=1 if Agrees "A Boy should always have final say about decisions with girlfriend" (86)	=1 if Agrees "It is okay to tease a girl who acts like a boy" (87)	=1 if Agrees "It is okay to tease a boy who acts like a girl" (88)	Index of Gender Conscious- ness (89)	=1 if Agrees "Our culture makes it harder for girls to achieve their goals than boys" (90)	=1 if Agrees "I'm very aware of people's reactions to my being a girl" (91)	think	change	Index of gendered attitudes toward education (94)	=1 if Agrees "If a family can afford for one child to go to secondary school, it should be the boy only" (95)
Panel A: 10-month impacts	(00)	(07)	(00)	(0)	(50)	(>1)	(>2)	(50)	(>1)	(23)
Her Spaces	-0.003 (0.036)	-0.015 (0.054)	-0.026 (0.050)	-0.064 (0.098)	-0.015 (0.052)	-0.061 (0.039)	-0.002 (0.055)	0.015 (0.043)	-0.072 (0.146)	0.029 (0.052)
AWH Essential	-0.087** (0.034)	-0.073 (0.053)	-0.017 (0.043)	0.080 (0.097)	0.028 (0.038)	0.053 (0.035)	-0.043 (0.056)	0.068 (0.048)	0.110 (0.112)	-0.024 (0.039)
AWH Comprehensive	-0.043 (0.034)	0.054 (0.059)	0.042 (0.054)	0.147* (0.081)	0.017 (0.061)	0.017 (0.045)	0.028 (0.050)	0.104** (0.043)	-0.186 (0.136)	0.128*** (0.042)
AWH Comprehensive Plus	-0.012 (0.038)	0.065 (0.046)	0.087 (0.054)	0.136 (0.084)	0.037 (0.040)	0.035 (0.032)	0.015 (0.050)	0.052 (0.044)	-0.018 (0.120)	0.064 (0.049)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.018] [0.211]	[0.326] [0.058]	[0.854] [0.265]	[0.205]	[0.409] [0.859]	[0.009]	[0.398] [0.147]	[0.332] [0.507]	[0.159] [0.024]	[0.317] [0.001]
p-value on AWH-C /= AWH-C+ Control Mean	[0.418] 0.845	[0.840]	[0.446] 0.331	[0.895]	[0.738] 0.635	[0.695]	[0.757]	[0.298]	[0.234]	[0.249] 0.459
Number of Observations Panel B: 24- to 36-month impacts	962	958	959	933	958	949	949	955	957	963
Her Spaces	-0.013 (0.036)	-0.029 (0.047)	-0.016 (0.044)	-0.087 (0.086)	-0.009 (0.052)	-0.048 (0.038)	-0.045 (0.047)	0.006 (0.045)	-0.042 (0.100)	-0.014 (0.047)
AWH Essential	-0.008 (0.040)	0.060* (0.035)	0.032 (0.030)	0.135* (0.073)	-0.018 (0.052)	0.090***	0.023 (0.043)	0.081**	-0.029 (0.110)	0.018 (0.052)
AWH Comprehensive	0.032 (0.037)	0.057 (0.043)	0.047 (0.044)	0.123 (0.085)	-0.010 (0.051)	0.045 (0.033)	0.061 (0.047)	0.041 (0.046)	-0.147 (0.134)	0.023 (0.056)
AWH Comprehensive Plus	-0.112** (0.048)	-0.034 (0.039)	-0.019 (0.036)	-0.024 (0.089)	0.050 (0.050)	-0.024 (0.031)	0.006 (0.044)	-0.056 (0.047)	0.042 (0.111)	-0.006 (0.048)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.920] [0.371]	[0.065] [0.942]	[0.251] [0.718]	[0.004] [0.872]	[0.871] [0.883]	[0.001] [0.222]	[0.176] [0.448]	[0.085]	[0.901] [0.403]	[0.523] [0.941]
p-value on AWH-C /= AWH-C+ Control Mean	[0.009]	[0.033]	[0.151] 0.216	[0.123] 0.017	[0.287] 0.536	[0.063] 0.745	[0.287] 0.642	[0.058] 0.537	[0.193]	[0.621] 0.373
Number of Observations	970	971	971	957	967	968	965	968	971	972

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Cross-Cutting Outcomes (part 4)

	=1 if Agrees "Only boys should learn about science, technology, and math" (96)	=1 if Agrees "Girls should be sent to school only if they are not needed at home" (97)	=1 if Agrees "A girl's marriage can wait until she has completed senior secondary school" (98)		Index of attitudes toward violence (standardi zed) (100)	=1 if Agrees "It is acceptable for a man to hit his wife" (101)	=1 if Agrees "A man using violence against his wife is a private matter that should not be discussed outside the couple" (102)	=1 if Agrees "A woman should tolerate violence to keep her family together" (103)
Panel A: 10-month impacts								
Her Spaces	0.038	-0.077	-0.053	0.041	0.063	-0.009	0.002	-0.055
	(0.046)	(0.063)	(0.033)	(0.061)	(0.082)	(0.040)	(0.050)	(0.036)
AWH Essential	-0.017	-0.048	-0.046	-0.112**	-0.071	0.020	0.083	-0.024
	(0.041)	(0.050)	(0.034)	(0.054)	(0.097)	(0.053)	(0.055)	(0.039)
AWH Comprehensive	0.039	0.014	-0.041	0.016	-0.212**	0.099**	0.117**	0.013
	(0.049)	(0.062)	(0.031)	(0.066)	(0.096)	(0.046)	(0.051)	(0.049)
AWH Comprehensive Plus	-0.063*	0.031	-0.052	-0.053	-0.102	0.028	0.073	0.008
	(0.036)	(0.053)	(0.034)	(0.051)	(0.073)	(0.037)	(0.052)	(0.034)
p-value on HS /= AWH-E	[0.214]	[0.561]	[0.815]	[0.008]	[0.113]	[0.614]	[0.071]	[0.400]
p-value on AWH-E /= AWH-C	[0.296]	[0.263]	[0.882]	[0.037]	[0.193]	[0.206]	[0.461]	[0.488]
p-value on AWH-C /= AWH-C+	[0.041]	[0.789]	[0.753]	[0.236]	[0.186]	[0.133]	[0.315]	[0.931]
Control Mean	0.264	0.466	0.866	0.379	-0.398	0.757	0.612	0.778
Number of Observations	963	961	965	964	962	964	962	963
Panel B: 24- to 36-month impacts								
Her Spaces	0.014	0.041	0.030	0.046	-0.145	0.114*	0.022	0.014
	(0.037)	(0.040)	(0.037)	(0.036)	(0.108)	(0.064)	(0.046)	(0.045)
AWH Essential	-0.035	0.100*	0.048	0.009	-0.191*	0.088*	0.076*	0.034
	(0.037)	(0.053)	(0.037)	(0.030)	(0.096)	(0.045)	(0.044)	(0.048)
AWH Comprehensive	0.018	0.087*	0.020	0.064*	-0.024	0.029	-0.013	0.014
	(0.050)	(0.052)	(0.045)	(0.036)	(0.108)	(0.063)	(0.046)	(0.045)
AWH Comprehensive Plus	-0.075**	0.094*	0.018	-0.027	-0.096	0.076*	0.037	-0.010
	(0.037)	(0.048)	(0.045)	(0.032)	(0.083)	(0.045)	(0.039)	(0.053)
p-value on HS /= AWH-E	[0.162]	[0.296]	[0.577]	[0.355]	[0.674]	[0.644]	[0.270]	[0.677]
p-value on AWH-E /= AWH-C	[0.269]	[0.840]	[0.509]	[0.190]	[0.142]	[0.330]	[0.078]	[0.670]
p-value on AWH-C /= AWH-C+	[0.062]	[0.915]	[0.969]	[0.039]	[0.500]	[0.458]	[0.269]	[0.665]
Control Mean	0.189	0.190	0.768	0.142	-0.153	0.414	0.612	0.640
Number of Observations	972	972	971	972	968	969	969	970

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

		Cross-Cutting Outcomes (part 5)								
	Index of Supportive Network (104)	=1 if Has a Trusted Female Friend (105)	=1 if Has a Trusted Male Friend (106)	=1 if Has a Trusted Adult (107)	Index of Service Knowledge (108)	=1 if Knows Where Services Could be Received for Substance Addiction (109)	=1 if Knows Where Services Could be Received for Mental Health (110)	=1 if Knows Where Services Could be Received for Pregnancy Prevention (111)	=1 if Knows Where Services Could be Received for Abortion/A doption (112)	=1 if Knows Where Services Could be Received for Violence (113)
Panel A: 10-month impacts										
Her Spaces	0.012	0.026	-0.008	0.004						
	(0.138)	(0.056)	(0.028)	(0.059)						
AWH Essential	0.081	0.055	-0.022	0.073*						
	(0.108)	(0.046)	(0.026)	(0.041)						
AWH Comprehensive	0.060	0.056	-0.026	0.063						
	(0.136)	(0.042)	(0.029)	(0.062)						
AWH Comprehensive Plus	0.125	0.074	0.012	0.009						
	(0.120)	(0.048)	(0.027)	(0.047)						
p-value on HS /= AWH-E	[0.579]	[0.624]	[0.509]	[0.207]						
p-value on AWH-E /= AWH-C	[0.884]	[0.988]	[0.872]	[0.857]						
p-value on AWH-C /= AWH-C+	[0.673]	[0.731]	[0.155]	[0.402]						
Control Mean	-0.035	0.641	0.070	0.463						
Number of Observations	965	965	965	965						
Panel B: 24- to 36-month impacts										
Her Spaces	-0.110	-0.018	-0.035*	-0.016	0.053	0.014	-0.026**	0.077**	0.012	0.049
	(0.099)	(0.054)	(0.020)	(0.044)	(0.074)	(0.012)	(0.011)	(0.038)	(0.030)	(0.052)
AWH Essential	0.040	0.030	-0.001	0.011	0.134	0.004	0.004	0.104*	0.069*	-0.014
	(0.124)	(0.052)	(0.026)	(0.053)	(0.084)	(0.010)	(0.014)	(0.053)	(0.038)	(0.043)
AWH Comprehensive	-0.012	0.018	-0.002	-0.026	0.066	-0.008	-0.018	0.078	0.042	-0.046
	(0.134)	(0.053)	(0.037)	(0.057)	(0.084)	(0.005)	(0.013)	(0.054)	(0.042)	(0.045)
AWH Comprehensive Plus	-0.304***	-0.049	-0.042**	-0.160***	0.066	0.014	-0.021*	0.041	0.036	0.042
	(0.110)	(0.053)	(0.020)	(0.049)	(0.069)	(0.012)	(0.013)	(0.046)	(0.025)	(0.042)
p-value on HS /= AWH-E	[0.221]	[0.393]	[0.166]	[0.622]	[0.389]	[0.497]	[0.016]	[0.634]	[0.149]	[0.216]
p-value on AWH-E /= AWH-C	[0.735]	[0.819]	[0.981]	[0.575]	[0.528]	[0.200]	[0.134]	[0.711]	[0.603]	[0.507]
p-value on AWH-C /= AWH-C+	[0.036]	[0.228]	[0.256]	[0.030]	[1.000]	[0.101]	[0.781]	[0.581]	[0.908]	[0.094]
Control Mean	0.188	0.680	0.104	0.599	-0.321	0.007	0.035	0.133	0.068	0.341
Number of Observations	972	972	972	972	873	874	972	873	873	971

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

				Cross-Cut	ting Outcom	es (part 6)			
	=1 if Knows Where Services Could be Received for Injustice Under the Law (114)	Index of Service Accessibilit y (115)	Could Access	=1 if Believes Adolescent Could Access Services for Mental Health (117)	Could Access	Could Access Services for	=1 if Believes Adolescent Could Access Services for Violence (120)	=1 if Believes Adolescent Could Access Services for Injustice Under the Law (121)	=1 if Believes Adolescent Could Access Financial Services (122)
Panel A: 10-month impacts	(114)	(113)	(110)	(117)	(110)	(11)	(120)	(121)	(122)
Her Spaces									
•									
AWH Essential									
AWH Comprehensive									
AWH Comprehensive Plus									
p-value on HS /= AWH-E									
p-value on AWH-E /= AWH-C									
p-value on AWH-C /= AWH-C+									
Control Mean									
Number of Observations									
Panel B: 24- to 36-month impacts									
Her Spaces	-0.016	0.024	0.007	-0.031***	0.076*	0.013	0.054	-0.040	
	(0.044)	(0.066)	(0.010)	(0.011)	(0.039)	(0.021)	(0.052)	(0.038)	
AWH Essential	0.039	0.089	-0.004	-0.002	0.082*	0.014	0.009	0.022	
	(0.044)	(0.080)	(0.008)	(0.015)	(0.047)	(0.025)	(0.045)	(0.039)	
AWH Comprehensive	0.069*	0.028	-0.009*	-0.017	0.051	0.024	-0.039	0.039	
	(0.041)	(0.069)	(0.005)	(0.014)	(0.038)	(0.026)	(0.048)	(0.035)	
AWH Comprehensive Plus	0.008	0.007	0.007	-0.021	0.043	0.019	-0.012	-0.005	
	(0.037)	(0.063)	(0.012)	(0.013)	(0.040)	(0.018)	(0.036)	(0.034)	
p-value on HS /= AWH-E	[0.232]	[0.462]	[0.357]	[0.026]	[0.895]	[0.967]	[0.400]	[0.118]	
p-value on AWH-E /= AWH-C	[0.493]	[0.525]	[0.444]	[0.343]	[0.561]	[0.765]	[0.370]	[0.671]	
p-value on AWH-C /= AWH-C+	[0.133]	[0.809]	[0.215]	[0.767]	[0.879]	[0.853]	[0.582]	[0.253]	
Control Mean	0.153	-0.301	0.007	0.035	0.101	0.029	0.290	0.134	
Number of Observations	971	871	874	972	872	873	971	970	

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

1 able B3.	111 regression	ns for girls' secon				
			Cross-Cutting C	Jutcomes (part	7)	
Panel A: 10-month impacts	Knowledge Index (for AWH girls curricula (maybe also HS)) (123)	=1 if Knowledge: girls reach puberty first (in AWH curr only) (124)	=1 if Knowledge: menstruation frequency (125)	=1 if Knowledge: menarche allows pregnancy (126)	=1 if Knowledge: early pregnancy is bad for health (in AWH curr only) (127)	=1 if Knowledge: index naming iron-rich foods (0-4) (in AWH curr only) (128)
Her Spaces	0.236*	0.041	0.083	0.079*	0.042	0.045
The spaces	(0.131)	(0.060)	(0.061)	(0.043)	(0.047)	(0.106)
AWH Essential	0.353**	-0.020	0.048	0.079*	0.024	-0.018
11// 11 Bisellium	(0.140)	(0.046)	(0.057)	(0.043)	(0.053)	(0.132)
AWH Comprehensive	0.314***	0.036	0.147**	0.096*	0.045	0.155
r	(0.119)	(0.047)	(0.062)	(0.053)	(0.053)	(0.124)
AWH Comprehensive Plus	0.271**	0.033	0.127**	0.099**	0.001	-0.139
•	(0.129)	(0.046)	(0.059)	(0.046)	(0.059)	(0.118)
p-value on HS /= AWH-E	[0.398]	[0.281]	[0.584]	[0.990]	[0.746]	[0.631]
p-value on AWH-E /= AWH-C	[0.774]	[0.180]	[0.128]	[0.785]	[0.727]	[0.251]
p-value on AWH-C /= AWH-C+	[0.743]	[0.932]	[0.775]	[0.971]	[0.530]	[0.025]
Control Mean	-0.281	0.725	0.351	0.586	0.638	1.849
Number of Observations	890	964	961	964	963	959
Panel B: 24- to 36-month impacts						
Her Spaces	0.096	-0.016	0.013	0.011	-0.078*	0.053
	(0.107)	(0.031)	(0.034)	(0.050)	(0.046)	(0.091)
AWH Essential	0.075	0.004	0.005	0.083*	-0.036	0.061
	(0.121)	(0.030)	(0.037)	(0.044)	(0.047)	(0.093)
AWH Comprehensive	0.003	0.006	0.006	0.048	-0.043	-0.048
	(0.106)	(0.029)	(0.041)	(0.058)	(0.046)	(0.098)
AWH Comprehensive Plus	0.047	0.020	-0.005	-0.051	-0.133***	0.073
	(0.111)	(0.035)	(0.046)	(0.048)	(0.048)	(0.085)
p-value on HS /= AWH-E	[0.859]	[0.484]	[0.846]	[0.082]	[0.366]	[0.936]
p-value on AWH-E /= AWH-C	[0.532]	[0.940]	[0.989]	[0.466]	[0.881]	[0.295]
p-value on AWH-C /= AWH-C+	[0.706]	[0.654]	[0.839]	[0.051]	[0.054]	[0.225]
Control Mean	-0.195	0.845	0.745	0.668	0.773	2.100

Number of Observations

Table B3. ITT regressions for girls' secondary outcomes, East Hararghe sites

Cross-Cutting Outcomes (part 8)

	=1 if Knowledge: number meals healthy for adolescents (129)	=1 if Knowledge: legal age of marriage for girls (in AWH curr only) (130)	=1 if Knowledge: legal age of marriage for boys (in AWH curr only) (131)	=1 if Knowledge: FGMC has risks (132)	=1 if Knowledge: where to get help for violence (133)	=1 if Knowledge - safe place where to keep money other than home (134)	=1 if Knowledge: negotiation skills (135)	=1 Knowledge: boys are not biologically smarter than girls (136)
Panel A: 10-month impacts		0.000		0.44044		2.2.5		
Her Spaces	-0.024	0.030	-0.025	0.149**	0.089	0.052	0.077	0.025
	(0.028)	(0.036)	(0.018)	(0.059)	(0.057)	(0.044)	(0.054)	(0.039)
AWH Essential	0.034	0.046	-0.017	0.241***	0.045	0.084	0.000	0.081
	(0.031)	(0.029)	(0.017)	(0.061)	(0.066)	(0.066)	(0.055)	(0.049)
AWH Comprehensive	0.025	0.031	0.001	0.197***	0.077	0.106**	0.012	-0.017
	(0.030)	(0.034)	(0.017)	(0.054)	(0.064)	(0.046)	(0.037)	(0.045)
AWH Comprehensive Plus	-0.036	0.033	-0.009	0.130***	0.081	0.070	0.050	0.024
	(0.042)	(0.037)	(0.019)	(0.045)	(0.070)	(0.045)	(0.045)	(0.046)
p-value on HS /= AWH-E	[0.052]	[0.673]	[0.701]	[0.182]	[0.519]	[0.616]	[0.205]	[0.280]
p-value on AWH-E /= AWH-C	[0.765]	[0.666]	[0.335]	[0.520]	[0.656]	[0.754]	[0.828]	[0.085]
p-value on AWH-C /= AWH-C+	[0.121]	[0.969]	[0.640]	[0.242]	[0.964]	[0.462]	[0.421]	[0.432]
Control Mean	0.847	0.068	0.044	0.157	0.292	0.734	0.266	0.489
Number of Observations	965	964	964	963	955	912	965	965
Panel B: 24- to 36-month impacts								
Her Spaces	0.048*	0.041	-0.021		0.049	0.039	0.035	-0.011
	(0.026)	(0.042)	(0.026)		(0.052)	(0.025)	(0.048)	(0.056)
AWH Essential	0.019	0.034	-0.005		-0.014	0.004	0.061	0.052
	(0.030)	(0.045)	(0.028)		(0.043)	(0.028)	(0.055)	(0.053)
AWH Comprehensive	0.023	0.010	-0.003		-0.046	-0.013	0.044	0.021
	(0.026)	(0.040)	(0.020)		(0.045)	(0.029)	(0.047)	(0.050)
AWH Comprehensive Plus	0.040*	0.112**	-0.023		0.042	-0.009	0.049	0.045
	(0.023)	(0.046)	(0.020)		(0.042)	(0.032)	(0.047)	(0.050)
p-value on HS /= AWH-E	[0.343]	[0.868]	[0.628]		[0.216]	[0.148]	[0.584]	[0.320]
p-value on AWH-E /= AWH-C	[0.896]	[0.606]	[0.948]		[0.507]	[0.544]	[0.718]	[0.573]
p-value on AWH-C /= AWH-C+	[0.485]	[0.040]	[0.375]		[0.094]	[0.918]	[0.894]	[0.651]
Control Mean	0.888	0.139	0.089		0.341	0.934	0.564	0.550
Number of Observations	972	971	971		971	963	972	972

	=1 if Knowledge: gender roles can be changed (in AWH curr only) (137)
Panel A: 10-month impacts	
Her Spaces	-0.087
•	(0.056)
AWH Essential	0.052
	(0.050)
AWH Comprehensive	-0.103*
•	(0.061)
AWH Comprehensive Plus	-0.043
•	(0.054)
p-value on HS /= AWH-E	[0.014]
p-value on AWH-E /= AWH-C	[0.013]
p-value on AWH-C /= AWH-C+	[0.328]
Control Mean	0.485
Number of Observations	963
Panel B: 24- to 36-month impacts	
Her Spaces	0.013
	(0.049)
AWH Essential	-0.074**
	(0.035)
AWH Comprehensive	0.008
	(0.056)
AWH Comprehensive Plus	-0.015
	(0.037)
p-value on HS /= AWH-E	[0.057]
p-value on AWH-E /= AWH-C	[0.144]
p-value on AWH-C /= AWH-C+	[0.685]
Control Mean	0.569
Number of Observations	971

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

			Edu	ication and Lear	ning		
	Index of Education Participation (1)	=1 if Enrolled in School (2)	Share of School Days Attended in Last Two Weeks (3)	=1 if Did Not Miss More Than One Consecutive Week of School in Last 12 Months (4)	=1 if Aspires to Attain ≥ Secondary School Degree (5)	Highest Grade Attended ¹ (6)	=1 if Ever Enrolled in Secondary School (7)
Panel A: 10-month impacts							
Her Spaces		-0.020	-0.001	-0.010	0.005	-0.099	
		(0.066)	(0.064)	(0.067)	(0.025)	(0.433)	
AWH Essential		0.040	0.059	0.054	0.021	0.398	
		(0.047)	(0.050)	(0.050)	(0.020)	(0.274)	
AWH Comprehensive		-0.034	-0.017	-0.050	-0.026	0.258	
		(0.058)	(0.058)	(0.058)	(0.033)	(0.389)	
AWH Comprehensive Plus		-0.043	-0.100	-0.092	-0.020	-0.630**	
		(0.058)	(0.078)	(0.068)	(0.026)	(0.297)	
p-value on HS /= AWH-E		[0.343]	[0.326]	[0.346]	[0.473]	[0.268]	
p-value on AWH-E /= AWH-C		[0.184]	[0.164]	[0.071]	[0.138]	[0.739]	
p-value on AWH-C /= AWH-C+		[0.894]	[0.257]	[0.542]	[0.868]	[0.045]	
Control Mean		0.796	0.682	0.726	0.959	4.740	
Number of Observations		721	704	718	701	720	
Panel B: 24- to 36-month impacts							
Her Spaces	-0.053	-0.057	-0.007	0.009	0.002	-0.015	0.036
	(0.140)	(0.053)	(0.056)	(0.067)	(0.034)	(0.426)	(0.031)
AWH Essential	-0.004	0.007	0.033	0.032	0.001	0.417	0.043
	(0.170)	(0.058)	(0.077)	(0.065)	(0.039)	(0.362)	(0.038)
AWH Comprehensive	-0.137	-0.079	-0.052	-0.031	-0.042	-0.186	0.024
	(0.152)	(0.060)	(0.063)	(0.065)	(0.041)	(0.382)	(0.028)
AWH Comprehensive Plus	-0.169	-0.079	-0.072	-0.014	-0.019	-0.340	-0.013
	(0.124)	(0.051)	(0.053)	(0.056)	(0.031)	(0.386)	(0.028)
p-value on HS /= AWH-E	[0.784]	[0.335]	[0.594]	[0.731]	[0.977]	[0.346]	[0.860]
p-value on AWH-E /= AWH-C	[0.488]	[0.231]	[0.297]	[0.362]	[0.375]	[0.172]	[0.633]
p-value on AWH-C /= AWH-C+	[0.840]	[0.996]	[0.755]	[0.793]	[0.577]	[0.746]	[0.249]
Control Mean	0.026	0.738	0.633	0.622	0.941	5.748	0.084
Number of Observations	657	702	659	700	699	692	692

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

		Bodily Integrity										
	Index of Violence (higher= less violence) (8)	Peer Violence Scale (0-6, higher= less violence) (9)	=1 if No Exposure to Household Violence Against Self, Female Caregiver in Last 12 Months (10)	=1 if No Experience of Sexual Violence in Last 12 Months (11)	Ideal Age at Marriage (years) (12)	=1 if No Peer Violence Victimization in Last 12 months (13)	=1 if No Exposure to Corporal Punishment at School in Last 12 Months (14)	=1 if Did Not Perpetrate Peer Violence in Last 12 Months (15)	=1 if Never Married (16)			
Panel A: 10-month impacts												
Her Spaces	0.022	0.092	-0.034	0.003	-0.394	0.029	0.057	-0.055**	0.022			
	(0.073)	(0.060)	(0.064)	(0.014)	(0.848)	(0.032)	(0.048)	(0.027)	(0.023)			
AWH Essential	0.015	-0.017	-0.048	0.014	0.283	-0.017	0.070	-0.080***	0.021			
	(0.079)	(0.082)	(0.057)	(0.011)	(0.966)	(0.026)	(0.051)	(0.027)	(0.025)			
AWH Comprehensive	-0.092	-0.051	-0.043	0.000	-0.873	-0.014	0.046	-0.066	-0.054			
	(0.121)	(0.133)	(0.065)	(0.016)	(1.077)	(0.044)	(0.039)	(0.063)	(0.044)			
AWH Comprehensive Plus	0.132	0.040	0.028	0.016	-0.897	0.004	0.063	-0.031	0.018			
	(0.100)	(0.079)	(0.063)	(0.012)	(1.060)	(0.025)	(0.050)	(0.020)	(0.020)			
p-value on HS /= AWH-E	[0.933]	[0.176]	[0.824]	[0.401]	[0.437]	[0.228]	[0.815]	[0.431]	[0.971]			
p-value on AWH-E /= AWH-C	[0.342]	[0.791]	[0.938]	[0.339]	[0.233]	[0.951]	[0.607]	[0.823]	[0.127]			
p-value on AWH-C /= AWH-C+	[0.078]	[0.507]	[0.204]	[0.306]	[0.979]	[0.707]	[0.746]	[0.544]	[0.111]			
Control Mean	0.106	5.748	0.626	0.979	22.852	0.887	0.112	0.961	0.948			
Number of Observations	693	720	699	716	678	682	563	720	721			
Panel B: 24- to 36-month impacts												
Her Spaces	0.055	0.029	0.069	-0.004	0.021	-0.003	-0.049	0.022	0.023			
	(0.153)	(0.105)	(0.046)	(0.013)	(0.587)	(0.033)	(0.066)	(0.015)	(0.047)			
AWH Essential	0.053	0.103**	0.003	-0.009	-0.202	0.025	-0.013	-0.004	0.049			
	(0.115)	(0.051)	(0.049)	(0.012)	(0.532)	(0.026)	(0.072)	(0.021)	(0.042)			
AWH Comprehensive	-0.005	0.048	-0.032	-0.008	-0.466	0.014	-0.051	0.006	0.010			
	(0.100)	(0.054)	(0.048)	(0.013)	(0.778)	(0.028)	(0.088)	(0.017)	(0.057)			
AWH Comprehensive Plus	0.140	0.054	0.037	0.002	-0.420	-0.001	-0.061	0.004	0.032			
	(0.091)	(0.056)	(0.040)	(0.010)	(0.552)	(0.022)	(0.089)	(0.014)	(0.044)			
p-value on HS /= AWH-E	[0.987]	[0.455]	[0.267]	[0.723]	[0.671]	[0.365]	[0.562]	[0.248]	[0.573]			
p-value on AWH-E /= AWH-C	[0.646]	[0.330]	[0.575]	[0.937]	[0.699]	[0.665]	[0.636]	[0.686]	[0.464]			
p-value on AWH-C /= AWH-C+	[0.168]	[0.926]	[0.205]	[0.380]	[0.952]	[0.503]	[0.924]	[0.923]	[0.679]			
Control Mean	0.061	5.795	0.667	0.991	21.014	0.927	0.300	0.955	0.872			
Number of Observations	611	700	680	634	621	673	494	701	702			

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

	Physical Health, Nutrition, and Sexual and Reproductive Health										
	Index of Physical Health & Nutrition (17)	=1 Physical Health Is Good (18)	Proportion of Meals Yesterday Containing Meat, Chicken, Fish, or Egg (19)	=1 if Has Not Ever Been Hungry Because Not Enough Food in Last 4 Weeks (20)	Index of Menstrual Practices (21)	=1 if Normal Activities Are Not Affected by Menstruation (Among Post- Menarche) (22)	Index of Improved Menstrual Hygiene Practices (0- 2, Among Post- menarche) (23)	=1 if Improved Menstrual Hygiene Management (Among Postmenarche) (24)	=1 if Practices Appropriate Menstrual Product Disposal at Home (Among Post- menarche) (25)		
Panel A: 10-month impacts											
Her Spaces	0.185	0.024	0.029	0.019	0.089	0.054	0.088	0.125	-0.080		
	(0.117)	(0.033)	(0.020)	(0.042)	(0.383)	(0.129)	(0.346)	(0.124)	(0.194)		
AWH Essential	0.325***	0.020	0.054***	0.052	0.320	-0.005	0.362	0.302*	0.084		
	(0.086)	(0.031)	(0.015)	(0.034)	(0.540)	(0.150)	(0.319)	(0.153)	(0.177)		
AWH Comprehensive	0.079	-0.007	0.009	0.030	0.044	0.045	-0.139	0.178	-0.277*		
	(0.128)	(0.042)	(0.023)	(0.031)	(0.490)	(0.168)	(0.291)	(0.143)	(0.155)		
AWH Comprehensive Plus	-0.023	-0.012	0.005	-0.011	1.389***	0.035	1.058***	0.487***	0.370**		
	(0.094)	(0.036)	(0.015)	(0.034)	(0.372)	(0.113)	(0.296)	(0.179)	(0.148)		
p-value on HS /= AWH-E	[0.342]	[0.928]	[0.356]	[0.504]	[0.577]	[0.639]	[0.348]	[0.175]	[0.304]		
p-value on AWH-E /= AWH-C	[0.080]	[0.570]	[0.073]	[0.577]	[0.574]	[0.795]	[0.099]	[0.502]	[0.027]		
p-value on AWH-C /= AWH-C+	[0.451]	[0.917]	[0.866]	[0.195]	[0.015]	[0.951]	[0.001]	[0.130]	[0.000]		
Control Mean	-0.052	0.896	0.031	0.853	-0.379	0.762	0.497	0.100	0.348		
Number of Observations	720	721	721	720	81	99	81	99	81		
Panel B: 24- to 36-month impacts											
Her Spaces	-0.043	-0.004	0.003	-0.029	0.199	0.035	0.304**	0.137*	0.126*		
	(0.149)	(0.027)	(0.015)	(0.053)	(0.141)	(0.062)	(0.145)	(0.073)	(0.069)		
AWH Essential	0.300**	0.053*	0.035**	0.003	0.252*	0.088	0.200	0.116*	0.140**		
	(0.136)	(0.031)	(0.017)	(0.042)	(0.132)	(0.055)	(0.120)	(0.064)	(0.064)		
AWH Comprehensive	-0.159	-0.029	0.005	-0.074*	-0.390**	-0.090*	-0.081	-0.015	-0.038		
	(0.136)	(0.027)	(0.019)	(0.041)	(0.152)	(0.049)	(0.174)	(0.090)	(0.088)		
AWH Comprehensive Plus	-0.103	-0.044	0.011	-0.035	-0.084	-0.026	0.142	0.118*	0.044		
	(0.124)	(0.033)	(0.015)	(0.036)	(0.160)	(0.055)	(0.127)	(0.070)	(0.064)		
p-value on HS /= AWH-E	[0.010]	[0.071]	[0.055]	[0.537]	[0.721]	[0.351]	[0.491]	[0.773]	[0.848]		
p-value on AWH-E /= AWH-C	[0.000]	[0.017]	[0.115]	[0.074]	[0.000]	[0.001]	[0.099]	[0.138]	[0.038]		
p-value on AWH-C /= AWH-C+	[0.617]	[0.653]	[0.764]	[0.256]	[0.119]	[0.185]	[0.233]	[0.161]	[0.370]		
Control Mean	-0.073	0.898	0.019	0.873	-0.009	0.858	1.010	0.384	0.541		
Number of Observations	691	702	691	702	281	330	281	330	281		

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

	SF	RH (continue	d)		Psychosocia	al Wellbeing	
	Ideal Age at First Child (years) (26)	=1 if Not Ever Pregnant (27)	Desired Fertility (number of children) (28)	Self-Esteem Score (0-40, higher= more self-esteem) (29)	Mental Distress Score (0-27, higher= less distress) (30)	Resilience Score (12-36, higher= more resilience) (31)	=1 if Minimal Depression Detected (32)
Panel A: 10-month impacts							
Her Spaces					0.320*	1.486***	0.021
					(0.180)	(0.545)	(0.013)
AWH Essential					0.422**	1.971***	0.026*
					(0.205)	(0.461)	(0.015)
AWH Comprehensive					0.179	1.681***	0.000
					(0.227)	(0.383)	(0.019)
AWH Comprehensive Plus					-0.193	0.554	-0.002
					(0.402)	(0.566)	(0.026)
p-value on HS /= AWH-E					[0.601]	[0.404]	[0.731]
p-value on AWH-E /= AWH-C					[0.280]	[0.493]	[0.176]
p-value on AWH-C /= AWH-C+					[0.386]	[0.046]	[0.924]
Control Mean					26.427	30.721	0.975
Number of Observations					685	605	685
Panel B: 24- to 36-month impacts							
Her Spaces	-0.270	0.003	1.183***	-0.395	0.020	-0.047	0.006
	(0.556)	(0.020)	(0.394)	(0.418)	(0.117)	(0.674)	(0.012)
AWH Essential	-0.860	-0.013	0.135	-0.381	0.203	-0.021	0.008
	(0.525)	(0.024)	(0.325)	(0.426)	(0.139)	(0.736)	(0.010)
AWH Comprehensive	-0.282	-0.048	0.086	0.061	-0.225	0.569	-0.007
	(0.583)	(0.049)	(0.244)	(0.279)	(0.177)	(0.708)	(0.012)
AWH Comprehensive Plus	-0.762	-0.021	0.645**	-0.291	-0.062	-0.397	-0.010
	(0.523)	(0.027)	(0.312)	(0.358)	(0.139)	(0.616)	(0.020)
p-value on HS /= AWH-E	[0.207]	[0.508]	[0.013]	[0.976]	[0.187]	[0.974]	[0.861]
p-value on AWH-E /= AWH-C	[0.266]	[0.483]	[0.870]	[0.271]	[0.036]	[0.496]	[0.254]
p-value on AWH-C /= AWH-C+	[0.400]	[0.601]	[0.086]	[0.273]	[0.404]	[0.185]	[0.883]
Control Mean	23.357	0.943	4.908	30.174	26.532	31.257	0.985
Number of Observations	640	503	689	644	702	681	702

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

				Voice	and Agency (part 1)			
	Index of Voice & Agency (33)	Index of Participation in Decision Making (34)	=1 if Has Leadership Role in School (Among Enrolled) (35)	Index of Say in Household Decisions Related to Self (0-8) (36)	Index of Comfort Expressing Oneself (37)	=1 if Comfortable Expressing Opinion With Agemates (38)	=1 if Comfortable Expressing Opinion With Those Who Are Older (38)	Index of Issues Discussed with Mother (0-8) (39)	Index of Issues Discussed with Father (0-7) (40)
Panel A: 10-month impacts									
Her Spaces	0.255**	0.281*	0.115*	0.410	0.003	-0.031	0.037	0.764***	0.461***
	(0.121)	(0.141)	(0.059)	(0.308)	(0.122)	(0.058)	(0.057)	(0.179)	(0.155)
AWH Essential	0.417***	0.113	0.082	0.106	0.148	-0.004	0.119**	0.762***	0.524**
	(0.097)	(0.117)	(0.055)	(0.236)	(0.099)	(0.040)	(0.051)	(0.233)	(0.223)
AWH Comprehensive	0.400***	0.297	-0.098	1.290***	0.072	0.005	0.051	0.900***	0.485*
	(0.120)	(0.183)	(0.071)	(0.361)	(0.116)	(0.061)	(0.059)	(0.285)	(0.273)
AWH Comprehensive Plus	0.290**	0.277**	0.055	0.672***	-0.063	-0.039	-0.003	0.981***	0.364
	(0.131)	(0.129)	(0.065)	(0.249)	(0.128)	(0.063)	(0.046)	(0.221)	(0.228)
p-value on HS /= AWH-E	[0.187]	[0.169]	[0.445]	[0.359]	[0.173]	[0.598]	[0.173]	[0.992]	[0.768]
p-value on AWH-E /= AWH-C	[0.884]	[0.261]	[0.002]	[0.003]	[0.446]	[0.870]	[0.249]	[0.671]	[0.901]
p-value on AWH-C /= AWH-C+	[0.446]	[0.908]	[0.025]	[0.105]	[0.307]	[0.537]	[0.364]	[0.812]	[0.704]
Control Mean	-0.031	0.018	0.233	3.884	0.078	0.812	0.390	2.342	2.061
Number of Observations	648	671	564	671	721	721	721	623	566
Panel B: 24- to 36-month impacts									
Her Spaces	0.261**	0.262*	0.143**	0.270	-0.007	0.008	-0.016	0.355	-0.001
	(0.121)	(0.142)	(0.059)	(0.316)	(0.104)	(0.049)	(0.050)	(0.253)	(0.236)
AWH Essential	0.053	-0.042	0.062	-0.355	-0.123	-0.024	-0.070	0.558**	0.333
	(0.135)	(0.147)	(0.056)	(0.308)	(0.122)	(0.047)	(0.054)	(0.255)	(0.204)
AWH Comprehensive	0.114	0.056	0.048	0.062	-0.176*	-0.062	-0.064	0.367	0.369*
	(0.121)	(0.163)	(0.093)	(0.282)	(0.105)	(0.047)	(0.052)	(0.279)	(0.204)
AWH Comprehensive Plus	-0.230**	-0.057	-0.078	0.008	-0.289**	-0.086*	-0.125**	0.380*	0.004
	(0.110)	(0.133)	(0.049)	(0.321)	(0.116)	(0.047)	(0.050)	(0.190)	(0.183)
p-value on HS /= AWH-E	[0.164]	[0.082]	[0.230]	[0.079]	[0.347]	[0.576]	[0.259]	[0.479]	[0.197]
p-value on AWH-E /= AWH-C	[0.677]	[0.606]	[0.886]	[0.181]	[0.672]	[0.501]	[0.907]	[0.544]	[0.870]
p-value on AWH-C /= AWH-C+	[0.006]	[0.525]	[0.202]	[0.867]	[0.327]	[0.653]	[0.196]	[0.962]	[0.109]
Control Mean	0.033	0.013	0.220	4.178	0.100	0.842	0.487	2.905	2.387
Number of Observations	661	681	494	681	702	702	702	617	580

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Voice and Agency (part 2)

					Index for "If			
				Index for	I See			
			Index for	"My Friends	Something		Index for "I	
		Index For	"My Parents	Ask My	Wrong, I Feel		Can Speak	Index for "I
		•	Listen When I			Can Speak	Up If I See	Can Ask
		Ask for My	Share My	They Have a	Talk To	Up in Class"	Someone	Adults for
	Index of	Opinions on		`	Someone" (0-	(among	Being Hurt"	Help When I
	Voice	Things" (0-2)		2)	2)	enrolled, 0-2)	(0-2)	Need It" (0-2)
	(41)	(42)	(43)	(44)	(45)	(46)	(47)	(48)
Panel A: 10-month impacts								
Her Spaces	0.414***	0.074	0.230***	0.086	0.208**	0.240***	0.144**	0.165**
	(0.108)	(0.088)	(0.058)	(0.097)	(0.099)	(0.061)	(0.063)	(0.075)
AWH Essential	0.489***	0.189**	0.158*	0.201***	0.261**	0.152**	0.270***	0.212***
	(0.130)	(0.090)	(0.082)	(0.064)	(0.111)	(0.068)	(0.078)	(0.056)
AWH Comprehensive	0.499***	0.213***	0.137*	0.240***	0.373***	0.135	0.153	0.223***
	(0.146)	(0.065)	(0.080)	(0.085)	(0.107)	(0.091)	(0.124)	(0.070)
AWH Comprehensive Plus	0.475***	0.190***	0.147***	0.172**	0.186**	0.150**	0.221***	0.263***
	(0.076)	(0.054)	(0.050)	(0.072)	(0.079)	(0.074)	(0.067)	(0.046)
p-value on HS /= AWH-E	[0.603]	[0.300]	[0.370]	[0.256]	[0.668]	[0.215]	[0.102]	[0.554]
p-value on AWH-E /= AWH-C	[0.953]	[0.812]	[0.822]	[0.635]	[0.351]	[0.845]	[0.348]	[0.882]
p-value on AWH-C /= AWH-C+	[0.870]	[0.717]	[0.898]	[0.436]	[0.088]	[0.878]	[0.597]	[0.589]
Control Mean	-0.102	1.065	1.238	1.023	0.919	1.354	1.122	1.067
Number of Observations	717	718	718	718	718	564	719	720
Panel B: 24- to 36-month impacts								
Her Spaces	0.309***	0.051	0.107*	0.114	0.058	0.257***	0.199**	0.116*
	(0.109)	(0.062)	(0.056)	(0.079)	(0.086)	(0.083)	(0.076)	(0.062)
AWH Essential	0.334**	0.190**	0.163**	0.113	0.066	0.046	0.234**	0.092
	(0.133)	(0.089)	(0.079)	(0.071)	(0.085)	(0.076)	(0.105)	(0.067)
AWH Comprehensive	0.150	0.063	-0.009	0.023	-0.080	0.053	0.228***	0.072
	(0.145)	(0.075)	(0.083)	(0.082)	(0.091)	(0.139)	(0.065)	(0.096)
AWH Comprehensive Plus	-0.112	-0.092	-0.082	-0.066	-0.209***	-0.060	0.121	-0.009
	(0.115)	(0.068)	(0.062)	(0.087)	(0.053)	(0.073)	(0.083)	(0.068)
p-value on HS /= AWH-E	[0.868]	[0.147]	[0.449]	[0.984]	[0.935]	[0.012]	[0.757]	[0.746]
p-value on AWH-E /= AWH-C	[0.305]	[0.233]	[0.073]	[0.275]	[0.186]	[0.962]	[0.955]	[0.856]
p-value on AWH-C /= AWH-C+	[0.115]	[0.070]	[0.377]	[0.357]	[0.128]	[0.424]	[0.225]	[0.444]
Control Mean	-0.026	1.188	1.402	1.238	1.189	1.381	1.172	1.143
Number of Observations	696	693	694	697	695	494	694	697

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Voice and Agency (part 3)

	Index of Mobility (Standardized) (49)	=1 if Has Left Kebele in Last 3 Months (50)	Index of Not Needing Permission to Go Places (0-4) (51)	Index of Different Places Visited in Last 3 Months (0-4) (52)	=1 if Feels Safe in Community in Daytime (53)	=1 if Feels Safe in Community in Nighttime (54)	Index of Collective Action (0-2) (55)	=1 if Talked with Others About a Serious Problem in the Community (56)	=1 if Took Action with Others About a Serious Problem in the Community (57)
Panel A: 10-month impacts									
Her Spaces	-0.015	0.018	-0.099	0.350**	-0.031	-0.085			
	(0.162)	(0.067)	(0.130)	(0.153)	(0.025)	(0.051)			
AWH Essential	0.148	0.040	-0.163	0.482***	-0.001	-0.020			
	(0.093)	(0.054)	(0.119)	(0.137)	(0.019)	(0.044)			
AWH Comprehensive	0.006	0.052	-0.149	0.336	-0.017	-0.103			
	(0.177)	(0.048)	(0.124)	(0.233)	(0.022)	(0.074)			
AWH Comprehensive Plus	-0.028	-0.036	-0.126	0.299**	-0.011	-0.040			
	(0.104)	(0.041)	(0.148)	(0.126)	(0.024)	(0.054)			
p-value on HS /= AWH-E	[0.277]	[0.775]	[0.620]	[0.445]	[0.221]	[0.198]			
p-value on AWH-E /= AWH-C	[0.397]	[0.836]	[0.907]	[0.524]	[0.494]	[0.256]			
p-value on AWH-C /= AWH-C+	[0.838]	[0.053]	[0.864]	[0.870]	[0.826]	[0.435]			
Control Mean	-0.049	0.217	1.129	2.581	0.947	0.360			
Number of Observations	701	717	720	720	719	706			
Panel B: 24- to 36-month impacts									
Her Spaces	0.016	0.098	0.083	0.033	-0.035	-0.082	0.121	0.007	0.039*
	(0.115)	(0.069)	(0.119)	(0.118)	(0.025)	(0.061)	(0.095)	(0.030)	(0.021)
AWH Essential	-0.055	0.043	0.012	0.002	-0.034	0.002	0.093	0.048	0.000
	(0.105)	(0.055)	(0.098)	(0.125)	(0.023)	(0.064)	(0.105)	(0.041)	(0.017)
AWH Comprehensive	0.025	-0.067	0.302**	-0.033	0.011	-0.056	0.106	0.031	0.017
	(0.120)	(0.064)	(0.121)	(0.119)	(0.022)	(0.051)	(0.133)	(0.041)	(0.022)
AWH Comprehensive Plus	-0.269**	-0.129**	0.046	-0.008	-0.045	-0.071	0.060	0.033	-0.001
	(0.107)	(0.049)	(0.078)	(0.109)	(0.031)	(0.053)	(0.085)	(0.027)	(0.019)
p-value on HS /= AWH-E	[0.538]	[0.484]	[0.629]	[0.809]	[0.968]	[0.183]	[0.819]	[0.375]	[0.083]
p-value on AWH-E /= AWH-C	[0.486]	[0.134]	[0.042]	[0.781]	[0.098]	[0.281]	[0.931]	[0.734]	[0.430]
p-value on AWH-C /= AWH-C+	[0.019]	[0.358]	[0.044]	[0.827]	[0.141]	[0.739]	[0.726]	[0.966]	[0.425]
Control Mean	0.045	0.278	0.517	3.085	0.953	0.529	-0.075	0.082	0.041
Number of Observations	683	702	701	702	700	683	701	701	701

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

				Economic	Empowermei	nt (part 1)			
	Index of Economic Empowerment (58)	=1 if Had Money Under Own Control in Last 12 Months (59)	=1 if Has Savings for the Future (60)	Proportion of Time Spent in Leisure, School, and Study on a Typical Weekday (61)	Index of Economic Aspirations (62)	=1 if Aspires to Be Employed in Skilled or Professional Work Someday (63)	=1 if Aspires to Have Employment or Own a Business Someday (64)	=1 if In School, Training, or Studying (65)	Proportion of Time Spent In School, Training, or Studying (66)
Panel A: 10-month impacts									
Her Spaces	0.096	0.061	0.008	-0.012	0.043	-0.002	0.018	-0.027	-0.009
	(0.144)	(0.053)	(0.036)	(0.019)	(0.138)	(0.055)	(0.022)	(0.065)	(0.020)
AWH Essential	0.223	0.062	0.045	0.003	0.030	0.013	0.003	0.010	0.002
	(0.153)	(0.056)	(0.050)	(0.012)	(0.104)	(0.030)	(0.024)	(0.041)	(0.012)
AWH Comprehensive	0.177	0.002	0.086*	-0.003	-0.040	0.004	-0.018	-0.021	-0.002
	(0.176)	(0.062)	(0.045)	(0.018)	(0.139)	(0.040)	(0.035)	(0.051)	(0.016)
AWH Comprehensive Plus	0.141	0.026	0.057	-0.010	-0.159	-0.045	-0.032	-0.050	-0.013
	(0.166)	(0.058)	(0.047)	(0.016)	(0.121)	(0.039)	(0.026)	(0.059)	(0.017)
p-value on HS /= AWH-E	[0.461]	[0.989]	[0.503]	[0.355]	[0.929]	[0.775]	[0.562]	[0.523]	[0.553]
p-value on AWH-E /= AWH-C	[0.823]	[0.276]	[0.508]	[0.724]	[0.645]	[0.838]	[0.582]	[0.509]	[0.762]
p-value on AWH-C /= AWH-C+	[0.875]	[0.708]	[0.631]	[0.736]	[0.483]	[0.320]	[0.735]	[0.648]	[0.575]
Control Mean	0.008	0.159	0.599	0.278	0.063	0.885	0.967	0.826	0.234
Number of Observations	631	721	721	631	710	710	710	631	631
Panel B: 24- to 36-month impacts									
Her Spaces	0.086	0.052	-0.003	0.003	0.007	-0.074	0.051**	-0.049	0.007
	(0.112)	(0.035)	(0.043)	(0.042)	(0.126)	(0.069)	(0.021)	(0.055)	(0.041)
AWH Essential	0.284*	0.077*	0.075	0.030	0.043	0.024	0.005	0.027	0.042
	(0.159)	(0.041)	(0.072)	(0.043)	(0.093)	(0.043)	(0.022)	(0.062)	(0.044)
AWH Comprehensive	0.244**	0.086**	0.115**	-0.029	-0.152	-0.110	0.002	-0.010	-0.034
	(0.122)	(0.042)	(0.056)	(0.039)	(0.135)	(0.068)	(0.023)	(0.077)	(0.040)
AWH Comprehensive Plus	0.001	-0.022	0.087*	-0.040	-0.046	-0.059	0.017	-0.067	-0.038
	(0.099)	(0.028)	(0.050)	(0.040)	(0.100)	(0.045)	(0.021)	(0.055)	(0.041)
p-value on HS /= AWH-E	[0.221]	[0.585]	[0.250]	[0.582]	[0.775]	[0.153]	[0.061]	[0.274]	[0.488]
p-value on AWH-E /= AWH-C	[0.810]	[0.852]	[0.604]	[0.218]	[0.162]	[0.063]	[0.925]	[0.670]	[0.124]
p-value on AWH-C /= AWH-C+	[0.034]	[0.006]	[0.636]	[0.811]	[0.465]	[0.478]	[0.529]	[0.505]	[0.932]
Control Mean	-0.042	0.109	0.189	0.467	0.001	0.807	0.926	0.718	0.420
Number of Observations	701	701	702	702	680	680	680	702	702

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

	Ec Em	powerment (p	part 2)			Cross-Cut	ting Outcomes	(part 1)		
	Proportion of Time in Paid Work (67)	=1 if Any Paid Work in Last 12 Months (68)	Wages in Past 7 Days (69)	Index of Gender Equitable Attitudes (70)	GEA Index of Gender Stereotypic al Traits (71)	Raising Their	Feelings		for boys to	
Panel A: 10-month impacts										
Her Spaces				-0.192**	-0.313***	0.125**	-0.010	0.081***	0.066	-0.015
				(0.095)	(0.095)	(0.054)	(0.030)	(0.028)	(0.042)	(0.040)
AWH Essential				0.047	-0.067	0.101**	0.025	-0.005	0.048	0.003
				(0.095)	(0.079)	(0.047)	(0.026)	(0.030)	(0.043)	(0.039)
AWH Comprehensive				0.006	-0.191*	0.142**	-0.013	0.051	0.004	0.045
				(0.116)	(0.104)	(0.063)	(0.031)	(0.048)	(0.046)	(0.054)
AWH Comprehensive Plus				-0.304***	-0.297***	0.081*	-0.007	0.042	0.081**	0.086**
				(0.085)	(0.072)	(0.043)	(0.032)	(0.031)	(0.035)	(0.043)
p-value on HS /= AWH-E				[0.032]	[0.020]	[0.685]	[0.281]	[0.007]	[0.707]	[0.664]
p-value on AWH-E /= AWH-C				[0.755]	[0.284]	[0.565]	[0.224]	[0.258]	[0.430]	[0.439]
p-value on AWH-C /= AWH-C+				[0.013]	[0.340]	[0.353]	[0.875]	[0.872]	[0.098]	[0.478]
Control Mean				0.022	0.035	0.605	0.868	0.864	0.781	0.485
Number of Observations				707	708	719	720	715	720	715
Panel B: 24- to 36-month impacts										
Her Spaces	0.009**	-0.022	0.011	0.133	0.006	0.017	0.033	0.055	0.003	-0.082*
	(0.004)	(0.019)	(0.017)	(0.120)	(0.100)	(0.044)	(0.054)	(0.050)	(0.038)	(0.047)
AWH Essential	0.004*	-0.008	0.014	0.003	-0.081	0.069	-0.001	0.087**	-0.009	0.048
	(0.002)	(0.021)	(0.016)	(0.112)	(0.118)	(0.045)	(0.052)	(0.038)	(0.056)	(0.059)
AWH Comprehensive	0.003	-0.007	0.014	0.026	-0.075	0.035	0.042	0.053	-0.034	0.018
	(0.002)	(0.023)	(0.020)	(0.135)	(0.103)	(0.052)	(0.049)	(0.046)	(0.048)	(0.050)
AWH Comprehensive Plus	0.004*	-0.009	0.007	-0.064	-0.022	0.072	0.099***	0.064*	-0.010	-0.006
	(0.002)	(0.021)	(0.019)	(0.100)	(0.095)	(0.053)	(0.036)	(0.033)	(0.037)	(0.050)
p-value on HS /= AWH-E	[0.212]	[0.496]	[0.858]	[0.298]	[0.455]	[0.251]	[0.570]	[0.474]	[0.830]	[0.018]
p-value on AWH-E /= AWH-C	[0.554]	[0.976]	[0.987]	[0.870]	[0.963]	[0.534]	[0.467]	[0.473]	[0.680]	[0.598]
p-value on AWH-C /= AWH-C+	[0.509]	[0.935]	[0.773]	[0.474]	[0.583]	[0.515]	[0.215]	[0.806]	[0.628]	[0.636]
Control Mean	0.000	0.068	0.029	-0.054	-0.017	0.466	0.768	0.824	0.728	0.395
Number of Observations	702	702	685	692	694	700	699	699	700	697

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Cross-Cutting Outcomes (part 2)

	=1 if Agrees "Girls need their parents' protection more than boys" (77)	=1 if Agrees "Boys Should Always defend themselves even if it means fighting" (78)	=1 if Agrees "Boys should be raised tough so they can overcome any difficulty" (79)	GEA Index of Gender Stereotypical Roles (80)	=1 if Agrees "Women should have the same chance to work outside of the home as men" (81)	=1 if Agrees "Girls and boys should share household tasks equally" (82)	"Women's	=1 if Agrees "A Man should have the final word on decisions in his home" (84)	=1 if Agrees " A Woman should obey her husband in all things" (85)
Panel A: 10-month impacts									
Her Spaces	0.059	0.019	0.071**	0.020	-0.001	0.141***	0.012	0.118***	0.026
	(0.049)	(0.041)	(0.032)	(0.096)	(0.035)	(0.046)	(0.034)	(0.043)	(0.031)
AWH Essential	0.064	-0.098**	0.020	0.147	0.047	0.129**	-0.010	-0.031	0.028
	(0.044)	(0.043)	(0.028)	(0.105)	(0.035)	(0.056)	(0.032)	(0.042)	(0.034)
AWH Comprehensive	0.052	-0.038	-0.004	0.200	0.016	0.097	-0.071	-0.088*	0.005
	(0.046)	(0.044)	(0.035)	(0.130)	(0.063)	(0.064)	(0.050)	(0.049)	(0.036)
AWH Comprehensive Plus	0.092**	0.025	-0.001	-0.181**	-0.001	0.059	0.025	0.052	0.073***
	(0.037)	(0.037)	(0.026)	(0.084)	(0.041)	(0.047)	(0.035)	(0.042)	(0.026)
p-value on HS /= AWH-E	[0.935]	[0.017]	[0.165]	[0.273]	[0.149]	[0.829]	[0.541]	[0.002]	[0.961]
p-value on AWH-E /= AWH-C	[0.809]	[0.284]	[0.499]	[0.735]	[0.586]	[0.659]	[0.186]	[0.305]	[0.573]
p-value on AWH-C /= AWH-C+	[0.371]	[0.204]	[0.936]	[0.005]	[0.788]	[0.574]	[0.057]	[0.008]	[0.030]
Control Mean	0.772	0.763	0.831	0.002	0.855	0.704	0.855	0.695	0.851
Number of Observations	718	717	720	718	720	720	720	720	720
Panel B: 24- to 36-month impacts									
Her Spaces	0.011	-0.036	0.047	0.203*	0.018	-0.014	-0.075	-0.033	-0.044
	(0.045)	(0.053)	(0.052)	(0.118)	(0.032)	(0.068)	(0.049)	(0.054)	(0.035)
AWH Essential	0.021	-0.072	-0.041	0.081	0.051	0.016	0.010	-0.050	0.024
AWAY G	(0.055)	(0.054)	(0.053)	(0.105)	(0.039)	(0.050)	(0.036)	(0.050)	(0.025)
AWH Comprehensive	0.021	-0.013	0.036	0.138	-0.005	0.084**	-0.070*	-0.080*	-0.031
	(0.046)	(0.058)	(0.047)	(0.115)	(0.032)	(0.037)	(0.041)	(0.042)	(0.039)
AWH Comprehensive Plus	0.027	-0.057	0.046	-0.100	-0.034	0.006	-0.002	0.008	0.065**
1	(0.050)	(0.050)	(0.046)	(0.096)	(0.032)	(0.043)	(0.043)	(0.029)	(0.028)
p-value on HS /= AWH-E	[0.862]	[0.555]	[0.122]	[0.369]	[0.383]	[0.690]	[0.098]	[0.801]	[0.051]
p-value on AWH-E /= AWH-C	[0.992]	[0.374]	[0.172]	[0.673]	[0.144]	[0.203]	[0.057]	[0.589]	[0.142]
p-value on AWH-C /= AWH-C+	[0.907]	[0.475]	[0.829]	[0.050]	[0.379]	[0.091]	[0.159]	[0.021]	[0.011]
Control Mean	0.752	0.742	0.798	-0.061	0.830	0.743	0.853	0.698	0.882
Number of Observations	700	698	698	698	699	701	701	701	700

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

			•	C	ross-Cutting O	utcomes (pa	art 3)			
	=1 if Agrees "A Boy should always have final say about decisions with girlfriend" (86)	=1 if Agrees "It is okay to tease a girl who acts like a boy" (87)	=1 if Agrees "It is okay to tease a boy who acts like a girl" (88)	Index of Gender Conscious- ness (89)	=1 if Agrees "Our culture makes it harder for girls to achieve their goals than boys" (90)	=1 if Agrees "I'm very aware of people's reactions to my being a girl" (91)	=1 if Agrees "I think about how boys' and girls' roles differ from each other" (92)	=1 if Agrees "I think it is possible to change people's reaction to my gender" (93)	Index of gendered attitudes toward education (94)	=1 if Agrees "If a family can afford for one child to go to secondary school, it should be the boy only" (95)
Panel A: 10-month impacts	(00)	(07)	(00)	(0)	(50)	(21)	(72)	(23)	(24)	(73)
Her Spaces	0.020 (0.050)	-0.035 (0.055)	-0.018 (0.051)	0.339*** (0.065)	0.040 (0.061)	0.092** (0.039)	0.102** (0.042)	0.162*** (0.041)	-0.005 (0.117)	-0.013 (0.054)
AWH Essential	-0.052 (0.036)	-0.003 (0.041)	0.041 (0.038)	0.248*** (0.092)	-0.030 (0.049)	0.141*** (0.032)	0.025 (0.062)	0.144*** (0.051)	0.179** (0.084)	-0.014 (0.039)
AWH Comprehensive	-0.022 (0.043)	-0.048 (0.042)	0.054 (0.045)	0.273*** (0.090)	-0.055 (0.067)	0.079*	0.085 (0.060)	0.189*** (0.032)	0.035 (0.103)	0.013 (0.042)
AWH Comprehensive Plus	0.015 (0.045)	0.098*** (0.036)	0.032 (0.047)	0.367*** (0.082)	0.059 (0.046)	0.113*** (0.039)	0.073 (0.061)	0.144*** (0.044)	-0.255*** (0.076)	0.158*** (0.045)
p-value on HS /= AWH-E	[0.184]	[0.552]	[0.243]	[0.289]	[0.312]	[0.212]	[0.163]	[0.745]	[0.137]	[0.994]
p-value on AWH-E /= AWH-C	[0.546]	[0.310]	[0.756]	[0.792]	[0.732]	[0.150]	[0.337]	[0.308]	[0.143]	[0.462]
p-value on AWH-C /= AWH-C+	[0.490]	[0.000]	[0.612]	[0.288]	[0.107]	[0.492]	[0.827]	[0.266]	[0.004]	[0.002]
Control Mean	0.801	0.326	0.305	-0.080	0.565	0.694	0.658	0.616	0.004	0.280
Number of Observations	720	718	718	706	714	715	712	718	715	718
Panel B: 24- to 36-month impacts										
Her Spaces	-0.010	-0.064	-0.034	0.178	0.048	-0.001	0.053	0.129***	0.039	-0.024
	(0.048)	(0.043)	(0.054)	(0.111)	(0.047)	(0.054)	(0.052)	(0.046)	(0.109)	(0.035)
AWH Essential	-0.100	0.029	0.047	-0.037	0.001	-0.018	-0.003	-0.019	-0.048	-0.008
ANULC 1 ·	(0.071)	(0.039)	(0.040)	(0.095)	(0.045)	(0.041)	(0.050)	(0.051)	(0.102)	(0.038)
AWH Comprehensive	0.009	0.046	0.033	0.200**	0.033	0.039	0.032	0.124**	-0.108	0.035
AWH Comprehensive Plus	(0.045) -0.013	(0.045) 0.031	(0.055) 0.011	(0.095) 0.044	(0.054) 0.069	(0.038) -0.032	(0.050) 0.038	(0.058) -0.015	(0.100) -0.008	(0.041) 0.059
AWH Comprehensive Plus	(0.045)	(0.031)	(0.046)	(0.109)	(0.044)	(0.046)	(0.058)	(0.066)	(0.107)	(0.040)
p-value on HS /= AWH-E	[0.247]	[0.018]	[0.076]	[0.038]	[0.316]	[0.747]	[0.371]	[0.001]	[0.107]	[0.716]
p-value on AWH-E /= AWH-C	[0.151]	[0.703]	[0.759]	[0.005]	[0.548]	[0.131]	[0.571]	[0.011]	[0.572]	[0.375]
p-value on AWH-C /= AWH-C+	[0.642]	[0.719]	[0.680]	[0.103]	[0.505]	[0.114]	[0.922]	[0.048]	[0.371]	[0.638]
Control Mean	0.786	0.233	0.249	-0.063	0.446	0.734	0.637	0.542	-0.021	0.229
Number of Observations	699	700	700	692	697	698	697	698	699	700

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Cross-Cutting Outcomes (part 4)

	=1 if Agrees "Only boys should learn about science, technology, and math" (96)	=1 if Agrees "Girls should be sent to school only if they are not needed at home" (97)	=1 if Agrees "A girl's marriage can wait until she has completed senior secondary school" (98)		Index of attitudes toward violence (standardi zed) (100)	=1 if Agrees "It is acceptable for a man to hit his wife" (101)	=1 if Agrees "A man using violence against his wife is a private matter that should not be discussed outside the couple" (102)	=1 if Agrees "A woman should tolerate violence to keep her family together" (103)
Panel A: 10-month impacts								
Her Spaces	0.011	-0.025	-0.010	0.028	-0.186**	0.075	0.113**	0.014
	(0.040)	(0.049)	(0.030)	(0.044)	(0.088)	(0.063)	(0.051)	(0.045)
AWH Essential	0.012	-0.127***	0.025	-0.066	-0.225***	0.067	0.148**	0.027
	(0.031)	(0.044)	(0.026)	(0.050)	(0.077)	(0.046)	(0.061)	(0.031)
AWH Comprehensive	-0.018	-0.086*	-0.013	0.029	-0.024	0.039	0.063	-0.070**
	(0.051)	(0.047)	(0.031)	(0.047)	(0.067)	(0.041)	(0.057)	(0.034)
AWH Comprehensive Plus	0.024	0.113**	-0.007	0.036	0.005	-0.011	0.087*	-0.075
	(0.034)	(0.043)	(0.032)	(0.036)	(0.099)	(0.044)	(0.051)	(0.046)
p-value on HS /= AWH-E	[0.992]	[0.052]	[0.281]	[0.102]	[0.712]	[0.900]	[0.592]	[0.760]
p-value on AWH-E /= AWH-C	[0.540]	[0.336]	[0.224]	[0.112]	[0.011]	[0.606]	[0.171]	[0.001]
p-value on AWH-C /= AWH-C+	[0.393]	[0.000]	[0.875]	[0.888]	[0.760]	[0.315]	[0.587]	[0.907]
Control Mean	0.181	0.361	0.868	0.284	0.013	0.561	0.439	0.706
Number of Observations	718	718	720	720	719	720	719	719
Panel B: 24- to 36-month impacts								
Her Spaces	0.008	0.044	0.033	-0.022	0.017	-0.048	0.092	-0.052
	(0.034)	(0.047)	(0.054)	(0.032)	(0.123)	(0.063)	(0.057)	(0.050)
AWH Essential	-0.035	0.057	-0.001	0.043	-0.234**	0.108**	0.061	0.069
	(0.039)	(0.043)	(0.052)	(0.036)	(0.091)	(0.043)	(0.043)	(0.047)
AWH Comprehensive	0.028	0.057	0.042	0.045	-0.056	0.032	0.040	-0.010
	(0.051)	(0.050)	(0.049)	(0.035)	(0.124)	(0.065)	(0.061)	(0.060)
AWH Comprehensive Plus	-0.027	0.099*	0.099***	-0.010	-0.001	0.019	0.049	-0.060
	(0.034)	(0.056)	(0.036)	(0.026)	(0.070)	(0.036)	(0.040)	(0.042)
p-value on HS /= AWH-E	[0.258]	[0.762]	[0.570]	[0.114]	[0.042]	[0.022]	[0.557]	[0.022]
p-value on AWH-E /= AWH-C	[0.223]	[0.993]	[0.467]	[0.964]	[0.168]	[0.269]	[0.704]	[0.210]
p-value on AWH-C /= AWH-C+	[0.250]	[0.512]	[0.215]	[0.125]	[0.624]	[0.837]	[0.862]	[0.413]
Control Mean	0.157	0.188	0.768	0.145	0.015	0.394	0.489	0.614
Number of Observations	700	700	699	700	699	700	699	700

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

	Cross-Cutting Outcomes (part 5)											
	Index of Supportive Network (104)	=1 if Has a Trusted Female Friend (105)	=1 if Has a Trusted Male Friend (106)	=1 if Has a Trusted Adult (107)	Index of Service Knowledge (108)	=1 if Knows Where Services Could be Received for Substance Addiction (109)	=1 if Knows Where Services Could be Received for Mental Health (110)	=1 if Knows Where Services Could be Received for Pregnancy Prevention (111)	=1 if Knows Where Services Could be Received for Abortion/A doption (112)	=1 if Knows Where Services Could be Received for Violence (113)		
Panel A: 10-month impacts	, ,				` ′							
Her Spaces	0.259***	0.050	0.024	0.126***								
	(0.062)	(0.062)	(0.015)	(0.046)								
AWH Essential	0.175*	0.058	0.013	0.070								
	(0.100)	(0.051)	(0.015)	(0.050)								
AWH Comprehensive	0.132	0.082	-0.013	0.071								
	(0.093)	(0.056)	(0.015)	(0.076)								
AWH Comprehensive Plus	0.331***	0.077	0.038**	0.129**								
	(0.121)	(0.059)	(0.018)	(0.049)								
p-value on HS /= AWH-E	[0.407]	[0.910]	[0.489]	[0.279]								
p-value on AWH-E /= AWH-C	[0.713]	[0.702]	[0.114]	[0.992]								
p-value on AWH-C /= AWH-C+	[0.170]	[0.944]	[0.014]	[0.449]								
Control Mean	-0.106	0.606	0.027	0.543								
Number of Observations	721	721	721	721								
Panel B: 24- to 36-month impacts												
Her Spaces	-0.009	0.011	-0.004	-0.011	-0.003	-0.030	-0.000	-0.018	0.056	0.006		
	(0.121)	(0.066)	(0.029)	(0.050)	(0.138)	(0.031)	(0.026)	(0.061)	(0.064)	(0.077)		
AWH Essential	0.123	0.071	-0.004	0.057	0.431**	0.066	0.090*	0.113	0.149**	0.079		
	(0.105)	(0.062)	(0.031)	(0.056)	(0.205)	(0.047)	(0.051)	(0.077)	(0.074)	(0.070)		
AWH Comprehensive	0.122	0.140**	-0.055**	0.086	0.178	-0.001	0.026	0.052	0.055	0.035		
	(0.126)	(0.067)	(0.025)	(0.074)	(0.163)	(0.039)	(0.040)	(0.074)	(0.051)	(0.059)		
AWH Comprehensive Plus	-0.158	0.019	-0.033	-0.105**	0.136	0.015	0.030	-0.004	0.079*	0.031		
	(0.114)	(0.062)	(0.020)	(0.052)	(0.118)	(0.026)	(0.021)	(0.056)	(0.044)	(0.048)		
p-value on HS /= AWH-E	[0.281]	[0.382]	[0.996]	[0.199]	[0.068]	[0.104]	[0.114]	[0.101]	[0.298]	[0.442]		
p-value on AWH-E /= AWH-C	[0.990]	[0.319]	[0.114]	[0.710]	[0.322]	[0.271]	[0.310]	[0.501]	[0.266]	[0.575]		
p-value on AWH-C /= AWH-C+	[0.042]	[0.083]	[0.311]	[0.014]	[0.827]	[0.721]	[0.927]	[0.413]	[0.676]	[0.949]		
Control Mean	-0.012	0.593	0.082	0.538	-0.057	0.059	0.067	0.341	0.174	0.344		
Number of Observations	701	702	702	701	651	652	701	653	653	700		

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

			•	Cross-Cut	ting Outcome	es (part 6)			
	=1 if Knows Where Services Could be Received for Injustice Under the Law (114)	Index of Service Accessibilit y (115)	=1 if Believes Adolescent Could Access Services for Substance Addiction (116)	=1 if Believes Adolescent Could Access Services for Mental Health (117)	=1 if Believes Adolescent Could Access Services for Pregnancy Prevention (118)	Could Access	=1 if Believes Adolescent Could Access Services for Violence (120)	=1 if Believes Adolescent Could Access Services for Injustice Under the Law (121)	=1 if Believes Adolescent Could Access Financial Services (122)
Panel A: 10-month impacts		,	,		,	,	,	,	
Her Spaces									
AWH Essential									
AWH Comprehensive									
AWH Comprehensive Plus									
p-value on HS /= AWH-E									
p-value on AWH-E /= AWH-C									
p-value on AWH-C /= AWH-C+									
Control Mean									
Number of Observations									
Panel B: 24- to 36-month impacts									
Her Spaces	-0.049	0.015	-0.024	-0.012	-0.038	0.066	0.020	-0.035	
	(0.044)	(0.134)	(0.030)	(0.022)	(0.054)	(0.060)	(0.073)	(0.041)	
AWH Essential	0.062	0.385*	0.030	0.082*	0.060	0.140*	0.087	0.076*	
	(0.053)	(0.207)	(0.050)	(0.042)	(0.071)	(0.076)	(0.066)	(0.045)	
AWH Comprehensive	0.039	0.150	-0.013	0.020	0.024	0.049	0.053	0.018	
	(0.059)	(0.142)	(0.035)	(0.040)	(0.064)	(0.043)	(0.055)	(0.046)	
AWH Comprehensive Plus	-0.001	0.149	0.001	0.032	0.014	0.087*	0.055	-0.006	
	(0.035)	(0.116)	(0.025)	(0.020)	(0.056)	(0.046)	(0.043)	(0.027)	
p-value on HS /= AWH-E	[0.052]	[0.104]	[0.376]	[0.029]	[0.185]	[0.384]	[0.446]	[0.032]	
p-value on AWH-E /= AWH-C	[0.737]	[0.330]	[0.483]	[0.248]	[0.674]	[0.246]	[0.631]	[0.326]	
p-value on AWH-C /= AWH-C+	[0.498]	[0.993]	[0.744]	[0.775]	[0.878]	[0.404]	[0.957]	[0.597]	
Control Mean	0.177	-0.057	0.056	0.060	0.304	0.116	0.272	0.147	
Number of Observations	701	649	652	701	651	653	700	701	

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Cross-Cutting Outcomes (part 7)

	Vnovilede	=1 if			=1 if Knowledge:	=1 if
	Knowledge				early	Knowledge:
	Index (for	Knowledge:		=1 if		index naming
	AWH girls	girls reach	=1 if	Knowledge:	bad for	iron-rich
	curricula	puberty first	Knowledge:	menarche	health (in	foods (0-4) (in
	(maybe also	(in AWH	menstruation	allows	AWH curr	AWH curr
	HS))	curr only)	frequency	pregnancy	only)	only)
	(123)	(124)	(125)	(126)	(127)	(128)
Panel A: 10-month impacts	, ,			, ,		
Her Spaces	0.443***	-0.023	0.237***	0.027	0.032	-0.080
	(0.114)	(0.040)	(0.039)	(0.043)	(0.037)	(0.119)
AWH Essential	0.559***	-0.047	0.162***	0.070*	0.094*	0.038
	(0.128)	(0.052)	(0.042)	(0.038)	(0.052)	(0.127)
AWH Comprehensive	0.466***	-0.058	0.233***	0.026	0.087*	-0.003
-	(0.122)	(0.038)	(0.054)	(0.057)	(0.050)	(0.147)
AWH Comprehensive Plus	0.328***	0.038	0.167***	0.043	0.054	-0.156
	(0.111)	(0.033)	(0.046)	(0.048)	(0.054)	(0.194)
p-value on HS /= AWH-E	[0.401]	[0.685]	[0.086]	[0.335]	[0.208]	[0.346]
p-value on AWH-E /= AWH-C	[0.524]	[0.840]	[0.227]	[0.450]	[0.911]	[0.758]
p-value on AWH-C /= AWH-C+	[0.324]	[0.023]	[0.260]	[0.780]	[0.608]	[0.375]
Control Mean	-0.045	0.592	0.444	0.678	0.682	2.136
Number of Observations	690	721	721	721	720	718
Panel B: 24- to 36-month impacts						
Her Spaces	-0.115	-0.032	0.056	-0.033	0.012	-0.227*
	(0.106)	(0.049)	(0.034)	(0.042)	(0.041)	(0.115)
AWH Essential	0.013	-0.046	0.006	-0.022	0.010	-0.018
	(0.140)	(0.050)	(0.038)	(0.032)	(0.058)	(0.102)
AWH Comprehensive	0.042	0.004	-0.003	-0.065	0.047	-0.182
	(0.109)	(0.055)	(0.042)	(0.070)	(0.045)	(0.147)
AWH Comprehensive Plus	-0.122	0.084*	0.053	-0.134***	-0.030	-0.075
	(0.116)	(0.047)	(0.043)	(0.049)	(0.056)	(0.097)
p-value on HS /= AWH-E	[0.353]	[0.811]	[0.136]	[0.755]	[0.961]	[0.102]
p-value on AWH-E /= AWH-C	[0.828]	[0.428]	[0.837]	[0.507]	[0.457]	[0.297]
p-value on AWH-C /= AWH-C+	[0.132]	[0.197]	[0.264]	[0.343]	[0.113]	[0.470]
Control Mean	0.014	0.665	0.799	0.777	0.749	2.230
Number of Observations	692	701	702	697	700	701

Table B4. ITT regressions for girls' secondary outcomes, marginalized sites

Cross-Cutting Outcomes (part 8)

	=1 if Knowledge: number meals healthy for adolescents (129)	=1 if Knowledge: legal age of marriage for girls (in AWH curr only) (130)	=1 if Knowledge: legal age of marriage for boys (in AWH curr only) (131)	=1 if Knowledge: FGMC has risks (132)	=1 if Knowledge: where to get help for violence (133)	=1 if Knowledge - safe place where to keep money other than home (134)	=1 if Knowledge: negotiation skills (135)	=1 Knowledge: boys are not biologically smarter than girls (136)	=1 if Knowledge: gender roles can be changed (in AWH curr only) (137)
Panel A: 10-month impacts									
Her Spaces	0.002	0.099**	0.058**	0.092	0.234***	0.060	0.084*	0.027	0.035
	(0.022)	(0.040)	(0.026)	(0.065)	(0.073)	(0.037)	(0.048)	(0.048)	(0.072)
AWH Essential	0.002	0.130***	0.043*	0.230***	0.229***	0.132*	0.084*	-0.013	0.130***
	(0.024)	(0.034)	(0.023)	(0.073)	(0.054)	(0.068)	(0.044)	(0.047)	(0.048)
AWH Comprehensive	0.071***	0.106*	0.024	0.116*	0.180**	0.118**	0.085*	-0.044	0.064
	(0.025)	(0.061)	(0.029)	(0.061)	(0.074)	(0.053)	(0.049)	(0.048)	(0.067)
AWH Comprehensive Plus	-0.009	0.050	0.028	0.107	0.050	0.102**	0.091**	-0.078*	0.010
	(0.027)	(0.045)	(0.020)	(0.065)	(0.056)	(0.049)	(0.044)	(0.040)	(0.063)
p-value on HS /= AWH-E	[0.990]	[0.489]	[0.634]	[0.086]	[0.947]	[0.322]	[0.992]	[0.507]	[0.179]
p-value on AWH-E /= AWH-C	[0.004]	[0.714]	[0.586]	[0.137]	[0.494]	[0.855]	[0.983]	[0.603]	[0.296]
p-value on AWH-C /= AWH-C+	[0.005]	[0.442]	[0.901]	[0.888]	[0.101]	[0.831]	[0.915]	[0.514]	[0.458]
Control Mean	0.920	0.106	0.036	0.358	0.224	0.786	0.233	0.536	0.419
Number of Observations	721	720	720	712	717	706	721	721	721
Panel B: 24- to 36-month impacts									
Her Spaces	-0.007	0.028	-0.081*		0.006	-0.011	-0.069	0.109*	-0.032
	(0.022)	(0.054)	(0.044)		(0.077)	(0.022)	(0.048)	(0.060)	(0.051)
AWH Essential	-0.003	0.088*	-0.019		0.079	-0.008	0.005	0.051	-0.059
	(0.027)	(0.045)	(0.031)		(0.070)	(0.022)	(0.068)	(0.058)	(0.048)
AWH Comprehensive	0.013	0.028	-0.027		0.035	0.009	0.026	0.121*	0.036
	(0.021)	(0.056)	(0.036)		(0.059)	(0.021)	(0.059)	(0.062)	(0.046)
AWH Comprehensive Plus	0.014	0.039	-0.040		0.031	-0.051	-0.047	0.034	-0.047
	(0.020)	(0.049)	(0.040)		(0.048)	(0.036)	(0.053)	(0.058)	(0.041)
p-value on HS /= AWH-E	[0.869]	[0.282]	[0.182]		[0.442]	[0.861]	[0.248]	[0.330]	[0.653]
p-value on AWH-E /= AWH-C	[0.518]	[0.283]	[0.820]		[0.575]	[0.357]	[0.756]	[0.293]	[0.069]
p-value on AWH-C /= AWH-C+	[0.952]	[0.864]	[0.764]		[0.949]	[0.110]	[0.185]	[0.183]	[0.064]
Control Mean	0.940	0.373	0.155		0.344	0.976	0.506	0.505	0.538
Number of Observations	702	702	702		700	697	702	701	700

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	Education and Learning										
	Index of Education Participation (1)	=1 if Enrolled in School (2)	Share of School Days Attended in Last Two Weeks (3)	=1 if Did Not Miss More Than One Consecutive Week of School in Last 12 Months (4)	=1 if Aspires to Attain ≥ Secondary School Degree (5)	Highest Grade Attended ¹ (6)	=1 if Ever Enrolled in Secondary School (7)				
Panel A: 10-month impacts	,				,						
Her Spaces		-0.031	-0.061	-0.025	-0.007	-0.101					
		(0.045)	(0.045)	(0.040)	(0.018)	(0.203)					
AWH Essential		0.006	-0.018	0.024	-0.027	-0.078					
		(0.044)	(0.046)	(0.047)	(0.033)	(0.261)					
AWH Comprehensive		0.030	0.012	0.035	0.021	0.067					
		(0.044)	(0.044)	(0.044)	(0.018)	(0.229)					
AWH Comprehensive Plus		0.094**	0.093**	0.080*	-0.007	0.153					
		(0.041)	(0.040)	(0.041)	(0.018)	(0.252)					
p-value on HS /= AWH-E		[0.440]	[0.393]	[0.296]	[0.562]	[0.929]					
p-value on AWH-E /= AWH-C		[0.579]	[0.536]	[0.833]	[0.168]	[0.594]					
p-value on AWH-C /= AWH-C+		[0.111]	[0.052]	[0.317]	[0.124]	[0.739]					
Control Mean		0.786	0.710	0.708	0.954	4.749					
Number of Observations		1284	1256	1282	1251	1284					
Panel B: 24- to 36-month impacts											
Her Spaces	0.024	-0.022	0.002	-0.033	0.019	0.196	0.023				
	(0.132)	(0.061)	(0.061)	(0.057)	(0.027)	(0.217)	(0.029)				
AWH Essential	0.190	0.079	0.055	0.102*	0.031	-0.010	0.015				
	(0.131)	(0.060)	(0.057)	(0.057)	(0.026)	(0.270)	(0.036)				
AWH Comprehensive	0.160	0.055	0.038	0.110**	0.042*	0.146	0.016				
	(0.126)	(0.058)	(0.055)	(0.054)	(0.023)	(0.248)	(0.029)				
AWH Comprehensive Plus	0.181	0.067	0.057	0.073	0.019	0.163	0.082**				
	(0.126)	(0.059)	(0.057)	(0.052)	(0.027)	(0.289)	(0.039)				
p-value on HS /= AWH-E	[0.244]	[0.086]	[0.388]	[0.033]	[0.608]	[0.455]	[0.836]				
p-value on AWH-E /= AWH-C	[0.822]	[0.645]	[0.745]	[0.894]	[0.629]	[0.592]	[0.981]				
p-value on AWH-C /= AWH-C+	[0.869]	[0.809]	[0.712]	[0.484]	[0.342]	[0.953]	[0.104]				
Control Mean	-0.022	0.715	0.645	0.601	0.923	5.957	0.105				
Number of Observations	1120	1221	1120	1221	1218	1210	1210				

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	Bodily Integrity										
	Index of Violence (higher= less violence) (8)	Peer Violence Scale (0-6, higher= less violence) (9)	=1 if No Exposure to Household Violence Against Self, Female Caregiver in Last 12 Months (10)	=1 if No Experience of Sexual Violence in Last 12 Months (11)	Ideal Age at Marriage (years) (12)	=1 if No Peer Violence Victimization in Last 12 months (13)	=1 if No Exposure to Corporal Punishment at School in Last 12 Months (14)	=1 if Did Not Perpetrate Peer Violence in Last 12 Months (15)	=1 if Never Married (16)		
Panel A: 10-month impacts											
Her Spaces	0.134	0.159**	0.070	-0.009	0.430	0.012	0.044	0.067***	0.028*		
	(0.088)	(0.066)	(0.045)	(0.012)	(0.652)	(0.026)	(0.043)	(0.023)	(0.016)		
AWH Essential	0.139	0.125*	0.067	-0.008	0.063	-0.015	0.099**	0.048*	0.011		
	(0.087)	(0.074)	(0.051)	(0.011)	(0.684)	(0.026)	(0.050)	(0.025)	(0.025)		
AWH Comprehensive	-0.016	0.044	-0.006	-0.012	0.711	-0.025	0.065	0.024	0.032*		
	(0.100)	(0.083)	(0.046)	(0.012)	(0.722)	(0.032)	(0.051)	(0.023)	(0.017)		
AWH Comprehensive Plus	0.140	0.138*	0.061	-0.004	0.196	-0.023	0.075*	0.040	0.013		
	(0.091)	(0.072)	(0.051)	(0.010)	(0.667)	(0.027)	(0.040)	(0.026)	(0.018)		
p-value on HS /= AWH-E	[0.954]	[0.563]	[0.958]	[0.957]	[0.584]	[0.378]	[0.324]	[0.382]	[0.486]		
p-value on AWH-E /= AWH-C	[0.106]	[0.293]	[0.159]	[0.787]	[0.351]	[0.789]	[0.581]	[0.300]	[0.374]		
p-value on AWH-C /= AWH-C+	[0.127]	[0.220]	[0.195]	[0.519]	[0.436]	[0.953]	[0.858]	[0.520]	[0.272]		
Control Mean	-0.081	5.590	0.532	0.983	22.121	0.876	0.100	0.854	0.944		
Number of Observations	1235	1282	1244	1275	1233	1176	1037	1283	1284		
Panel B: 24- to 36-month impacts											
Her Spaces	0.138	0.037	0.030	0.025*	-0.734	0.002	-0.007	0.004	-0.008		
	(0.103)	(0.049)	(0.054)	(0.013)	(0.519)	(0.025)	(0.061)	(0.018)	(0.034)		
AWH Essential	0.043	-0.007	0.059	0.005	0.397	0.010	0.016	0.009	0.025		
	(0.103)	(0.060)	(0.052)	(0.017)	(0.529)	(0.019)	(0.055)	(0.020)	(0.038)		
AWH Comprehensive	0.106	-0.003	0.041	0.020	-0.278	-0.011	0.035	-0.006	0.017		
	(0.086)	(0.043)	(0.055)	(0.012)	(0.587)	(0.023)	(0.060)	(0.020)	(0.034)		
AWH Comprehensive Plus	0.041	-0.025	0.083	-0.009	0.338	-0.003	-0.030	-0.008	-0.014		
	(0.119)	(0.042)	(0.051)	(0.024)	(0.426)	(0.023)	(0.057)	(0.019)	(0.027)		
p-value on HS /= AWH-E	[0.399]	[0.491]	[0.548]	[0.223]	[0.042]	[0.706]	[0.684]	[0.803]	[0.419]		
p-value on AWH-E /= AWH-C	[0.503]	[0.940]	[0.708]	[0.338]	[0.257]	[0.300]	[0.738]	[0.444]	[0.838]		
p-value on AWH-C /= AWH-C+	[0.597]	[0.586]	[0.371]	[0.283]	[0.233]	[0.747]	[0.249]	[0.906]	[0.330]		
Control Mean	-0.049	5.829	0.613	0.969	21.538	0.918	0.309	0.946	0.898		
Number of Observations	1088	1217	1189	1119	1096	1178	899	1219	1221		

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	Physical Health, Nutrition, and Sexual and Reproductive Health										
	Index of Physical Health & Nutrition (17)	=1 Physical Health Is Good (18)	Proportion of Meals Yesterday Containing Meat, Chicken, Fish, or Egg (19)	=1 if Has Not Ever Been Hungry Because Not Enough Food in Last 4 Weeks (20)	Index of Menstrual Practices (21)	=1 if Normal Activities Are Not Affected by Menstruation (Among Post- Menarche) (22)	Index of Improved Menstrual Hygiene Practices (0- 2, Among Post- menarche) (23)	=1 if Improved Menstrual Hygiene Management (Among Post- menarche) (24)	=1 if Practices Appropriate Menstrual Product Disposal at Home (Among Post- menarche) (25)		
Panel A: 10-month impacts	, í				, ,						
Her Spaces	0.024 (0.106)	0.024 (0.028)	0.002 (0.013)	-0.018 (0.035)	-0.199 (0.373)	-0.009 (0.088)	-0.116 (0.274)	-0.009 (0.112)	-0.153 (0.147)		
AWH Essential	0.012 (0.094)	0.026 (0.024)	-0.005 (0.012)	-0.009 (0.034)	0.085 (0.306)	-0.059 (0.084)	0.366 (0.258)	0.252** (0.117)	0.121 (0.155)		
AWH Comprehensive	-0.151 (0.113)	-0.069** (0.034)	0.006 (0.016)	-0.028 (0.031)	0.252 (0.278)	0.045 (0.080)	0.236 (0.251)	0.150 (0.125)	0.040 (0.136)		
AWH Comprehensive Plus	-0.118	-0.001	-0.003	-0.064*	0.109	-0.086	0.432**	0.197*	0.207*		
p-value on HS /= AWH-E	(0.096) [0.892]	(0.029) [0.931]	(0.010) [0.570]	(0.033) [0.788]	(0.211) [0.473]	(0.080) [0.557]	(0.212) [0.075]	(0.107) [0.013]	(0.115) [0.078]		
p-value on AWH-E /= AWH-C p-value on AWH-C /= AWH-C+	[0.110] [0.752]	[0.003] [0.053]	[0.497] [0.555]	[0.516] [0.168]	[0.638] [0.561]	[0.216] [0.103]	[0.653] [0.412]	[0.435] [0.703]	[0.637] [0.193]		
Control Mean Number of Observations	0.039 1283	0.902 1284	0.043 1284	0.874 1283	0.185 160	0.875 195	0.961 160	0.377 194	0.532 160		
Panel B: 24- to 36-month impacts	1203	1201	1201	1203	100	193	100	17.	100		
Her Spaces	-0.060 (0.105)	-0.003 (0.022)	-0.007 (0.010)	-0.010 (0.032)	-0.164 (0.167)	-0.024 (0.055)	-0.102 (0.157)	0.011 (0.075)	-0.070 (0.084)		
AWH Essential	-0.050 (0.088)	0.009 (0.020)	-0.008 (0.011)	-0.014 (0.024)	0.227 (0.140)	0.026 (0.054)	0.152 (0.146)	0.102 (0.079)	0.064 (0.078)		
AWH Comprehensive	-0.050	-0.010	0.002	-0.020	0.264**	0.098**	0.094	0.076	0.026		
AWH Comprehensive Plus	(0.080) 0.100 (0.093)	(0.023) 0.031 (0.020)	(0.010) 0.008 (0.011)	(0.025) -0.005 (0.024)	(0.130) 0.164 (0.161)	(0.046) 0.030 (0.043)	(0.144) 0.146 (0.164)	(0.079) 0.092 (0.089)	(0.076) 0.040 (0.091)		
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.930]	[0.503]	[0.901] [0.394]	[0.922]	[0.006] [0.715]	[0.291]	[0.055]	[0.178] [0.720]	[0.076] [0.586]		
p-value on AWH-C /= AWH-C+	[0.112]	[0.028]	[0.596]	[0.608]	[0.417]	[0.057]	[0.707]	[0.840]	[0.861]		
Control Mean Number of Observations	0.060 1207	0.931 1221	0.025 1207	0.890 1221	0.005 521	0.860 566	1.154 522	0.487 567	0.620 522		

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	S	RH (continue	•	Psychosocial Wellbeing					
	Ideal Age at First Child (years) (26)	=1 if Not Ever Pregnant (27)	Desired Fertility (number of children) (28)	Self-Esteem Score (0-40, higher= more self-esteem) (29)	Mental Distress Score (0-27, higher= less distress) (30)	Resilience Score (12-36, higher= more resilience) (31)	=1 if Minimal Depression Detected (32)		
Panel A: 10-month impacts									
Her Spaces					-0.002	-0.101	-0.010		
					(0.229)	(0.403)	(0.016)		
AWH Essential					0.380*	-0.280	0.024*		
					(0.205)	(0.490)	(0.014)		
AWH Comprehensive					0.358*	0.018	0.023		
					(0.213)	(0.386)	(0.015)		
AWH Comprehensive Plus					0.230	0.074	0.013		
					(0.194)	(0.320)	(0.014)		
p-value on HS /= AWH-E					[0.015]	[0.737]	[0.026]		
p-value on AWH-E /= AWH-C					[0.857]	[0.572]	[0.964]		
p-value on AWH-C /= AWH-C+					[0.359]	[0.890]	[0.512]		
Control Mean					26.400	31.727	0.972		
Number of Observations					1181	1106	1181		
Panel B: 24- to 36-month impacts									
Her Spaces	-0.560	0.015	0.087	-0.012	0.049	-0.593	-0.005		
	(0.517)	(0.027)	(0.255)	(0.355)	(0.109)	(0.474)	(0.011)		
AWH Essential	0.103	0.025	-0.340	0.233	-0.018	0.460	0.000		
	(0.568)	(0.026)	(0.205)	(0.342)	(0.126)	(0.401)	(0.012)		
AWH Comprehensive	-0.227	0.028	-0.363**	-0.082	0.066	0.032	0.010		
	(0.609)	(0.026)	(0.169)	(0.327)	(0.103)	(0.409)	(0.008)		
AWH Comprehensive Plus	0.186	0.030	-0.316*	0.246	-0.038	-0.329	-0.006		
	(0.609)	(0.022)	(0.165)	(0.334)	(0.121)	(0.409)	(0.012)		
p-value on HS /= AWH-E	[0.228]	[0.765]	[0.119]	[0.473]	[0.592]	[0.016]	[0.710]		
p-value on AWH-E /= AWH-C	[0.602]	[0.921]	[0.906]	[0.353]	[0.495]	[0.239]	[0.409]		
p-value on AWH-C /= AWH-C+	[0.535]	[0.941]	[0.751]	[0.348]	[0.389]	[0.334]	[0.165]		
Control Mean	23.604	0.922	5.050	29.655	26.536	31.826	0.982		
Number of Observations	1151	862	1199	1090	1221	1193	1221		

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Voice and Agency (part 1)

	Index of Voice & Agency (33)	Index of Participation in Decision Making (34)	=1 if Has Leadership Role in School (Among Enrolled) (35)	Index of Say in Household Decisions Related to Self (0-8) (36)	Index of Comfort Expressing Oneself (37)	=1 if Comfortable Expressing Opinion With Agemates (38)	=1 if Comfortable Expressing Opinion With Those Who Are Older (38)	Index of Issues Discussed with Mother (0-8) (39)	Index of Issues Discussed with Father (0-7) (40)
Panel A: 10-month impacts		0.04.04	0.051	2.112			0.010		0.100
Her Spaces	0.124	0.212*	0.051	0.440	0.057	0.023	0.018	0.031	-0.103
ATHLE 1	(0.090)	(0.119)	(0.039)	(0.275)	(0.108)	(0.042)	(0.053)	(0.167)	(0.151)
AWH Essential	0.173*	0.167	0.081	0.198	0.084	0.025	0.036	0.197	0.135
AWII Community ong ing	(0.102) 0.204**	(0.122) 0.156	(0.049) -0.009	(0.296) 0.563*	(0.108) 0.210**	(0.044) 0.038	(0.045) 0.120**	(0.226) 0.342**	(0.170) 0.025
AWH Comprehensive	(0.089)	(0.115)	(0.042)	(0.296)	(0.084)	(0.038)	(0.047)	(0.164)	(0.126)
AWH Comprehensive Plus	0.114	0.113)	0.042)	0.494*	0.092	0.029	0.047)	0.625***	0.120)
AWII Comprehensive I tus	(0.094)	(0.105)	(0.038)	(0.265)	(0.092)	(0.038)	(0.046)	(0.168)	(0.137)
p-value on HS /= AWH-E	[0.576]	[0.676]	[0.533]	[0.305]	[0.818]	[0.961]	[0.720]	[0.433]	[0.178]
p-value on AWH-E /= AWH-C	[0.737]	[0.918]	[0.082]	[0.160]	[0.206]	[0.774]	[0.105]	[0.496]	[0.488]
p-value on AWH-C /= AWH-C+	[0.269]	[0.914]	[0.496]	[0.759]	[0.120]	[0.828]	[0.126]	[0.075]	[0.043]
Control Mean	0.022	-0.013	0.196	3.952	-0.059	0.728	0.380	2.747	2.314
Number of Observations	1188	1226	1034	1229	1284	1284	1284	1134	1061
Panel B: 24- to 36-month impacts									
Her Spaces	0.101	0.110	-0.021	0.265	0.058	0.004	0.041	-0.107	0.014
	(0.098)	(0.106)	(0.053)	(0.217)	(0.087)	(0.034)	(0.046)	(0.172)	(0.119)
AWH Essential	0.204**	0.149	0.036	0.197	0.185**	0.074**	0.056	0.301*	0.014
	(0.094)	(0.114)	(0.045)	(0.213)	(0.093)	(0.037)	(0.048)	(0.171)	(0.134)
AWH Comprehensive	0.157*	0.165	0.008	0.351	-0.007	-0.031	0.034	0.216	0.002
	(0.086)	(0.113)	(0.047)	(0.222)	(0.102)	(0.042)	(0.051)	(0.169)	(0.133)
AWH Comprehensive Plus	-0.043	-0.067	-0.056	-0.100	0.004	0.027	-0.031	-0.194	-0.147
	(0.087)	(0.100)	(0.043)	(0.199)	(0.097)	(0.040)	(0.051)	(0.169)	(0.134)
p-value on HS /= AWH-E	[0.305]	[0.751]	[0.294]	[0.764]	[0.083]	[0.016]	[0.725]	[0.024]	[0.999]
p-value on AWH-E /= AWH-C	[0.629]	[0.895]	[0.544]	[0.503]	[0.042]	[0.005]	[0.636]	[0.654]	[0.939]
p-value on AWH-C /= AWH-C+	[0.031]	[0.040]	[0.159]	[0.047]	[0.916]	[0.159]	[0.214]	[0.040]	[0.352]
Control Mean	-0.027	-0.011	0.239	4.134	-0.083	0.774	0.425	3.399	2.721
Number of Observations	1162	1192	900	1192	1220	1220	1220	1114	1067

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Voice and Agency (part 2)

	Index of Voice	Ask for My Opinions on Things" (0-2)	,	They Have a Problem" (0- 2)	Index for "If I See Something Wrong, I Feel That I Can Talk To Someone" (0- 2)	Can Speak Up in Class" (among enrolled, 0-2)	Index for "I Can Speak Up If I See Someone Being Hurt" (0-2)	Index for "I Can Ask Adults for Help When I Need It" (0-2)
Panel A: 10-month impacts	(41)	(42)	(43)	(44)	(45)	(46)	(47)	(48)
Her Spaces	0.102	-0.042	-0.013	-0.025	0.047	0.157**	0.100	0.067
Tier spaces	(0.097)	(0.057)	(0.066)	(0.051)	(0.067)	(0.074)	(0.072)	(0.059)
AWH Essential	0.240**	0.086	0.028	0.086	0.109	0.194***	0.145**	0.075
11//11 2550////	(0.099)	(0.061)	(0.062)	(0.056)	(0.074)	(0.070)	(0.064)	(0.063)
AWH Comprehensive	0.206*	0.158***	0.086	0.084	-0.002	0.133*	0.131**	0.051
1	(0.105)	(0.056)	(0.071)	(0.060)	(0.059)	(0.078)	(0.064)	(0.064)
AWH Comprehensive Plus	0.215**	0.142**	0.104*	0.147**	0.157**	0.125**	0.129**	0.027
•	(0.093)	(0.057)	(0.061)	(0.058)	(0.062)	(0.058)	(0.063)	(0.070)
p-value on HS /= AWH-E	[0.187]	[0.076]	[0.580]	[0.058]	[0.388]	[0.612]	[0.507]	[0.889]
p-value on AWH-E /= AWH-C	[0.757]	[0.289]	[0.452]	[0.976]	[0.087]	[0.423]	[0.817]	[0.706]
p-value on AWH-C /= AWH-C+	[0.932]	[0.797]	[0.818]	[0.290]	[0.004]	[0.901]	[0.977]	[0.720]
Control Mean	0.078	1.138	1.368	1.104	1.016	1.338	1.160	1.144
Number of Observations	1272	1279	1277	1284	1281	1036	1282	1284
Panel B: 24- to 36-month impacts								
Her Spaces	0.108	0.103	-0.022	0.077	0.126**	-0.044	0.050	-0.017
	(0.070)	(0.063)	(0.054)	(0.058)	(0.052)	(0.075)	(0.065)	(0.065)
AWH Essential	0.159**	0.074	0.003	0.062	0.154***	0.039	0.154***	0.074
	(0.069)	(0.053)	(0.059)	(0.056)	(0.056)	(0.069)	(0.055)	(0.056)
AWH Comprehensive	0.146**	0.086	0.035	0.041	0.075	0.052	0.107*	0.081
	(0.068)	(0.056)	(0.046)	(0.053)	(0.055)	(0.071)	(0.060)	(0.051)
AWH Comprehensive Plus	0.026	-0.005	0.005	0.094	0.043	0.136**	-0.021	-0.101
1 TIG / ATTITUTE	(0.078)	(0.061)	(0.062)	(0.065)	(0.048)	(0.057)	(0.057)	(0.070)
p-value on HS /= AWH-E	[0.538]	[0.673]	[0.664]	[0.789]	[0.666]	[0.272]	[0.127]	[0.193]
p-value on AWH-E /= AWH-C	[0.870]	[0.843]	[0.528]	[0.672]	[0.250]	[0.855]	[0.452]	[0.889]
p-value on AWH-C /= AWH-C+	[0.202]	[0.179]	[0.616]	[0.401]	[0.604]	[0.123]	[0.047]	[0.011]
Control Mean Number of Observations	0.022 1213	1.170 1215	1.497 1215	1.229 1218	1.105 1217	1.405 899	1.260 1213	1.151 1217
Number of Observations	1213	1213	1213	1218	121/	899	1213	121/

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Voice and Agency (part 3)

	Index of Mobility (Standardized) (49)	=1 if Has Left Kebele in Last 3 Months (50)	Index of Not Needing Permission to Go Places (0-4) (51)	Index of Different Places Visited in Last 3 Months (0-4) (52)	=1 if Feels Safe in Community in Daytime (53)	=1 if Feels Safe in Community in Nighttime (54)	Index of Collective Action (0-2) (55)	=1 if Talked with Others About a Serious Problem in the Community (56)	=1 if Took Action with Others About a Serious Problem in the Community (57)
Panel A: 10-month impacts									
Her Spaces	-0.073	0.039	-0.040	-0.070	-0.028	-0.043			
	(0.099)	(0.040)	(0.100)	(0.138)	(0.024)	(0.052)			
AWH Essential	-0.041	0.019	-0.130	-0.079	0.001	-0.000			
	(0.103)	(0.045)	(0.103)	(0.115)	(0.025)	(0.052)			
AWH Comprehensive	-0.053	0.025	-0.225**	0.166	-0.041	-0.011			
	(0.081)	(0.036)	(0.096)	(0.134)	(0.028)	(0.045)			
AWH Comprehensive Plus	-0.234**	0.006	0.000	-0.092	-0.081**	-0.070			
	(0.098)	(0.044)	(0.121)	(0.140)	(0.037)	(0.044)			
p-value on HS /= AWH-E	[0.747]	[0.644]	[0.400]	[0.941]	[0.230]	[0.400]			
p-value on AWH-E /= AWH-C	[0.891]	[0.884]	[0.379]	[0.048]	[0.126]	[0.798]			
p-value on AWH-C /= AWH-C+	[0.037]	[0.649]	[0.088]	[0.063]	[0.300]	[0.085]			
Control Mean	0.036	0.210	1.056	2.934	0.930	0.374			
Number of Observations	1253	1280	1283	1283	1282	1259			
Panel B: 24- to 36-month impacts									
Her Spaces	-0.025	0.003	0.045	-0.077	-0.031*	0.062	-0.028	-0.019	0.004
	(0.104)	(0.042)	(0.104)	(0.086)	(0.017)	(0.052)	(0.092)	(0.028)	(0.018)
AWH Essential	0.002	0.015	-0.128	0.088	-0.011	0.051	-0.006	-0.001	-0.001
	(0.103)	(0.038)	(0.086)	(0.087)	(0.017)	(0.047)	(0.088)	(0.025)	(0.019)
AWH Comprehensive	0.051	0.033	0.070	-0.026	-0.032	0.087*	0.072	0.015	0.016
	(0.096)	(0.040)	(0.088)	(0.091)	(0.020)	(0.051)	(0.091)	(0.029)	(0.019)
AWH Comprehensive Plus	-0.030	0.008	-0.141	-0.030	-0.001	0.053	-0.076	-0.025	-0.010
	(0.098)	(0.039)	(0.093)	(0.082)	(0.018)	(0.049)	(0.082)	(0.028)	(0.017)
p-value on HS /= AWH-E	[0.781]	[0.789]	[0.125]	[0.054]	[0.260]	[0.822]	[0.810]	[0.466]	[0.791]
p-value on AWH-E /= AWH-C	[0.583]	[0.664]	[0.035]	[0.235]	[0.300]	[0.459]	[0.387]	[0.539]	[0.405]
p-value on AWH-C /= AWH-C+	[0.373]	[0.597]	[0.032]	[0.968]	[0.118]	[0.497]	[0.085]	[0.160]	[0.165]
Control Mean	-0.037	0.221	0.605	3.090	0.953	0.455	0.063	0.133	0.055
Number of Observations	1192	1220	1220	1220	1219	1192	1220	1221	1220

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	Economic Empowerment (part 1)										
	Index of Economic Empowerm ent (58)	=1 if Had Money Under Own Control in Last 12 Months (59)	=1 if Has Savings for the Future (60)	Proportion of Time Spent in Leisure, School, and Study on a Typical Weekday (61)	Index of Economic Aspirations (62)	=1 if Aspires to Be Employed in Skilled or Professional Work Someday (63)	=1 if Aspires to Have Employmen t or Own a Business Someday (64)	=1 if In School, Training, or Studying (65)	Proportion of Time Spent In School, Training, or Studying (66)		
Panel A: 10-month impacts											
Her Spaces	0.156	0.109**	0.048	-0.014	0.033	0.005	0.009	-0.029	-0.012		
	(0.150)	(0.047)	(0.044)	(0.016)	(0.129)	(0.039)	(0.029)	(0.045)	(0.016)		
AWH Essential	-0.039	0.002	0.020	-0.004	-0.005	0.007	-0.006	0.016	0.001		
	(0.115)	(0.042)	(0.044)	(0.010)	(0.136)	(0.039)	(0.030)	(0.042)	(0.012)		
AWH Comprehensive	0.118	0.057	0.033	0.000	0.038	0.031	-0.006	0.025	0.013		
	(0.133)	(0.043)	(0.045)	(0.015)	(0.141)	(0.039)	(0.032)	(0.046)	(0.015)		
AWH Comprehensive Plus	0.219*	0.034	0.098*	0.014	0.085	0.053	-0.002	0.084**	0.017		
	(0.131)	(0.045)	(0.050)	(0.011)	(0.119)	(0.034)	(0.027)	(0.037)	(0.012)		
p-value on HS /= AWH-E	[0.131]	[0.018]	[0.461]	[0.534]	[0.738]	[0.971]	[0.533]	[0.360]	[0.400]		
p-value on AWH-E /= AWH-C	[0.169]	[0.185]	[0.726]	[0.732]	[0.729]	[0.511]	[0.979]	[0.845]	[0.415]		
p-value on AWH-C /= AWH-C+	[0.444]	[0.621]	[0.160]	[0.348]	[0.672]	[0.484]	[0.874]	[0.136]	[0.771]		
Control Mean	-0.006	0.164	0.471	0.289	-0.048	0.861	0.941	0.806	0.239		
Number of Observations	1146	1283	1283	1146	1263	1263	1263	1146	1146		
Panel B: 24- to 36-month impacts											
Her Spaces	0.055	0.039	0.013	-0.016	0.023	-0.015	0.020	-0.006	-0.012		
	(0.101)	(0.033)	(0.041)	(0.035)	(0.137)	(0.057)	(0.031)	(0.056)	(0.036)		
AWH Essential	0.129	0.025	0.056	0.006	0.175	0.038	0.055**	0.045	0.005		
	(0.117)	(0.035)	(0.042)	(0.035)	(0.112)	(0.050)	(0.026)	(0.054)	(0.037)		
AWH Comprehensive	0.282**	0.077**	0.088**	0.019	0.207**	0.074*	0.047*	0.051	0.022		
	(0.125)	(0.034)	(0.042)	(0.032)	(0.101)	(0.040)	(0.025)	(0.055)	(0.033)		
AWH Comprehensive Plus	0.199*	0.064*	0.050	0.013	0.056	0.015	0.016	0.037	0.018		
	(0.117)	(0.032)	(0.047)	(0.034)	(0.113)	(0.043)	(0.029)	(0.056)	(0.035)		
p-value on HS /= AWH-E	[0.487]	[0.725]	[0.285]	[0.538]	[0.213]	[0.376]	[0.133]	[0.330]	[0.643]		
p-value on AWH-E /= AWH-C	[0.267]	[0.217]	[0.472]	[0.700]	[0.705]	[0.416]	[0.658]	[0.916]	[0.628]		
p-value on AWH-C /= AWH-C+	[0.559]	[0.758]	[0.457]	[0.862]	[0.119]	[0.109]	[0.242]	[0.800]	[0.910]		
Control Mean	0.035	0.121	0.212	0.482	-0.001	0.800	0.929	0.733	0.435		
Number of Observations	1219	1219	1219	1220	1177	1177	1177	1220	1220		

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

	Ec Empowerment (part 2) Cross-Cutting Outcomes (part 1)									
	Proportion of Time in Paid Work (67)	=1 if Any Paid Work in Last 12 Months (68)	Wages in Past 7 Days (69)	Index of Gender Equitable Attitudes (70)	GEA Index of Gender Stereotypic al Traits (71)	Raising Their	Feelings		for boys to	=1 if Agrees "Boys who behave like girls are considered weak" (76)
Panel A: 10-month impacts										
Her Spaces				-0.009	-0.095	-0.060	-0.006	0.085**	0.040	-0.079**
AHALE				(0.091)	(0.082)	(0.039)	(0.026)	(0.035)	(0.038)	(0.038)
AWH Essential				0.062	-0.047	0.007	-0.061**	0.034	0.028	-0.101***
ANTI C. 1 ·				(0.092)	(0.089)	(0.040)	(0.026)	(0.031)	(0.037)	(0.038)
AWH Comprehensive				0.097	-0.094	0.003	-0.055**	0.099***	-0.006	-0.064
ANTI C. 1 · DI				(0.113)	(0.094)	(0.036)	(0.027)	(0.033)	(0.041)	(0.047)
AWH Comprehensive Plus				0.053	-0.055	-0.004	-0.022	0.083**	0.019	-0.096**
1 170 / 1777 5				(0.108)	(0.092)	(0.035)	(0.025)	(0.032)	(0.036)	(0.045)
p-value on HS /= AWH-E				[0.354]	[0.535]	[0.056]	[0.034]	[0.103]	[0.756]	[0.519]
p-value on AWH-E /= AWH-C				[0.750]	[0.636]	[0.910]	[0.820]	[0.035]	[0.416]	[0.419]
p-value on AWH-C /= AWH-C+				[0.711]	[0.704]	[0.800]	[0.214]	[0.604]	[0.555]	[0.545]
Control Mean				-0.017	-0.026	0.674	0.883	0.806	0.769	0.584
Number of Observations				1260	1269	1281	1284	1283	1284	1277
Panel B: 24- to 36-month impacts	0.001	0.022	0.000	0.010	0.042	0.020	0.005	0.000	0.0564	0.022
Her Spaces	0.001	-0.023	-0.020	-0.019	-0.043	0.038	0.005	-0.022	0.076*	-0.033
4777 F	(0.001)	(0.024)	(0.020)	(0.098)	(0.098)	(0.039)	(0.023)	(0.034)	(0.040)	(0.053)
AWH Essential	0.001	-0.017	-0.016	0.085	0.035	-0.028	0.016	-0.016	0.031	-0.069
	(0.001)	(0.023)	(0.020)	(0.108)	(0.102)	(0.040)	(0.024)	(0.032)	(0.039)	(0.051)
AWH Comprehensive	-0.000	-0.004	0.005	-0.031	-0.068	0.011	0.004	0.034	0.110***	-0.079
	(0.001)	(0.023)	(0.022)	(0.094)	(0.104)	(0.043)	(0.029)	(0.027)	(0.038)	(0.051)
AWH Comprehensive Plus	0.000	0.013	-0.012	0.161*	0.019	-0.001	-0.021	0.025	0.069	-0.126**
	(0.001)	(0.026)	(0.020)	(0.082)	(0.096)	(0.049)	(0.029)	(0.029)	(0.042)	(0.053)
p-value on HS /= AWH-E	[0.751]	[0.752]	[0.816]	[0.345]	[0.396]	[0.146]	[0.619]	[0.870]	[0.189]	[0.491]
p-value on AWH-E /= AWH-C	[0.444]	[0.512]	[0.318]	[0.275]	[0.305]	[0.423]	[0.677]	[0.080]	[0.018]	[0.856]
p-value on AWH-C /= AWH-C+	[0.870]	[0.519]	[0.436]	[0.013]	[0.349]	[0.823]	[0.447]	[0.743]	[0.267]	[0.398]
Control Mean	0.001	0.064	0.047	0.044	0.014	0.520	0.857	0.856	0.675	0.456
Number of Observations	1220	1221	1195	1215	1216	1220	1220	1220	1220	1216

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Cross-Cutting Outcomes (part 2)

	=1 if Agrees "Girls need their parents' protection more than boys" (77)	=1 if Agrees "Boys Should Always defend themselves even if it means fighting" (78)	=1 if Agrees "Boys should be raised tough so they can overcome any difficulty" (79)	GEA Index of Gender Stereotypical Roles (80)	=1 if Agrees "Women should have the same chance to work outside of the home as men" (81)	=1 if Agrees "Girls and boys should share household tasks equally" (82)	"Women's	=1 if Agrees "A Man should have the final word on decisions in his home" (84)	=1 if Agrees " A Woman should obey her husband in all things" (85)
Panel A: 10-month impacts									
Her Spaces	0.044	0.030	0.017	0.080	0.000	0.054	-0.017	-0.053	0.000
	(0.030)	(0.038)	(0.028)	(0.089)	(0.029)	(0.036)	(0.032)	(0.042)	(0.026)
AWH Essential	-0.027	0.039	-0.022	0.150*	-0.046	0.065	0.030	-0.076**	-0.006
ATTITUDE OF THE STATE OF THE ST	(0.037)	(0.042)	(0.031)	(0.082)	(0.039)	(0.040)	(0.031)	(0.038)	(0.027)
AWH Comprehensive	0.048	0.003	-0.030	0.243**	0.088***	0.103***	0.039	-0.061	0.023
ATTITUDE A SECONDARIA DE	(0.039)	(0.049)	(0.032)	(0.107)	(0.028)	(0.034)	(0.035)	(0.041)	(0.033)
AWH Comprehensive Plus	0.033	-0.037	0.003	0.129	0.054*	0.055	-0.020	-0.039	-0.003
- 1- IIC / AWILE	(0.035)	(0.043)	(0.028)	(0.107)	(0.033)	(0.036)	(0.037)	(0.039)	(0.029)
p-value on HS /= AWH-E	[0.032]	[0.825]	[0.195]	[0.298]	[0.286]	[0.749]	[0.102]	[0.544]	[0.811]
p-value on AWH-E /= AWH-C p-value on AWH-C /= AWH-C+	[0.086]	[0.483]	[0.827]	[0.321]	[0.002]	[0.264]	[0.759]	[0.684]	[0.380]
Control Mean	[0.725] 0.813	[0.457] 0.751	[0.320] 0.829	[0.315] -0.002	[0.293] 0.847	[0.084] 0.745	[0.128] 0.813	[0.564] 0.724	[0.448] 0.862
Number of Observations	1279	1282	1282	-0.002 1272	1283	1284	1284	1282	1283
Panel B: 24- to 36-month impacts	1279	1282	1202	12/2	1283	1284	1204	1282	1283
Her Spaces	-0.009	0.016	0.021	0.011	-0.015	0.011	-0.032	0.051	-0.026
Her spaces	(0.036)	(0.035)	(0.032)	(0.107)	(0.041)	(0.035)	(0.040)	(0.031)	(0.035)
AWH Essential	-0.002	0.027	0.019	0.114	0.011	0.044	-0.077*	-0.022	0.027
111111 Essential	(0.038)	(0.035)	(0.035)	(0.117)	(0.036)	(0.033)	(0.046)	(0.042)	(0.031)
AWH Comprehensive	0.003	0.035	-0.013	0.018	0.007	0.015	-0.062*	0.011	-0.030
111111 Comprenentive	(0.041)	(0.035)	(0.037)	(0.096)	(0.033)	(0.034)	(0.037)	(0.038)	(0.026)
AWH Comprehensive Plus	0.029	-0.008	-0.047	0.241**	-0.089**	0.035	-0.134***	-0.022	-0.033
11//11 compressions to the	(0.044)	(0.035)	(0.037)	(0.099)	(0.045)	(0.028)	(0.034)	(0.041)	(0.029)
p-value on HS /= AWH-E	[0.859]	[0.757]	[0.949]	[0.370]	[0.489]	[0.478]	[0.348]	[0.131]	[0.117]
p-value on AWH-E /= AWH-C	[0.904]	[0.812]	[0.407]	[0.351]	[0.868]	[0.501]	[0.750]	[0.479]	[0.035]
p-value on AWH-C /= AWH-C+	[0.563]	[0.234]	[0.396]	[0.005]	[0.025]	[0.624]	[0.033]	[0.467]	[0.879]
Control Mean	0.755	0.727	0.773	0.050	0.878	0.748	0.838	0.622	0.859
Number of Observations	1220	1220	1220	1219	1219	1220	1220	1220	1219

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

			•	Cı	ross-Cutting O	utcomes (pa	ırt 3)			
	=1 if Agrees "A Boy should always have final say about decisions with girlfriend" (86)	=1 if Agrees "It is okay to tease a girl who acts like a boy" (87)	=1 if Agrees "It is okay to tease a boy who acts like a gir!" (88)	Index of Gender Consciousne ss (89)	=1 if Agrees "Our culture makes it harder for girls to achieve their goals than boys" (90)	=1 if Agrees "I'm very aware of people's reactions to my being a girl" (91)	=1 if Agrees "I think about how boys' and girls' roles differ from each other" (92)	=1 if Agrees "I think it is possible to change people's reaction to my gender" (93)	Index of gendered attitudes toward education (94)	=1 if Agrees "If a family can afford for one child to go to secondary school, it should be the boy only" (95)
Panel A: 10-month impacts	(00)	(07)	(00)	(0)	(50)	(>1)	(>2)	(50)	(21)	(53)
Her Spaces	0.046 (0.034)	-0.016 (0.048)	-0.031 (0.042)	-0.031 (0.121)	0.034 (0.043)	-0.033 (0.055)	-0.040 (0.057)	0.008 (0.046)	-0.069 (0.104)	0.056 (0.045)
AWH Essential	-0.014 (0.042)	-0.085* (0.050)	-0.074* (0.039)	-0.017 (0.106)	0.038 (0.039)	0.008 (0.048)	-0.041 (0.050)	-0.018 (0.047)	0.062 (0.089)	-0.038 (0.032)
AWH Comprehensive	-0.015 (0.037)	-0.048 (0.058)	-0.091** (0.042)	-0.031 (0.105)	0.019 (0.046)	-0.011 (0.049)	-0.040 (0.053)	-0.002 (0.050)	-0.083 (0.104)	0.041 (0.040)
AWH Comprehensive Plus	0.013 (0.036)	-0.022 (0.051)	0.019 (0.045)	0.103 (0.091)	-0.038 (0.038)	0.079** (0.039)	0.036 (0.041)	0.036 (0.048)	0.052 (0.106)	-0.025 (0.037)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.088]	[0.139] [0.509]	[0.211] [0.664]	[0.915] [0.903]	[0.946] [0.708]	[0.494] [0.726]	[0.985] [0.984]	[0.625] [0.782]	[0.128] [0.109]	[0.020] [0.029]
p-value on AWH-C /= AWH-C+ Control Mean	[0.393] 0.773	[0.646] 0.363	[0.014] 0.342	[0.189] 0.061	[0.273] 0.559	[0.056] 0.741	[0.084] 0.723	[0.522] 0.672	[0.216] -0.003	[0.100] 0.328
Number of Observations Panel B: 24- to 36-month impacts	1280	1277	1277	1266	1283	1273	1276	1276	1280	1284
Her Spaces	-0.010 (0.041)	0.015 (0.050)	-0.003 (0.047)	0.011 (0.094)	0.011 (0.055)	-0.002 (0.038)	0.020 (0.044)	-0.016 (0.046)	-0.043 (0.105)	0.001 (0.041)
AWH Essential	0.010 (0.040)	-0.019 (0.052)	-0.027 (0.049)	0.053 (0.078)	-0.057 (0.052)	0.040 (0.036)	0.081**	0.001 (0.042)	0.102 (0.100)	-0.005 (0.041)
AWH Comprehensive	0.034 (0.034)	0.029 (0.049)	0.034 (0.048)	0.138* (0.080)	0.019 (0.051)	0.053 (0.035)	0.079** (0.040)	0.012 (0.040)	0.019 (0.126)	-0.026 (0.043)
AWH Comprehensive Plus	-0.062 (0.048)	-0.083* (0.046)	-0.064 (0.045)	-0.021 (0.081)	-0.047 (0.051)	0.013 (0.031)	0.041 (0.037)	-0.039 (0.036)	0.165 (0.105)	-0.055 (0.039)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.655] [0.537]	[0.466] [0.246]	[0.563] [0.133]	[0.621] [0.249]	[0.190] [0.126]	[0.345] [0.766]	[0.190] [0.970]	[0.710] [0.794]	[0.107] [0.458]	[0.878] [0.644]
p-value on AWH-C /= AWH-C+ Control Mean	[0.042]	[0.002] 0.270	[0.005] 0.268	[0.050] 0.051	[0.186] 0.519	[0.310] 0.706	[0.358] 0.635	[0.154] 0.657	[0.213] 0.017	[0.488] 0.266
Number of Observations	1219	1219	1219	1212	1218	1218	1215	1218	1220	1220

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Cross-Cutting Outcomes (part 4)

	=1 if Agrees "Only boys should learn about science, technology, and math"	=1 if Agrees "Girls should be sent to school only if they are not needed at home"	=1 if Agrees "A girl's marriage can wait until she has completed senior secondary school"		Index of attitudes toward violence (standardi zed)	=1 if Agrees "It is acceptable for a man to hit his wife"	=1 if Agrees "A man using violence against his wife is a private matter that should not be discussed outside the couple"	=1 if Agrees "A woman should tolerate violence to keep her family together"
B 11 10 11 1	(96)	(97)	(98)	(99)	(100)	(101)	(102)	(103)
Panel A: 10-month impacts	2.22	0.046	2.225	0.040	0.005	0.004#	0.0=0.4	0.400444
Her Spaces	0.029	-0.046	-0.006	0.048	0.096	0.084*	-0.079*	-0.100***
	(0.033)	(0.044)	(0.026)	(0.051)	(0.088)	(0.045)	(0.043)	(0.037)
AWH Essential	-0.011	-0.050	-0.061**	-0.067*	0.078	0.027	-0.020	-0.085**
AWAY G	(0.035)	(0.039)	(0.026)	(0.040)	(0.088)	(0.044)	(0.045)	(0.039)
AWH Comprehensive	0.010	0.014	-0.055**	-0.023	0.006	0.068	-0.028	-0.044
ANTI C	(0.034)	(0.050)	(0.027)	(0.052)	(0.102)	(0.048)	(0.051)	(0.043)
AWH Comprehensive Plus	-0.021	-0.002	-0.022	-0.040	0.075	0.027	-0.040	-0.063
1 110 / 11111 5	(0.040)	(0.044)	(0.025)	(0.043)	(0.093)	(0.043)	(0.052)	(0.040)
p-value on HS /= AWH-E	[0.248]	[0.909]	[0.034]	[0.005]	[0.814]	[0.260]	[0.086]	[0.644]
p-value on AWH-E /= AWH-C	[0.593]	[0.151]	[0.820]	[0.275]	[0.475]	[0.448]	[0.850]	[0.338]
p-value on AWH-C /= AWH-C+	[0.467]	[0.763]	[0.214]	[0.698]	[0.493]	[0.426]	[0.806]	[0.666]
Control Mean	0.181	0.333	0.883	0.294	-0.010	0.502	0.545	0.684
Number of Observations	1284	1281	1284	1283	1282	1283	1282	1283
Panel B: 24- to 36-month impacts	0.022	0.000	0.005	0.020	0.025	0.105**	0.020	0.050
Her Spaces	0.023	0.008	0.005	0.020	-0.025	0.105**	-0.029	-0.050
AUULE 1	(0.032)	(0.039)	(0.023)	(0.034)	(0.103)	(0.048)	(0.050)	(0.040)
AWH Essential	-0.035	0.011	0.016	-0.065*	0.123	-0.017	-0.022	-0.080
ANTI C. 1 ·	(0.027)	(0.048)	(0.024)	(0.035)	(0.104)	(0.047)	(0.045)	(0.053)
AWH Comprehensive	-0.004	0.014	0.004	-0.003	0.119	-0.006	-0.059	-0.052
AUTH C 1 · DI	(0.036)	(0.044)	(0.029)	(0.041)	(0.097)	(0.052)	(0.044)	(0.043)
AWH Comprehensive Plus	-0.036	-0.040	-0.021	-0.080**	0.187*	-0.017	-0.093**	-0.075
n andre an HC /- AW/H E	(0.037)	(0.037)	(0.029)	(0.033)	(0.106)	(0.049)	(0.047)	(0.053)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.029]	[0.950]	[0.619]	[0.013]	[0.158]	[0.008]	[0.892]	[0.499]
1	[0.324]	[0.949]	[0.677]	[0.123]	[0.967]	[0.833]	[0.421]	[0.539]
p-value on AWH-C /= AWH-C+ Control Mean	[0.427]	[0.184]	[0.447]	[0.053]	[0.501]	[0.830]	[0.494]	[0.617]
Number of Observations	0.114 1220	0.222 1220	0.857 1220	0.172 1220	-0.013 1218	0.343 1218	0.542 1219	0.644 1219
INUMORI OF OUSEFVALIOUS	1220	1220	1220	1220	1218	1210	1219	1219

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

			<u> </u>	C	ross-Cutting (Outcomes (par	rt 5)			
	Index of Supportive Network (104)	=1 if Has a Trusted Female Friend (105)	=1 if Has a Trusted Male Friend (106)	=1 if Has a Trusted Adult (107)	Index of Service Knowledge (108)	=1 if Knows Where Services Could be Received for Substance Addiction (109)	=1 if Knows Where Services Could be Received for Mental Health (110)	=1 if Knows Where Services Could be Received for Pregnancy Prevention (111)	=1 if Knows Where Services Could be Received for Abortion/ Adoption (112)	=1 if Knows Where Services Could be Received for Violence (113)
Panel A: 10-month impacts	,				,					
Her Spaces	-0.124	-0.041	-0.015	-0.033						
	(0.106)	(0.050)	(0.021)	(0.051)						
AWH Essential	-0.036	0.012	-0.019	0.003						
	(0.090)	(0.043)	(0.021)	(0.038)						
AWH Comprehensive	-0.039	0.010	-0.020	0.004						
	(0.098)	(0.034)	(0.020)	(0.050)						
AWH Comprehensive Plus	0.033	0.028	0.006	-0.013						
	(0.094)	(0.042)	(0.022)	(0.043)						
p-value on HS /= AWH-E	[0.383]	[0.311]	[0.800]	[0.438]						
p-value on AWH-E /= AWH-C	[0.973]	[0.958]	[0.959]	[0.983]						
p-value on AWH-C /= AWH-C+	[0.516]	[0.657]	[0.139]	[0.747]						
Control Mean	0.080	0.662	0.049	0.601						
Number of Observations	1284	1284	1284	1284						
Panel B: 24- to 36-month impacts										
Her Spaces	-0.100	-0.013	-0.024*	-0.034	-0.004	0.002	-0.042*	0.059	0.006	0.079
	(0.098)	(0.049)	(0.013)	(0.051)	(0.103)	(0.022)	(0.025)	(0.044)	(0.036)	(0.049)
AWH Essential	0.062	0.013	0.010	0.026	0.149	0.002	0.029	0.112**	0.063	-0.005
	(0.109)	(0.047)	(0.016)	(0.053)	(0.118)	(0.023)	(0.030)	(0.051)	(0.041)	(0.042)
AWH Comprehensive	0.020	0.006	0.018	-0.024	-0.027	0.000	-0.001	0.041	0.003	-0.023
	(0.106)	(0.041)	(0.025)	(0.048)	(0.101)	(0.024)	(0.025)	(0.048)	(0.040)	(0.042)
AWH Comprehensive Plus	0.064	0.039	0.006	0.010	-0.066	0.011	-0.030	0.055	-0.041	-0.004
	(0.116)	(0.049)	(0.016)	(0.058)	(0.116)	(0.027)	(0.029)	(0.056)	(0.038)	(0.052)
p-value on HS /= AWH-E	[0.133]	[0.571]	[0.027]	[0.294]	[0.143]	[0.989]	[0.009]	[0.239]	[0.145]	[0.051]
p-value on AWH-E /= AWH-C	[0.716]	[0.845]	[0.790]	[0.376]	[0.090]	[0.931]	[0.256]	[0.159]	[0.156]	[0.626]
p-value on AWH-C /= AWH-C+	[0.732]	[0.422]	[0.677]	[0.571]	[0.704]	[0.682]	[0.257]	[0.815]	[0.259]	[0.690]
Control Mean	0.010	0.666	0.039	0.576	0.048	0.061	0.090	0.321	0.221	0.334
Number of Observations	1220	1220	1220	1220	1102	1104	1220	1103	1103	1218

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

			<u> </u>	Cross-Cut	ting Outcom	es (part 6)			
	=1 if Knows Where Services Could be Received for Injustice Under the Law (114)	Index of Service Accessibilit y (115)	=1 if Believes Adolescent Could Access Services for Substance Addiction (116)	Could Access		=1 if Believes Adolescent Could Access Services for Abortion/A doption (119)		=1 if Believes Adolescent Could Access Services for Injustice Under the Law (121)	=1 if Believes Adolescent Could Access Financial Services (122)
Panel A: 10-month impacts	(114)	(113)	(110)	(117)	(110)	(117)	(120)	(121)	(122)
Her Spaces									
AWH Essential	 	 	 	 	 	 	 	 	
AWH Comprehensive									
AWH Comprehensive Plus	 	 	 	 	 	 	 	 	
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C		 	 		 				
p-value on AWH-C /= AWH-C+									
Control Mean Number of Observations	 	 		 	 	 	 	 	
Panel B: 24- to 36-month impacts									
Her Spaces	-0.063 (0.044)	-0.040 (0.112)	-0.013 (0.021)	-0.047* (0.024)	0.064 (0.051)	0.007 (0.039)	0.074 (0.049)	-0.064 (0.039)	
AWH Essential	0.023 (0.044)	0.170 (0.116)	-0.008 (0.021)	0.024 (0.027)	0.133*** (0.050)	0.071* (0.042)	0.011 (0.040)	0.020 (0.041)	
AWH Comprehensive	-0.036 (0.043)	-0.031 (0.104)	-0.013 (0.025)	0.007 (0.025)	0.054 (0.046)	0.007 (0.033)	-0.036 (0.041)	-0.028 (0.040)	
AWH Comprehensive Plus	-0.085** (0.042)	-0.063 (0.118)	0.011 (0.027)	-0.020 (0.028)	0.082 (0.054)	-0.032 (0.035)	-0.056 (0.047)	-0.059 (0.040)	
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.031]	[0.058]	[0.763] [0.794]	[0.007]	[0.130] [0.074]	[0.141]	[0.140]	[0.035] [0.236]	
p-value on AWH-C /= AWH-C+	[0.202]	[0.764]	[0.372]	[0.304]	[0.585]	[0.199]	[0.663]	[0.416]	
Control Mean Number of Observations	0.240 1219	0.048 1101	0.061 1104	0.076 1220	0.258 1103	0.165 1103	0.298 1218	0.193 1218	

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Cross-Cutting Outcomes (part 7) =1 if **Knowledge:** =1 if =1 if Knowledge early **Knowledge:** Index (for Knowledge: =1 if pregnancy is index naming **AWH** girls girls reach =1 if **Knowledge:** bad for iron-rich curricula puberty first **Knowledge:** menarche health (in foods (0-4) (in (maybe also (in AWH menstruation allows AWH curr AWH curr HS)) curr only) frequency pregnancy only) only) (123)(124)(125)(126)(127)(128)Panel A: 10-month impacts 0.059 0.071 -0.0040.038 0.063 Her Spaces 0.115 (0.109)(0.049)(0.055)(0.035)(0.044)(0.085)0.144 0.017 -0.031 0.018 -0.034 AWH Essential 0.062 (0.096)(0.047)(0.049)(0.036)(0.043)(0.099)AWH Comprehensive 0.207** 0.030 0.156*** -0.021 -0.003 0.231** (0.098)(0.043)(0.051)(0.042)(0.047)(0.092)0.290*** AWH Comprehensive Plus 0.056 0.170*** -0.006 0.010 0.076 (0.105)(0.042)(0.047)(0.042)(0.047)(0.083)p-value on HS /= AWH-E [0.764][0.957] [0.265] [0.399] [0.329] [0.653] p-value on AWH-E /= AWH-C [0.487][0.464][0.002][0.799][0.653][0.014]p-value on AWH-C /= AWH-C+ [0.457][0.482][0.754][0.750][0.795][0.087]Control Mean 0.036 0.437 0.4880.715 0.659 2.158 Number of Observations 1210 1283 1279 1283 1283 1279 Panel B: 24- to 36-month impacts 0.051 0.037 -0.0010.001 -0.097** -0.043Her Spaces (0.106)(0.046)(0.030)(0.044)(0.040)(0.087)AWH Essential 0.073 0.074* -0.016 0.036 -0.056 -0.026 (0.107)(0.044)(0.028)(0.043)(0.041)(0.088)AWH Comprehensive -0.009 0.060 -0.003 0.008 -0.007-0.061(0.091)(0.028)(0.052)(0.042)(0.071)(0.043)AWH Comprehensive Plus 0.087 0.091** -0.045-0.051-0.053-0.006(0.100)(0.040)(0.037)(0.047)(0.041)(0.081)p-value on HS /= AWH-E [0.829][0.466][0.629] [0.375][0.345][0.862]p-value on AWH-E /= AWH-C [0.369] [0.767][0.667] [0.258][0.682][0.543] p-value on AWH-C /= AWH-C+ [0.268][0.494][0.262] [0.265] [0.283][0.467]Control Mean -0.012 0.589 0.845 0.7620.795 2.291

1208

1219

1219

1218

1219

Number of Observations

1219

Table B5. ITT regressions for girls' secondary outcomes, non-marginalized sites

Cross-Cutting Outcomes (part 8)

	=1 if Knowledge: number meals healthy for adolescents (129)	=1 if Knowledge: legal age of marriage for girls (in AWH curr only) (130)	=1 if Knowledge: legal age of marriage for boys (in AWH curr only) (131)	=1 if Knowledge: FGMC has risks (132)	=1 if Knowledge: where to get help for violence (133)	=1 if Knowledge - safe place where to keep money other than home (134)	=1 if Knowledge: negotiation skills (135)	=1 Knowledge: boys are not biologically smarter than girls (136)	=1 if Knowledge: gender roles can be changed (in AWH curr only) (137)
Panel A: 10-month impacts									
Her Spaces	-0.027	0.028	-0.022	0.116*	0.059	0.017	0.026	-0.025	0.026
	(0.018)	(0.034)	(0.019)	(0.060)	(0.055)	(0.040)	(0.045)	(0.033)	(0.052)
AWH Essential	0.005	0.048	-0.013	0.159***	-0.022	-0.009	0.007	0.033	0.036
	(0.023)	(0.032)	(0.021)	(0.051)	(0.055)	(0.045)	(0.045)	(0.041)	(0.051)
AWH Comprehensive	-0.017	0.042	0.005	0.197***	0.076	0.062*	-0.007	0.005	-0.056
	(0.019)	(0.030)	(0.020)	(0.056)	(0.052)	(0.035)	(0.031)	(0.046)	(0.055)
AWH Comprehensive Plus	-0.029	0.059	0.020	0.170***	0.046	0.047	0.031	0.061	0.006
	(0.029)	(0.038)	(0.030)	(0.055)	(0.064)	(0.034)	(0.035)	(0.037)	(0.048)
p-value on HS /= AWH-E	[0.129]	[0.561]	[0.663]	[0.449]	[0.161]	[0.575]	[0.692]	[0.129]	[0.845]
p-value on AWH-E /= AWH-C	[0.299]	[0.842]	[0.409]	[0.481]	[0.077]	[0.112]	[0.728]	[0.580]	[0.095]
p-value on AWH-C /= AWH-C+	[0.645]	[0.659]	[0.694]	[0.659]	[0.642]	[0.616]	[0.233]	[0.234]	[0.227]
Control Mean	0.913	0.164	0.055	0.314	0.324	0.833	0.199	0.537	0.497
Number of Observations	1284	1283	1284	1273	1273	1242	1284	1284	1282
Panel B: 24- to 36-month impacts									
Her Spaces	0.042**	0.047	-0.021		0.081*	0.026*	0.039	-0.032	-0.042
	(0.019)	(0.051)	(0.032)		(0.048)	(0.015)	(0.042)	(0.047)	(0.042)
AWH Essential	0.015	0.059	0.000		-0.002	0.006	0.047	0.069	-0.068*
	(0.023)	(0.055)	(0.036)		(0.042)	(0.019)	(0.051)	(0.053)	(0.037)
AWH Comprehensive	0.024	0.074*	-0.002		-0.021	-0.004	-0.008	0.018	-0.135***
	(0.020)	(0.042)	(0.035)		(0.042)	(0.019)	(0.041)	(0.045)	(0.051)
AWH Comprehensive Plus	0.029	0.118**	-0.027		-0.002	0.022	0.011	0.087*	-0.040
	(0.020)	(0.053)	(0.037)		(0.051)	(0.016)	(0.042)	(0.048)	(0.034)
p-value on HS /= AWH-E	[0.226]	[0.815]	[0.459]		[0.051]	[0.244]	[0.878]	[0.072]	[0.527]
p-value on AWH-E /= AWH-C	[0.706]	[0.743]	[0.935]		[0.631]	[0.619]	[0.279]	[0.351]	[0.175]
p-value on AWH-C /= AWH-C+	[0.797]	[0.349]	[0.455]		[0.699]	[0.149]	[0.661]	[0.206]	[0.062]
Control Mean	0.926	0.381	0.153		0.332	0.955	0.410	0.523	0.604
Number of Observations	1221	1219	1219		1217	1213	1220	1220	1220

					=1 if Agrees "It	U		
	GEA Index of Gender Stereo- typical Traits	=1 if Agrees "Girls should avoid eaising voice"	=1 if Agrees "Boys should be able to show feelings"	=1 if Agrees "Girls are expected to be humble"	is important for boys to show they are tough"	'Boys who behave like girls are weak'	=1 if Agrees 'Girls need protection more than boys'	=1 if Agrees 'Boys should defend themselves'
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: 10-month impacts								
Her Spaces	-0.261***	0.061*	0.026	0.055*	0.050**	0.049	0.072**	0.041
	(0.081)	(0.033)	(0.020)	(0.029)	(0.019)	(0.043)	(0.034)	(0.033)
AWH Essential	-0.251***	0.026	0.029	0.069**	0.025	0.047	0.072*	0.082***
	(0.074)	(0.034)	(0.025)	(0.027)	(0.021)	(0.042)	(0.037)	(0.030)
AWH Comprehensive	-0.060	0.009	0.049***	0.024	0.016	-0.013	0.030	0.061**
	(0.082)	(0.032)	(0.017)	(0.031)	(0.024)	(0.046)	(0.038)	(0.030)
AWH Comprehensive Plus	-0.102	0.035	0.008	0.018	-0.009	0.015	0.008	0.062**
	(0.080)	(0.033)	(0.020)	(0.029)	(0.023)	(0.044)	(0.037)	(0.028)
p-value on HS /= AWH-E	[0.882]	[0.295]	[0.923]	[0.581]	[0.185]	[0.963]	[0.994]	[0.233]
p-value on AWH-E /= AWH-C	[0.014]	[0.592]	[0.379]	[0.093]	[0.744]	[0.155]	[0.233]	[0.523]
p-value on AWH-C /= AWH-C+	[0.590]	[0.386]	[0.044]	[0.834]	[0.344]	[0.526]	[0.554]	[0.974]
Control Mean	-0.000	0.618	0.905	0.833	0.886	0.506	0.736	0.766
Number of Observations	1528	1534	1532	1531	1533	1533	1533	1533
Panel B: 24- to 36-month impacts								
Her Spaces	-0.154**	0.034	-0.021	0.022	-0.001	-0.016	0.072**	0.060**
	(0.074)	(0.041)	(0.019)	(0.019)	(0.021)	(0.041)	(0.033)	(0.024)
AWH Essential	-0.000	0.012	-0.013	-0.003	-0.022	-0.020	0.047	0.027
	(0.090)	(0.041)	(0.020)	(0.021)	(0.027)	(0.047)	(0.031)	(0.025)
AWH Comprehensive	0.131*	-0.094**	-0.007	0.002	0.001	-0.106***	-0.016	0.028
	(0.074)	(0.046)	(0.018)	(0.023)	(0.028)	(0.039)	(0.034)	(0.028)
AWH Comprehensive Plus	0.037	-0.035	-0.004	-0.023	-0.023	-0.015	0.003	0.046*
	(0.079)	(0.042)	(0.019)	(0.025)	(0.025)	(0.046)	(0.029)	(0.028)
p-value on HS /= AWH-E	[0.108]	[0.614]	[0.725]	[0.256]	[0.423]	[0.943]	[0.509]	[0.220]
p-value on AWH-E /= AWH-C	[0.156]	[0.020]	[0.789]	[0.838]	[0.460]	[0.073]	[0.090]	[0.963]
p-value on AWH-C /= AWH-C+	[0.271]	[0.208]	[0.918]	[0.375]	[0.459]	[0.049]	[0.590]	[0.578]
Control Mean	0.000	0.521	0.940	0.892	0.907	0.429	0.740	0.856
Number of Observations	1441	1446	1447	1446	1447	1444	1446	1447

	GEA Index of Gender Stereo- typical Roles (9)	=1 if Agrees 'Women should have same chance to work outside home as men' (10)	=1 if Agrees 'Girls and boys should share household tasks equally' (11)	=1 if Agrees 'Women's most important role is home' (12)	0	=1 if Agrees 'Woman should obey her husband' (14)	=1 if Agrees 'Boy should have final say with girlfriend' (15)
Panel A: 10-month impacts							
Her Spaces	-0.263***	-0.021	-0.036	0.046	0.032	0.043*	0.049*
	(0.070)	(0.032)	(0.034)	(0.032)	(0.028)	(0.024)	(0.026)
AWH Essential	-0.109	-0.008	0.003	0.028	0.059**	0.008	0.007
	(0.070)	(0.027)	(0.039)	(0.035)	(0.030)	(0.024)	(0.032)
AWH Comprehensive	0.013	0.040	0.097***	-0.015	-0.000	0.045*	0.009
	(0.070)	(0.030)	(0.034)	(0.035)	(0.031)	(0.023)	(0.030)
AWH Comprehensive Plus	0.103	-0.026	0.049	-0.050	-0.019	-0.031	-0.053*
	(0.088)	(0.040)	(0.038)	(0.036)	(0.034)	(0.030)	(0.027)
p-value on HS /= AWH-E	[0.028]	[0.647]	[0.330]	[0.565]	[0.350]	[0.142]	[0.168]
p-value on AWH-E /= AWH-C	[0.082]	[0.087]	[0.014]	[0.176]	[0.052]	[0.099]	[0.952]
p-value on AWH-C /= AWH-C+	[0.302]	[0.107]	[0.206]	[0.286]	[0.583]	[0.005]	[0.039]
Control Mean	-0.000	0.836	0.767	0.840	0.774	0.883	0.802
Number of Observations	1528	1533	1534	1534	1534	1533	1530
Panel B: 24- to 36-month impacts							
Her Spaces	0.034	0.013	-0.023	-0.031	-0.007	0.047*	-0.007
	(0.085)	(0.034)	(0.040)	(0.033)	(0.040)	(0.027)	(0.026)
AWH Essential	0.166*	-0.014	0.102***	-0.044	-0.025	-0.030	-0.010
	(0.086)	(0.032)	(0.036)	(0.037)	(0.038)	(0.029)	(0.028)
AWH Comprehensive	0.164**	0.020	0.045	-0.083**	-0.056	0.033	-0.009
	(0.082)	(0.034)	(0.037)	(0.035)	(0.038)	(0.025)	(0.027)
AWH Comprehensive Plus	0.207**	0.014	0.110***	-0.016	-0.041	0.009	-0.034
	(0.081)	(0.037)	(0.036)	(0.028)	(0.040)	(0.031)	(0.027)
p-value on HS /= AWH-E	[0.123]	[0.332]	[0.001]	[0.760]	[0.644]	[0.006]	[0.931]
p-value on AWH-E /= AWH-C	[0.988]	[0.232]	[0.072]	[0.383]	[0.361]	[0.010]	[0.987]
p-value on AWH-C /= AWH-C+	[0.552]	[0.875]	[0.047]	[0.061]	[0.681]	[0.374]	[0.416]
Control Mean	-0.000	0.813	0.728	0.803	0.783	0.865	0.860
Number of Observations	1444	1445	1446	1446	1445	1446	1446

			=1 if Agrees			=1 if Agrees	
	=1 if Agrees 'It	=1 if Agrees 'It	'Our culture	=1 if Agrees		'Possible to	
	•	is okay to tease		'I'm aware of	=1 if Agrees 'I	change people's	
	a girl who acts	a boy who acts	for girls to	reactions to my	think about	reaction to my	Peer Violence
	like boy'	like a girl'	achieve goals'	gender'	gender roles'	gender'	Scale
	(16)	(17)	(18)	(19)	(20)	(21)	(22)
Panel A: 10-month impacts							
Her Spaces	0.051	0.080*	0.027	0.051*	0.034	-0.019	-0.026
	(0.043)	(0.041)	(0.038)	(0.027)	(0.037)	(0.030)	(0.082)
AWH Essential	0.011	0.029	0.039	0.039	-0.010	-0.045	-0.044
	(0.043)	(0.036)	(0.040)	(0.031)	(0.038)	(0.038)	(0.089)
AWH Comprehensive	0.047	0.033	-0.004	0.050*	-0.013	0.043	0.053
	(0.042)	(0.038)	(0.045)	(0.027)	(0.032)	(0.029)	(0.087)
AWH Comprehensive Plus	0.040	0.009	-0.059	0.013	-0.029	-0.046	0.030
	(0.042)	(0.035)	(0.046)	(0.029)	(0.033)	(0.035)	(0.082)
p-value on HS /= AWH-E	[0.380]	[0.211]	[0.767]	[0.687]	[0.284]	[0.498]	[0.838]
p-value on AWH-E /= AWH-C	[0.440]	[0.911]	[0.338]	[0.710]	[0.943]	[0.014]	[0.264]
p-value on AWH-C /= AWH-C+	[0.868]	[0.504]	[0.282]	[0.184]	[0.627]	[0.012]	[0.785]
Control Mean	0.335	0.340	0.601	0.819	0.773	0.725	5.321
Number of Observations	1532	1532	1534	1532	1532	1532	1532
Panel B: 24- to 36-month impacts							
Her Spaces	-0.028	-0.051	0.012	-0.027	0.065*	0.020	0.028
	(0.037)	(0.039)	(0.042)	(0.030)	(0.037)	(0.042)	(0.059)
AWH Essential	-0.042	-0.032	-0.069*	-0.002	0.048	0.027	0.138**
	(0.034)	(0.040)	(0.040)	(0.034)	(0.033)	(0.045)	(0.054)
AWH Comprehensive	-0.047	-0.057	-0.022	-0.000	0.079**	0.033	0.029
	(0.033)	(0.036)	(0.033)	(0.029)	(0.035)	(0.041)	(0.056)
AWH Comprehensive Plus	-0.055	-0.086***	0.026	-0.007	0.043	0.003	-0.038
	(0.035)	(0.031)	(0.034)	(0.032)	(0.041)	(0.042)	(0.054)
p-value on HS /= AWH-E	[0.712]	[0.679]	[0.087]	[0.439]	[0.597]	[0.873]	[0.086]
p-value on AWH-E /= AWH-C	[0.885]	[0.561]	[0.225]	[0.959]	[0.295]	[0.885]	[0.052]
p-value on AWH-C /= AWH-C+	[0.801]	[0.373]	[0.160]	[0.794]	[0.326]	[0.462]	[0.246]
Control Mean	0.292	0.284	0.489	0.816	0.696	0.508	5.625
Number of Observations	1446	1446	1446	1446	1444	1446	1446

				=1 if		=1 if	
		=1 if	=1 if	Knowledge:	=1 if	Knowledge:	=1 if
	=1 if No Peer	Knowledge:	Knowledge:	Menarche	Knowledge:	Boys not	Knowledge:
	Violence Perpe-tration	girls reach puberty first	menstruation frequency	allows	Negotiation Skills	biologically smarter	Gender roles can be changed
	(23)	(24)	(25)	pregnancy (26)	(27)	(28)	(29)
Panel A: 10-month impacts	(23)	(24)	(23)	(20)	(27)	(20)	(2))
Her Spaces	0.016	-0.053	0.006	0.065**	0.044	-0.103***	0.002
	(0.032)	(0.037)	(0.042)	(0.031)	(0.042)	(0.039)	(0.045)
AWH Essential	-0.020	-0.012	0.037	0.064*	0.040	-0.103**	-0.071*
	(0.030)	(0.037)	(0.049)	(0.035)	(0.039)	(0.040)	(0.041)
AWH Comprehensive	-0.011	0.014	0.075	0.026	-0.001	-0.038	-0.010
	(0.033)	(0.032)	(0.046)	(0.033)	(0.041)	(0.044)	(0.041)
AWH Comprehensive Plus	-0.002	-0.006	0.015	0.066*	0.043	-0.005	-0.078
	(0.037)	(0.035)	(0.046)	(0.035)	(0.041)	(0.044)	(0.053)
p-value on HS /= AWH-E	[0.275]	[0.286]	[0.515]	[0.981]	[0.932]	[0.985]	[0.112]
p-value on AWH-E /= AWH-C	[0.764]	[0.415]	[0.456]	[0.315]	[0.347]	[0.134]	[0.128]
p-value on AWH-C /= AWH-C+	[0.821]	[0.503]	[0.200]	[0.285]	[0.356]	[0.478]	[0.171]
Control Mean	0.742	0.700	0.313	0.674	0.360	0.504	0.518
Number of Observations	1532	1534	1529	1534	1535	1537	1536
Panel B: 24- to 36-month impacts							
Her Spaces	-0.022	0.005	0.047	0.009	0.041	-0.072**	0.034
	(0.024)	(0.037)	(0.039)	(0.031)	(0.034)	(0.034)	(0.036)
AWH Essential	0.013	0.000	0.013	-0.027	-0.002	0.024	-0.011
	(0.027)	(0.028)	(0.034)	(0.031)	(0.033)	(0.042)	(0.040)
AWH Comprehensive	-0.030	-0.022	0.052	0.007	0.058	-0.031	0.020
	(0.027)	(0.031)	(0.041)	(0.030)	(0.036)	(0.032)	(0.040)
AWH Comprehensive Plus	-0.030	-0.011	0.080**	-0.016	0.009	0.060	0.111***
1 HG / ANH E	(0.026)	(0.038)	(0.039)	(0.032)	(0.033)	(0.042)	(0.037)
p-value on HS /= AWH-E	[0.219]	[0.896]	[0.370]	[0.246]	[0.231]	[0.053]	[0.238]
p-value on AWH-E /= AWH-C	[0.155]	[0.476]	[0.325]	[0.257]	[0.110]	[0.238]	[0.468]
p-value on AWH-C /= AWH-C+	[0.989]	[0.785]	[0.508]	[0.466]	[0.178]	[0.052]	[0.024]
Control Mean	0.872	0.797	0.500	0.866	0.595	0.469	0.450
Number of Observations	1445	1444	1446	1443	1446	1446	1444

Notes for Tables B6-B10: These tables present intention to treat (ITT) results from regressions as specified in equation (1), on the full sample of adolescent boys surveyed in the first follow-up survey round (Panel A) and the second follow-up survey round (Panel B), for the sample indicated in the table title (all sites, South Gondar sites, East Hararghe sites, sites in marginalized communities, and sites in non-marginalized communities). For each outcome measure listed in the column titles, the coefficients (standard errors) for each of the four treatment group indicators are displayed. Outcomes are described in more detail in Appendix D. Regressions are OLS, and include basic and rich controls sets. The basic controls include adolescent age at the time of study recruitment as well as indicators for households with multiple eligible adolescents, sampling block, and survey month; regressions in Panel B additionally include indicators for survey year and randomly assigned survey wave. The rich set of controls for both panels include household size, a household asset index, and indicators for the household head being literate, the household head being female, and the household ever receiving PSNP benefits (by baseline survey). Missing values for controls are set to the mean value for the sample. Regressions are weighted to maintain initial population proportions, and standard errors are clustered by community (kebele).

			=1 if Agrees					
	GEA Index of	0	"Boys should	_	=1 if Agrees "It	_	=1 if Agrees	=1 if Agrees
	Gender	"Girls should	be able to	"Girls are	is important for	'Boys who	'Girls need	'Boys should
	Stereo-typical	_	show	expected to	boys to show	behave like	protection more	defend
	Traits	voice"	feelings"	be humble"	they are tough"	girls are weak'	than boys'	themselves'
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: 10-month impacts								
Her Spaces	-0.296***	0.092**	0.056*	0.070	0.075**	0.051	0.025	0.097**
	(0.107)	(0.044)	(0.031)	(0.046)	(0.032)	(0.056)	(0.047)	(0.044)
AWH Essential	-0.209**	0.018	0.058	0.119***	0.037	-0.030	0.047	0.061
	(0.103)	(0.050)	(0.041)	(0.040)	(0.034)	(0.061)	(0.044)	(0.045)
AWH Comprehensive	0.062	-0.009	0.082***	0.040	0.046	-0.136**	-0.020	0.055
	(0.127)	(0.050)	(0.026)	(0.056)	(0.036)	(0.062)	(0.050)	(0.054)
AWH Comprehensive Plus	-0.115	0.068	0.022	0.062	-0.004	0.005	-0.075	0.056
	(0.123)	(0.053)	(0.029)	(0.045)	(0.043)	(0.067)	(0.053)	(0.047)
p-value on HS /= AWH-E	[0.330]	[0.102]	[0.966]	[0.183]	[0.256]	[0.129]	[0.635]	[0.379]
p-value on AWH-E /= AWH-C	[0.020]	[0.598]	[0.508]	[0.082]	[0.804]	[0.063]	[0.159]	[0.908]
p-value on AWH-C /= AWH-C+	[0.175]	[0.133]	[0.022]	[0.685]	[0.257]	[0.025]	[0.320]	[0.973]
Control Mean	0.071	0.574	0.875	0.767	0.851	0.568	0.735	0.753
Number of Observations	778	780	779	779	779	780	779	779
Panel B: 24- to 36-month impacts								
Her Spaces	-0.102	0.005	0.011	0.037	-0.055	-0.020	0.151***	0.085***
	(0.112)	(0.060)	(0.030)	(0.038)	(0.035)	(0.067)	(0.050)	(0.032)
AWH Essential	0.115	-0.019	-0.013	-0.007	-0.085*	-0.043	0.030	0.051
	(0.113)	(0.063)	(0.035)	(0.039)	(0.045)	(0.071)	(0.044)	(0.031)
AWH Comprehensive	0.280***	-0.112	0.000	0.021	-0.052	-0.168***	-0.070	0.031
	(0.095)	(0.069)	(0.030)	(0.044)	(0.044)	(0.060)	(0.046)	(0.039)
AWH Comprehensive Plus	0.170	-0.047	-0.018	-0.042	-0.103**	0.017	0.001	0.020
	(0.135)	(0.071)	(0.040)	(0.053)	(0.047)	(0.075)	(0.044)	(0.030)
p-value on HS /= AWH-E	[0.072]	[0.701]	[0.538]	[0.285]	[0.520]	[0.756]	[0.044]	[0.365]
p-value on AWH-E /= AWH-C	[0.101]	[0.168]	[0.732]	[0.547]	[0.518]	[0.066]	[0.064]	[0.642]
p-value on AWH-C /= AWH-C+	[0.390]	[0.385]	[0.709]	[0.267]	[0.359]	[0.010]	[0.170]	[0.788]
Control Mean	0.078	0.549	0.915	0.807	0.920	0.444	0.664	0.853
Number of Observations	710	712	712	712	712	712	712	712

	GEA Index of Gender Stereo- typical Roles (9)	=1 if Agrees 'Women should have same chance to work outside home as men' (10)	=1 if Agrees 'Girls and boys should share household tasks equally' (11)	=1 if Agrees 'Women's most important role is home' (12)	=1 if Agrees 'Man should have final word' (13)	=1 if Agrees 'Woman should obey her husband' (14)	=1 if Agrees 'Boy should have final say with girlfriend' (15)
Panel A: 10-month impacts							
Her Spaces	-0.315*** (0.105)	-0.034 (0.054)	-0.085* (0.046)	0.046 (0.041)	0.055 (0.045)	0.027 (0.034)	0.020 (0.041)
AWH Essential	-0.142 (0.104)	0.032 (0.040)	0.023 (0.048)	0.049 (0.041)	0.098** (0.047)	0.000 (0.036)	0.001 (0.049)
AWH Comprehensive	-0.127 (0.104)	0.008 (0.049)	0.041) 0.061 (0.041)	0.020 (0.041)	0.025 (0.048)	0.046 (0.033)	-0.004 (0.054)
AWH Comprehensive Plus	0.104) 0.031 (0.120)	0.045 (0.052)	0.034 (0.038)	0.039 (0.040)	-0.071 (0.054)	-0.031 (0.040)	-0.045 (0.039)
p-value on HS /= AWH-E	[0.076]	[0.127]	[0.061]	[0.926]	[0.321]	[0.482]	[0.696]
p-value on AWH-E /= AWH-C p-value on AWH-C /= AWH-C+	[0.883] [0.193]	[0.482] [0.421]	[0.428] [0.536]	[0.410] [0.585]	[0.130] [0.071]	[0.204] [0.059]	[0.934] [0.407]
Control Mean Number of Observations	0.119 779	0.796 780	0.841 780	0.821 780	0.678 780	0.871 780	0.842 780
Panel B: 24- to 36-month impacts	119	700	760	780	780	780	780
Her Spaces	-0.029 (0.111)	0.016 (0.044)	-0.079* (0.044)	-0.023 (0.051)	0.016 (0.057)	0.109*** (0.039)	-0.037 (0.043)
AWH Essential	0.238** (0.118)	0.012 (0.039)	0.045 (0.043)	-0.059 (0.055)	-0.044 (0.057)	-0.017 (0.046)	-0.049 (0.039)
AWH Comprehensive	0.237* (0.131)	0.054 (0.041)	0.034 (0.039)	-0.134** (0.055)	-0.069 (0.056)	0.076* (0.039)	-0.037 (0.040)
AWH Comprehensive Plus	0.261* (0.134)	0.055 (0.046)	0.070 (0.045)	-0.033 (0.045)	-0.123* (0.070)	0.033 (0.057)	-0.037 (0.045)
p-value on HS /= AWH-E	[0.006]	[0.923]	[0.002]	[0.593]	[0.282]	[0.003]	[0.769]
p-value on AWH-E /= AWH-C p-value on AWH-C /= AWH-C+	[0.998] [0.854]	[0.289] [0.985]	[0.740] [0.330]	[0.272] [0.087]	[0.616] [0.396]	[0.021] [0.429]	[0.772] [1.000]
Control Mean Number of Observations	0.076 711	0.805 711	0.864 712	0.776 712	0.691 712	0.788 712	0.861 712

	'It is okay to tease a girl	=1 if Agrees 'It is okay to tease a boy who acts like	=1 if Agrees 'Our culture makes it harder for girls to	=1 if Agrees 'I'm aware of reactions to my	U	=1 if Agrees 'Possible to change people's reaction to my		=1 if No Peer Violence
	boy' (16)	a girl' (17)	achieve goals' (18)	gender' (19)	gender roles' (20)	gender' (21)	Scale (22)	Perpe-tration (23)
Panel A: 10-month impacts						, ,		
Her Spaces	0.084 (0.056)	0.087 (0.062)	0.019 (0.054)	0.099** (0.046)	0.084 (0.058)	-0.001 (0.045)	-0.102 (0.127)	0.015 (0.034)
AWH Essential	0.039 (0.045)	0.069 (0.043)	0.042 (0.052)	0.090* (0.053)	-0.000 (0.060)	0.062 (0.050)	0.190* (0.113)	0.052 (0.038)
AWH Comprehensive	0.086 (0.055)	0.068 (0.054)	-0.058 (0.058)	0.083* (0.045)	-0.032 (0.052)	0.097** (0.043)	0.142 (0.151)	0.059 (0.036)
AWH Comprehensive Plus	0.141*** (0.046)	0.026 (0.050)	0.037 (0.054)	0.069 (0.048)	0.004 (0.055)	0.029 (0.050)	0.036 (0.123)	0.011 (0.046)
p-value on HS /= AWH-E p-value on AWH-E /= AWH-C	[0.430] [0.396]	[0.733] [0.967]	[0.698] [0.094]	[0.874] [0.891]	[0.198] [0.570]	[0.194] [0.424]	[0.010] [0.696]	[0.304] [0.859]
p-value on AWH-C /= AWH-C+ Control Mean	[0.318] 0.291	[0.412]	[0.117]	[0.767] 0.729	[0.511] 0.710	[0.166]	[0.436] 5.204	[0.300] 0.777
Number of Observations Panel B: 24- to 36-month impacts	779	780	780	779	779	779	779	780
Her Spaces	-0.006 (0.056)	-0.090 (0.064)	0.127** (0.059)	-0.028 (0.051)	0.033 (0.057)	0.059 (0.068)	-0.072 (0.083)	-0.031 (0.034)
AWH Essential	-0.066 (0.054)	-0.089 (0.067)	-0.065 (0.059)	-0.051 (0.061)	-0.039 (0.047)	0.027 (0.063)	0.160**	-0.001 (0.032)
AWH Comprehensive	-0.062 (0.056)	-0.096 (0.064)	-0.038 (0.047)	0.002 (0.050)	0.026 (0.056)	0.065 (0.066)	0.071 (0.076)	-0.053 (0.042)
AWH Comprehensive Plus	-0.043 (0.060)	-0.101* (0.052)	0.001 (0.054)	-0.057 (0.062)	0.034 (0.062)	0.074 (0.065)	-0.054 (0.086)	-0.023 (0.043)
p-value on HS /= AWH-E	[0.254]	[0.987]	[0.006]	[0.695]	[0.124]	[0.615]	[0.004]	[0.389]
p-value on AWH-E /= AWH-C	[0.945]	[0.924]	[0.615]	[0.333]	[0.132]	[0.551]	[0.208]	[0.221]
p-value on AWH-C /= AWH-C+	[0.738]	[0.917]	[0.481]	[0.259]	[0.895]	[0.888]	[0.177]	[0.552]
Control Mean Number of Observations	0.388 712	0.415 712	0.399 712	0.684 712	0.692 712	0.521 712	5.620 712	0.862 711

	=1 if Knowledge: girls reach puberty first (24)	=1 if Knowledge: menstruation frequency (25)	=1 if Knowledge: Menarche allows pregnancy (26)	=1 if Knowledge: Negotiation Skills (27)	=1 if Knowledge: Boys not biologically smarter (28)	=1 if Knowledge: Gender roles can be changed (29)
Panel A: 10-month impacts						
Her Spaces	-0.153*** (0.052)	-0.022 (0.072)	0.030 (0.043)	0.084* (0.047)	-0.081** (0.038)	0.060 (0.057)
AWH Essential	-0.046	0.099	0.039	0.013	-0.033	-0.100*
	(0.054)	(0.070)	(0.042)	(0.045)	(0.048)	(0.057)
AWH Comprehensive	0.007	0.044	-0.019	-0.015	0.064	-0.071
	(0.048)	(0.080)	(0.045)	(0.048)	(0.045)	(0.050)
AWH Comprehensive Plus	-0.080	0.021	-0.006	0.007	0.055	-0.141**
	(0.060)	(0.068)	(0.052)	(0.051)	(0.051)	(0.069)
p-value on HS /= AWH-E	[0.071]	[0.061]	[0.851]	[0.189]	[0.318]	[0.014]
p-value on AWH-E /= AWH-C	[0.330]	[0.460]	[0.206]	[0.598]	[0.064]	[0.608]
p-value on AWH-C /= AWH-C+	[0.116]	[0.743]	[0.819]	[0.712]	[0.872]	[0.300]
Control Mean	0.655	0.407	0.801	0.277	0.450	0.559
Number of Observations	781	779	781	781	781	780
Panel B: 24- to 36-month impacts						
Her Spaces	-0.114**	0.099*	0.036	-0.007	-0.092**	0.030
	(0.051)	(0.058)	(0.040)	(0.056)	(0.041)	(0.050)
AWH Essential	-0.035	0.055	-0.027	-0.048	0.034	-0.021
	(0.040)	(0.041)	(0.038)	(0.048)	(0.063)	(0.051)
AWH Comprehensive	-0.051	0.106**	0.010	0.045	-0.055	0.036
	(0.049)	(0.051)	(0.035)	(0.059)	(0.038)	(0.049)
AWH Comprehensive Plus	-0.083	0.096*	-0.032	-0.044	0.116**	0.108*
	(0.066)	(0.057)	(0.039)	(0.050)	(0.055)	(0.055)
p-value on HS /= AWH-E	[0.138]	[0.400]	[0.145]	[0.444]	[0.087]	[0.292]
p-value on AWH-E /= AWH-C	[0.754]	[0.274]	[0.342]	[0.121]	[0.183]	[0.244]
p-value on AWH-C /= AWH-C+	[0.671]	[0.863]	[0.274]	[0.155]	[0.005]	[0.138]
Control Mean	0.770	0.594	0.869	0.454	0.464	0.399
Number of Observations	712	712	712	712	712	712

	GEA Index of Gender Stereo-typical Traits (1)	"Girls should	=1 if Agrees "Boys should be able to show feelings" (3)	=1 if Agrees "Girls are expected to be humble" (4)	=1 if Agrees "It is important for boys to show they are tough" (5)	=1 if Agrees 'Boys who behave like girls are weak' (6)	=1 if Agrees 'Girls need protection more than boys' (7)	=1 if Agrees 'Boys should defend themselves' (8)
Panel A: 10-month impacts								
Her Spaces	-0.188 (0.117)	0.036 (0.050)	0.001 (0.024)	0.030 (0.033)	0.029 (0.021)	0.020 (0.060)	0.108** (0.051)	-0.018 (0.043)
AWH Essential	-0.253**	0.033	0.001	0.010	0.013	0.099*	0.086	0.101**
AWII Essentat	(0.102)	(0.048)	(0.028)	(0.034)	(0.023)	(0.052)	(0.055)	(0.040)
AWH Comprehensive	-0.191*	0.048)	0.020	0.006	0.003	0.032)	0.081	0.068**
AWII Comprehensive	(0.101)	(0.039)	(0.022)	(0.030)	(0.028)	(0.050)	(0.056)	(0.032)
AWH Comprehensive Plus	-0.071	0.009	-0.001	-0.027	-0.011	0.013	0.082	0.064*
111/11 Comprehensive 1 tus	(0.102)	(0.040)	(0.027)	(0.036)	(0.021)	(0.055)	(0.050)	(0.035)
p-value on HS /= AWH-E	[0.542]	[0.951]	[0.994]	[0.528]	[0.481]	[0.195]	[0.659]	[0.019]
p-value on AWH-E /= AWH-C	[0.504]	[0.902]	[0.510]	[0.870]	[0.766]	[0.910]	[0.927]	[0.417]
p-value on AWH-C /= AWH-C+	[0.148]	[0.334]	[0.480]	[0.248]	[0.615]	[0.128]	[0.983]	[0.903]
Control Mean	-0.062	0.656	0.931	0.889	0.916	0.454	0.736	0.778
Number of Observations	750	754	753	752	754	753	754	754
Panel B: 24- to 36-month impacts								
Her Spaces	-0.221**	0.076	-0.048*	0.005	0.035	-0.001	0.024	0.045
	(0.092)	(0.051)	(0.024)	(0.016)	(0.024)	(0.047)	(0.032)	(0.039)
AWH Essential	-0.121	0.031	-0.016	0.006	0.040	0.001	0.055	0.017
	(0.119)	(0.056)	(0.021)	(0.018)	(0.028)	(0.056)	(0.039)	(0.037)
AWH Comprehensive	-0.018	-0.073	-0.010	-0.020	0.049	-0.042	0.042	0.030
	(0.113)	(0.064)	(0.021)	(0.016)	(0.030)	(0.046)	(0.045)	(0.040)
AWH Comprehensive Plus	-0.115	-0.013	0.006	-0.012	0.047*	-0.023	0.013	0.067
	(0.102)	(0.053)	(0.015)	(0.020)	(0.025)	(0.052)	(0.039)	(0.044)
p-value on HS /= AWH-E	[0.397]	[0.412]	[0.259]	[0.956]	[0.854]	[0.969]	[0.343]	[0.455]
p-value on AWH-E /= AWH-C	[0.431]	[0.119]	[0.846]	[0.220]	[0.793]	[0.455]	[0.764]	[0.732]
p-value on AWH-C /= AWH-C+	[0.419]	[0.362]	[0.426]	[0.723]	[0.945]	[0.728]	[0.536]	[0.420]
Control Mean	-0.067	0.498	0.962	0.964	0.896	0.416	0.806	0.859
Number of Observations	731	734	735	734	735	732	734	735

	GEA Index of Gender Stereo- typical Roles (9)	=1 if Agrees 'Women should have same chance to work outside home as men' (10)	=1 if Agrees 'Girls and boys should share household tasks equally' (11)	=1 if Agrees 'Women's most important role is home' (12)	=1 if Agrees 'Man should have final word' (13)	=1 if Agrees 'Woman should obey her husband' (14)	=1 if Agrees 'Boy should have final say with girlfriend' (15)
Panel A: 10-month impacts							
Her Spaces	-0.197**	-0.016	0.008	0.039	-0.008	0.059*	0.075**
	(0.089)	(0.033)	(0.045)	(0.049)	(0.035)	(0.031)	(0.029)
AWH Essential	-0.067	-0.060*	-0.029	0.001	0.007	0.010	0.009
	(0.095)	(0.034)	(0.056)	(0.054)	(0.034)	(0.034)	(0.038)
AWH Comprehensive	0.107	0.064*	0.123**	-0.036	-0.014	0.063*	0.032
	(0.083)	(0.037)	(0.052)	(0.053)	(0.041)	(0.033)	(0.031)
AWH Comprehensive Plus	0.174	-0.095*	0.061	-0.129**	0.013	-0.026	-0.061*
	(0.133)	(0.055)	(0.066)	(0.052)	(0.042)	(0.042)	(0.037)
p-value on HS /= AWH-E	[0.204]	[0.186]	[0.444]	[0.432]	[0.657]	[0.094]	[0.058]
p-value on AWH-E /= AWH-C	[0.079]	[0.003]	[0.006]	[0.451]	[0.562]	[0.077]	[0.536]
p-value on AWH-C /= AWH-C+	[0.611]	[0.009]	[0.327]	[0.057]	[0.543]	[0.012]	[0.011]
Control Mean	-0.103	0.871	0.703	0.855	0.857	0.893	0.767
Number of Observations	749	753	754	754	754	753	750
Panel B: 24- to 36-month impacts							
Her Spaces	0.085	-0.001	0.018	-0.020	-0.046	-0.019	0.015
	(0.111)	(0.049)	(0.064)	(0.039)	(0.047)	(0.033)	(0.031)
AWH Essential	0.121	-0.028	0.154***	-0.042	-0.001	-0.041	0.026
	(0.117)	(0.048)	(0.054)	(0.048)	(0.048)	(0.029)	(0.039)
AWH Comprehensive	0.108	-0.013	0.054	-0.034	-0.047	-0.012	0.013
	(0.101)	(0.052)	(0.059)	(0.047)	(0.052)	(0.027)	(0.039)
AWH Comprehensive Plus	0.190**	-0.024	0.152***	-0.008	0.005	-0.010	-0.034
	(0.086)	(0.052)	(0.051)	(0.034)	(0.042)	(0.025)	(0.034)
p-value on HS /= AWH-E	[0.777]	[0.505]	[0.030]	[0.653]	[0.299]	[0.548]	[0.808]
p-value on AWH-E /= AWH-C	[0.913]	[0.722]	[0.059]	[0.886]	[0.330]	[0.272]	[0.793]
p-value on AWH-C /= AWH-C+	[0.303]	[0.811]	[0.055]	[0.562]	[0.243]	[0.933]	[0.289]
Control Mean	-0.065	0.820	0.611	0.827	0.862	0.931	0.860
Number of Observations	733	734	734	734	733	734	734

	0	O	=1 if Agrees 'Our culture makes it harder for girls to achieve goals' (18)	'I'm aware of	~	=1 if Agrees 'Possible to change people's reaction to my gender' (21)	Peer Violence Scale (22)	=1 if No Peer Violence Perpe- tration (23)
Panel A: 10-month impacts								
Her Spaces	0.009 (0.059)	0.071 (0.055)	0.021 (0.056)	0.005 (0.029)	-0.012 (0.038)	-0.052 (0.035)	0.021 (0.097)	0.005 (0.057)
AWH Essential	-0.027 (0.070)	-0.005	0.018 (0.061)	-0.013 (0.031)	-0.013 (0.042)	-0.160***	-0.290**	-0.092**
AWH Comprehensive	-0.001 (0.059)	(0.059) -0.010 (0.057)	(0.061) 0.049 (0.061)	0.040 (0.027)	0.042) 0.008 (0.040)	(0.050) -0.001 (0.040)	(0.117) 0.022 (0.096)	(0.045) -0.059 (0.050)
AWH Comprehensive Plus	-0.053 (0.062)	-0.007 (0.054)	-0.149** (0.066)	-0.036 (0.031)	-0.056 (0.042)	-0.125*** (0.044)	0.011 (0.105)	-0.020 (0.055)
p-value on HS /= AWH-E	[0.612]	[0.209]	[0.943]	[0.531]	[0.975]	[0.025]	[0.004]	[0.080]
p-value on AWH-E /= AWH-C	[0.734]	[0.935]	[0.566]	[0.065]	[0.640]	[0.004]	[0.003]	[0.451]
p-value on AWH-C /= AWH-C+	[0.427]	[0.960]	[0.003]	[0.009]	[0.153]	[0.018]	[0.896]	[0.475]
Control Mean	0.373	0.342	0.628	0.898	0.828	0.761	5.422	0.712
Number of Observations	753	752	754	753	753	753	753	752
Panel B: 24- to 36-month impacts								
Her Spaces	-0.039 (0.043)	-0.021 (0.044)	-0.072 (0.047)	-0.018 (0.027)	0.079* (0.045)	0.004 (0.048)	0.103 (0.075)	-0.026 (0.034)
AWH Essential	-0.030	0.011	-0.074	0.034	0.124***	0.027	0.105	0.021
	(0.041)	(0.042)	(0.052)	(0.026)	(0.040)	(0.061)	(0.084)	(0.042)
AWH Comprehensive	-0.037	-0.025	-0.003	-0.008	0.123***	0.009	-0.007	-0.006
	(0.032)	(0.030)	(0.044)	(0.024)	(0.041)	(0.048)	(0.080)	(0.035)
AWH Comprehensive Plus	-0.076**	-0.068**	0.053	0.039	0.044	-0.025	-0.042	-0.040
	(0.031)	(0.031)	(0.041)	(0.024)	(0.054)	(0.055)	(0.071)	(0.034)
p-value on HS /= AWH-E	[0.855]	[0.572]	[0.959]	[0.046]	[0.259]	[0.693]	[0.975]	[0.230]
p-value on AWH-E /= AWH-C	[0.860]	[0.419]	[0.184]	[0.073]	[0.983]	[0.740]	[0.185]	[0.495]
p-value on AWH-C /= AWH-C+	[0.213]	[0.174]	[0.204]	[0.018]	[0.132]	[0.507]	[0.629]	[0.286]
Control Mean	0.210	0.171	0.566	0.930	0.699	0.497	5.629	0.881
Number of Observations	734	734	734	734	732	734	734	734

			=1 if		=1 if	
	=1 if	=1 if	Knowledge:	=1 if	Knowledge:	=1 if
	Knowledge:	Knowledge:	Menarche	Knowledge:	Boys not	Knowledge:
	girls reach	menstruation	allows	Negotiation	biologically	Gender roles
	puberty first	frequency	pregnancy	Skills	smarter	can be changed
	(24)	(25)	(26)	(27)	(28)	(29)
Panel A: 10-month impacts						
Her Spaces	0.040	0.032	0.083**	0.016	-0.119*	-0.045
	(0.047)	(0.047)	(0.041)	(0.064)	(0.063)	(0.064)
AWH Essential	0.019	-0.026	0.078	0.069	-0.164**	-0.037
	(0.049)	(0.066)	(0.052)	(0.063)	(0.065)	(0.057)
AWH Comprehensive	0.015	0.092*	0.085**	0.036	-0.126*	0.051
	(0.042)	(0.048)	(0.041)	(0.064)	(0.068)	(0.063)
AWH Comprehensive Plus	0.058	0.007	0.128***	0.083	-0.055	-0.013
	(0.042)	(0.061)	(0.044)	(0.059)	(0.069)	(0.072)
p-value on HS /= AWH-E	[0.629]	[0.367]	[0.935]	[0.422]	[0.480]	[0.895]
p-value on AWH-E /= AWH-C	[0.907]	[0.070]	[0.911]	[0.641]	[0.589]	[0.124]
p-value on AWH-C /= AWH-C+	[0.117]	[0.151]	[0.348]	[0.497]	[0.346]	[0.347]
Control Mean	0.740	0.231	0.563	0.432	0.551	0.483
Number of Observations	753	750	753	754	756	756
Panel B: 24- to 36-month impacts						
Her Spaces	0.101**	-0.006	-0.015	0.080**	-0.035	0.036
	(0.046)	(0.052)	(0.045)	(0.038)	(0.050)	(0.052)
AWH Essential	0.027	-0.019	-0.030	0.036	0.012	0.002
	(0.038)	(0.054)	(0.047)	(0.045)	(0.056)	(0.061)
AWH Comprehensive	-0.006	0.005	0.002	0.076*	-0.002	0.008
	(0.034)	(0.058)	(0.049)	(0.042)	(0.049)	(0.065)
AWH Comprehensive Plus	0.033	0.072	-0.017	0.057	0.030	0.123**
	(0.042)	(0.051)	(0.047)	(0.042)	(0.058)	(0.049)
p-value on HS /= AWH-E	[0.150]	[0.823]	[0.736]	[0.347]	[0.456]	[0.590]
p-value on AWH-E /= AWH-C	[0.392]	[0.720]	[0.505]	[0.427]	[0.824]	[0.933]
p-value on AWH-C /= AWH-C+	[0.344]	[0.248]	[0.697]	[0.669]	[0.621]	[0.070]
Control Mean	0.820	0.420	0.864	0.716	0.473	0.494
Number of Observations	732	734	731	734	734	732

	GEA Index					=1 if Agrees	=1 if Agrees	
	of Gender	=1 if Agrees	=1 if Agrees	=1 if Agrees	=1 if Agrees "It	'Boys who	'Girls need	=1 if Agrees
	Stereo-	"Girls should	"Boys should	"Girls are	is important for	behave like	protection	'Boys should
	typical	_	be able to show	expected to	boys to show	girls are	more than	defend
	Traits	voice"	feelings"	be humble"	they are tough"	weak'	boys'	themselves'
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: 10-month impacts								
Her Spaces	-0.378***	0.028	0.044	0.167***	0.075***	0.139**	0.030	0.120***
	(0.120)	(0.037)	(0.036)	(0.043)	(0.027)	(0.053)	(0.042)	(0.041)
AWH Essential	-0.153	0.095*	0.038	0.114***	-0.004	-0.037	0.034	0.007
	(0.113)	(0.052)	(0.036)	(0.041)	(0.031)	(0.059)	(0.034)	(0.042)
AWH Comprehensive	-0.171	0.059	0.041	0.077	0.031	-0.004	0.070	0.043
	(0.140)	(0.045)	(0.031)	(0.054)	(0.042)	(0.076)	(0.057)	(0.049)
AWH Comprehensive Plus	0.052	0.026	0.042	0.042	-0.035	-0.053	-0.015	0.040
	(0.117)	(0.064)	(0.030)	(0.049)	(0.030)	(0.058)	(0.047)	(0.037)
p-value on HS /= AWH-E	[0.044]	[0.138]	[0.878]	[0.133]	[0.004]	[0.005]	[0.915]	[0.008]
p-value on AWH-E /= AWH-C	[0.875]	[0.479]	[0.921]	[0.463]	[0.379]	[0.654]	[0.494]	[0.457]
p-value on AWH-C /= AWH-C+	[0.068]	[0.602]	[0.967]	[0.545]	[0.124]	[0.507]	[0.180]	[0.941]
Control Mean	0.050	0.619	0.897	0.775	0.887	0.482	0.721	0.784
Number of Observations	559	562	562	560	562	561	562	562
Panel B: 24- to 36-month impacts								
Her Spaces	-0.322***	0.051	-0.009	0.064**	0.011	0.061	0.027	0.130***
	(0.090)	(0.065)	(0.034)	(0.031)	(0.027)	(0.054)	(0.044)	(0.038)
AWH Essential	0.066	-0.120*	0.028	0.029	-0.007	-0.062	0.027	0.033
	(0.126)	(0.066)	(0.037)	(0.034)	(0.034)	(0.059)	(0.037)	(0.042)
AWH Comprehensive	0.070	-0.127*	0.012	0.039	0.018	-0.120**	-0.077	0.058
	(0.102)	(0.074)	(0.029)	(0.040)	(0.046)	(0.049)	(0.058)	(0.043)
AWH Comprehensive Plus	-0.076	-0.032	0.040	-0.000	0.024	0.032	-0.035	0.112***
	(0.142)	(0.056)	(0.029)	(0.043)	(0.035)	(0.063)	(0.051)	(0.036)
p-value on HS /= AWH-E	[0.002]	[0.018]	[0.403]	[0.322]	[0.660]	[0.031]	[0.996]	[0.018]
p-value on AWH-E /= AWH-C	[0.976]	[0.919]	[0.713]	[0.821]	[0.648]	[0.308]	[0.086]	[0.597]
p-value on AWH-C /= AWH-C+	[0.324]	[0.140]	[0.444]	[0.440]	[0.907]	[0.010]	[0.535]	[0.155]
Control Mean	-0.011	0.555	0.916	0.888	0.895	0.413	0.798	0.837
Number of Observations	530	535	535	535	535	532	535	535

	GEA Index of Gender Stereo- typical Roles (9)	=1 if Agrees 'Women should have same chance to work outside home as men' (10)	=1 if Agrees 'Girls and boys should share household tasks equally' (11)	=1 if Agrees 'Women's most important role is home' (12)	=1 if Agrees 'Man should have final word' (13)		=1 if Agrees 'Boy should have final say with girlfriend' (15)
Panel A: 10-month impacts							
Her Spaces	-0.183	0.080	-0.026	0.037	0.001	0.078**	0.037
	(0.116)	(0.048)	(0.054)	(0.053)	(0.034)	(0.038)	(0.032)
AWH Essential	0.039	0.032	0.110	0.006	-0.013	0.046	0.002
	(0.104)	(0.050)	(0.068)	(0.048)	(0.041)	(0.037)	(0.048)
AWH Comprehensive	0.126	0.082	0.160**	-0.023	-0.099**	0.066	-0.005
	(0.147)	(0.054)	(0.069)	(0.055)	(0.043)	(0.050)	(0.051)
AWH Comprehensive Plus	0.228*	0.077	0.031	-0.157**	-0.098**	0.027	-0.032
	(0.130)	(0.060)	(0.052)	(0.060)	(0.047)	(0.048)	(0.041)
p-value on HS /= AWH-E	[0.032]	[0.247]	[0.048]	[0.543]	[0.736]	[0.427]	[0.371]
p-value on AWH-E /= AWH-C	[0.465]	[0.234]	[0.460]	[0.497]	[0.086]	[0.673]	[0.885]
p-value on AWH-C /= AWH-C+	[0.472]	[0.926]	[0.041]	[0.021]	[0.976]	[0.427]	[0.545]
Control Mean	-0.059	0.794	0.724	0.859	0.818	0.859	0.790
Number of Observations	560	562	562	562	562	562	562
Panel B: 24- to 36-month impacts							
Her Spaces	0.044	0.036	-0.023	-0.022	-0.034	0.037	0.061**
	(0.122)	(0.051)	(0.040)	(0.042)	(0.052)	(0.031)	(0.029)
AWH Essential	0.292**	0.054	0.098**	-0.041	-0.100***	-0.078*	-0.058
	(0.112)	(0.056)	(0.041)	(0.056)	(0.036)	(0.042)	(0.047)
AWH Comprehensive	0.229*	0.073	0.136***	-0.061	-0.021	0.010	-0.038
	(0.128)	(0.058)	(0.039)	(0.046)	(0.037)	(0.033)	(0.034)
AWH Comprehensive Plus	0.203	0.031	0.065	-0.035	-0.079*	-0.010	-0.014
	(0.126)	(0.056)	(0.046)	(0.052)	(0.046)	(0.033)	(0.032)
p-value on HS /= AWH-E	[0.041]	[0.695]	[0.004]	[0.750]	[0.279]	[0.006]	[0.009]
p-value on AWH-E /= AWH-C	[0.636]	[0.747]	[0.377]	[0.743]	[0.071]	[0.040]	[0.688]
p-value on AWH-C /= AWH-C+	[0.847]	[0.474]	[0.119]	[0.663]	[0.290]	[0.525]	[0.427]
Control Mean	-0.137	0.759	0.699	0.827	0.818	0.889	0.884
Number of Observations	534	534	534	534	534	534	534

	=1 if Agrees 'It is okay to tease a girl who acts like boy' (16)	O	=1 if Agrees 'Our culture makes it harder for girls to achieve goals' (18)	=1 if Agrees 'I'm aware of reactions to my gender' (19)		=1 if Agrees 'Possible to change people's reaction to my gender' (21)	Peer Violence Scale (22)	=1 if No Peer Violence Perpe-tration (23)
Panel A: 10-month impacts								
Her Spaces	0.051	0.081*	0.006	0.063	0.188***	-0.031	-0.129	0.009
	(0.051)	(0.045)	(0.044)	(0.044)	(0.052)	(0.048)	(0.128)	(0.048)
AWH Essential	-0.025	0.057	-0.031	0.109**	0.080	-0.017	-0.217	-0.092*
	(0.068)	(0.051)	(0.071)	(0.051)	(0.063)	(0.077)	(0.141)	(0.050)
AWH Comprehensive	0.100	0.029	-0.023	0.047	0.141***	0.054	0.016	-0.035
	(0.063)	(0.063)	(0.067)	(0.057)	(0.053)	(0.052)	(0.121)	(0.058)
AWH Comprehensive Plus	0.061	0.014	-0.091	0.042	-0.041	-0.082	0.028	-0.002
	(0.066)	(0.053)	(0.072)	(0.057)	(0.052)	(0.055)	(0.160)	(0.052)
p-value on HS /= AWH-E	[0.228]	[0.593]	[0.566]	[0.359]	[0.071]	[0.850]	[0.592]	[0.087]
p-value on AWH-E /= AWH-C	[0.063]	[0.616]	[0.919]	[0.292]	[0.287]	[0.309]	[0.092]	[0.348]
p-value on AWH-C /= AWH-C+	[0.556]	[0.807]	[0.425]	[0.944]	[0.002]	[0.009]	[0.934]	[0.591]
Control Mean	0.333	0.318	0.617	0.805	0.734	0.757	5.369	0.776
Number of Observations	561	561	562	561	561	561	561	561
Panel B: 24- to 36-month impacts								
Her Spaces	-0.019	-0.106	-0.054	0.003	0.094*	0.037	-0.040	-0.046
	(0.059)	(0.064)	(0.053)	(0.039)	(0.050)	(0.067)	(0.059)	(0.042)
AWH Essential	0.006	-0.021	-0.085	-0.035	0.016	-0.101*	0.059	-0.046
	(0.052)	(0.050)	(0.052)	(0.044)	(0.041)	(0.054)	(0.111)	(0.052)
AWH Comprehensive	0.012	-0.063	0.012	-0.060	0.084*	0.017	-0.096	-0.063
	(0.072)	(0.062)	(0.049)	(0.047)	(0.044)	(0.050)	(0.100)	(0.046)
AWH Comprehensive Plus	-0.002	-0.095*	-0.021	-0.055	0.018	-0.048	-0.237**	-0.078
	(0.058)	(0.052)	(0.064)	(0.050)	(0.053)	(0.041)	(0.091)	(0.053)
p-value on HS /= AWH-E	[0.694]	[0.220]	[0.578]	[0.383]	[0.116]	[0.066]	[0.313]	[0.994]
p-value on AWH-E /= AWH-C	[0.940]	[0.538]	[0.071]	[0.650]	[0.110]	[0.044]	[0.212]	[0.775]
p-value on AWH-C /= AWH-C+	[0.860]	[0.609]	[0.607]	[0.930]	[0.210]	[0.201]	[0.217]	[0.820]
Control Mean	0.293	0.304	0.516	0.845	0.704	0.559	5.648	0.864
Number of Observations	534	534	534	534	534	534	534	534

			=1 if		=1 if	
	=1 if	=1 if	Knowledge:	=1 if	Knowledge:	=1 if
	Knowledge:	Knowledge:	Menarche	Knowledge:	Boys not	Knowledge:
	girls reach	menstruation	allows	Negotiation	biologically	Gender roles
	puberty first	frequency	pregnancy	Skills	smarter	can be changed
	(24)	(25)	(26)	(27)	(28)	(29)
Panel A: 10-month impacts						
Her Spaces	-0.063	0.070	0.141***	0.069	-0.109*	-0.131*
	(0.057)	(0.068)	(0.043)	(0.050)	(0.059)	(0.070)
AWH Essential	-0.069	0.101	0.120***	0.044	0.020	-0.046
	(0.059)	(0.071)	(0.030)	(0.053)	(0.055)	(0.039)
AWH Comprehensive	0.025	0.128*	-0.021	0.038	-0.111*	-0.129**
	(0.047)	(0.070)	(0.037)	(0.057)	(0.065)	(0.055)
AWH Comprehensive Plus	0.026	0.080	0.075*	0.062	0.085	-0.109
	(0.056)	(0.065)	(0.039)	(0.047)	(0.070)	(0.068)
p-value on HS /= AWH-E	[0.944]	[0.704]	[0.614]	[0.669]	[0.052]	[0.161]
p-value on AWH-E /= AWH-C	[0.172]	[0.756]	[0.000]	[0.929]	[0.039]	[0.066]
p-value on AWH-C /= AWH-C+	[0.987]	[0.533]	[0.017]	[0.696]	[0.014]	[0.773]
Control Mean	0.703	0.238	0.609	0.354	0.473	0.528
Number of Observations	563	562	563	563	565	564
Panel B: 24- to 36-month impacts						
Her Spaces	0.013	0.099	0.116**	0.052	-0.104*	0.018
	(0.070)	(0.059)	(0.051)	(0.044)	(0.061)	(0.056)
AWH Essential	0.059	0.051	0.049	0.053	0.042	-0.027
	(0.056)	(0.052)	(0.038)	(0.049)	(0.053)	(0.056)
AWH Comprehensive	0.038	0.092	0.079*	0.079	-0.036	-0.053
	(0.057)	(0.069)	(0.041)	(0.051)	(0.049)	(0.063)
AWH Comprehensive Plus	0.137***	0.070	-0.005	0.005	0.014	0.064
	(0.051)	(0.054)	(0.041)	(0.058)	(0.069)	(0.064)
p-value on HS /= AWH-E	[0.563]	[0.413]	[0.246]	[0.987]	[0.036]	[0.374]
p-value on AWH-E /= AWH-C	[0.754]	[0.553]	[0.471]	[0.652]	[0.184]	[0.677]
p-value on AWH-C /= AWH-C+	[0.084]	[0.738]	[0.058]	[0.238]	[0.477]	[0.077]
Control Mean	0.766	0.465	0.819	0.621	0.498	0.499
Number of Observations	534	534	533	534	534	533

						=1 if Agrees	=1 if Agrees	
	GEA Index of Gender	=1 if Agrees "Girls should	=1 if Agrees "Boys should		=1 if Agrees "It is important for	'Boys who behave like	'Girls need protection	=1 if Agrees 'Boys should
	Stereo-	avoid eaising	be able to show	expected to	boys to show	girls are	more than	defend
	typical Traits	voice"	feelings"	be humble"	they are tough"	weak'	boys'	themselves'
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: 10-month impacts								
Her Spaces	-0.195*	0.075	0.008	-0.013	0.037	0.003	0.100**	-0.005
	(0.103)	(0.047)	(0.024)	(0.034)	(0.026)	(0.057)	(0.049)	(0.039)
AWH Essential	-0.290***	-0.006	0.017	0.035	0.035	0.087	0.093*	0.116***
	(0.096)	(0.045)	(0.032)	(0.034)	(0.026)	(0.054)	(0.054)	(0.036)
AWH Comprehensive	-0.000	-0.013	0.045**	-0.015	0.007	-0.026	0.019	0.065*
	(0.099)	(0.042)	(0.020)	(0.036)	(0.028)	(0.058)	(0.049)	(0.037)
AWH Comprehensive Plus	-0.144	0.045	-0.011	-0.006	-0.009	0.042	0.020	0.066*
	(0.101)	(0.041)	(0.024)	(0.035)	(0.031)	(0.059)	(0.052)	(0.039)
p-value on HS /= AWH-E	[0.285]	[0.064]	[0.794]	[0.128]	[0.911]	[0.086]	[0.891]	[0.003]
p-value on AWH-E /= AWH-C	[0.002]	[0.862]	[0.381]	[0.130]	[0.342]	[0.022]	[0.098]	[0.184]
p-value on AWH-C /= AWH-C+	[0.132]	[0.081]	[0.038]	[0.806]	[0.619]	[0.211]	[0.975]	[0.970]
Control Mean	-0.038	0.617	0.911	0.876	0.885	0.525	0.747	0.753
Number of Observations	969	972	970	971	971	972	971	971
Panel B: 24- to 36-month impacts								
Her Spaces	-0.106	0.020	-0.033	0.004	-0.013	-0.032	0.122***	0.024
	(0.099)	(0.048)	(0.023)	(0.024)	(0.030)	(0.055)	(0.040)	(0.029)
AWH Essential	-0.022	0.057	-0.035	-0.018	-0.034	-0.010	0.074*	0.027
	(0.112)	(0.051)	(0.024)	(0.026)	(0.037)	(0.064)	(0.041)	(0.027)
AWH Comprehensive	0.146	-0.076	-0.012	-0.010	-0.018	-0.100*	0.035	0.026
	(0.102)	(0.058)	(0.018)	(0.025)	(0.036)	(0.053)	(0.039)	(0.031)
AWH Comprehensive Plus	0.068	-0.031	-0.024	-0.029	-0.054	-0.023	0.045	0.011
	(0.093)	(0.057)	(0.027)	(0.031)	(0.034)	(0.060)	(0.036)	(0.034)
p-value on HS /= AWH-E	[0.473]	[0.458]	[0.925]	[0.433]	[0.544]	[0.732]	[0.295]	[0.928]
p-value on AWH-E /= AWH-C	[0.154]	[0.021]	[0.365]	[0.784]	[0.679]	[0.160]	[0.386]	[0.968]
p-value on AWH-C /= AWH-C+	[0.466]	[0.475]	[0.674]	[0.566]	[0.340]	[0.200]	[0.793]	[0.722]
Control Mean	0.008	0.497	0.958	0.894	0.916	0.440	0.699	0.871
Number of Observations	911	911	912	911	912	912	911	912

	GEA Index of Gender Stereo- typical Roles (9)	=1 if Agrees 'Women should have same chance to work outside home as men' (10)	=1 if Agrees 'Girls and boys should share household tasks equally' (11)	=1 if Agrees 'Women's most important role is home' (12)	=1 if Agrees 'Man should have final word' (13)	=1 if Agrees 'Woman should obey her husband' (14)	=1 if Agrees 'Boy should have final say with girlfriend' (15)
Panel A: 10-month impacts							
Her Spaces	-0.315***	-0.079**	-0.050	0.055	0.058	0.018	0.057
	(0.088)	(0.037)	(0.039)	(0.038)	(0.038)	(0.028)	(0.036)
AWH Essential	-0.172*	-0.027	-0.056	0.040	0.101**	-0.015	0.009
	(0.093)	(0.033)	(0.043)	(0.046)	(0.039)	(0.031)	(0.042)
AWH Comprehensive	-0.030	0.015	0.065*	-0.012	0.045	0.032	0.010
	(0.080)	(0.034)	(0.038)	(0.044)	(0.039)	(0.024)	(0.038)
AWH Comprehensive Plus	0.071	-0.073	0.039	-0.006	-0.001	-0.067*	-0.073**
	(0.112)	(0.048)	(0.045)	(0.038)	(0.043)	(0.037)	(0.036)
p-value on HS /= AWH-E	[0.104]	[0.129]	[0.891]	[0.694]	[0.233]	[0.260]	[0.247]
p-value on AWH-E /= AWH-C	[0.087]	[0.232]	[0.010]	[0.231]	[0.132]	[0.075]	[0.991]
p-value on AWH-C /= AWH-C+	[0.337]	[0.080]	[0.591]	[0.886]	[0.280]	[0.003]	[0.031]
Control Mean	0.045	0.869	0.798	0.825	0.742	0.901	0.811
Number of Observations	968	971	972	972	972	971	968
Panel B: 24- to 36-month impacts							
Her Spaces	-0.021	-0.025	-0.032	-0.018	0.005	0.039	-0.046
	(0.114)	(0.043)	(0.060)	(0.042)	(0.055)	(0.037)	(0.035)
AWH Essential	0.062	-0.039	0.078	-0.031	0.032	-0.013	0.012
	(0.118)	(0.039)	(0.052)	(0.047)	(0.054)	(0.038)	(0.034)
AWH Comprehensive	0.120	-0.024	0.004	-0.087*	-0.064	0.039	-0.000
-	(0.105)	(0.040)	(0.049)	(0.045)	(0.055)	(0.030)	(0.038)
AWH Comprehensive Plus	0.191*	-0.016	0.131**	0.007	-0.028	0.020	-0.052
•	(0.107)	(0.045)	(0.050)	(0.032)	(0.058)	(0.042)	(0.037)
p-value on HS /= AWH-E	[0.431]	[0.690]	[0.036]	[808.0]	[0.523]	[0.161]	[0.112]
p-value on AWH-E /= AWH-C	[0.553]	[0.630]	[0.067]	[0.304]	[0.026]	[0.086]	[0.745]
p-value on AWH-C /= AWH-C+	[0.409]	[0.856]	[0.002]	[0.031]	[0.461]	[0.610]	[0.207]
Control Mean	0.100	0.852	0.749	0.785	0.758	0.847	0.843
Number of Observations	910	911	912	912	911	912	912

			=1 if Agrees			=1 if Agrees		
	0	=1 if Agrees 'It	'Our culture	=1 if Agrees		'Possible to		
	-	is okay to tease		'I'm aware of	_	change people's		=1 if No Peer
	a girl who acts	a boy who acts	for girls to	reactions to my	think about	reaction to my	Peer Violence	
	like boy'	like a girl'	achieve goals'	gender'	gender roles'	gender'	Scale	tration
	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)
Panel A: 10-month impacts								
Her Spaces	0.047	0.073	0.040	0.043	-0.060	-0.011	0.042	0.023
	(0.062)	(0.060)	(0.054)	(0.031)	(0.042)	(0.039)	(0.107)	(0.041)
AWH Essential	0.024	-0.000	0.078	-0.006	-0.062	-0.059	0.025	0.018
	(0.055)	(0.048)	(0.048)	(0.035)	(0.045)	(0.046)	(0.113)	(0.036)
AWH Comprehensive	0.019	0.029	0.003	0.045	-0.092**	0.042	0.067	0.004
	(0.054)	(0.050)	(0.058)	(0.028)	(0.037)	(0.039)	(0.116)	(0.042)
AWH Comprehensive Plus	0.032	0.004	-0.045	-0.015	-0.040	-0.039	0.014	-0.000
	(0.055)	(0.047)	(0.057)	(0.033)	(0.039)	(0.044)	(0.096)	(0.047)
p-value on HS /= AWH-E	[0.709]	[0.176]	[0.454]	[0.138]	[0.966]	[0.302]	[0.875]	[0.887]
p-value on AWH-E /= AWH-C	[0.931]	[0.529]	[0.168]	[0.104]	[0.498]	[0.022]	[0.707]	[0.698]
p-value on AWH-C /= AWH-C+	[0.811]	[0.583]	[0.440]	[0.041]	[0.217]	[0.068]	[0.608]	[0.922]
Control Mean	0.337	0.357	0.588	0.830	0.802	0.701	5.285	0.717
Number of Observations	971	971	972	971	971	971	971	971
Panel B: 24- to 36-month impacts								
Her Spaces	-0.002	-0.001	0.047	-0.030	0.047	0.045	0.070	-0.008
	(0.045)	(0.048)	(0.057)	(0.038)	(0.050)	(0.052)	(0.083)	(0.029)
AWH Essential	-0.047	-0.028	-0.062	0.008	0.065	0.095	0.208***	0.048
	(0.047)	(0.055)	(0.053)	(0.046)	(0.046)	(0.059)	(0.061)	(0.029)
AWH Comprehensive	-0.067	-0.062	-0.025	0.029	0.068	0.047	0.091	-0.004
	(0.041)	(0.044)	(0.045)	(0.032)	(0.048)	(0.054)	(0.071)	(0.032)
AWH Comprehensive Plus	-0.077*	-0.081**	0.062	0.021	0.044	0.049	0.046	-0.009
	(0.044)	(0.039)	(0.041)	(0.038)	(0.055)	(0.060)	(0.064)	(0.030)
p-value on HS /= AWH-E	[0.288]	[0.642]	[0.091]	[0.379]	[0.639]	[0.316]	[0.080]	[0.033]
p-value on AWH-E /= AWH-C	[0.591]	[0.525]	[0.494]	[0.592]	[0.940]	[0.354]	[0.072]	[0.071]
p-value on AWH-C /= AWH-C+	[0.769]	[0.598]	[0.042]	[0.788]	[0.612]	[0.974]	[0.501]	[0.856]
Control Mean	0.292	0.269	0.468	0.794	0.689	0.471	5.608	0.878
Number of Observations	912	912	912	912	910	912	912	911

			=1 if		=1 if	
	=1 if	=1 if	Knowledge:	=1 if	Knowledge:	=1 if
	Knowledge:	Knowledge:	Menarche	Knowledge:	Boys not	Knowledge:
	girls reach	menstruation	allows	Negotiation	biologically	Gender roles
	puberty first	frequency	pregnancy	Skills	smarter	can be changed
	(24)	(25)	(26)	(27)	(28)	(29)
Panel A: 10-month impacts						
Her Spaces	-0.042	-0.039	0.024	0.027	-0.109**	0.072
	(0.050)	(0.052)	(0.042)	(0.059)	(0.050)	(0.057)
AWH Essential	0.018	-0.008	0.030	0.032	-0.170***	-0.076
	(0.047)	(0.064)	(0.051)	(0.053)	(0.052)	(0.058)
AWH Comprehensive	0.012	0.039	0.039	-0.027	-0.016	0.053
	(0.044)	(0.059)	(0.044)	(0.056)	(0.052)	(0.054)
AWH Comprehensive Plus	-0.015	-0.021	0.054	0.025	-0.049	-0.058
	(0.048)	(0.058)	(0.048)	(0.057)	(0.053)	(0.072)
p-value on HS /= AWH-E	[0.174]	[0.609]	[0.900]	[0.921]	[0.194]	[0.011]
p-value on AWH-E /= AWH-C	[0.862]	[0.458]	[0.869]	[0.306]	[0.003]	[0.013]
p-value on AWH-C /= AWH-C+	[0.441]	[0.294]	[0.767]	[0.418]	[0.540]	[0.089]
Control Mean	0.698	0.369	0.722	0.364	0.527	0.511
Number of Observations	971	967	971	972	972	972
Panel B: 24- to 36-month impacts						
Her Spaces	-0.012	0.008	-0.045	0.031	-0.053	0.041
	(0.040)	(0.049)	(0.035)	(0.048)	(0.042)	(0.048)
AWH Essential	-0.046	-0.014	-0.068*	-0.036	0.020	0.017
	(0.031)	(0.046)	(0.041)	(0.044)	(0.057)	(0.052)
AWH Comprehensive	-0.072**	0.017	-0.034	0.042	-0.042	0.053
	(0.033)	(0.053)	(0.040)	(0.048)	(0.042)	(0.049)
AWH Comprehensive Plus	-0.091*	0.074	-0.033	0.006	0.090*	0.139***
	(0.046)	(0.051)	(0.041)	(0.040)	(0.054)	(0.046)
p-value on HS /= AWH-E	[0.400]	[0.629]	[0.531]	[0.163]	[0.254]	[0.643]
p-value on AWH-E /= AWH-C	[0.444]	[0.551]	[0.403]	[0.101]	[0.331]	[0.510]
p-value on AWH-C /= AWH-C+	[0.713]	[0.283]	[0.989]	[0.405]	[0.025]	[0.085]
Control Mean	0.820	0.526	0.901	0.575	0.447	0.415
Number of Observations	910	912	910	912	912	911

Appendix C: Treatment on the Treated (TOT) Impacts

Table C1. TOT regressions for girls' primary outcomes, all study sites

	Index of Education Partici- pation (1)	=1 if Aspires to Attain ≥ Secondary School Degree (2)	Index of Violence (higher= less violence) (3)	Ideal Age at Marriage (years) (4)	Index of Physical Heath & Nutrition (5)	Index of Menstrual Hygiene Manage- ment (6)	Ideal Age at First Child (years) (7)	Self-Esteem Score (0-40, higher= more self- esteem) (8)	Mental Distress Score (0-27, higher= less distress) (9)	Resilience Score (12-36, higher= more resilience) (10)
Panel A: 10-month impacts										
Her Spaces		0.002	0.120*	-0.031	0.094	0.142			0.096	0.980***
		(0.015)	(0.066)	(0.627)	(0.096)	(0.372)			(0.167)	(0.368)
AWH Essential		-0.036	0.112	0.043	0.253***	0.199			0.590***	0.626
		(0.030)	(0.071)	(0.693)	(0.089)	(0.332)			(0.215)	(0.486)
AWH Comprehensive		-0.002	-0.075	-0.177	-0.001	0.524*			0.363*	0.218
		(0.020)	(0.094)	(0.766)	(0.102)	(0.289)			(0.204)	(0.396)
AWH Comprehensive Plus		-0.013	0.187**	-0.512	-0.077	0.465*			0.218	0.386
		(0.019)	(0.090)	(0.787)	(0.089)	(0.251)			(0.273)	(0.361)
Panel B: 24- to 36-month impacts										
Her Spaces	-0.009	-0.001	0.121	-0.542	-0.052	-0.091	2.128	-0.239	-0.027	-0.449
	(0.121)	(0.026)	(0.107)	(0.421)	(0.109)	(0.174)	(2.184)	(0.310)	(0.097)	(0.486)
AWH Essential	0.102	0.014	0.113	0.131	0.106	0.177	-1.493	-0.091	0.067	0.326
	(0.113)	(0.025)	(0.082)	(0.479)	(0.093)	(0.113)	(2.630)	(0.308)	(0.108)	(0.463)
AWH Comprehensive	0.069	0.007	0.124*	-0.277	-0.102	-0.009	-0.078	0.046	-0.036	0.068
	(0.108)	(0.022)	(0.073)	(0.459)	(0.084)	(0.117)	(2.512)	(0.257)	(0.092)	(0.388)
AWH Comprehensive Plus	0.048	-0.007	0.172**	0.062	0.073	0.121	-1.260	0.052	-0.109	-0.482
	(0.128)	(0.028)	(0.086)	(0.440)	(0.112)	(0.162)	(2.459)	(0.309)	(0.118)	(0.505)

Table C1. TOT regressions for girls' primary outcomes, all study sites (continued)

	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir-ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor-tive Network (16)	Index of Service Know-ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curric-ulum Know- ledge ¹ (19)
Panel A: 10-month impacts									
Her Spaces	0.254***	0.215*	0.110	-0.111	0.167*	-0.017			0.320***
	(0.084)	(0.124)	(0.109)	(0.077)	(0.092)	(0.102)			(0.096)
AWH Essential	0.401***	0.063	-0.016	0.070	0.102	0.084			0.403***
	(0.096)	(0.083)	(0.118)	(0.070)	(0.083)	(0.081)			(0.112)
AWH Comprehensive	0.248***	0.062	-0.036	0.071	0.075	-0.086			0.319***
	(0.075)	(0.120)	(0.132)	(0.102)	(0.094)	(0.090)			(0.099)
AWH Comprehensive Plus	0.165*	0.282**	0.039	-0.116	0.266***	0.146			0.353***
	(0.095)	(0.120)	(0.111)	(0.106)	(0.099)	(0.109)			(0.088)
Panel B: 24- to 36-month impacts									
Her Spaces	0.171*	0.082	0.052	0.020	0.137	-0.105	0.019	0.004	0.055
	(0.089)	(0.080)	(0.124)	(0.097)	(0.087)	(0.085)	(0.083)	(0.092)	(0.090)
AWH Essential	0.203**	0.301***	0.151*	0.084	0.046	0.106	0.377***	0.374***	0.106
	(0.089)	(0.104)	(0.085)	(0.100)	(0.065)	(0.090)	(0.110)	(0.111)	(0.101)
AWH Comprehensive	0.170**	0.284***	0.100	-0.023	0.181***	0.074	0.027	0.023	0.010
	(0.074)	(0.091)	(0.092)	(0.086)	(0.069)	(0.082)	(0.093)	(0.089)	(0.086)
AWH Comprehensive Plus	-0.143*	0.223**	0.053	0.164*	-0.045	-0.090	-0.039	-0.013	0.026
	(0.079)	(0.105)	(0.113)	(0.091)	(0.088)	(0.111)	(0.108)	(0.108)	(0.098)

Table C2. TOT regressions for girls' primary outcomes, South Gondar sites

		=1 if Aspires	s			Index of		Self-Esteem	Mental Distress	Resilience Score
	Index of Education Participation (1)	to Attain ≥ Secondary School Degree (2)	Index of Violence (higher= less violence) (3)	Ideal Age at Marriage (years) (4)	Index of Physical Heath & Nutrition (5)	Menstrual Hygiene Manage- ment (6)	Ideal Age at First Child (years) (7)	Score (0-40, higher= more self- esteem) (8)	Score (0-27, higher= less distress) (9)	(12-36, higher= more resilience) (10)
Panel A: 10-month impacts										
Her Spaces		-0.004	0.120	0.895	0.008	0.089			0.039	0.550*
		(0.013)	(0.080)	(0.780)	(0.068)	(0.308)			(0.111)	(0.282)
AWH Essential		-0.048	0.036	1.784**	0.100	-0.549			0.169	0.509
		(0.043)	(0.120)	(0.883)	(0.082)	(0.346)			(0.147)	(0.441)
AWH Comprehensive		-0.019	-0.068	2.558**	-0.039	-0.525			0.024	0.278
		(0.022)	(0.137)	(1.163)	(0.152)	(0.381)			(0.171)	(0.316)
AWH Comprehensive Plus		-0.001	0.188	0.049	-0.105	0.530			-0.250	0.190
		(0.015)	(0.130)	(0.794)	(0.088)	(0.490)			(0.251)	(0.358)
Panel B: 24- to 36-month impacts										
Her Spaces	-0.008	-0.045	0.038	-0.173	-0.083	-0.439**	2.152	0.323	-0.198**	-0.213
	(0.134)	(0.031)	(0.151)	(0.481)	(0.116)	(0.182)	(1.499)	(0.284)	(0.091)	(0.492)
AWH Essential	0.154	-0.004	0.075	0.022	-0.040	0.033	1.626	0.068	-0.159	0.377
	(0.100)	(0.032)	(0.125)	(0.625)	(0.086)	(0.163)	(1.177)	(0.332)	(0.098)	(0.369)
AWH Comprehensive	0.112	0.019	0.233**	-0.812	-0.200**	-0.142	0.796	0.027	-0.110	0.493
	(0.148)	(0.027)	(0.110)	(0.537)	(0.087)	(0.169)	(1.247)	(0.299)	(0.114)	(0.555)
AWH Comprehensive Plus	-0.050	-0.007	0.105	-0.124	0.024	-0.059	0.214	0.189	-0.236	0.114
	(0.132)	(0.026)	(0.101)	(0.558)	(0.122)	(0.168)	(1.325)	(0.367)	(0.154)	(0.502)

Table C2. TOT regressions for girls' primary outcomes, South Gondar sites (continued)

	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir-ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor-tive Network (16)	Index of Service Know-ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curric-ulum Know- ledge ¹ (19)
Panel A: 10-month impacts									
Her Spaces	0.242**	0.248*	-0.020	-0.092	0.264**	0.028			0.322***
	(0.107)	(0.131)	(0.065)	(0.099)	(0.115)	(0.081)			(0.099)
AWH Essential	0.568***	0.210**	-0.138	0.136	0.090	0.044			0.347***
	(0.103)	(0.093)	(0.132)	(0.091)	(0.111)	(0.091)			(0.096)
AWH Comprehensive	0.251**	0.443**	0.017	0.330**	-0.068	-0.107			0.208
	(0.114)	(0.205)	(0.104)	(0.133)	(0.155)	(0.108)			(0.128)
AWH Comprehensive Plus	0.318***	0.558***	-0.033	0.044	0.255**	0.117			0.360***
	(0.108)	(0.143)	(0.083)	(0.142)	(0.118)	(0.089)			(0.096)
Panel B: 24- to 36-month impacts									
Her Spaces	-0.011	0.121	-0.020	-0.067	0.287***	-0.068	0.024	0.044	-0.023
	(0.104)	(0.099)	(0.139)	(0.123)	(0.105)	(0.090)	(0.109)	(0.122)	(0.107)
AWH Essential	0.220**	0.561***	0.073	0.254*	-0.091	0.165	0.475***	0.532***	0.091
	(0.109)	(0.139)	(0.099)	(0.134)	(0.084)	(0.104)	(0.176)	(0.175)	(0.113)
AWH Comprehensive	0.156	0.441***	0.027	-0.043	0.184*	0.147	-0.070	-0.010	-0.028
	(0.111)	(0.145)	(0.130)	(0.127)	(0.106)	(0.091)	(0.164)	(0.166)	(0.109)
AWH Comprehensive Plus	-0.094	0.333**	0.004	0.149	-0.020	0.199*	-0.122	-0.026	-0.011
	(0.091)	(0.151)	(0.102)	(0.120)	(0.108)	(0.107)	(0.145)	(0.149)	(0.091)

Table C3. TOT regressions for girls' primary outcomes, East Hararghe sites

	Index of Education Partici- pation (1)	=1 if Aspires to Attain ≥ Secondary School Degree (2)	Index of Violence (higher= less violence) (3)	Ideal Age at Marriage (years) (4)	Index of Physical Heath & Nutrition (5)	Index of Menstrual Hygiene Manage- ment (6)	Ideal Age at First Child (years) (7)	Self-Esteem Score (0-40, higher= more self- esteem) (8)	Mental Distress Score (0-27, higher= less distress) (9)	Resilience Score (12-36, higher= more resilience) (10)
Panel A: 10-month impacts										
Her Spaces		0.030	0.162	-1.287	0.223	0.093			0.259	1.665*
		(0.040)	(0.124)	(0.944)	(0.200)	(0.609)			(0.457)	(0.989)
AWH Essential		-0.030	0.268***	-1.394	0.410***	0.169			0.985***	0.704
		(0.053)	(0.091)	(0.860)	(0.148)	(0.455)			(0.378)	(0.952)
AWH Comprehensive		0.013	-0.067	-1.468*	-0.023	0.858***			0.751**	0.114
		(0.036)	(0.138)	(0.777)	(0.138)	(0.306)			(0.375)	(0.693)
AWH Comprehensive Plus		-0.023	0.260*	-0.784	-0.062	0.180			1.554***	0.619
		(0.045)	(0.133)	(1.512)	(0.176)	(0.375)			(0.549)	(0.724)
Panel B: 24- to 36-month impacts										
Her Spaces	0.006	0.051	0.226*	-1.171	0.017	0.276	3.617	-1.645**	0.250	-0.678
	(0.229)	(0.048)	(0.134)	(0.827)	(0.216)	(0.241)	(6.126)	(0.748)	(0.185)	(0.999)
AWH Essential	-0.042	0.034	0.180*	0.165	0.303*	0.316**	-5.947	-0.420	0.356**	0.210
	(0.233)	(0.041)	(0.098)	(0.646)	(0.180)	(0.134)	(5.963)	(0.582)	(0.176)	(0.904)
AWH Comprehensive	-0.010	-0.010	-0.014	0.316	0.001	0.026	-1.932	0.052	0.056	-0.350
	(0.149)	(0.034)	(0.096)	(0.736)	(0.138)	(0.153)	(5.067)	(0.425)	(0.126)	(0.529)
AWH Comprehensive Plus	0.178	-0.018	0.350**	0.450	0.177	0.370	-3.346	-0.163	0.118	-1.359
	(0.281)	(0.060)	(0.160)	(0.699)	(0.234)	(0.246)	(6.165)	(0.606)	(0.150)	(1.023)

Table C3. TOT regressions for girls' primary outcomes, East Hararghe sites (continued)

	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir-ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor-tive Network (16)	Index of Service Know-ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curric-ulum Know- ledge ¹ (19)
Panel A: 10-month impacts									
Her Spaces	0.232	0.139	0.433	-0.135	-0.036	-0.075			0.261
	(0.161)	(0.266)	(0.286)	(0.131)	(0.150)	(0.239)			(0.197)
AWH Essential	0.258	-0.081	0.119	0.006	0.104	0.110			0.497**
	(0.165)	(0.140)	(0.208)	(0.119)	(0.122)	(0.139)			(0.211)
AWH Comprehensive	0.238**	-0.417***	-0.085	-0.226	0.153	-0.102			0.310**
	(0.115)	(0.134)	(0.258)	(0.154)	(0.116)	(0.127)			(0.148)
AWH Comprehensive Plus	-0.120	-0.209	0.095	-0.332**	0.263	0.185			0.375**
	(0.178)	(0.193)	(0.257)	(0.167)	(0.162)	(0.223)			(0.152)
Panel B: 24- to 36-month impacts									
Her Spaces	0.496***	-0.019	0.167	0.112	-0.047	-0.187	0.029	-0.023	0.239
	(0.157)	(0.122)	(0.222)	(0.165)	(0.151)	(0.154)	(0.120)	(0.109)	(0.165)
AWH Essential	0.191	-0.012	0.210	-0.098	0.199*	0.090	0.261**	0.170	0.134
	(0.147)	(0.132)	(0.139)	(0.110)	(0.105)	(0.157)	(0.123)	(0.117)	(0.185)
AWH Comprehensive	0.205*	0.130	0.128	0.052	0.148	0.012	0.072	0.018	-0.007
	(0.107)	(0.094)	(0.123)	(0.120)	(0.098)	(0.131)	(0.089)	(0.076)	(0.127)
AWH Comprehensive Plus	-0.253*	-0.009	0.127	0.228	-0.103	-0.598***	0.114	0.026	0.072
	(0.130)	(0.124)	(0.233)	(0.144)	(0.170)	(0.172)	(0.114)	(0.101)	(0.203)

Table C4. TOT regressions for girls' primary outcomes, marginalized sites

	Index of Education Partici- pation (1)	=1 if Aspires to Attain ≥ Secondary School Degree (2)	Index of Violence (higher= less violence) (3)	Ideal Age at Marriage (years) (4)	Index of Physical Heath & Nutrition (5)	Index of Menstrual Hygiene Manage- ment (6)	Ideal Age at First Child (years) (7)	Self-Esteem Score (0-40, higher= more self- esteem) (8)	Mental Distress Score (0-27, higher= less distress) (9)	Resilience Score (12-36, higher= more resilience) (10)
Panel A: 10-month impacts										
Her Spaces		-0.003	0.043	-0.447	0.154	0.482			0.294**	1.446**
		(0.028)	(0.080)	(1.130)	(0.101)	(0.674)			(0.133)	(0.592)
AWH Essential		-0.004	0.076	0.123	0.453***	0.607			0.584***	1.969***
		(0.023)	(0.095)	(0.913)	(0.084)	(0.588)			(0.203)	(0.524)
AWH Comprehensive		-0.036	-0.110	-1.939	0.281***	0.240			0.293	1.709***
		(0.032)	(0.152)	(1.225)	(0.086)	(0.736)			(0.212)	(0.355)
AWH Comprehensive Plus		-0.036	0.232*	-1.081	0.032	1.326***			-0.250	0.764
		(0.039)	(0.128)	(1.463)	(0.100)	(0.367)			(0.488)	(0.716)
Panel B: 24- to 36-month impacts										
Her Spaces	-0.099	-0.016	-0.053	-0.375	-0.133	0.274	2.312	-0.586	-0.085	-0.357
	(0.173)	(0.040)	(0.209)	(0.628)	(0.222)	(0.184)	(4.554)	(0.602)	(0.138)	(0.929)
AWH Essential	-0.040	-0.007	0.126	-0.854*	0.301*	0.335***	2.335	-0.241	0.201	-0.081
	(0.182)	(0.040)	(0.115)	(0.479)	(0.167)	(0.127)	(3.702)	(0.483)	(0.171)	(0.776)
AWH Comprehensive	-0.234	-0.057	0.115	-0.783	-0.211	-0.535***	4.292	0.250	-0.168	0.544
	(0.142)	(0.044)	(0.116)	(0.879)	(0.154)	(0.160)	(3.733)	(0.300)	(0.168)	(0.512)
AWH Comprehensive Plus	-0.350**	-0.053	0.253	-0.968	-0.258	-0.316	0.281	-0.276	-0.199	-0.795
	(0.173)	(0.043)	(0.157)	(0.818)	(0.182)	(0.261)	(3.884)	(0.481)	(0.227)	(1.036)

Table C4. TOT regressions for girls' primary outcomes, marginalized sites (continued)

	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir-ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor-tive Network (16)	Index of Service Know-ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curric-ulum Know- ledge ¹ (19)
Panel A: 10-month impacts									
Her Spaces	0.274*	0.016	0.058	-0.239**	0.446***	0.292***			0.464***
	(0.153)	(0.159)	(0.128)	(0.105)	(0.077)	(0.078)			(0.090)
AWH Essential	0.522***	0.161	-0.060	0.000	0.247**	0.186*			0.578***
	(0.086)	(0.129)	(0.109)	(0.106)	(0.102)	(0.102)			(0.155)
AWH Comprehensive	0.325***	-0.056	-0.002	0.013	0.328***	0.070			0.480***
	(0.125)	(0.139)	(0.122)	(0.102)	(0.114)	(0.083)			(0.144)
AWH Comprehensive Plus	0.272	0.255	-0.152	-0.381***	0.527***	0.489***			0.380***
	(0.172)	(0.175)	(0.146)	(0.133)	(0.111)	(0.138)			(0.111)
Panel B: 24- to 36-month impacts									
Her Spaces	0.329**	0.126	-0.029	0.270	0.164	-0.023	-0.014	0.044	-0.170
	(0.145)	(0.136)	(0.152)	(0.165)	(0.137)	(0.169)	(0.133)	(0.132)	(0.126)
AWH Essential	0.094	0.320**	-0.007	0.047	-0.104	0.171	0.405**	0.374**	-0.060
	(0.137)	(0.161)	(0.097)	(0.117)	(0.093)	(0.114)	(0.182)	(0.184)	(0.165)
AWH Comprehensive	0.272**	0.274**	-0.194	0.038	0.201***	0.212*	0.174	0.158	0.100
	(0.121)	(0.122)	(0.148)	(0.150)	(0.075)	(0.121)	(0.131)	(0.111)	(0.128)
AWH Comprehensive Plus	-0.253*	-0.027	-0.168	-0.010	0.024	-0.210	0.132	0.164	-0.207
	(0.149)	(0.126)	(0.159)	(0.156)	(0.167)	(0.183)	(0.134)	(0.114)	(0.178)

Table C5. TOT regressions for girls' primary outcomes, non-marginalized sites

	Index of Education Partici- pation (1)	=1 if Aspires to Attain ≥ Secondary School Degree (2)	Index of Violence (higher= less violence) (3)	Ideal Age at Marriage (years) (4)	Index of Physical Heath & Nutrition (5)	Index of Menstrual Hygiene Manage- ment (6)	Ideal Age at First Child (years) (7)	Self-Esteem Score (0-40, higher= more self- esteem) (8)	Mental Distress Score (0-27, higher= less distress) (9)	Resilience Score (12-36, higher= more resilience) (10)
Panel A: 10-month impacts										
Her Spaces		-0.001	0.165*	0.453	0.058	-0.244			0.051	0.620
		(0.024)	(0.098)	(0.803)	(0.135)	(0.433)			(0.290)	(0.460)
AWH Essential		-0.054	0.135	0.180	0.118	-0.028			0.634**	-0.654
		(0.045)	(0.101)	(0.866)	(0.126)	(0.317)			(0.308)	(0.619)
AWH Comprehensive		0.017	-0.053	0.638	-0.135	0.888***			0.389	-0.318
		(0.022)	(0.115)	(0.897)	(0.139)	(0.306)			(0.264)	(0.477)
AWH Comprehensive Plus		0.000	0.173	-0.176	-0.136	0.079			0.440	0.160
		(0.019)	(0.123)	(0.888)	(0.123)	(0.279)			(0.269)	(0.410)
Panel B: 24- to 36-month impacts										
Her Spaces	0.031	-0.006	0.121	-0.704	-0.040	-0.302	1.605	-0.179	0.032	-0.621
	(0.158)	(0.034)	(0.121)	(0.560)	(0.118)	(0.239)	(2.538)	(0.396)	(0.136)	(0.593)
AWH Essential	0.176	0.027	0.061	0.544	-0.036	0.129	-4.741	0.042	-0.041	0.833
	(0.136)	(0.032)	(0.114)	(0.709)	(0.113)	(0.174)	(4.459)	(0.449)	(0.147)	(0.545)
AWH Comprehensive	0.199	0.028	0.087	-0.003	-0.098	0.257*	-1.779	-0.113	0.046	-0.234
	(0.139)	(0.019)	(0.089)	(0.536)	(0.098)	(0.135)	(3.036)	(0.356)	(0.113)	(0.493)
AWH Comprehensive Plus	0.238	0.017	0.126	0.540	0.237*	0.210	-1.872	0.180	-0.057	-0.394
	(0.156)	(0.035)	(0.106)	(0.496)	(0.122)	(0.213)	(3.234)	(0.391)	(0.138)	(0.576)

Table C5. TOT regressions for girls' primary outcomes, non-marginalized sites (continued)

	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir-ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor-tive Network (16)	Index of Service Know-ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curric-ulum Know- ledge ¹ (19)
Panel A: 10-month impacts									
Her Spaces	0.207*	0.300*	0.115	-0.025	0.070	-0.213			0.158
	(0.113)	(0.181)	(0.157)	(0.117)	(0.138)	(0.157)			(0.132)
AWH Essential	0.290*	-0.067	0.009	0.088	0.005	-0.009			0.217*
	(0.152)	(0.113)	(0.177)	(0.091)	(0.126)	(0.112)			(0.117)
AWH Comprehensive	0.241***	0.100	-0.071	0.083	-0.016	-0.136			0.255**
	(0.090)	(0.157)	(0.167)	(0.137)	(0.126)	(0.119)			(0.117)
AWH Comprehensive Plus	0.081	0.295*	0.146	0.041	0.127	-0.020			0.325***
	(0.112)	(0.151)	(0.150)	(0.141)	(0.134)	(0.119)			(0.111)
Panel B: 24- to 36-month impacts									
Her Spaces	0.070	0.033	0.039	-0.128	0.107	-0.126	0.041	-0.004	0.162
	(0.110)	(0.096)	(0.161)	(0.134)	(0.113)	(0.100)	(0.109)	(0.126)	(0.123)
AWH Essential	0.288**	0.229	0.244*	0.152	0.080	0.057	0.324**	0.354***	0.175
	(0.125)	(0.150)	(0.137)	(0.147)	(0.094)	(0.135)	(0.143)	(0.135)	(0.129)
AWH Comprehensive	0.179*	0.302**	0.175*	-0.088	0.166*	0.063	-0.035	-0.039	-0.029
	(0.095)	(0.128)	(0.106)	(0.109)	(0.099)	(0.099)	(0.117)	(0.119)	(0.107)
AWH Comprehensive Plus	-0.075	0.322**	0.157	0.242**	-0.054	0.000	-0.116	-0.095	0.124
	(0.095)	(0.134)	(0.145)	(0.110)	(0.107)	(0.134)	(0.139)	(0.143)	(0.116)

Table 1. Characteristics of adolescent girls and their households at baseline

	All Sites	South Gondar	East Hararghe	Marginalized Sites	Non-Margin- alized Sites
	(1)	(2)	(3)	(4)	(5)
Panel A: Household Characteristics					
Household size	6.422	5.825	7.003	6.376	6.449
	(1.848)	(1.642)	(1.852)	(1.859)	(1.841)
=1 if household is pastoralist	0.85	0.823	0.878	0.882	0.832
	(0.357)	(0.382)	(0.328)	(0.322)	(0.374)
=1 if household head is female	0.147	0.165	0.129	0.169	0.133
	(0.334)	(0.362)	(0.304)	(0.351)	(0.323)
=1 if household head is literate	0.328	0.366	0.291	0.321	0.332
	(0.468)	(0.482)	(0.451)	(0.466)	(0.469)
=1 if household has improved floors	0.024	0.001	0.046	0.018	0.027
	(0.152)	(0.025)	(0.210)	(0.133)	(0.162)
=1 if household ever received PSNP	0.320	0.300	0.339	0.396	0.276
support	(0.465)	(0.458)	(0.471)	(0.489)	(0.445)
Household Food Insecurity Experience	4.004	2.946	5.041	4.103	3.947
Scale (0-8)	(2.578)	(2.195)	(2.503)	(2.549)	(2.593)
Panel B: Adolescent Girl Characteristics					
Age at baseline survey	11.002	10.984	11.02	11.009	10.999
	(0.842)	(0.802)	(0.879)	(0.842)	(0.842)
=1 if enrolled in school	0.833	0.966	0.703	0.813	0.845
	(0.373)	(0.183)	(0.457)	(0.390)	(0.362)
Highest grade attended (not including	3.720	3.809	3.632	3.715	3.722
kindergarten)	(1.744)	(1.482)	(1.964)	(1.937)	(1.621)
=1 if hungry in last 4 weeks	0.188	0.120	0.255	0.175	0.195
	(0.391)	(0.325)	(0.436)	(0.380)	(0.397)
=1 if ever married	0.004	0.006	0.002	0.007	0.002
	(0.063)	(0.076)	(0.046)	(0.081)	(0.048)
=1 if experienced female genital mutilation	0.294	0.251	0.336	0.335	0.270
or cutting	(0.455)	(0.434)	(0.473)	(0.472)	(0.444)

Table 1. Characteristics of adolescent girls and their households at baseline (continued)

	All Sites	South Gondar	East Hararghe	Marginalized Sites	Non-Margin- alized Sites
_	(1)	(2)	(3)	(4)	(5)
Panel C: Attitudes of Female Primary Care	giver				
=1 if agrees "Women should have the same	0.829	0.918	0.725	0.835	0.826
chance to work outside of the home as men."	(0.377)	(0.274)	(0.447)	(0.372)	(0.379)
=1 if agrees "A man should have the final	0.772	0.727	0.823	0.762	0.777
word on decisions in his home."	(0.420)	(0.446)	(0.382)	(0.426)	(0.416)
=1 if agrees "Girls and boys should share	0.724	0.831	0.600	0.728	0.722
household tasks equally."	(0.447)	(0.375)	(0.490)	(0.445)	(0.448)
=1 if agrees "If a family can afford for one	0.412	0.332	0.505	0.434	0.400
child to go to secondary school it should be the boy only."	(0.492)	(0.471)	(0.500)	(0.496)	(0.490)
1.6 "C' 1 1 -111 44 1 1	0.300	0.280	0.323	0.307	0.297
=1 if agrees "Girls should be sent to school only if they are not needed to help at home."	(0.458)	(0.449)	(0.468)	(0.462)	(0.457)
1:6 " " " " " " " " " " " " " " " " " " "	0.925	0.924	0.926	0.906	0.935
=1 if agrees "A girl's marriage can wait until she has completed secondary schooling."	(0.263)	(0.265)	(0.261)	(0.292)	(0.246)
Number of observations	2,294	1,113	1,181	860	1,434

Notes for Table 1: Columns (1), (2), (3), (5) and (6) display means (standard deviations) of adolescent and household characteristics among the research sample of adolescent girls in South Gondar and East Hararghe research sites at the time of the baseline data collection, prior to the launch of any programming, in late 2017 or early 2018. Columns (4) and (7) display the difference in means between the two preceeding columns, and the p-value of that difference in brackets. * indicates statistical significance at p<0.1, ** at p<0.05, and *** and p<0.001. Improved floors include floors constructed from wood, cement, tile, brick, or a like material. The Productive Safety Net Program (PSNP) is an Ethiopian federal workfare and food aid program. The Household Food Insecurity Scale is an eight-point scale designed to capture individual and household experience of constrained access to food (Cafiero et al., 2018).

Table 2. ITT regressions for girls' primary outcomes, all study sites

		nons for girls pr	Index of	,	<u>.</u>	Index of			
	Index of Education Partici- pation	=1 if Aspires to Attain ≥ Secondary School Degree	Violence (higher= less violence)	Ideal Age at Marriage (years)	Index of Physical Heath & Nutrition	Menstrual Hygiene Manage- ment	Ideal Age at First Child (years)	Self-Esteem Score (0-40, higher= more self-esteem)	Mental Distress Score (0-27, higher= less distress)
B 11 10 11 1	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: 10-month impacts		0.001	0.007	0.120	0.002	0.015			0.077
Her Spaces		-0.001	0.085	0.139	0.083	0.015			0.077
		(0.014)	(0.062)	(0.530)	(0.080)	(0.265)			(0.151)
AWALE I		[0.916]	[0.458]	[0.916]	[0.667]	[0.916]			[0.833]
AWH Essential		-0.011	0.091	0.071	0.140**	0.213			0.396***
		(0.023)	(0.061)	(0.582)	(0.069)	(0.265)			(0.148)
ATTILL CO. 1		[0.769]	[0.287]	[1.000]	[0.139]	[0.527]			[0.035]
AWH Comprehensive		0.009	-0.047	0.217	-0.065	0.200			0.305**
		(0.016)	(0.078)	(0.617)	(0.087)	(0.251)			(0.153)
ANNI G		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.240]
AWH Comprehensive Plus		-0.010	0.129**	-0.233	-0.070	0.454**			0.081
		(0.016)	(0.065)	(0.568)	(0.069)	(0.196)			(0.195)
		[0.518]	[0.106]	[0.582]	[0.279]	[0.072]			[0.582]
q-value on HS /= AWH-E		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.183]
q-value on AWH-E /= AWH-C		[1.000]	[0.858]	[1.000]	[0.244]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+		[0.970]	[0.767]	[0.970]	[1.000]	[0.970]			[0.843]
Number of observations		1952	1928	1911	2003	241			1866
Panel B: 24- to 36-month impacts									
Her Spaces	-0.023	0.010	0.115	-0.429	-0.072	-0.071	2.776	-0.135	0.018
	(0.101)	(0.021)	(0.085)	(0.401)	(0.087)	(0.124)	(1.749)	(0.263)	(0.078)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.096	0.015	0.048	0.272	0.033	0.217**	-0.584	-0.003	0.040
	(0.105)	(0.021)	(0.077)	(0.395)	(0.078)	(0.098)	(2.122)	(0.251)	(0.093)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[0.154]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.048	0.017	0.110	-0.257	-0.126	0.081	0.402	-0.204	-0.016
	(0.102)	(0.021)	(0.069)	(0.466)	(0.082)	(0.113)	(2.501)	(0.249)	(0.090)
	[1.000]	[1.000]	[0.568]	[1.000]	[0.568]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	0.046	-0.000	0.077	0.099	0.037	0.094	-0.113	0.010	-0.056
-	(0.093)	(0.021)	(0.085)	(0.343)	(0.079)	(0.116)	(1.817)	(0.251)	(0.090)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.488]	[0.952]	[0.713]	[0.309]	[0.446]	[0.167]	[0.309]	[0.952]	[0.952]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[0.335]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[0.529]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	1777	1917	1699	1717	1898	802	1668	1734	1923

Table 2. ITT regressions for girls' primary outcomes, all study sites (continued)

	Resilience Score (12-36, higher= more resilience) (10)	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir- ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor- tive Network (16)	Index of Service Know- ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curriculum Knowledge ¹ (19)
Panel A: 10-month impacts										
Her Spaces	0.615*	0.189***	0.150	0.043	-0.086	0.107	0.014			0.272***
	(0.327)	(0.070)	(0.107)	(0.095)	(0.067)	(0.083)	(0.075)			(0.085)
	[0.329]	[0.053]	[0.458]	[0.833]	[0.458]	[0.458]	[0.916]			[0.025]
AWH Essential	0.646	0.275***	0.058	0.002	0.060	0.084	0.055			0.307***
	(0.392)	(0.073)	(0.093)	(0.095)	(0.069)	(0.076)	(0.069)			(0.089)
	[0.256]	[0.003]	[0.629]	[1.000]	[0.527]	[0.454]	[0.527]			[0.006]
AWH Comprehensive	0.562*	0.269***	0.123	0.009	0.052	0.076	0.023			0.298***
	(0.312)	(0.072)	(0.104)	(0.106)	(0.086)	(0.079)	(0.077)			(0.077)
	[0.285]	[0.003]	[0.925]	[1.000]	[1.000]	[1.000]	[1.000]			[0.003]
AWH Comprehensive Plus	0.330	0.178**	0.188*	-0.008	-0.081	0.210***	0.138*			0.316***
	(0.311)	(0.075)	(0.103)	(0.089)	(0.078)	(0.067)	(0.078)			(0.087)
	[0.279]	[0.072]	[0.123]	[0.773]	[0.279]	[0.014]	[0.123]			[0.006]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[0.195]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+	[0.970]	[0.843]	[0.970]	[1.000]	[0.843]	[0.843]	[0.843]			[1.000]
Number of observations	1711	1836	1777	1973	1967	1972	2005			1900
Panel B: 24- to 36-month impacts										
Her Spaces	-0.405	0.151*	0.061	0.022	0.027	0.073	-0.076	0.031	0.014	-0.003
	(0.388)	(0.077)	(0.074)	(0.102)	(0.076)	(0.072)	(0.076)	(0.078)	(0.082)	(0.079)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.245	0.156**	0.194**	0.116	0.046	0.045	0.087	0.266**	0.264**	0.041
	(0.368)	(0.075)	(0.092)	(0.076)	(0.081)	(0.062)	(0.080)	(0.103)	(0.103)	(0.080)
	[1.000]	[0.154]	[0.154]	[0.439]	[1.000]	[1.000]	[1.000]	[0.117]	[0.117]	[1.000]
AWH Comprehensive	0.170	0.137*	0.249**	0.123	-0.002	0.162***	0.034	0.027	0.016	-0.016
	(0.359)	(0.071)	(0.096)	(0.081)	(0.077)	(0.062)	(0.084)	(0.083)	(0.082)	(0.071)
	[1.000]	[0.503]	[0.110]	[0.568]	[1.000]	[0.110]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	-0.296	-0.112*	0.144*	0.011	0.090	-0.004	-0.032	0.004	0.010	0.003
	(0.337)	(0.066)	(0.083)	(0.081)	(0.065)	(0.064)	(0.089)	(0.084)	(0.084)	(0.074)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.309]	[1.000]	[0.350]	[0.488]	[0.952]	[0.952]	[0.238]	[0.167]	[0.167]	[0.952]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[0.335]	[1.000]	[0.312]	[0.312]	[1.000]
q-value on AWH-C /= AWH-C+	[0.830]	[0.020]	[1.000]	[0.830]	[0.830]	[0.068]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	1874	1823	1920	1857	1907	1904	1921	1753	1750	1900

Notes for Tables 2-6: These tables present intention to treat (ITT) results from regressions as specified in equation (1), on the full sample of adolescent girls surveyed in the first follow-up survey round (Panel A) and the second follow-up survey round (Panel B), for the sample indicated in the table title (all sites, South Gondar sites, East Hararghe sites, sites in marginalized communities, and sites in non-marginalized communities). For each outcome measure listed in the column titles, the coefficients (standard errors) [FDR adjusted q-values] for each of the four treatment group indicators are displayed. Outcomes are described in more detail in Appendix B. Regressions are OLS, and include basic and rich controls sets. The basic controls include adolescent age at the time of study recruitment as well as indicators for households with multiple eligible adolescents, sampling block, and survey month; regressions in Panel B additionally include indicators for survey year and randomly assigned survey wave. The rich set of controls for both panels include household size, a household asset index, and indicators for the household head being literate, the household head being female, and the household ever receiving PSNP benefits (by baseline survey). Missing values for controls are set to the mean value for the sample. Regressions are weighted to maintain initial population proportions, and standard errors are clustered by community (kebele).

Table 3. ITT regressions for girls' primary outcomes, South Gondar sites

	Index of Index of								
	Index of Education Participation	Attain ≥ Secondary School Degree	Violence (higher= less violence)	Ideal Age at Marriage (years)	Index of Physical Heath & Nutrition	Menstrual Hygiene Manage- ment	Ideal Age at First Child (years)	Self-Esteem Score (0-40, higher= more self-esteem)	Mental Distress Score (0-27, higher= less distress)
Danal A. 10 month imports	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: 10-month impacts Her Spaces		-0.010	0.104	0.777	0.035	-0.092			0.096
ner spaces		(0.015)	(0.083)	(0.703)	(0.086)	(0.304)			(0.152)
		[0.951]	[0.749]	[0.749]	[1.000]	[1.000]		 	[0.951]
AWH Essential		-0.015	0.017	0.749]	0.025	0.511			0.228
AWII Essentiat		(0.028)	(0.098)	(0.884)	(0.023)	(0.544)			(0.158)
		[1.000]	[1.000]	[1.000]	[1.000]	(0.344) [1.000]			[0.724]
AWH Comprehensive		-0.001	-0.045	1.686*	-0.137	-0.304			0.217
AWII Comprehensive		(0.017)	(0.110)	(0.867)	(0.125)				(0.162)
		` ′		[0.140]	[0.381]	(0.347)			
AWH Comprehensive Plus		[0.932] -0.006	[0.771] 0.141	0.140]	-0.127	[0.522] 0.502			[0.267] -0.259
AWH Comprehensive Plus			(0.141)						
		(0.015) [0.629]	` ′	(0.771)	(0.089)	(0.406)			(0.257)
a value on HS /= AWH E		[0.629]	[0.340]	[0.629]	[0.340]	[0.366]			[0.398]
q-value on HS /= AWH-E q-value on AWH-E /= AWH-C			[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
±		[0.817]	[0.817]	[0.817]	[0.463]	[0.431]			[1.000]
q-value on AWH-C /= AWH-C+		[0.797]	[0.325]	[0.325]	[0.826]	[0.325]			[0.325]
Number of Observations		1030	1016	1019	1039	86			1025
Panel B: 24- to 36-month impacts	0.010	0.022	0.005	0.000	0.117	0.216*	2.402*	0.245	-0.178**
Her Spaces	-0.018	-0.032	0.085	0.090	-0.117	-0.316*	2.492*	0.345	
	(0.127)	(0.028)	(0.148)	(0.522)	(0.114)	(0.177)	(1.309)	(0.266)	(0.084)
AWII For and al	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[0.543]	[0.543]	[1.000]	[0.543]
AWH Essential	0.121	0.002	-0.023	0.096	-0.061	0.125	2.054*	0.049	-0.159
	(0.103)	(0.027)	(0.131)	(0.568)	(0.095)	(0.150)	(1.043)	(0.306)	(0.105)
ABULC 1 ·	[0.525]	[1.000]	[1.000]	[1.000]	[0.834]	[0.685]	[0.219]	[1.000]	[0.331]
AWH Comprehensive	0.089	0.028	0.178*	-0.746	-0.333**	0.047	1.076	-0.078	-0.130
	(0.135)	(0.027)	(0.105)	(0.630)	(0.133)	(0.163)	(1.202)	(0.282)	(0.128)
ANALO I · DI	[1.000]	[0.735]	[0.481]	[0.735]	[0.149]	[1.000]	[0.792]	[1.000]	[0.735]
AWH Comprehensive Plus	-0.021	-0.003	-0.019	-0.151	0.078	-0.041	0.842	0.199	-0.133
	(0.119)	(0.025)	(0.144)	(0.499)	(0.105)	(0.183)	(1.302)	(0.333)	(0.151)
1 HO / ANH E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.318]	[0.357]	[0.581]	[0.714]	[0.581]	[0.028]	[0.581]	[0.427]	[0.714]
q-value on AWH-E /= AWH-C	[1.000]	[0.788]	[0.471]	[0.682]	[0.163]	[1.000]	[0.788]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[0.050]	[1.000]	[1.000]	[1.000]	[1.000]
Number of Observations	937	949	858	897	926	342	872	880	951

Table 3. ITT regressions for girls' primary outcomes, South Gondar sites (continued)

	Resilience Score		Index of Economic	Index of Economic	Index of Gender	Index of Gender	Index of	Index of Service	Index of	Index of AWH
	(12-36, higher= more resilience) (10)	Index of Voice & Agency (11)	Empower- ment (12)	Aspirations (13)			Supportive Network (16)	Know- ledge (17)	Service Access- ibility (18)	Curriculum Knowledge ¹ (19)
Panel A: 10-month impacts										
Her Spaces	0.311	0.214**	0.201	-0.061	-0.057	0.208*	0.019			0.279**
	(0.297)	(0.098)	(0.125)	(0.064)	(0.091)	(0.117)	(0.080)			(0.113)
	[0.749]	[0.293]	[0.507]	[0.760]	[0.951]	[0.471]	[1.000]			[0.293]
AWH Essential	0.648**	0.363***	0.105	-0.100	0.074	0.073	0.019			0.231**
	(0.323)	(0.088)	(0.133)	(0.089)	(0.095)	(0.113)	(0.089)			(0.109)
	[0.267]	[0.002]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.267]
AWH Comprehensive	0.496*	0.213**	0.418***	0.047	0.245**	-0.018	-0.017			0.208**
	(0.280)	(0.091)	(0.139)	(0.083)	(0.100)	(0.129)	(0.087)			(0.103)
	[0.175]	[0.110]	[0.054]	[0.675]	[0.110]	[0.924]	[0.924]			[0.140]
AWH Comprehensive Plus	0.392	0.301***	0.429***	-0.028	-0.004	0.261**	0.157*			0.352***
	(0.337)	(0.101)	(0.138)	(0.065)	(0.124)	(0.100)	(0.093)			(0.105)
	[0.366]	[0.019]	[0.019]	[0.629]	[0.629]	[0.032]	[0.237]			[0.019]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C	[0.817]	[0.431]	[0.431]	[0.431]	[0.431]	[0.817]	[0.866]			[1.000]
q-value on AWH-C /= AWH-C+	[0.797]	[0.349]	[0.826]	[0.349]	[0.325]	[0.325]	[0.325]			[0.349]
Number of Observations	942	1004	975	1033	1028	1039	1040			1010
Panel B: 24- to 36-month impacts										
Her Spaces	-0.275	0.021	0.066	-0.029	-0.048	0.252**	-0.027	-0.000	0.007	-0.072
	(0.519)	(0.115)	(0.106)	(0.133)	(0.119)	(0.105)	(0.107)	(0.132)	(0.141)	(0.110)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[0.543]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.429	0.187*	0.407***	0.043	0.182	-0.054	0.177*	0.393**	0.432**	0.033
	(0.380)	(0.099)	(0.139)	(0.092)	(0.127)	(0.087)	(0.092)	(0.179)	(0.177)	(0.106)
	[0.525]	[0.219]	[0.094]	[1.000]	[0.347]	[0.834]	[0.219]	[0.217]	[0.181]	[1.000]
AWH Comprehensive	0.478	0.145	0.367**	0.044	-0.028	0.180*	0.141*	-0.053	-0.043	-0.068
	(0.466)	(0.091)	(0.143)	(0.116)	(0.116)	(0.091)	(0.083)	(0.136)	(0.143)	(0.092)
	[0.735]	[0.486]	[0.149]	[1.000]	[1.000]	[0.444]	[0.481]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	0.170	-0.109	0.262*	-0.016	0.081	0.038	0.203**	-0.047	0.026	-0.016
	(0.419)	(0.085)	(0.136)	(0.085)	(0.104)	(0.091)	(0.094)	(0.145)	(0.151)	(0.087)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.293]	[0.303]	[0.080]	[0.581]	[0.185]	[0.001]	[0.170]	[0.100]	[0.088]	[0.526]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[0.471]	[0.020]	[1.000]	[0.083]	[0.078]	[0.788]
q-value on AWH-C /= AWH-C+	[1.000]	[0.050]	[1.000]	[1.000]	[1.000]	[0.478]	[1.000]	[1.000]	[1.000]	[1.000]
Number of Observations	922	931	949	917	948	947	949	880	879	943

Table 4. ITT regressions for girls' primary outcomes, East Hararghe sites

			Index of			Index of			
	Index of Education Partici- pation	=1 if Aspires to Attain ≥ Secondary School Degree	Violence (higher= less violence)	Ideal Age at Marriage (years)	Index of Physical Heath & Nutrition	Menstrual Hygiene Manage- ment	Ideal Age at First Child (years)	Self-Esteem Score (0-40, higher= more self-esteem)	Mental Distress Score (0-27, higher= less distress)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: 10-month impacts									
Her Spaces		0.010	0.065	-0.402	0.149	0.065			0.052
		(0.025)	(0.092)	(0.756)	(0.128)	(0.391)			(0.281)
		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
AWH Essential		-0.007	0.193***	-0.755	0.236**	0.008			0.595**
		(0.041)	(0.069)	(0.698)	(0.107)	(0.297)			(0.250)
		[1.000]	[0.096]	[0.739]	[0.102]	[1.000]			[0.096]
AWH Comprehensive		0.013	-0.057	-0.920	-0.057	0.359			0.467*
		(0.030)	(0.110)	(0.706)	(0.117)	(0.323)			(0.277)
		[0.647]	[0.647]	[0.366]	[0.647]	[0.436]			[0.267]
AWH Comprehensive Plus		-0.014	0.139*	-0.478	-0.041	0.371			0.606**
		(0.029)	(0.079)	(0.827)	(0.104)	(0.239)			(0.241)
		[1.000]	[0.371]	[1.000]	[1.000]	[0.371]			[0.249]
q-value on HS /= AWH-E		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.183]
q-value on AWH-E /= AWH-C		[1.000]	[0.055]	[1.000]	[0.055]	[0.936]			[1.000]
q-value on AWH-C /= AWH-C+		[1.000]	[0.329]	[1.000]	[1.000]	[1.000]			[1.000]
Number of Observations		922	912	892	964	155			841
Panel B: 24- to 36-month impacts									
Her Spaces	-0.047	0.039	0.164**	-0.909	-0.003	0.067	3.021	-0.927**	0.193*
	(0.161)	(0.030)	(0.076)	(0.557)	(0.136)	(0.152)	(3.755)	(0.401)	(0.113)
	[1.000]	[0.874]	[0.259]	[0.520]	[1.000]	[1.000]	[0.977]	[0.259]	[0.520]
AWH Essential	-0.000	0.024	0.138*	0.340	0.173	0.267**	-3.110	-0.313	0.235*
	(0.190)	(0.031)	(0.072)	(0.494)	(0.121)	(0.121)	(4.290)	(0.390)	(0.128)
	[1.000]	[0.702]	[0.492]	[0.702]	[0.492]	[0.492]	[0.702]	[0.702]	[0.492]
AWH Comprehensive	-0.039	0.007	0.042	0.292	-0.004	0.083	-0.765	-0.197	0.061
	(0.144)	(0.031)	(0.082)	(0.646)	(0.120)	(0.140)	(5.251)	(0.385)	(0.111)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	0.089	-0.008	0.192**	0.355	0.065	0.174	-1.160	-0.418	0.045
	(0.146)	(0.032)	(0.091)	(0.461)	(0.119)	(0.142)	(3.499)	(0.363)	(0.088)
	[1.000]	[1.000]	[0.533]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.875]	[0.875]	[0.875]	[0.145]	[0.648]	[0.648]	[0.648]	[0.648]	[0.875]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of Observations	840	968	841	820	972	460	796	854	972

Table 4. ITT regressions for girls' primary outcomes, East Hararghe sites (continued)

	Resilience									
	Score (12-36, higher= more resilience)	Index of Voice & Agency	Index of Economic Empower- ment	Index of Economic Aspir- ations (13)	Index of Gender Equitable Attitudes	Index of Gender Conscious- ness	Index of Suppor- tive Network	Index of Service Know- ledge	Index of Service Access- ibility	Index of AWH Curriculum Knowledge ¹
Panel A: 10-month impacts	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
Her Spaces	0.981	0.140	0.131	0.239	-0.060	-0.064	0.012			0.236*
Tier spaces	(0.686)	(0.103)	(0.170)	(0.190)	(0.096)	(0.098)	(0.138)			(0.131)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
AWH Essential	0.571	0.178	-0.000	0.082	0.047	0.080	0.081			0.353**
11/, 11 2000/////	(0.765)	(0.111)	(0.114)	(0.166)	(0.097)	(0.097)	(0.108)			(0.140)
	[0.843]	[0.288]	[1.000]	[1.000]	[1.000]	[0.843]	[0.843]			[0.096]
AWH Comprehensive	0.463	0.322***	-0.281**	-0.063	-0.179	0.147*	0.060			0.314***
T	(0.638)	(0.110)	(0.118)	(0.204)	(0.129)	(0.081)	(0.136)			(0.119)
	[0.647]	[0.069]	[0.087]	[0.647]	[0.366]	[0.250]	[0.647]			[0.069]
AWH Comprehensive Plus	0.157	0.010	-0.111	0.007	-0.145	0.136	0.125			0.271**
1	(0.553)	(0.107)	(0.131)	(0.166)	(0.095)	(0.084)	(0.120)			(0.129)
	[1.000]	[1.000]	[0.666]	[1.000]	[0.371]	[0.371]	[0.526]			[0.335]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[0.936]	[0.055]	[1.000]	[0.247]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[0.127]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
Number of Observations	769	832	802	940	939	933	965			890
Panel B: 24- to 36-month impacts										
Her Spaces	-0.499	0.262***	0.030	0.084	0.080	-0.087	-0.110	0.053	0.024	0.096
	(0.560)	(0.093)	(0.085)	(0.147)	(0.089)	(0.086)	(0.099)	(0.074)	(0.066)	(0.107)
	[0.919]	[0.134]	[1.000]	[1.000]	[0.919]	[0.919]	[0.919]	[1.000]	[1.000]	[0.919]
AWH Essential	0.047	0.117	-0.030	0.168	-0.113	0.135*	0.040	0.134	0.089	0.075
	(0.618)	(0.099)	(0.103)	(0.111)	(0.082)	(0.073)	(0.124)	(0.084)	(0.080)	(0.121)
	[1.000]	[0.667]	[1.000]	[0.492]	[0.492]	[0.492]	[1.000]	[0.492]	[0.685]	[0.702]
AWH Comprehensive	-0.122	0.169*	0.118	0.132	0.044	0.123	-0.012	0.066	0.028	0.003
	(0.531)	(0.099)	(0.097)	(0.109)	(0.100)	(0.085)	(0.134)	(0.084)	(0.069)	(0.106)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	-0.795	-0.150*	-0.007	0.082	0.091	-0.024	-0.304***	0.066	0.007	0.047
	(0.520)	(0.088)	(0.082)	(0.123)	(0.081)	(0.089)	(0.110)	(0.069)	(0.063)	(0.111)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[0.162]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.875]	[0.648]	[0.875]	[0.875]	[0.145]	[0.083]	[0.648]	[0.875]	[0.875]	[0.875]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[0.129]	[1.000]	[1.000]	[1.000]	[1.000]	[0.480]	[1.000]	[1.000]	[1.000]
Number of Observations	952	892	971	940	959	957	972	873	871	957

Table 5. ITT regressions for girls' primary outcomes, marginalized sites

		nons for girls pr	Index of			Index of			
	Index of	=1 if Aspires	Violence	Ideal Age	Index of	Menstrual	Ideal Age	Self-Esteem	Mental Distress
	Education	to Attain≥	(higher=	at	Physical	Hygiene	at First	Score (0-40,	Score
	Partici-	Secondary	less	Marriage	Heath &	Manage-	Child	higher= more	(0-27, higher=
	pation	School Degree	violence)	(years)	Nutrition	ment	(years)	self-esteem)	less distress)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: 10-month impacts									
Her Spaces		0.005	0.022	-0.394	0.185	0.089			0.320*
		(0.025)	(0.073)	(0.848)	(0.117)	(0.383)			(0.180)
		[0.551]	[0.551]	[0.551]	[0.135]	[0.551]			[0.124]
AWH Essential		0.021	0.015	0.283	0.325***	0.320			0.422**
		(0.020)	(0.079)	(0.966)	(0.086)	(0.540)			(0.205)
		[0.295]	[0.571]	[0.555]	[0.002]	[0.503]			[0.072]
AWH Comprehensive		-0.026	-0.092	-0.873	0.079	0.044			0.179
		(0.033)	(0.121)	(1.077)	(0.128)	(0.490)			(0.227)
		[0.808]	[0.808]	[0.808]	[0.821]	[1.000]			[0.808]
AWH Comprehensive Plus		-0.020	0.132	-0.897	-0.023	1.389***			-0.193
		(0.026)	(0.100)	(1.060)	(0.094)	(0.372)			(0.402)
		[0.423]	[0.244]	[0.412]	[0.526]	[0.004]			[0.522]
q-value on HS /= AWH-E		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+		[1.000]	[0.274]	[1.000]	[0.783]	[0.118]			[0.783]
Number of Observations		701	693	678	720	81			685
Panel B: 24- to 36-month impacts									
Her Spaces	-0.053	0.002	0.055	0.021	-0.043	0.199	2.873	-0.395	0.020
	(0.140)	(0.034)	(0.153)	(0.587)	(0.149)	(0.141)	(3.401)	(0.418)	(0.117)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	-0.004	0.001	0.053	-0.202	0.300**	0.252*	1.197	-0.381	0.203
	(0.170)	(0.039)	(0.115)	(0.532)	(0.136)	(0.132)	(2.758)	(0.426)	(0.139)
	[1.000]	[1.000]	[1.000]	[1.000]	[0.433]	[0.433]	[1.000]	[1.000]	[0.535]
AWH Comprehensive	-0.137	-0.042	-0.005	-0.466	-0.159	-0.390**	3.688	0.061	-0.225
	(0.152)	(0.041)	(0.100)	(0.778)	(0.136)	(0.152)	(2.716)	(0.279)	(0.177)
	[0.836]	[0.836]	[1.000]	[1.000]	[0.836]	[0.329]	[0.836]	[1.000]	[0.836]
AWH Comprehensive Plus	-0.169	-0.019	0.140	-0.420	-0.103	-0.084	-0.555	-0.291	-0.062
	(0.124)	(0.031)	(0.091)	(0.552)	(0.124)	(0.160)	(2.494)	(0.358)	(0.139)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[0.235]	[1.000]	[1.000]	[1.000]	[0.977]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[0.001]	[0.001]	[1.000]	[1.000]	[0.169]
q-value on AWH-C /= AWH-C+	[0.977]	[0.699]	[0.491]	[1.000]	[0.699]	[0.433]	[0.433]	[0.559]	[0.641]
Number of Observations	657	699	611	621	691	281	600	644	702

Table 5. ITT regressions for girls' primary outcomes, marginalized sites (continued)

	Resilience Score (12-36, higher= more resilience) (10)	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir- ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor- tive Network (16)	Index of Service Know- ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curriculum Knowledge ¹ (19)
Panel A: 10-month impacts										
Her Spaces	1.486***	0.255**	0.096	0.043	-0.192**	0.339***	0.259***			0.443***
	(0.545)	(0.121)	(0.144)	(0.138)	(0.095)	(0.065)	(0.062)			(0.114)
	[0.024]	[0.086]	[0.514]	[0.551]	[0.088]	[0.001]	[0.001]			[0.002]
AWH Essential	1.971***	0.417***	0.223	0.030	0.047	0.248***	0.175*			0.559***
	(0.461)	(0.097)	(0.153)	(0.104)	(0.095)	(0.092)	(0.100)			(0.128)
	[0.001]	[0.001]	[0.179]	[0.555]	[0.511]	[0.020]	[0.116]			[0.001]
AWH Comprehensive	1.681***	0.400***	0.177	-0.040	0.006	0.273***	0.132			0.466***
	(0.383)	(0.120)	(0.176)	(0.139)	(0.116)	(0.090)	(0.093)			(0.122)
	[0.002]	[0.007]	[0.808]	[1.000]	[1.000]	[0.011]	[0.475]			[0.002]
AWH Comprehensive Plus	0.554	0.290**	0.141	-0.159	-0.304***	0.367***	0.331***			0.328***
	(0.566)	(0.131)	(0.166)	(0.121)	(0.085)	(0.082)	(0.121)			(0.111)
	[0.412]	[0.050]	[0.412]	[0.244]	[0.004]	[0.001]	[0.017]			[0.013]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[0.812]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+	[0.226]	[0.783]	[1.000]	[0.783]	[0.118]	[0.783]	[0.516]			[0.783]
Number of Observations	605	648	631	710	707	706	721			690
Panel B: 24- to 36-month impacts										
Her Spaces	-0.047	0.261**	0.086	0.007	0.133	0.178	-0.009	-0.003	0.015	-0.115
	(0.674)	(0.121)	(0.112)	(0.126)	(0.120)	(0.111)	(0.121)	(0.138)	(0.134)	(0.106)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	-0.021	0.053	0.284*	0.043	0.003	-0.037	0.123	0.431**	0.385*	0.013
	(0.736)	(0.135)	(0.159)	(0.093)	(0.112)	(0.095)	(0.105)	(0.205)	(0.207)	(0.140)
	[1.000]	[1.000]	[0.433]	[1.000]	[1.000]	[1.000]	[0.897]	[0.433]	[0.433]	[1.000]
AWH Comprehensive	0.569	0.114	0.244**	-0.152	0.026	0.200**	0.122	0.178	0.150	0.042
	(0.708)	(0.121)	(0.122)	(0.135)	(0.135)	(0.095)	(0.126)	(0.163)	(0.142)	(0.109)
	[0.944]	[0.836]	[0.428]	[0.836]	[1.000]	[0.428]	[0.836]	[0.836]	[0.836]	[1.000]
AWH Comprehensive Plus	-0.397	-0.230**	0.001	-0.046	-0.064	0.044	-0.158	0.136	0.149	-0.122
	(0.616)	(0.110)	(0.099)	(0.100)	(0.100)	(0.109)	(0.114)	(0.118)	(0.116)	(0.116)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[1.000]	[0.977]	[0.977]	[1.000]	[0.987]	[0.520]	[0.987]	[0.627]	[0.757]	[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[0.946]	[1.000]	[0.030]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[0.491]	[0.129]	[0.337]	[0.641]	[0.641]	[0.433]	[0.337]	[0.977]	[1.000]	[0.433]
Number of Observations	681	661	701	680	692	692	701	651	649	692

Table 6. ITT regressions for girls' primary outcomes, non-marginalized sites

		don's for girls pri	Index of	·		Index of			
	Index of Education	=1 if Aspires to Attain ≥	Violence (higher=	Ideal Age at	Index of Physical	Menstrual Hygiene	Ideal Age at First	Self-Esteem Score (0-40,	Mental Distress Score
	Partici- pation	Secondary School Degree	less violence)	Marriage (years)	Heath & Nutrition	Manage- ment	Child (years)	higher= more self-esteem)	(0-27, higher= less distress)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Panel A: 10-month impacts									
Her Spaces		-0.007	0.134	0.430	0.024	-0.199			-0.002
		(0.018)	(0.088)	(0.652)	(0.106)	(0.373)			(0.229)
		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
AWH Essential		-0.027	0.139	0.063	0.012	0.085			0.380*
		(0.033)	(0.087)	(0.684)	(0.094)	(0.306)			(0.205)
		[1.000]	[0.913]	[1.000]	[1.000]	[1.000]			[0.913]
AWH Comprehensive		0.021	-0.016	0.711	-0.151	0.252			0.358*
		(0.018)	(0.100)	(0.722)	(0.113)	(0.278)			(0.213)
		[0.925]	[1.000]	[0.925]	[0.925]	[0.925]			[0.634]
AWH Comprehensive Plus		-0.007	0.140	0.196	-0.118	0.109			0.230
		(0.018)	(0.091)	(0.667)	(0.096)	(0.211)			(0.194)
		[1.000]	[0.956]	[1.000]	[0.956]	[1.000]			[0.956]
q-value on HS /= AWH-E		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.266]
q-value on AWH-E /= AWH-C		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+		[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
Number of Observations		1251	1235	1233	1283	160			1181
Panel B: 24- to 36-month impacts									
Her Spaces	0.024	0.019	0.138	-0.734	-0.060	-0.164	3.094	-0.012	0.049
	(0.132)	(0.027)	(0.103)	(0.519)	(0.105)	(0.167)	(2.111)	(0.355)	(0.109)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.190	0.031	0.043	0.397	-0.050	0.227	-1.766	0.233	-0.018
	(0.131)	(0.026)	(0.103)	(0.529)	(0.088)	(0.140)	(3.187)	(0.342)	(0.126)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.160	0.042*	0.106	-0.278	-0.050	0.264**	-0.749	-0.082	0.066
	(0.126)	(0.023)	(0.086)	(0.587)	(0.080)	(0.130)	(3.325)	(0.327)	(0.103)
	[0.562]	[0.389]	[0.562]	[1.000]	[1.000]	[0.389]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	0.181	0.019	0.041	0.338	0.100	0.164	0.052	0.246	-0.038
	(0.126)	(0.027)	(0.119)	(0.426)	(0.093)	(0.161)	(2.620)	(0.334)	(0.121)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.613]	[0.779]	[0.664]	[0.313]	[1.000]	[0.129]	[0.429]	[0.717]	[0.779]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[0.948]	[1.000]	[0.948]	[0.591]	[0.948]	[1.000]	[0.948]	[0.948]
Number of Observations	1120	1218	1088	1096	1207	521	1068	1090	1221

Table 6. ITT regressions for girls' primary outcomes, non-marginalized sites (continued)

	Resilience Score (12-36, higher= more resilience) (10)	Index of Voice & Agency (11)	Index of Economic Empower- ment (12)	Index of Economic Aspir- ations (13)	Index of Gender Equitable Attitudes (14)	Index of Gender Conscious- ness (15)	Index of Suppor- tive Network (16)	Index of Service Know- ledge (17)	Index of Service Access- ibility (18)	Index of AWH Curriculum Knowledge ¹ (19)
Panel A: 10-month impacts										
Her Spaces	-0.101	0.124	0.156	0.033	-0.009	-0.031	-0.124			0.115
	(0.403)	(0.090)	(0.150)	(0.129)	(0.091)	(0.121)	(0.106)			(0.109)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
AWH Essential	-0.280	0.173*	-0.039	-0.005	0.062	-0.017	-0.036			0.144
	(0.490)	(0.102)	(0.115)	(0.136)	(0.092)	(0.106)	(0.090)			(0.096)
	[1.000]	[0.913]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[0.913]
AWH Comprehensive	0.018	0.204**	0.118	0.038	0.097	-0.031	-0.039			0.207**
	(0.386)	(0.089)	(0.133)	(0.141)	(0.113)	(0.105)	(0.098)			(0.098)
	[1.000]	[0.360]	[0.925]	[1.000]	[0.925]	[1.000]	[1.000]			[0.360]
AWH Comprehensive Plus	0.074	0.114	0.219*	0.085	0.053	0.103	0.033			0.290***
	(0.320)	(0.094)	(0.131)	(0.119)	(0.108)	(0.091)	(0.094)			(0.105)
	[1.000]	[0.956]	[0.956]	[1.000]	[1.000]	[0.956]	[1.000]			[0.104]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]			[1.000]
Number of Observations	1106	1188	1146	1263	1260	1266	1284			1210
Panel B: 24- to 36-month impacts										
Her Spaces	-0.593	0.101	0.055	0.023	-0.019	0.011	-0.100	-0.004	-0.040	0.051
	(0.474)	(0.098)	(0.101)	(0.137)	(0.098)	(0.094)	(0.098)	(0.103)	(0.112)	(0.106)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.460	0.204**	0.129	0.175	0.085	0.053	0.062	0.149	0.170	0.073
	(0.401)	(0.094)	(0.117)	(0.112)	(0.108)	(0.078)	(0.109)	(0.118)	(0.116)	(0.107)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.032	0.157*	0.282**	0.207**	-0.031	0.138*	0.020	-0.027	-0.031	-0.009
	(0.409)	(0.086)	(0.125)	(0.101)	(0.094)	(0.080)	(0.106)	(0.101)	(0.104)	(0.091)
	[1.000]	[0.389]	[0.389]	[0.389]	[1.000]	[0.389]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	-0.329	-0.043	0.199*	0.056	0.161*	-0.021	0.064	-0.066	-0.063	0.087
	(0.409)	(0.087)	(0.117)	(0.113)	(0.082)	(0.081)	(0.116)	(0.116)	(0.118)	(0.100)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[0.157]	[0.635]	[0.717]	[0.613]	[0.635]	[0.779]	[0.442]	[0.442]	[0.328]	[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[0.948]	[0.370]	[1.000]	[0.591]	[0.265]	[0.393]	[1.000]	[1.000]	[1.000]	[0.948]
Number of Observations	1193	1162	1219	1177	1215	1212	1220	1102	1101	1208

Table 7. ITT regressions for boys' primary outcomes

	Index of Gender Equitable Attitudes	Index of Gender Consciousness	Index of Violence (higher= less violence)	Mental Distress Score (0-27, higher= less distress)	=1 if Has a Supportive Adult	Index of AWH (Boys') Curriculum Knowledge ¹
	(1)	(2)	(3)	(4)	(5)	(6)
Panel A: 10-month impacts						
Her Spaces	-0.261***	0.098	0.011	-0.413	0.013	-0.029
	(0.081)	(0.072)	(0.070)	(0.280)	(0.036)	(0.078)
	0.01	0.419	0.777	0.419	0.766	0.766
AWH Essential	-0.251***	0.025	-0.049	-0.106	0.044	-0.030
	(0.074)	(0.086)	(0.074)	(0.131)	(0.038)	(0.074)
	0.006	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	-0.060	0.082	0.013	-0.307*	0.021	0.051
	(0.082)	(0.079)	(0.076)	(0.168)	(0.032)	(0.077)
	[1.000]	[1.000]	[1.000]	0.718	[1.000]	[1.000]
AWH Comprehensive Plus	-0.102	-0.112	0.013	-0.257*	-0.003	0.029
	(0.080)	(0.100)	(0.075)	(0.131)	(0.033)	(0.090)
	0.785	0.785	[1.000]	0.451	[1.000]	[1.000]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-E /= AWH-C	0.092	0.72	0.72	0.72	0.72	0.72
q-value on AWH-C /= AWH-C+	[1.000]	0.534	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	1528	1532	1531	1429	1535	1528
Panel B: 24- to 36-month impacts	S					
Her Spaces	-0.073	0.057	-0.016	0.051	0.071**	0.051
•	(0.078)	(0.088)	(0.072)	(0.094)	(0.036)	(0.080)
	[1.000]	[1.000]	[1.000]	[1.000]	[0.400]	[1.000]
AWH Essential	0.102	0.005	0.112	0.040	0.018	-0.010
	(0.089)	(0.087)	(0.074)	(0.099)	(0.041)	(0.082)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.183**	0.077	-0.032	-0.096	0.088***	0.059
•	(0.077)	(0.080)	(0.073)	(0.089)	(0.031)	(0.092)
	[0.051]	[0.503]	[0.798]	[0.503]	[0.034]	[0.726]
AWH Comprehensive Plus	0.149*	0.054	-0.075	-0.045	0.089***	0.169**
	(0.080)	(0.088)	(0.072)	(0.106)	(0.034)	(0.078)
	[0.105]	[0.484]	[0.289]	[0.507]	[0.064]	[0.086]
q-value on HS /= AWH-E	[0.429]	[0.684]	[0.429]	[0.793]	[0.429]	[0.684]
q-value on AWH-E /= AWH-C	[0.382]	[0.382]	[0.316]	[0.316]	[0.316]	[0.446]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	1439	1443	1445	1447	1446	1440

Table 7. ITT regressions for boys' primary outcomes (continued)

			South G	ondar sites		
	Index of Gende	er	Index of Violence	Mental Distress Score	=1 if Has a	Index of AWH (Boys')
	Equitable Attitudes	Index of Gender Consciousness	(higher= less violence)	(0-27, higher= less distress)	Supportive Adult	Curriculum Knowledge ¹
	(7)	(8)	(9)	(10)	(11)	(12)
Panel A: 10-month impacts		(0)	(2)	(10)	(11)	(12)
Her Spaces	-0.296***	0.211*	-0.027	-0.032	0.023	-0.076
ar a	(0.107)	(0.119)	(0.094)	(0.151)	(0.044)	(0.120)
	0.046	0.245	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	-0.209**	0.196	0.166*	0.101	0.033	-0.025
11// 11 22500000	(0.103)	(0.134)	(0.089)	(0.143)	(0.050)	(0.112)
	0.239	0.246	0.239	0.436	0.436	0.704
AWH Comprehensive	0.062	0.101	0.151	0.007	-0.010	0.001
	(0.127)	(0.112)	(0.111)	(0.143)	(0.046)	(0.117)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	-0.115	0.141	0.034	-0.137	0.035	-0.118
T I I I I I I I I I I I I I I I I I I I	(0.123)	(0.149)	(0.104)	(0.156)	(0.049)	(0.138)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[1.000]	[1.000]	0.161	[1.000]	[1.000]	[1.000]
q-value on AWH-E /= AWH-C	[0.137]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[0.941]	[0.941]	[0.941]	[0.941]	[0.941]	[0.941]
Number of observations	778	779	779	773	781	778
Panel B: 24- to 36-month impacts						
Her Spaces	-0.087	0.147	-0.091	0.061	0.089	-0.031
1	(0.106)	(0.150)	(0.096)	(0.139)	(0.058)	(0.112)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.217*	-0.118	0.101	0.113	0.008	-0.050
	(0.114)	(0.148)	(0.085)	(0.120)	(0.062)	(0.114)
	[0.594]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.319***	0.049	-0.045	-0.144	0.070	0.060
1	(0.116)	(0.138)	(0.100)	(0.123)	(0.044)	(0.117)
	[0.048]	[0.945]	[0.945]	[0.513]	[0.394]	[0.945]
AWH Comprehensive Plus	0.263*	0.024	-0.064	-0.054	0.053	0.107
	(0.134)	(0.154)	(0.107)	(0.140)	(0.049)	(0.108)
	[0.477]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	0.013	0.078	0.078	0.666	0.266	0.725
q-value on AWH-E /= AWH-C	0.359	0.283	0.283	0.276	0.359	0.359
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	710	713	712	713	713	713

Table 7. ITT regressions for boys' primary outcomes (continued)

			East Har	arghe sites		
	Index of Gende	r	Index of Violence	Mental Distress Score	=1 if Has a	Index of AWH (Boys')
	Equitable Attitudes	Index of Gender Consciousness	(higher= less violence)	(0-27, higher= less distress)	Supportive Adult	Curriculum Knowledge ¹
	(13)	(14)	(15)	(16)	(17)	(18)
Panel A: 10-month impacts	2.100			2.226		0.010
Her Spaces	-0.188	-0.035	0.017	-0.906	0.014	0.019
	(0.117)	(0.080)	(0.104)	(0.570)	(0.059)	(0.093)
	[0.534]	[1.000]	[1.000]	[0.534]	[1.000]	[1.000]
AWH Essential	-0.253**	-0.164	-0.271***	-0.377	0.060	-0.036
	(0.102)	(0.107)	(0.101)	(0.235)	(0.057)	(0.099)
	0.049	0.15	0.049	0.15	0.243	0.317
AWH Comprehensive	-0.191*	0.097	-0.068	-0.632**	0.036	0.125
	(0.101)	(0.105)	(0.098)	(0.298)	(0.043)	(0.098)
	0.232	0.473	0.489	0.232	0.473	0.383
AWH Comprehensive Plus	-0.071	-0.345***	-0.021	-0.455**	-0.037	0.171
	(0.102)	(0.115)	(0.099)	(0.215)	(0.043)	(0.108)
	0.412	0.023	0.708	0.105	0.412	0.187
q-value on HS /= AWH-E	0.997	0.933	0.058	0.997	0.997	0.997
q-value on AWH-E /= AWH-C	0.434	0.114	0.114	0.434	0.462	0.244
q-value on AWH-C /= AWH-C+	0.246	0.007	0.534	0.534	0.076	0.534
Number of observations	750	753	752	656	754	750
Panel B: 24- to 36-month impacts	S					
Her Spaces	-0.074	-0.005	0.026	0.035	0.060	0.135
-	(0.101)	(0.083)	(0.100)	(0.136)	(0.044)	(0.110)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.002	0.100	0.106	0.000	0.027	0.016
	(0.114)	(0.082)	(0.114)	(0.150)	(0.055)	(0.121)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive	0.055	0.102	-0.017	-0.046	0.105**	0.060
F. Comp.	(0.104)	(0.075)	(0.105)	(0.128)	(0.042)	(0.144)
	[1.000]	0.823	[1.000]	[1.000]	0.105	[1.000]
AWH Comprehensive Plus	0.042	0.102	-0.102	0.001	0.124***	0.223**
111 Comprehensive I was	(0.095)	(0.089)	(0.098)	(0.163)	(0.046)	(0.104)
	[1.000]	0.522	0.522	[1.000]	0.058	0.104)
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-E /= AWH-C	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+		[1.000]		[1.000]		[1.000]
Q-value on A w H-C /= A w H-C+ Number of observations	[1.000] 729	[1.000] 730	[1.000] 733	[1.000] 734	[1.000] 733	[1.000] 727

Table 7. ITT regressions for boys' primary outcomes (continued)

	Index of Gender Equitable	Index of Gender	Index of Violence (higher= less	Mental Distress Score (0-27, higher=	=1 if Has a Supportive	Index of AWH (Boys') Curriculum
	Attitudes	Consciousness	violence)	less distress)	Adult	Knowledge ¹
	(19)	(20)	(21)	(22)	(23)	(24)
Panel A: 10-month impacts						
Her Spaces	-0.378***	0.239*	-0.045	-0.083	0.025	-0.008
	(0.120)	(0.121)	(0.106)	(0.195)	-0.061	(0.124)
	0.016	0.153	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	-0.153	0.160	-0.232*	0.023	0.042	0.131
	(0.113)	(0.176)	(0.123)	(0.209)	(0.066)	(0.080)
	0.486	0.579	0.486	0.838	0.58	0.486
AWH Comprehensive	-0.171	0.229*	-0.039	-0.696**	-0.036	-0.047
	(0.140)	(0.129)	(0.124)	(0.307)	(0.055)	(0.116)
	0.43	0.25	0.821	0.194	0.821	0.821
AWH Comprehensive Plus	0.052	-0.155	0.014	-0.339	-0.058	0.177
-	(0.117)	(0.159)	(0.130)	(0.267)	(0.056)	(0.107)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	0.359	[1.000]	0.786	[1.000]	[1.000]	0.786
q-value on AWH-E /= AWH-C	0.524	0.524	0.346	0.064	0.402	0.346
q-value on AWH-C /= AWH-C+	0.168	0.107	0.555	0.257	0.555	0.168
Number of observations	559	561	560	535	563	561
Panel B: 24- to 36-month impacts						
Her Spaces	-0.168*	0.072	-0.102	0.188	0.079	0.192
•	(0.099)	(0.100)	(0.092)	(0.159)	(0.063)	(0.115)
	0.438	0.468	0.438	0.438	0.438	0.438
AWH Essential	0.223*	-0.179**	-0.038	0.343**	0.155**	0.190*
	(0.121)	(0.079)	(0.150)	(0.133)	(0.062)	(0.105)
	0.058	0.049	0.154	0.049	0.049	0.058
AWH Comprehensive	0.185	0.033	-0.168	0.227	0.170***	0.175
<i>T</i>	(0.114)	(0.099)	(0.130)	(0.150)	(0.056)	(0.110)
	0.204	0.321	0.254	0.204	0.023	0.204
AWH Comprehensive Plus	0.077	-0.099	-0.286**	0.047	0.090*	0.227**
	(0.136)	(0.112)	(0.140)	(0.218)	(0.050)	(0.100)
	0.524	0.401	0.16	0.709	0.16	0.16
q-value on HS /= AWH-E	0.001	0.029	[1.000]	0.681	0.681	[1.000]
q-value on AWH-E /= AWH-C	[1.000]	0.229	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	529	533	534	534	534	532

Table 7. ITT regressions for boys' primary outcomes (continued)

			Non-Marg	inalized sites		
	Index of Gende	er	Index of Violence	Mental Distress Score	=1 if Has a	Index of AWH (Boys')
	Equitable Attitudes	Index of Gender Consciousness	(higher= less violence)	(0-27, higher= less distress)	Supportive Adult	Curriculum Knowledge ¹
	(25)	(26)	(27)	(28)	(29)	(30)
Panel A: 10-month impacts	(23)	(20)	(= /)	(20)	(=>)	(8.0)
Her Spaces	-0.195*	0.013	0.052	-0.634	0.008	-0.056
T. T	(0.103)	(0.092)	(0.092)	(0.396)	(0.047)	(0.099)
	0.515	[1.000]	[1.000]	0.515	[1.000]	[1.000]
AWH Essential	-0.290***	-0.057	0.037	-0.157	0.041	-0.128
	(0.096)	(0.100)	(0.088)	(0.169)	(0.047)	(0.105)
	0.02	[1.000]	[1.000]	0.94	0.94	0.94
AWH Comprehensive	-0.000	0.000	0.040	-0.109	0.039	0.073
in in the same of	(0.099)	(0.099)	(0.097)	(0.194)	(0.039)	(0.100)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Comprehensive Plus	-0.144	-0.133	0.007	-0.157	0.022	-0.051
1,,11 comprehensive 1 vus	(0.101)	(0.124)	(0.092)	(0.140)	(0.042)	(0.125)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on HS /= AWH-E	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
q-value on AWH-E /= AWH-C	0.013	[1.000]	[1.000]	[1.000]	[1.000]	0.115
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	969	971	971	894	972	967
Panel B: 24- to 36-month impacts		7,1	,,1		, , <u>-</u>	701
Her Spaces	-0.079	0.090	0.035	-0.028	0.056	-0.032
T. T. T. T.	(0.107)	(0.122)	(0.096)	(0.102)	(0.043)	(0.106)
	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
AWH Essential	0.025	0.092	0.217***	-0.138	-0.060	-0.122
12 / 11 = 550 · · · · · · · · ·	(0.115)	(0.123)	(0.080)	(0.122)	(0.048)	(0.108)
	0.654	0.654	0.053	0.491	0.491	0.491
AWH Comprehensive	0.163	0.107	0.053	-0.276***	0.043	-0.049
in it comprehensive	(0.104)	(0.103)	(0.087)	(0.101)	(0.034)	(0.124)
	0.44	0.579	0.679	0.046	0.509	0.679
AWH Comprehensive Plus	0.161	0.143	0.023	-0.145	0.076*	0.123
20	(0.099)	(0.116)	(0.080)	(0.103)	(0.041)	(0.102)
	0.398	0.398	0.424	0.398	0.398	0.398
q-value on HS /= AWH-E	0.485	0.96	0.082	0.485	0.082	0.485
q-value on AWH-E /= AWH-C	0.352	0.716	0.032	0.386	0.032	0.64
q-value on AWH-C /= AWH-C+	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]	[1.000]
Number of observations	910	910	911	913	912	908

Notes for Table 7: This table presents intention to treat (ITT) results from regressions as specified in equation (1), on the full sample of adolescent boys surveyed in the first follow-up survey round (Panel A) and the second follow-up survey round (Panel B), for the sample indicated in the table title (all sites, South Gondar sites, East Hararghe sites, sites in marginalized communities, and sites in non-marginalized communities). For each outcome measure listed in the column titles, the coefficients (standard errors) [FDR adjusted q-values] for each of the four treatment group indicators are displayed. Outcomes are described in more detail in Appendix B. Regressions are OLS, and include basic and rich controls sets. The basic controls include adolescent age at the time of study recruitment as well as indicators for households with multiple eligible adolescents, sampling block, and survey month; regressions in Panel B additionally include indicators for survey year and randomly assigned survey wave. The rich set of controls for both panels include household size, a household asset index, and indicators for the household head being literate, the household head being female, and the household ever receiving PSNP benefits (by baseline survey). Missing values for controls are set to the mean value for the sample. Regressions are weighted to maintain initial population proportions, and standard errors are clustered by community (kebele).

Table 8. Counts of positive coefficients across girls' primary outcomes

	All s	sites	South (Gondar	East Hararghe		Marginalized sites		Non-marginalized sites	
	F1	F2	F1	F2	F1	F2	F1	F2	F1	F2
Her Spaces	12	11	10	8		12	12	12	7	10
AWH Essential	13	17	12	15		14	14	14	8	16
AWH Comprehensive	12	13	8	11	8	13	10	11	10	11
AWH Comprehensive+	9	12	9	9	9	11	8	5	12	13
# Outcomes Studied	14	19	14	19	14	19	14	19	14	19

Notes for Table 8: This table displays counts of positive coefficient estimates across treatment arm, residential location, and survey round (ignoring statistical significance), summarizing the findings on adolescent girls' outcomes reported in Tables 2-6. A striped background indicates the intervention arm with the highest number of positive coefficients in that location and survey round, and a dotted background indicates the intervention arm with the lowest number of positive coefficients in that location and survey round.

Table 9. Significance across girls' primary outcomes

1 able 9.	9. Significance across girls' primary outcome						
	All Sites						
	10 months				,	24- to 36-months	
	Ą.		NHA	MH.C	MILCX		WHIE WHICK
Index of Education Participation							_
=1 if aspires to attain ≥ secondary school degree							
Index of Violence (higher=less)							
Ideal age at marriage							
Index of Physical Health and Nutrition							
Index of Menstrual Hygiene Management				+			
Ideal age at first child							
Self-esteem score							
Mental distress score (higher = less distress)		+					
Resilience score							
Index of Voice and Agency	+	+	+	+			i – i
Index of Economic Empowerment							
Index of Economic Aspirations							
Index of Gender Equitable Attitudes							
Index of Gender Consciousness			+				F:
Index of Supportive Network							
Index of Service Knowledge							
Index of Service Accessibility							
Index of AWH Curriculum Knowledge	+	+	+	+			
# positive, statistically significant impacts	2	3	3	3	0	0	0 0

Table 9. Significance across girls' primary outcomes

		South Gondar sites								East Harghe sites								
		10 months				24- to 36-months				10 months			24- to 3			36-mo	nths	
	IJ\$	A.	H.E.	MH.C	WILCX	AWIL	AWIL AWIL	¢×	IJS.	AWI	LÊ WÎ	yc S	MILCX	AWI	i.E. WI	C AWIT	×	
Index of Education Participation =1 if aspires to attain ≥ secondary school degree Index of Violence (higher=less) Ideal age at marriage Index of Physical Health and Nutrition Index of Menstrual Hygiene Management Ideal age at first child Self-esteem score										+	€							
Mental distress score (higher = less distress) Resilience score Index of Voice and Agency Index of Economic Empowerment Index of Economic Aspirations		+	+	+++	[+	000			+	+	•						
Index of Gender Equitable Attitudes Index of Gender Consciousness Index of Supportive Network Index of Service Knowledge Index of Service Accessibility Index of AWH Curriculum Knowledge				+		: 	□ - <u>i</u>			+	+							
# positive, statistically significant impacts	0	1	1	4	0	1 0	0		0	3	2	0	0	0	0	0		

Table 9. Significance across girls' primary outcomes

		Marginalized sites									Non-marginalized sites								
		10 months				24- to 36-months					1	10 months			, 2	4- to	36-month	18	
	Ą	<u> ج</u>	WH.E.	WH.C	MICX		WHE	NH.C	NI.CX		U S	AW	LE AWIL	î AMH	(×/	AWI	d.E	H.C. ANH.C.	<
Index of Education Participation																			_
=1 if aspires to attain \geq secondary school degree																			
Index of Violence (higher=less)																			
Ideal age at marriage																			
Index of Physical Health and Nutrition		+																	
Index of Menstrual Hygiene Management				+			r												
Ideal age at first child								1											
Self-esteem score																			
Mental distress score (higher = less distress)		+																	
Resilience score	+	+	+																
Index of Voice and Agency	+	+	+	+															
Index of Economic Empowerment																			
Index of Economic Aspirations																			
Index of Gender Equitable Attitudes	-			-															
Index of Gender Consciousness	+	+	+	+															
Index of Supportive Network	+			+															
Index of Service Knowledge																			
Index of Service Accessibility																			
Index of AWH Curriculum Knowledge	+	+	+	+									-	-					
# positive, statistically significant impacts	5	6	4	5	0	0	0	0			0	0	0 1	0) (0	0	0	

Notes for Table 9: This table summarizes statistically significant results on adolescent girls' primary outcomes from Tables 2-6, using the standard cutoff of q≤0.1. Each cell in the table displays impacts on girls' primary outcomes by direction and statistical significance, both between each intervention arm and the control group (+/- noted in cell indicates pos/neg coefficient that is statistically significant), and across increasing intensity of intervention layers (a cell border indicates that the intervention arm is statistically significantly different from the intervention layer to the left, with a thick solid border indicating an increase from the previous layer, and a hashed border indicating a decrease from the previous layer).