

# Mid-term follow-up of a parenting intervention delivered through an unconditional cash transfer platform on child development in rural and urban Bangladesh

## Briefing

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## Key messages

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Combining parenting support with a government unconditional cash transfer (UCT) platform can deliver sustained improvements in the home learning and stimulation environment, even five to six years after programme completion.

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A combined parenting + UCT intervention showed no long-term impact on the IQ of children aged 6–8 years in either urban or rural settings.

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In the urban setting, children who received the intervention showed improved reading outcomes, whereas no benefits were observed in mathematics.

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In the rural setting, the intervention did not lead to significant improvements in children's reading or mathematics at follow-up.

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Sustained benefits for mothers, particularly in the urban setting, included improvements in childcare knowledge, empowerment and mental health, reinforcing the value of parenting support during early childhood.

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## About this briefing

This briefing presents evidence from a follow-up of two cluster-randomised controlled trials in Bangladesh, examining the sustained impacts of integrating a parenting intervention with a government unconditional cash transfer (UCT) programme. It reports effects on children's cognitive and learning outcomes and the home stimulation environment, and on mothers' knowledge, empowerment, mental health, quality of life and exposure to household violence, comparing parenting + UCT, UCT-only and control groups across urban and rural settings.

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## Acknowledgements

We sincerely thank all individuals and organisations whose contributions made this follow-up study possible. We acknowledge the valuable collaboration of the Rangpur City Corporation, Upazila Health Complex, Ullapara (Sirajganj), and the Ministry of Women and Children Affairs (MOWCA), as well as the government officials, service providers and community stakeholders who supported implementation. Finally, we extend our deepest appreciation to the mothers and children who participated in the study; without their time and cooperation, this work would not have been possible. The icddr,b is grateful to the Government of Bangladesh and Canada (Global Affairs Canada) for providing core/unrestricted support.

## Recommended citation

Hossain, S.J., Hossain, M.T., Baker-Henningham, H. and Hamadani, J.D. (2026). *Mid-term follow-up of a parenting intervention delivered through an unconditional cash transfer platform on child development in rural and urban Bangladesh*. Thrive briefing, Oxford Policy Management. <https://thrivechildevidence.org/resource-centre/mid-term-follow-up-of-a-parenting-intervention-delivered-through-an-unconditional-cash-transfer-platform-on-child-development-in-rural-and-urban-bangladesh/>

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# Introduction

Early childhood is a foundational period that shapes lifelong cognitive, emotional and socio-behavioural outcomes. However, in low- and middle-income countries, a large proportion of children enter school without exposure to adequate early learning, stimulation, and/or responsive caregiving – factors that can impede development from the start of life. Social protection platforms, such as unconditional cash transfer (UCT), can reduce economic barriers to caregiving, while parenting interventions aim to strengthen caregiver engagement and home stimulation practices. Combining these two approaches has been recognised globally as a promising strategy; however, evidence on sustained effects into middle childhood remains limited.

This briefing presents results from a follow-up of two cluster randomised controlled trials (cRCTs) conducted in Bangladesh, five to six years after the intervention. The study evaluates whether early gains from parenting sessions delivered through a government UCT platform were sustained into middle childhood (age 6–8 years). The trials were conducted in one urban and one rural setting.

## Study objectives

The study sought to:

- **Assess whether early developmental gains** from an integrated parenting + cash intervention were sustained over time.
- **Compare intervention effects** of the parenting + cash package versus cash-only (urban and rural designs differ).
- **Examine impacts** on children's IQ and foundational learning (in reading and mathematics), maternal wellbeing, empowerment and the quality of home stimulation.

# Methods

Two cRCTs were conducted to test whether combining parenting support with UCT improves long-term outcomes for vulnerable families.

## Urban trial: Rangpur City Corporation

- Two-arm cRCT (n=20 clusters):
  - parenting + UCT (n=10 clusters, n=299 participants)
  - UCT-only (n=10 clusters, n=300 participants).
- Mothers enrolled in the government's social safety net programme when children were 6–16 months old.
- Baseline sample: 599 mother/child dyads; follow-up sample: 556 (7.2% attrition).
- A new sample of mother/child dyads who did not receive parenting sessions or cash was recruited at this middle-term follow-up (n=267).

## Rural trial: Ullapara, Sirajganj

- Three-arm cRCT (n=30 clusters):
  - parenting + UCT (n=10 clusters, n=197 participants)
  - UCT-only (n=10 clusters, n=188 participants)
  - no-intervention comparison (n=10 clusters, n=209 participants).
- Mothers enrolled in the government's social safety net programme when children were 6–16 months old.
- Baseline sample: 594 mother/child dyads; follow-up sample: 536 (9.8% attrition).

## Intervention description

- Participants in the UCT-only and parenting + UCT arms of the trial received monthly cash transfers for three years through the Ministry of Women and Children Affairs-led UCT systems: BDT 800 per month in urban areas and BDT 500 per month in rural areas.
- Mothers in the parenting + UCT group received one year of fortnightly home-based parenting sessions in addition to the UCT. The parenting intervention

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used an adapted Reach-Up curriculum (see <https://reachupandlearn.com/>) focusing on:

- responsive parenting
- play-based stimulation
- language-rich interaction
- caregiver confidence and engagement.

## Follow-up

This follow-up study was conducted between December 2024 and March 2025 using a two-step data collection approach:

- **Household interview** – socioeconomic profile, maternal knowledge, empowerment, home environment
- **Centre-based child assessment** – children’s Full Scale IQ, children’s school achievement in reading and mathematics, maternal depressive symptoms, quality of life and women’s exposure to violence.

This combined approach ensured both caregiver-reported and directly assessed outcomes were included in the analysis.

## Outcomes

### Primary outcome

- Child Full Scale IQ: Wechsler Intelligence Scale for Children, Fifth Edition (WISC-V).

### Secondary outcome

- Child foundational reading and mathematics abilities: Early Grade Reading Assessment (EGRA), Early Grade Mathematics Assessment (EGMA).
- Quality of the home stimulation environment: Middle-Childhood Home Observation for Measurement of the Environment (MC-HOME).
- Maternal knowledge of childcare.
- Maternal depressive symptoms: Self-Reporting Questionnaire-20 (SRQ-20).
- Women’s empowerment.
- Women’s quality of life: WHO Quality of Life: WHOQOL-BREF.
- Women’s exposure to household violence.

## Analysis

- Intention-to-treat (ITT) analysis.

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- Linear and generalised mixed-effects models were used to evaluate the impact of the intervention.
- Controlled for baseline differences between groups, tester effects, child age and sex as fixed effects and clustering as a random effect.

# Key findings

## Child cognitive development

- **No significant impact on children's Full Scale IQ** in either urban or rural samples five to six years after the intervention.
- **Early cognitive gains from parenting sessions did not translate** into measurable IQ differences in middle childhood (ages 6–8).

## Early grade reading and mathematics

- **Children who received parenting + UCT showed a significant improvement in reading ability**, but no significant improvement in mathematics scores in the urban setting.
- **No significant improvement was observed in either reading or mathematics outcomes** in the rural setting.

## Home stimulation environment

- **Strong and sustained improvements** in both urban and rural samples.
- **Parenting + UCT group had higher quality home learning environments** years after intervention.

## Maternal knowledge and empowerment

- **Large and sustained improvements** for urban mothers in:
  - maternal knowledge of childcare
  - women's empowerment (mobility and participation in financial decisions).
- But **no improvement** among rural mothers.

## Maternal mental health and violence against women

- **Urban mothers** who received both parenting support and UCT showed a significant reduction in depressive symptoms, but there was no reduction in violence against women.
- **Rural mothers** showed no statistically significant improvement in mental health outcomes or reduction in exposure to violence.

## Effects of cash alone

When comparing UCT-only vs. absolute control:

- **Cash alone led to limited benefits in the rural environment**, with benefits found in physical health in the quality of life measure
- **Cash alone may improve** the stimulation environment and maternal empowerment among urban mothers.

# Interpretation of results

## What sustained over time

- Improved home environments (both rural and urban).
- Improved maternal knowledge (urban).
- Reduced depressive symptoms (urban).
- Improved reading outcomes for children (urban).
- Enhanced women empowerment (urban).

## What did not sustain

- Child cognitive scores (Full Scale IQ).
- Reductions in women's exposure to violence at home.
- Improvements across quality-of-life domains.

## Why might IQ effects not sustain?

- Middle childhood outcomes may be influenced by:
  - school quality
  - continued home stimulation
  - poverty-related stressors
  - broader environmental factors.
- Early childhood parenting interventions that are more intensive and/or of longer duration may be necessary for sustained effects on children's IQ.
- Without ongoing investments and interventions, early gains may fade.

# Insights and learning

## Benefits to the home environment were sustained over time

Home stimulation showed the strongest and most consistent long-term gains across settings. Maternal knowledge of childcare was sustained among urban mothers. This is important because these factors are key drivers of child learning and wellbeing during childhood and adolescence.

## Maternal mental health benefits are meaningful

Reduced maternal depressive symptoms in the urban sample indicate a valuable long-term impact, reflecting the role of parenting programmes in improving caregiver wellbeing.

## Cash transfers alone contribute to some improvements

The quasi-experimental design in an urban area suggests that receiving UCT alone may indirectly strengthen empowerment and stimulation, likely by reducing financial stress and increasing control over resources. Cash may help improve the physical health of the sub-domain of quality of life for rural mothers.

## Rural disadvantage reduces the durability of child outcomes

The differences may also be due to differences in the quality of intervention implementation: the home visitors in the urban area were highly educated, whereas those in the rural study were less educated.

# Conclusion

This follow-up study demonstrates that integrating parenting support into the UCT platform can produce durable changes in how children are raised, although measurable cognitive gains diminished over time. Improvements in stimulation, maternal knowledge of childcare, empowerment and early reading skills show that families can sustain positive practices years beyond programme exposure.

However, persistence in household behaviours does not automatically translate into long-term cognitive gains for children. For sustained effects on children's development, more intensive and/or longer-lasting early parenting interventions are necessary. In addition, to maintain early advantages, parenting programmes must be paired with improvements to early-grade school learning environments and support for women's wellbeing.

Integrating parenting interventions into cash transfer programmes is a promising strategy for reaching disadvantaged mothers in low- and middle-income countries and has the potential to improve outcomes for mothers, children and families in the long term.

# Thrive

Thrive is a multi-country research programme that aims to support countries to turn what we know about positive early childhood development into practical, scalable, low-cost programmes, able to transform societies over multiple generations. Working closely with policymakers and other stakeholders, Thrive aims to build understanding of early childhood development service delivery models and how they can be provided cost effectively and at scale, and how these systems can innovate, improve, and better serve children and communities in low- and middle-income countries.

Our five focus countries are Bangladesh, Ghana, Kiribati, Sierra Leone and Tanzania.

The Thrive programme is funded by UK International Development from the UK government and by New Zealand's Ministry of Foreign Affairs and Trade (MFAT). It is managed by Oxford Policy Management in collaboration with the Institute for Fiscal Studies.

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