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#295 - Solving the “Generalizability Puzzle” - adapting global ECD evidence to Mongolia

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Objectives/aims

While the number of rigorous impact evaluations has grown substantially over the last two decades, it is often challenging for decisionmakers to sift through the available evidence and draw actionable conclusions.

For a decisionmaker, there are two related questions to answer: first, which interventions seem to work, based on the evidence? And, how likely are those interventions to actually work in my context?

The Right-Fit Evidence Unit at IPA worked with the Lorinet Foundation and UBS Optimus Foundation to apply the evidence on Early Childhood Development (ECD) interventions to the urban Mongolian context.

Relevant theme: 2. Context counts: Translation, adaption, and transportability of evidence across people, place, culture and systems

Methods

Our methodology involved the following steps:

1. General evidence review to develop a shortlist of promising evidence-backed interventions in three categories of Early Childhood Education interventions (caregiver capacity, workforce development, and alternative access for out-of-school children), based on the criteria in the diagram below:



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1. **Impact magnitude** on target outcomes:

What is the potential for impact based on existing evidence?



2. **Impact certainty** on target outcomes:

How credible is the existing evidence on the intervention?



3. **Scale:** Are key elements simple/cost-effective enough for potential implementers at scale?



4. **Sustainability:** Is there evidence of the intervention providing lasting impact on beneficiaries?

2. Application of the “Generalizability Puzzle” framework (Bates and Glennester, 2017) to assess the likelihood of success of each intervention in urban Mongolia. This involved:
 - a. Preparation of a simple theory of change for each intervention
 - b. Identification of the preconditions required for the theory of change to hold in any context
 - c. Assessment of the global strength of evidence for success of the intervention, based on available meta-analyses from UNICEF, 3ie, Campbell Collaborative and Givewell.
 - d. Assessment of the feasibility of implementation within the local context, based on the above interviews and analysis of the policy and service environment.

These steps were all undertaken with a highly engaged set of donor partners, who scrutinized and provided feedback on each stage of the process.

Main findings

Ultimately, our team made recommendations about evidence-based interventions that would be likely to be impactful in Mongolia, considering both the content of the intervention and its delivery channel. The list of recommended interventions for each of the categories investigated is summarized in the table below.

Caregiver Capacity Development

ECE Workforce Capacity Development

Alternative access to learning opportunities



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Content	<ul style="list-style-type: none"> Attachment / Responsiveness Psychosocial Stimulation <i>Behavior Management</i> <i>Parental Mental Health</i> 	<ul style="list-style-type: none"> Classroom organization / management <i>Instructional Support</i> <i>Emotional Support</i> 	N/A
Delivery	<ul style="list-style-type: none"> Clinic-based Tech-mediated (phone and TV) <i>House visits</i> <i>Group Training</i> 	<ul style="list-style-type: none"> In-person Training Monitoring / Coaching Tech-mediated (phone and TV) 	<ul style="list-style-type: none"> Community run daycares Traveling Resources <i>Phone / TV teaching</i> <i>Libraries / reading corners</i>

For each intervention type, we summarized our conclusions in relation to the contextual fit of the intervention, as well as its potential impact in Mongolia, as per the example below.

Caregiver Capacity Content Findings: Parental Attachment / Responsiveness

Definition: Interventions that seek to influence how a parent perceives their child and, accordingly, how they respond to their behaviour and cues ¹.

Key takeaway: This content should be prioritized, as the gap between low and high income children is very high and levels of responsiveness in ger districts seem low. Evidence shows that responsive care is one of the key elements of early child development.

Contextual fit: Potentially high

- Although most parents seem to cover their child's physical needs ², they don't seem to respond to emergencies ³, emotional needs ⁴, or provide daily positive interactions ⁵, although this might be different for children under 3 y/o ⁶.
- Only 41% of adults in the poorest quintile (most of which live in ger districts ⁷) practice responsive care, compared to 74% in the richest quintile ⁸.
- Main reasons behind parenting absenteeism include insufficient parenting knowledge, stress, and workload ⁹.
- All respondents have seen cases of **alcoholism** ¹⁰, physical **violence** ¹¹ and verbal **abuse** ¹² amongst couples, which are associated with reduced attachment. The rate of IPV in Mongolia is 8% ¹³ and 8.3% of females justify wife beating ¹⁴.

Impact potential: High

- A meta-analysis of 70 interventions for parents with children < 4.5 y/o indicates a reduction in insensitive parenting (d=0.33) and infant attachment insecurity (d=0.20) ¹⁵. This confirmed results found on previous analysis of a smaller study sample ¹⁶.
- A meta-analysis of 102 interventions for parents with children < 3 y/o finds greater effects for interventions that had a responsive care element in comparison to those that didn't, in particular for LMICs ¹⁷.
- There's broad theoretical agreement that the quality of a child's attachment to their primary caregiver is robustly related to a range of child outcomes ^{18,19}.