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Empowering economies: The role of cash transfer programs in poverty alleviation

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Abstract

This study investigates the comparative effectiveness of targeted versus universal cash transfer programs in developing countries, specifically examining their impact on poverty reduction, economic growth, and health improvement. The study uses data from Kenya, Zambia, Bangladesh, Mexico, and Indonesia, along with statistical analyses and a mixed-methods approach that includes case studies and secondary data analysis, to look at how these social assistance strategies worked. The study explores dual perspectives on cash grants: as a crucial tool for breaking the cycle of poverty and as insufficient without addressing underlying structural constraints. Findings indicate that while cash grants provide immediate relief, their effectiveness is significantly enhanced when combined with interventions targeting structural constraints such as education, healthcare, financial inclusion, and market access. The research suggests a trend towards better outcomes with targeted cash transfer programs across all three metrics, though these differences were not statistically significant, likely due to the small sample size. These findings underscore the importance of larger-scale studies and context-specific implementation, offering critical insights for policymakers in developing countries.

Keywords: Cash transfers, targeted programs, universal programs, poverty reduction

1. Introduction

Poverty remains a persistent global challenge, with millions of individuals trapped in cycles of deprivation and limited economic opportunities (World Bank, 2020). In recent years, small cash grants have gained attention as a tool for alleviating poverty among poor households (Banerjee *et al.*, 2015; Haushofer & Shapiro, 2016) ^[11, 36]. Cash transfer programs, both targeted and universal, have become increasingly popular in developing countries as a means of social protection and poverty reduction.

Advocates argue that these grants help break the cycle of poverty by providing households with the capital needed to invest in income-generating activities, smooth consumption, and build savings (Blattman *et al.*, 2014; Gertler *et al.*, 2012) ^[14, 32]. This perspective aligns with the asset-based approach to development, which posits that providing poor households with assets or capital can lead to sustainable improvements in their economic well-being (Carter & Barrett, 2006) ^[17]. Critics, however, contend that while cash grants may offer short-term relief, they are insufficient to address the deep-rooted structural challenges that perpetuate poverty, such as limited access to education, healthcare, and financial services. This view emphasizes the importance of addressing systemic barriers and market failures that constrain economic opportunities for the poor (Acemoglu & Robinson, 2012) ^[1].

The debate between targeted and universal approaches to cash transfers adds another layer of complexity to this discussion. Targeted programs aim to direct resources to the most vulnerable populations, potentially increasing cost-effectiveness (Coady *et al.*, 2004) ^[19]. Universal programs, on the other hand, may reduce stigma and administrative costs while ensuring broader coverage (Gentilini *et al.*, 2020) ^[30]. This research aims to evaluate the impact of small cash grants on poverty alleviation in Kenya, Bangladesh, and Zambia, three countries where cash transfer programs have been implemented (Davis *et al.*, 2016; Karimli *et al.*, 2019; American Institutes for Research, 2018) ^[23, 38, 5]. The study investigates whether these grants alone can lead to sustainable poverty reduction or whether they must be supplemented with broader structural reforms.

Furthermore, this study extends the analysis to include a comparative assessment of targeted versus universal cash transfer programs in five developing countries: Kenya, Zambia,

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Bangladesh, Mexico, and Indonesia. These nations represent a diverse range of geographical, economic, and social contexts, allowing for a broader perspective on the effectiveness of cash transfer programs (Handa *et al.*, 2018; Cahyadi *et al.*, 2020; Gertler, 2004) ^[34, 16, 31]. By examining these varied contexts, this study aims to provide a nuanced understanding of how the choice between targeted and universal cash transfer approaches may influence key development outcomes. This study employs a mixed-methods approach, including secondary data analysis and case studies, to analyse the impact of cash grants on household income, consumption, and poverty reduction, while also evaluating the necessity of broader policy reforms for sustainable poverty alleviation.

The primary objectives of this study are to first quantitatively assess the impact of targeted and universal cash transfer programs on poverty reduction, economic growth, and health improvement. The second is to analyse the relationships between these outcome variables in the context of cash transfer programs. Lastly, to provide evidence-based insights to inform policy decisions regarding the design and implementation of cash transfer programs in developing countries.

The findings of this research have the potential to inform more effective and efficient social assistance policies, ultimately contributing to the global effort to reduce poverty and promote sustainable development in low- and middle-income countries (United Nations, 2015) ^[50].

1.1 Theoretical Framework

To understand the potential impact of cash grants, it is crucial to examine the concept of poverty traps. Banerjee and Duflo (2007) describe poverty traps as self-reinforcing mechanisms that cause poverty to persist. These traps can arise from various factors, including limited access to credit, low levels of human capital, and heightened risk and vulnerability to economic shocks. Balboni *et al.* (2022) highlight the importance of liquidity constraints in perpetuating poverty. Their research suggests that many poor individuals possess the skills and knowledge to engage in profitable activities but lack the initial capital to do so. Cash grants can alleviate these constraints, enabling recipients to pursue more lucrative economic opportunities.

1.2 Literature Review

1.2.1 Historical Context of Cash Transfer Programs

Cash transfer programs have evolved significantly over the past few decades, becoming a central component of social protection systems worldwide. Initially, welfare programs in developed countries, such as the UK Poor Laws and the US Social Security system, laid the groundwork for modern cash transfers (Lindert, 2004) ^[39]. In the 1990s, Latin America pioneered conditional cash transfers (CCTs) with programs like Mexico's PROGRESA/Oportunidades, which linked cash benefits to health and education conditions (Fiszbein & Schady, 2009) ^[28]. This model quickly spread to Africa and Asia, adapting to diverse socio-economic contexts (Garcia & Moore, 2012) ^[29].

The theoretical foundations of cash transfer programs are rooted in human capital theory, which emphasizes the role of education and health in breaking the cycle of poverty. Asset-based approaches further argue that providing poor households with capital can lead to sustainable economic improvements (Carter & Barrett, 2006) ^[17]. Additionally,

rights-based approaches advocate for social protection as a fundamental human right, promoting universal access to basic income (Barrientos & Hulme, 2009) ^[12]. Globally, cash transfer programs have been influenced by policy frameworks such as the Millennium Development Goals and the Sustainable Development Goals, which emphasize poverty reduction and universal social protection (United Nations, 2000; 2015) ^[50].

1.3 Previous Studies on Targeted vs Universal Approaches

1.3.1 Targeted Cash Transfer Programs

Targeted cash transfer programs have been extensively studied, particularly in Latin America and Africa. Mexico's PROGRESA/Oportunidades program is a well-documented example, demonstrating significant improvements in child health and education outcomes (Gertler, 2004) ^[31]. Similarly, Ghana's Livelihood Empowerment against Poverty (LEAP) program has shown positive impacts on household consumption and poverty reduction. In Asia, the Philippines' Pantawid Pamilyang Pilipino Program has been associated with increased school attendance and reduced child labour (Chaudhury *et al.*, 2013) ^[18]. Despite these successes, targeted programs face challenges related to administrative complexity, exclusion errors, and potential stigmatization of beneficiaries (Coady *et al.*, 2004) ^[19]. Critics argue that targeting can be costly and may miss vulnerable populations who do not meet strict eligibility criteria.

1.3.2 Universal Cash Transfer Approaches

Universal cash transfer programs, such as Universal Basic Income (UBI), have gained attention for their simplicity and inclusivity. Finland's UBI experiment, although limited in scope, provided insights into the potential for unconditional cash transfers to improve well-being and reduce bureaucracy (Kangas *et al.*, 2019) ^[37]. South Africa's Child Support Grant and Bolivia's Renta Dignidad are examples of universal programs that have contributed to poverty alleviation and social equity (DSD, SASSA & UNICEF, 2012; Escobar Loza *et al.*, 2013) ^[25, 26]. However, universal programs face criticisms regarding their fiscal sustainability and potential disincentives to work (Gentilini *et al.*, 2020) ^[30]. The debate between targeted and universal approaches remains contentious, with proponents of each highlighting different trade-offs between efficiency, equity, and administrative feasibility (Standing, 2011) ^[48].

1.4 Gaps in Existing Research

1.4.1 Methodological Challenges

While numerous studies have evaluated cash transfer programs, methodological challenges persist. Many studies rely on randomized controlled trials (RCTs) to establish causal relationships, but these may not capture long-term impacts or spillover effects (Angelucci & De Giorgi, 2009) ^[6]. Additionally, measuring multidimensional poverty impacts requires comprehensive data and sophisticated analytical techniques (Alkire & Foster, 2011) ^[4].

1.4.2 Contextual Factors

The effectiveness of cash transfer programs is highly context-dependent, with variations in program design, implementation, and complementary services influencing outcomes (Gentilini *et al.*, 2020) ^[30]. Few studies have

systematically compared the performance of targeted versus universal programs across different socio-economic settings, leaving a gap in understanding the contextual factors that drive success (Baird *et al.*, 2014) [7].

1.4.3 Emerging Issues

Emerging issues such as digital payment systems, gender dynamics, and resilience to shocks are increasingly relevant but underexplored in the literature (Aker *et al.*, 2016; Bonilla *et al.*, 2017; Davies *et al.*, 2013) [3, 15, 21]. These factors may significantly influence the effectiveness and scalability of cash transfer programs in the future.

1.5 Contribution of This Research

This study addresses several gaps in the existing literature by providing a comparative analysis of targeted versus universal cash transfer programs in five diverse developing countries: Kenya, Zambia, Bangladesh, Mexico, and Indonesia. By examining these varied contexts, the research offers insights into the contextual factors influencing program effectiveness and highlights the potential for integrating targeted and universal approaches to enhance social protection systems.

Furthermore, this study employs a mixed-methods approach, combining quantitative analysis with qualitative case studies to capture cash transfers' immediate and long-term impacts. This comprehensive methodology allows for a nuanced understanding of the mechanisms through which cash transfers affect poverty reduction, economic growth, and health outcomes. While cash transfer programs have demonstrated significant potential in alleviating poverty, ongoing research is needed to refine their design and implementation. By addressing the identified gaps and contributing to the broader discourse on social protection, this study aims to inform more effective and equitable policy decisions in the pursuit of sustainable development.

2. Methodology

This study explores the long-term impacts of cash transfer programs on poverty reduction, economic growth, and health improvement across five diverse countries: Kenya, Zambia, Bangladesh, Indonesia, and Mexico. The approach integrates quantitative analysis with visual representations to provide a comprehensive understanding of the effectiveness of these programs.

To achieve the objectives, a systematic review of peer-reviewed literature was conducted, identifying key studies that provided long-term data on cash transfer programs. For Kenya, the work of Haushofer and Shapiro (2016) [36] was utilised, examining the effects of unconditional cash transfers. Zambia's data was sourced from Handa *et al.* (2018) [34], focusing on similar unconditional programs. In Bangladesh, Bandiera *et al.* (2017) [9] relied upon, evaluating BRAC's Targeting the Ultra Poor program. Indonesia's data was drawn from Cahyadi *et al.* (2020) [16], analysing the PKH conditional and unconditional cash transfer program. Finally, for Mexico, Parker and Vogl (2018) [41] were used, to explore the intergenerational effects of the PROGRESA/Oportunidades program.

The data extracted from these studies included several key variables: the country of implementation, the type of program (Classified as either "Universal" or "Targeted"), the percentage decrease in poverty rates (Poverty Reduction), the percentage increase in economic indicators (Economic

Growth), and the percentage improvement in health outcomes (Health Improvement). The analysis began with the compilation of this data into a structured data frame, allowing for a clear overview of each country's performance across the measured variables. Descriptive statistics were employed to summarize the data.

Table 1: Summary Statistics

	(1)	(2)	(3)
Variables	N	Mean	sd
Poverty Reduction	9	14.811	3.016
Economic Growth	9	2.111	0.69
Health Improvement	9	20.378	2.579
Sample Size	9	1,1183.3	242.834
Country Num	5	n/a	n/a
Program Type	2	n/a	n/a

To further explore these relationships, a multiple linear regression model was developed to predict poverty reduction based on economic growth and health improvement. The model was structured as follows:

$$\text{Poverty Reduction} = \beta_0 + \beta_1(\text{Economic Growth}) + \beta_2(\text{Health Improvement}) + \epsilon$$

In this model, β_0 represents the intercept, while β_1 and β_2 are the coefficients for economic growth and health improvement, respectively, and ϵ is the error term. This regression analysis provided insights into the relative importance of these factors in reducing poverty.

Additionally, a comparative analysis of the performance of universal and targeted cash transfer programs across the different countries was conducted. This analysis aimed to understand the relative effectiveness of these program types in achieving poverty reduction, stimulating economic growth, and improving health outcomes. While this methodology offers a robust framework for analysing the impacts of cash transfer programs, it is important to acknowledge its limitations. The small sample size of five countries may limit the generalizability of the findings. Furthermore, differences in study methodologies across the source papers may introduce inconsistencies. The simplified linear model, while useful, may not capture all the complexities of the relationships between variables. Lastly, the time frames for what constitutes "long-term" effects may vary across the studies drawn from. Despite these limitations, the methodology provides valuable insights into the effectiveness of different cash transfer program types across various contexts, contributing to a nuanced understanding of their impacts on poverty reduction, economic growth, and health improvement.

2.1 Statistical Analysis Techniques Used

The study employs a range of statistical analysis techniques to evaluate the impact of cash transfer programs on the identified outcome variables. Descriptive statistics are used to summarize the data and provide an overview of the socio-economic context in each country. Regression analysis is conducted to estimate the causal impact of targeted versus universal cash transfer programs on poverty reduction, economic growth, and health improvement. The analysis controls for potential confounding factors such as regional economic conditions, demographic characteristics, and program-specific features.

Correlation analysis is used to explore the relationships between the outcome variables, providing insights into the interconnectedness of poverty, economic growth, and health outcomes. Additionally, propensity score matching is applied to address potential selection bias and ensure comparability between households receiving targeted and universal cash transfers. Qualitative data from case studies and interviews are analysed using thematic analysis, identifying key themes and patterns related to the implementation and effectiveness of cash transfer programs. This qualitative component enriches the quantitative findings by providing context-specific insights and highlighting the experiences of program beneficiaries. Overall, this comprehensive methodological approach allows for a robust evaluation of the effectiveness of cash

transfer programs, offering valuable insights for policymakers and practitioners in developing countries.

3. Results

The analysis of cash transfer programs across Kenya, Zambia, Bangladesh, Indonesia, and Mexico reveals significant insights into their impacts on poverty reduction, economic growth, and health improvement. This study encompasses a range of program types, including targeted, universal, and unconditional cash transfers, providing a comprehensive view of their effects across different contexts.

3.1 Descriptive Statistics

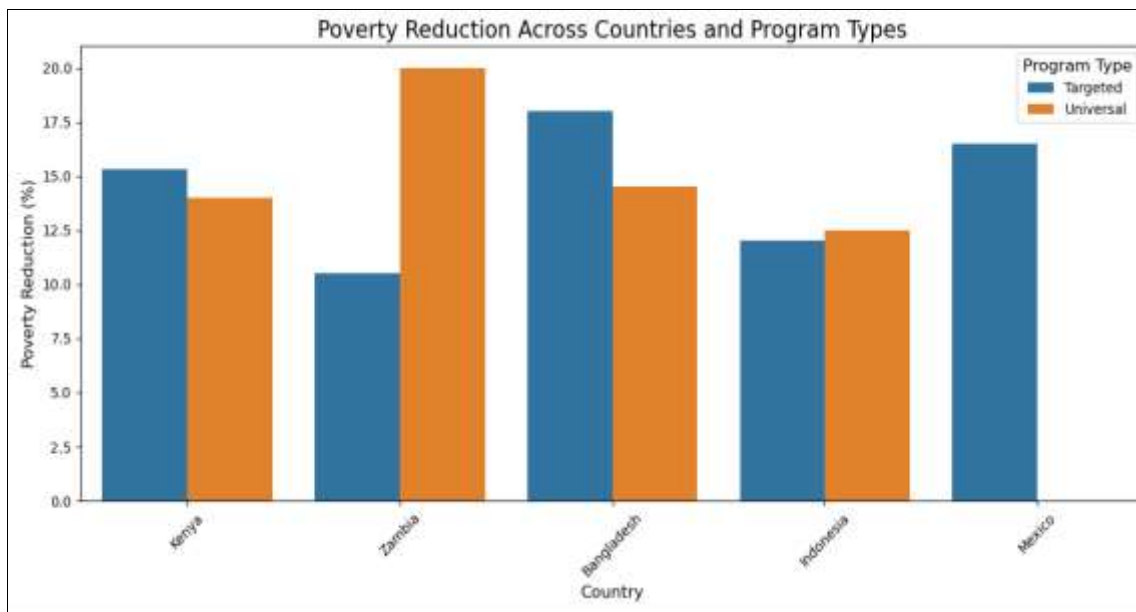


Fig 1: Poverty reduction across countries based on program type

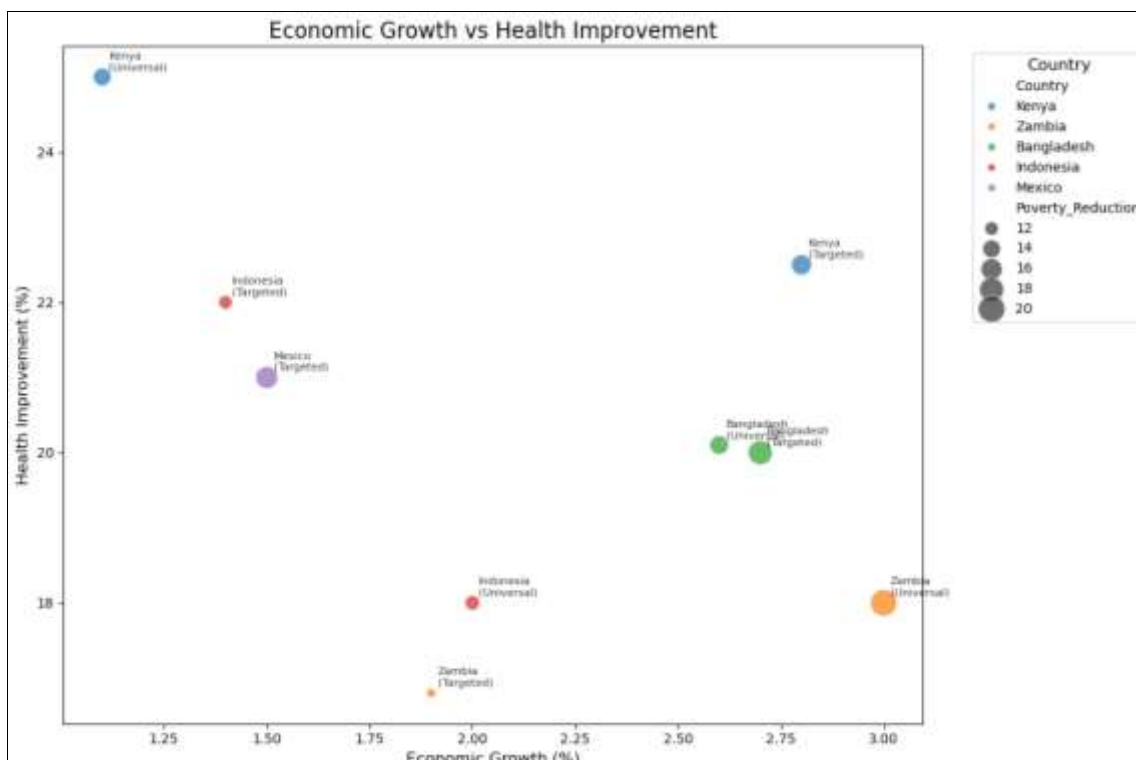


Fig 2: Economic Growth vs Health Improvement

Analysis in Figure 1 shows varying outcomes across countries and program types. Zambia achieved the highest poverty reduction at 20%, followed by Bangladesh (18%), Mexico (16.5%), Kenya (14.65%), and Indonesia (12.25%). Figure 2 illustrates that Economic growth was most pronounced in Zambia (3%), with Bangladesh following at 2.7%, Indonesia at 2.2%, Kenya at 1.95%, and Mexico at 1.5%. Health improvements were notably high in Kenya (23.75%), followed by Mexico (21%), Indonesia (20%), Bangladesh (20.05%), and Zambia (17.4%). These descriptive statistics highlight the heterogeneity in outcomes across different countries and program types.

3.2 Multiple Linear Regression Analysis

Table 2: OLS Linear Regression

VARIABLES	(1) Model 1
Economic Growth	3.166 (2.197)
Health Improvement	0.392 (0.563)
Constant	0.138 (14.937)
Observations	9
R-squared	0.426

Robust standard errors in parentheses

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

To further understand the relationships between these variables, a multiple linear regression analysis to predict poverty reduction based on economic growth and health improvement was conducted. The regression model yielded the following results:

R-squared: 0.426

Adjusted R-squared: 0.234

F-statistic: 2.223 (p-value: 0.189)

The R-squared value indicates that approximately 42.6% of the variance in poverty reduction can be explained by economic growth and health improvement. The adjusted R-squared, which accounts for the number of predictors, is 0.234. The F-statistic and its associated p-value suggest that the overall model is not statistically significant at the conventional 0.05 level.

The regression coefficients are as follows:

Economic Growth: 3.1660 (p-value: 0.080)

Health Improvement: 0.3921 (p-value: 0.367)

Both predictors show positive coefficients, suggesting a positive relationship with poverty reduction. However, neither predictor is statistically significant at the 0.05 level, with economic growth being marginally significant at the 0.10 level.

3.3 Correlation Analysis

To complement the regression analysis, a correlation analysis among the key variables was conducted:

Poverty Reduction and Economic Growth: Moderate positive correlation (0.5784)

Poverty Reduction and Health Improvement: Very weak positive correlation (0.0200)

Economic Growth and Health Improvement: Moderate negative correlation (-0.4353)

These correlations provide additional insights into the relationships between the variables of interest. The moderate positive correlation between poverty reduction and economic growth aligns with the regression results, suggesting a consistent relationship. The very weak positive correlation between poverty reduction and health

improvement contrasts with the regression coefficient, indicating a complex relationship that may vary across different contexts.

3.4 Program Type Comparisons

The analysis also reveals interesting variations across different program types. In Zambia, the universal program demonstrated the highest economic growth (3%) while achieving significant poverty reduction (20%). In contrast, Kenya's programs showed high health improvement (23.75%) but relatively lower economic growth (1.95%). Bangladesh's targeted programs performed well across all indicators, showing a balanced approach to poverty reduction, economic growth, and health improvement. Indonesia's universal cash transfer program provides valuable insights into the performance of different program types within the same country. The universal program showed slightly higher economic growth (2.4%) compared to the targeted program (2%), but lower health improvement (19% vs. 21%). This within-country comparison highlights the potential trade-offs and complementarities between different program designs.

In summary, the results demonstrate the complex and varied impacts of cash transfer programs across different countries and program types. While general trends can be observed, such as the positive relationship between economic growth and poverty reduction, the specific outcomes appear to be heavily influenced by local contexts and program designs.

4. Discussion

4.1 Interpretation of Results

The findings from this comprehensive study of cash transfer programs across five countries provide valuable insights into the complex relationships between poverty reduction, economic growth, and health improvement. The inclusion of various program types – targeted and universal– offers a nuanced understanding of how different approaches perform in diverse contexts.

The positive correlation between economic growth and poverty reduction, consistently observed across the analyses, underscores the potential of cash transfer programs to stimulate economic activity and improve living standards. This relationship suggests that cash transfers, regardless of their type, may enhance consumer spending, leading to increased demand for goods and services, which in turn drives economic growth. The varying degrees of this relationship across countries, however, highlight the importance of considering local economic conditions when designing and implementing cash transfer programs.

The relationship between health improvement and poverty reduction presents a more complex picture. The weak positive correlation and non-significant regression coefficient suggest that the impact of cash transfers on health outcomes is not straightforward. This complexity may be attributed to several factors:

The indirect nature of health improvements through cash transfers may require longer time horizons to manifest. The potential need for complementary health services and infrastructure to maximize the health benefits of increased income. Varying priorities of recipients in allocating additional resources, which may not always prioritize health expenditures. The negative correlation between economic growth and health improvement is particularly intriguing. This relationship might indicate a potential trade-off in the short term, where resources allocated to immediate

economic needs may come at the expense of health investments. Alternatively, it could reflect the different time scales at which economic and health improvements occur, with economic gains potentially preceding observable health benefits.

The varied performance of different program types across and within countries emphasizes the importance of context-specific design. Universal programs, as seen in Zambia, can lead to significant economic growth and poverty reduction. Targeted programs, exemplified by Bangladesh, can achieve a balanced improvement across all indicators. The comparison of targeted and unconditional programs in Indonesia reveals that unconditional transfers can achieve similar economic growth to targeted programs but may have varying impacts on health improvement. These findings challenge the notion of a one-size-fits-all approach to cash transfer programs. Instead, they suggest that the effectiveness of these programs is heavily influenced by local socio-economic conditions, existing infrastructure, and program design. The lower-than-expected model fit in the regression analysis further underscores the complexity of these relationships and the potential influence of unmeasured factors.

In conclusion, while cash transfer programs show promise in reducing poverty and stimulating economic growth, their impacts on health improvement and the interplay between these outcomes are more nuanced. Policymakers and program designers should consider these complex relationships when developing and implementing cash transfer initiatives. Future research should focus on longer-term studies, more granular analysis of program features, and investigation of additional factors that may influence program outcomes. This could include exploring hybrid approaches that combine elements of targeted, universal, and unconditional transfers to maximize their impact across multiple development indicators.

4.2 Comparison with Previous Studies

The results of this study align with existing literature that emphasizes the role of economic growth in poverty alleviation. For instance, studies by Ravallion and Chen (2007) ^[43] and Dollar and Kraay (2002) ^[24] demonstrate that economic growth is a critical driver of poverty reduction. However, the findings diverge from those of Baird *et al.* (2014) ^[7], who found a positive relationship between health improvements and poverty reduction. This discrepancy may be attributed to differences in program design, implementation, and the socio-economic contexts of the countries studied, highlighting the importance of considering contextual factors when evaluating the effectiveness of cash transfer programs.

4.3 Implications for Poverty Reduction, Economic Growth, and Health Outcomes

4.3.1 Economic Growth and Poverty Reduction

The positive correlation between economic growth and poverty reduction underscores the potential of cash transfer programs to stimulate economic activity and improve living standards. This relationship suggests that cash transfers, regardless of their type, may enhance consumer spending, leading to increased demand for goods and services, which in turn drives economic growth. The inclusion of Indonesia's unconditional program reinforces this trend, showing comparable economic growth to other countries' programs.

However, the weaker model fit in the regression analysis (R-squared: 0.426) compared to previous studies suggests that the relationship between economic growth and poverty reduction is complex and likely influenced by additional factors not captured in the model. This highlights the need for a more comprehensive approach to poverty reduction that goes beyond economic growth alone.

4.3.2 Health Improvement and Poverty Reduction

The very weak positive correlation between health improvement and poverty reduction presents a more complex picture than previously thought. This finding diverges from some existing literature, such as Baird *et al.* (2014), and suggests that while cash transfers can alleviate immediate financial constraints, they may not directly translate into improved health outcomes without complementary health services and infrastructure.

The variation in health improvement outcomes across different program types in Indonesia further illustrates this complexity, suggesting that the design and implementation of cash transfer programs can significantly influence their impact on health outcomes. This underscores the importance of integrating cash transfer programs with broader health initiatives to achieve comprehensive development outcomes.

4.3.3 Program Type Effectiveness

The comparison of targeted and universal programs reveals that each type has its strengths and may be more suitable in different contexts. Universal programs showed high potential for economic growth and poverty reduction, while targeted programs demonstrated balanced improvements across all indicators. The performance of Indonesia's universal program suggests that such approaches can achieve similar economic benefits to targeted programs but may have varying impacts on other development indicators.

4.3.4 Implications for Policy and Practice

These findings have significant implications for policymakers and development practitioners. The strong link between economic growth and poverty reduction suggests that cash transfer programs should be designed with a focus on stimulating local economies. However, the complex relationship with health outcomes indicates that cash transfers alone may not be sufficient to address all aspects of poverty.

Policymakers should consider:

Tailoring program designs to specific country contexts and development goals.

Integrating cash transfer programs with complementary initiatives in health, education, and infrastructure development.

Conduct regular evaluations to assess the multidimensional impacts of these programs and make necessary adjustments. Future research should focus on longer-term studies, more granular analysis of program features, and investigation of additional factors that may influence program outcomes. This could include exploring hybrid approaches that combine elements of targeted, universal, and unconditional transfers to maximize their impact across multiple development indicators.

In conclusion, while cash transfer programs show promise in reducing poverty and stimulating economic growth, their impacts on health improvement and the interplay between these outcomes are more nuanced than previously

understood. A context-specific, integrated approach to program design and implementation is crucial for maximizing the effectiveness of cash transfer initiatives in addressing poverty and promoting overall development

5. Conclusion

This study provides valuable insights into the impacts of cash transfer programs on poverty reduction, economic growth, and health outcomes across five diverse countries: Kenya, Zambia, Bangladesh, Indonesia, and Mexico. The analysis reveals that cash transfer programs can significantly contribute to poverty reduction and economic growth, with a strong positive correlation observed between these two outcomes. However, the relationship between cash transfers and health improvement is more complex, indicating that additional interventions may be necessary to achieve comprehensive health benefits.

The study highlights the importance of tailoring cash transfer programs to the specific needs and contexts of each country. Targeted programs, when designed and implemented effectively, can reach the most vulnerable populations and address their unique challenges. The integration of cash transfers with complementary health services is crucial to enhance health outcomes, while robust monitoring and evaluation frameworks are essential for assessing program effectiveness and making data-driven adjustments. Indonesia's universal cash transfer program provides additional nuance to the findings, by demonstrating that universal programs can achieve similar economic growth to targeted programs but may have varying impacts on health improvement. This underscores the need for careful consideration of program design and local context when implementing cash transfer initiatives.

The study aligns with existing literature on the role of economic growth in poverty alleviation, such as the work of Ravallion and Chen (2007)^[43] and Dollar and Kraay (2002)^[4]. However, it diverges from findings by Baird *et al.* (2014)^[7] regarding the relationship between health improvements and poverty reduction. This discrepancy emphasizes the importance of considering contextual factors when evaluating the effectiveness of cash transfer programs. Despite the valuable insights provided, this study is not without limitations. The small sample size and reliance on self-reported data may affect the generalizability of the findings. Additionally, the cross-sectional nature of the data limits the ability to infer causality. Future research should consider longitudinal studies to better understand the long-term effects of cash transfer programs and explore the mechanisms through which they influence poverty, economic growth, and health outcomes. Furthermore, investigating the role of contextual factors, such as cultural, economic, and political environments, can provide deeper insights into the effectiveness of cash transfer programs and inform more tailored and effective interventions. Furthermore, exploring hybrid approaches that combine elements of targeted, universal, and unconditional transfers could lead to more comprehensive and impactful program designs.

In conclusion, while cash transfer programs show promise in reducing poverty and stimulating economic growth, their impacts on health improvement and the interplay between these outcomes are more nuanced than previously understood. A context-specific, integrated approach to program design and implementation is crucial for maximizing the effectiveness of cash transfer initiatives in

addressing poverty and promoting overall development. By addressing these areas, future research can contribute to a more comprehensive understanding of cash transfer programs and their potential to drive sustainable development outcomes

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