- \*1. skip
- \*2. Refer to the "Main Analysis and Paper" folder
- \*3.
- \*a. a 45-minute classroom discussion about gender equality every three weeks for two and one-half school years for seventh- to tenth-graders.
- \*b. gender attitudes, girls' aspirations, and self-reported gender-related behavior.
- \*c. There are 314 schools encompassed in this study. And 150 of the sample schools are in the treatment group; the remaining 164 serve as control schools. They do not randomly choose the individual student in the treatment or control group, they randomly select schools, and all students in that school are in the treatment or control group.
  - \*d. Yes. Table 1.
  - \*e. Table 2.
- \*f. The authors express concerns about the possibility of students providing socially desirable responses to the survey questions, even if their actual beliefs remain unchanged. More importantly, if the social disirablity levels are different between treatment and control group, the estimated treatment effect could just be the result of students in the treatment group giving socially desirable answers. To address this issue, the authors develop the Marlower-Crowne Social Desirability Scale as a tool to evaluate the degree of social desirability present in students' responses and include it as a control variable in the regression.
- \*g. It basically means that they just pick one school in the sample for every village (therefore, the number of schools in the sample = the number of villages in the sample). If there are two schools in the same village: School A and School B, it is highly possible that students in School A frequently communicate with students in School B. Suppose School A is chosen to be in the treatment group, while School B is in the control group, and students in school A are engaged in gender attitude discussion and obtain some new perspective about the gender equality. Then, through frequent communication, students in School A would share these new views with students in School B. Therefore, students in School B, even though in the control group, are partly be "intervened". This spillover effect will generate an inaccurate final result.
- \*h. From Table 2, we know that the average level for the gender attitude index in control group is normalized to 0 in the first endline (short-run results). Comprated to the control group, the average level for gender attitude index in treatment group is 0 + 0.18 = 0.18 (in the unit of standard deviation). In the medium run, by Table 8, we find the mean of control group has increased from 0 to 0.33, and now the treatment effect (diffrence between treatment and control group) is 0.16. It means that the average level of gender attitude index in the treatment group is 0.33 + 0.16 = 0.49. That is why the authors mention "...fade-out in the treatment effect is not because the treatment group held less progressive attitudes at the second end line than at the first end line", rather, it becomes more progressive.