

Can Mobile Phones Improve Take-up and Delivery of Maternal Cash Transfer Programs in India?

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Location: Chhattisgarh, India

Sample: Women in 180 villages in Raipur district, Chhattisgarh, India

Target group: Mothers and pregnant women

Outcome of interest: Health outcomes Maternal health Nutrition Stunting Take-up of program/social service/healthy behavior

Intervention type: Digital and mobile Information **AEA RCT registration number:** AEARCTR-0005053

Appropriately targeted cash transfers can improve the health of millions of new mothers and children in low and middle income economies. In India, although maternal cash transfer programs have been deployed, limited awareness among beneficiaries coupled with inefficient delivery systems constrains the reach and impact of many programs. A two-pronged approach can potentially help: Providing beneficiaries with information about available cash transfers could improve take-up of the cash transfers, and gathering information about beneficiaries' experiences with transfers could be used to optimize payment delivery systems. Mobile phones, which are gaining widespread use across the country, provide an easily scalable, cost-effective way to communicate with new mothers. Building on a major initiative by the Government of Chhattisgarh that distributed over two million smartphones to rural women in the state of Chhattisgarh, researchers are conducting a randomized evaluation to test whether a phone-based information service can increase take-up of India's maternity cash transfer programs, and whether phone-based feedback can improve local-level program functioning and child health. Research ongoing; Results forthcoming.