



## Alternative Cash Transfer Delivery Mechanisms: Impacts on Routine Preventative Health Clinic Visits in Burkina Faso

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Country	Burkina Faso
Organizing Theme	Economic Opportunities and Access to Assets, Health
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Intervention Category	Cash Transfer
Sector	Social Protection
Abstract	<p>The authors conducted a unique randomized experiment to estimate the impact of two alternative cash transfer delivery mechanisms on household demand for routine preventative health services in rural Burkina Faso. The two-year pilot program randomly distributed cash transfers that were either conditional or unconditional, and the money was given to either mothers or fathers. Families enrolled in the conditional cash transfer schemes were required to obtain quarterly child-growth monitoring at local health clinics for all children under five years old. There was not such a requirement under the unconditional programs. Compared with control group households, conditional cash transfers significantly increased the number of preventative health care visits during the previous year, while unconditional cash transfers did not have such an impact. For the conditional cash transfers, money given to mothers or fathers showed beneficial impacts of similar magnitude in increasing routine visits.</p>
Gender Connection	Gender Focused Intervention
Gender Outcomes	Use of healthcare services, Intrahousehold Bargaining
IE Design	Clustered Randomized Control Trial (Clustered at village level)
Intervention	<p>The program tested 5 different types of cash transfer mechanisms. The treatment arms included: 1. Conditional Cash transfers given to the father 2. Conditional Cash transfers given to the mother 3. Unconditional Cash transfers given to the father 4. Unconditional Cash transfers given to the mother 5. a control group. For the CCT, in order to receive the transfer children under six must make quarterly visits to the local health clinic, and older children must have school attendance rates above 90%. For the UCT the families received a quarterly stipend. The annual value of the stipend was about \$9.64 which is about 9% of the household per capita expenditure.</p>
Intervention Period	2008-2010, Transfers were received quarterly and quarterly health visits were mandated.
Sample population	<p>The sample is comprised of individuals living in 75 villages in Southern Burkina Faso. The Villages were split up into 5 groups of 15 villages, 4 treatment and 1 control. In each of the treatment villages, approximately 540 households were randomly selected to receive the transfer. In the control villages 615 households were surveyed.</p>



Comparison conditions	A conditional cash transfer scheme was compared to an unconditional cash transfer scheme and a standard control. The study compared the impact of both types of transfers delivered to the mother and the father.
Unit of analysis	Child Level
Evaluation Period	2008-2010, there was a midline survey in 2009
Results	Children in families that received conditional cash transfers had an additional .43 routine health clinic visits in the previous years, while UCTs showed no impact regardless of the recipient of the transfer. For CCTs, there was no observable differences in outcomes between transferring money to mothers vs. fathers.
Primary study limitations	The outcome health clinics visits is a self-reported variable.
Funding Source	Gender and Social Protection Program: An Evaluation of Conditional and Unconditional Cash Transfers in Rural Burkina Faso, Spanish Impact Evaluation Fund
Reference(s)	Akresh, R., DeWalque, D., Kazianga, H. (2012) "Alternative Cash Transfer Delivery Mechanisms Impacts on Routine Preventative Health Clinic Visits in Burkina Faso," World Bank Policy Research Working Paper No. 5958.
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