



“moni for my pocket”

**Mobile Conditional Cash
Transfer**

INTRODUCTION

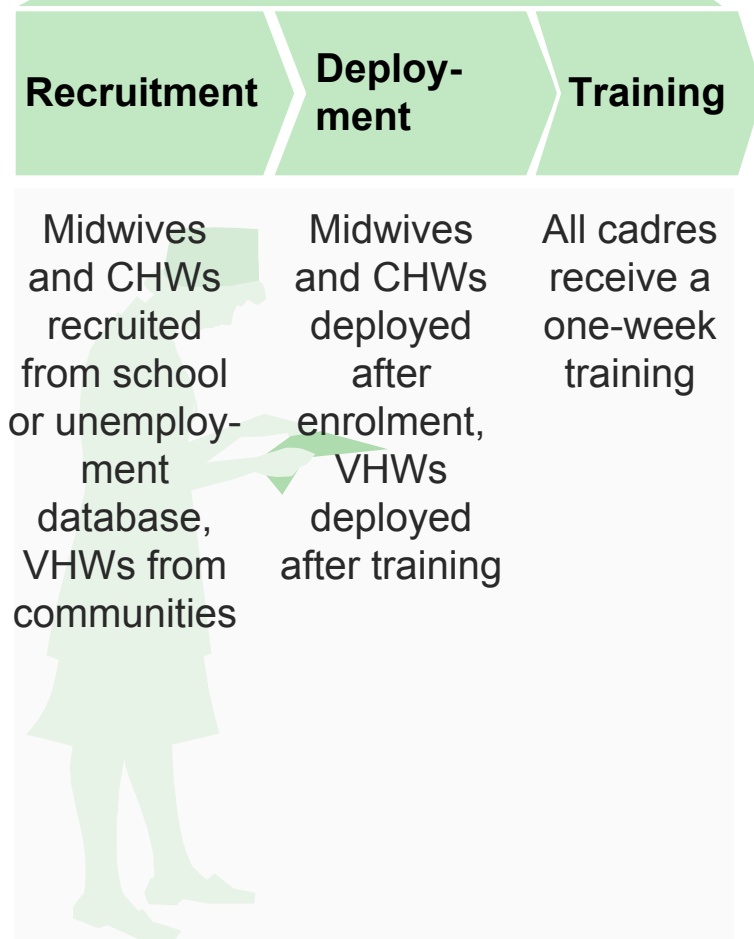
- SURE-P Maternal and Child Health (MCH) is a large scale Federal Government social safety net project to address barriers to accessing care by women and children in rural Nigeria
- One of the key components of the SURE-P MCH program is demand generation
- SURE-P MCH is a strategic part of the President's Saving One Million Lives Initiative
- The mobile CCT (mCCT) is one of the 4 key areas that dominates the President's agenda to leverage on Information Communication Technology to Save One Million Lives (ICT4SOML)



SURE-P MCH addresses demand and supply side barriers to accessing RMNCH services

Supply Inputs

Human Resources for Health

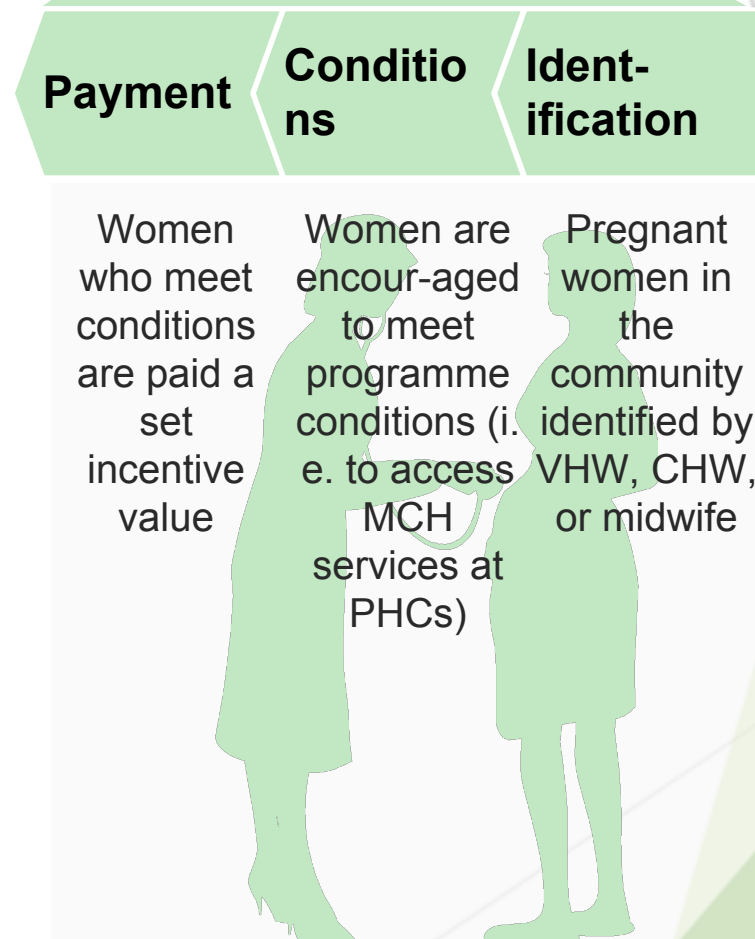


Continuum of care



Demand Inputs

Conditional Cash Transfer



Major demand side strategy under the SURE-P MCH program is the Conditional Cash Transfer Scheme

- The programme involves cash payments as an incentive to encourage pregnant women to access services along the RMNCH continuum of care.
- The CCT programme involves identification of the target beneficiaries (pregnant women) within the community by Community Health Resource Persons (VHWs) and enrolment of the pregnant women into the SURE-P MCH CCT programme at the health facility.
- Pregnant women are required to meet all outlined conditions before cash payment is made.



Major demand side strategy under the SURE-P MCH program is the Conditional Cash Transfer Scheme



Conditions

▪ 4 conditions for which CCTs are based:

- Registration and 1st ANC visit
- Focused ANC visits
- Skilled birth delivery

Compliance and Verification

▪ Reporting process within one week of delivery by beneficiaries meeting service conditions

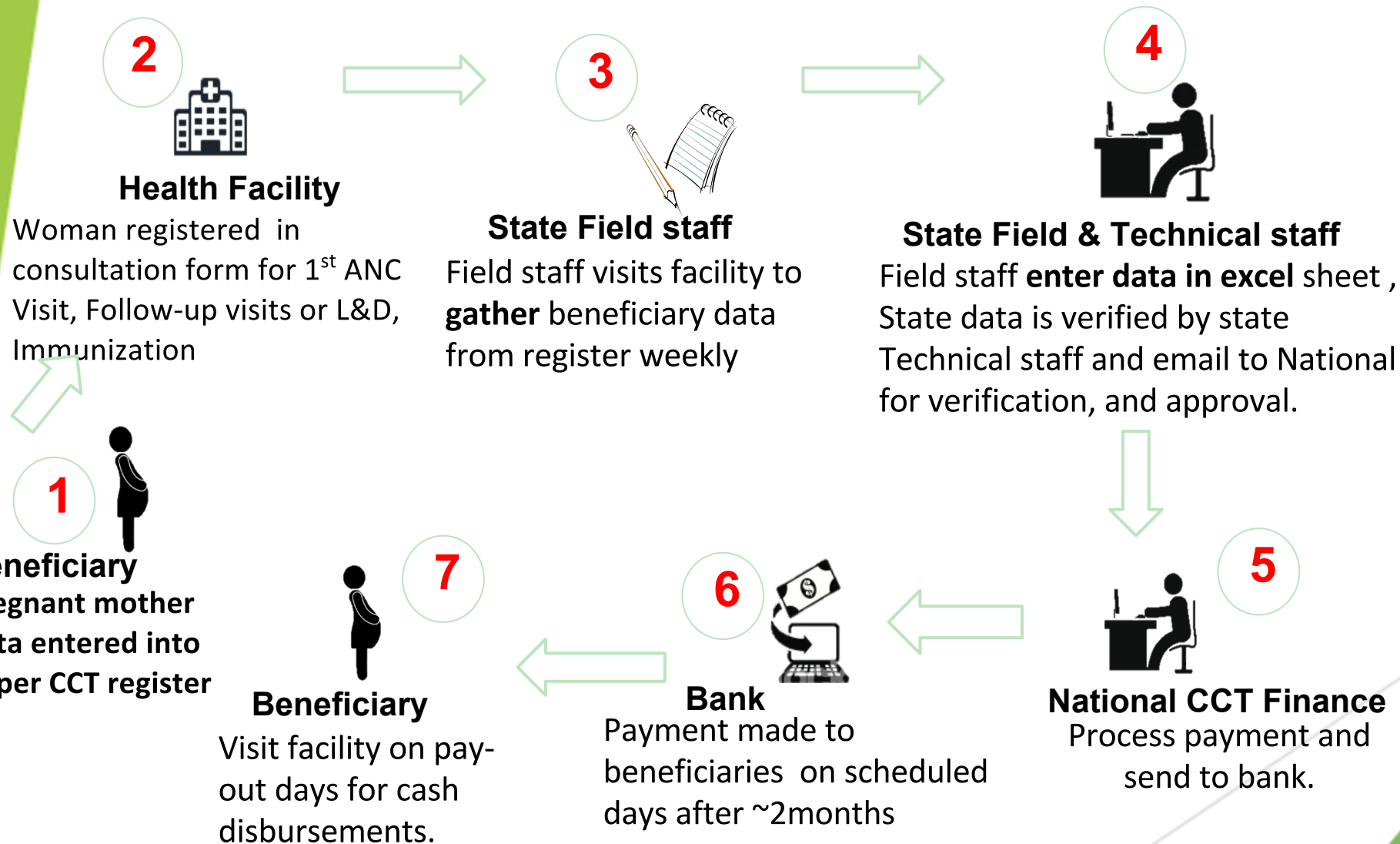
▪ Verification by field officers

▪ Total of **two disbursements**:

- **1st disbursement = 1,000 Naira** for registration and first ANC visit
- **2nd disbursement = 4,000 Naira** for going through the continuum of care (meeting **all remaining conditions**, focused ANC visits, skilled birth and zero-dose immunization)

Cash Disbursement

The initial payment mechanism for beneficiaries of the CCT program involved cumbersome logistic processes



The major challenges with this cash payment system included:

- Long wait times for beneficiaries from date of fulfillment of co-responsibilities
- Large sums of cash transported to the 'pay out' locations

SURE-P MCH partnership with Pathfinder to pilot a mobile money (mCCT) platform

- Pathfinder's **CommCare application** was introduced to optimize the process of registration and verification by:
 - Collecting clinical data
 - Sending structured pregnancy and prenatal messages
 - Sending appointment reminders
 - **Calculating beneficiary cash support**
 - **Real time reporting and approvals through a web dashboard**
- **The pilot was conducted in 4 facilities in the FCT**
 - Dobi, Wuna, Rafin-Zurfi and Ibwa II
- **Partnerships were made with mobile aggregators to negotiate**

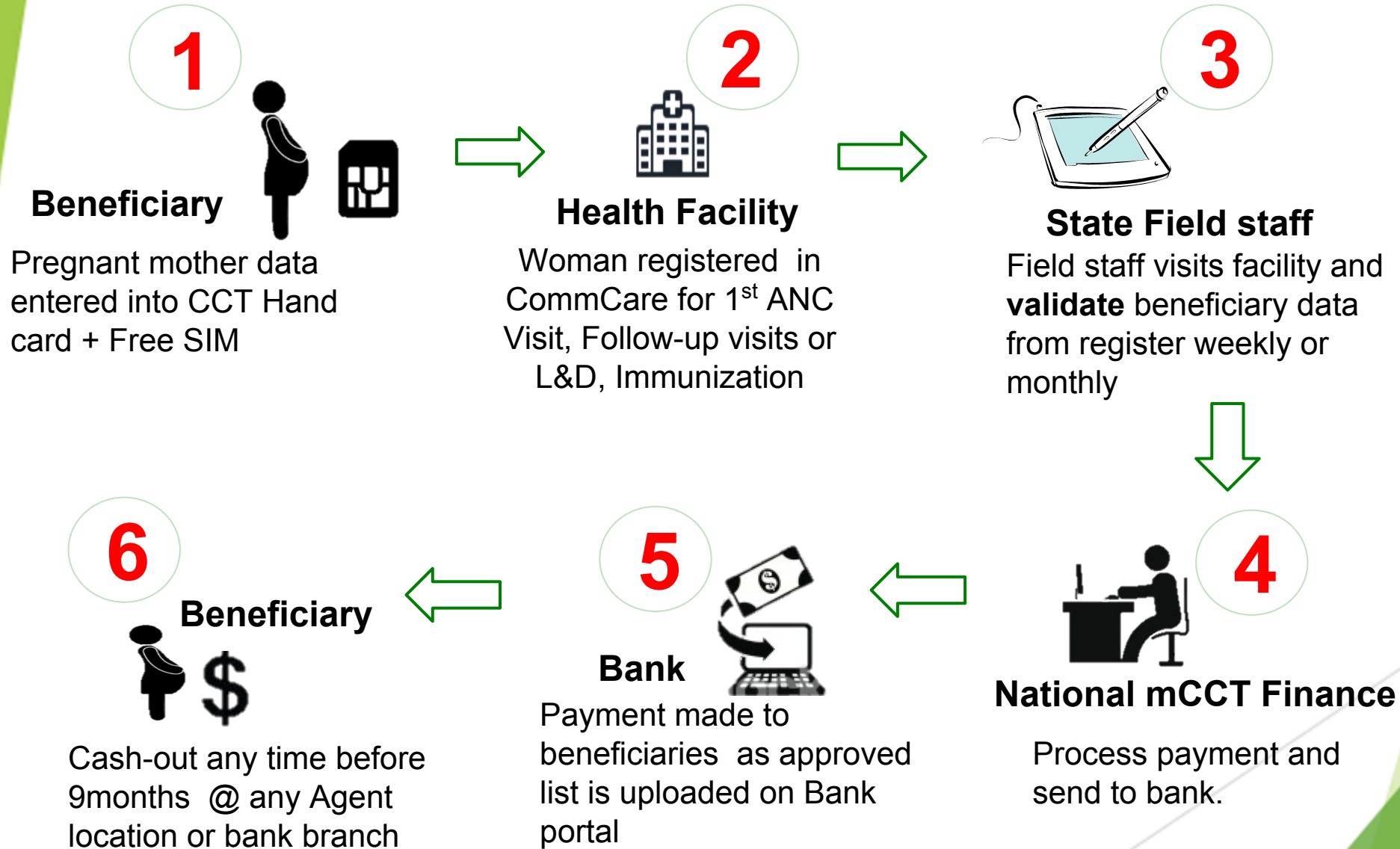


The mCCT pilot incorporated key strategies that enhanced its implementation

- **Training of health workers on mobile money platform**
 - Field officers trained health workers in pilot facilities
- **Educating beneficiaries on mobile wallets**
 - Mobile Network Operator personnel and CCT field officers trained beneficiaries on mobile wallet
- **Provision of free sim cards**
 - Women were presented with free sim cards as an additional incentive
- **Rural telephones**
 - Rural telephones to read sim cards were present at



The mCCT pilot was successful in reducing reporting, verification and payment times



There were a few implementation challenges



Challenges

- Delays in engagements with banks
- Alignment of mobile operators and banks coverage to ensure national scale
- Change management associated with migration from cash economy to mobile money

Mitigation strategy

- Continuous engagement with banks upon conclusion
- Create environment for open discourse among banks, mobile operators and regulatory bodies
- Improved advocacy and education in rural communities on the benefits of mobile money

NEXT STEPS

- Scale up of mCCT to 4 facilities in Kaduna state
- Explore other digital health applications that meet mCCT requirements
- Review and assess pilot implementation





Questions?