

# Improved cookstove adoption

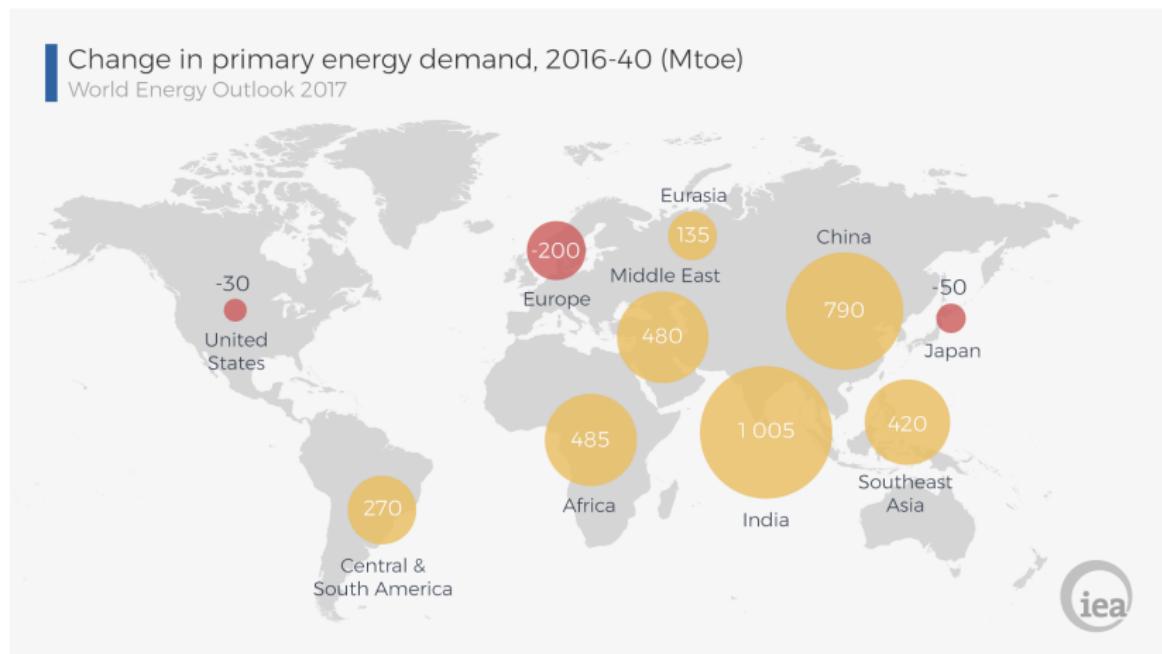
Susanna B. Berkouwer<sup>1</sup>      Joshua T. Dean<sup>2</sup>  
(they/them)                          (he/him)

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<sup>2</sup>The Booth School of Business, University of Chicago

March 2024

## Low- and middle-income countries will lead demand growth



Source: International Energy Agency

Background  
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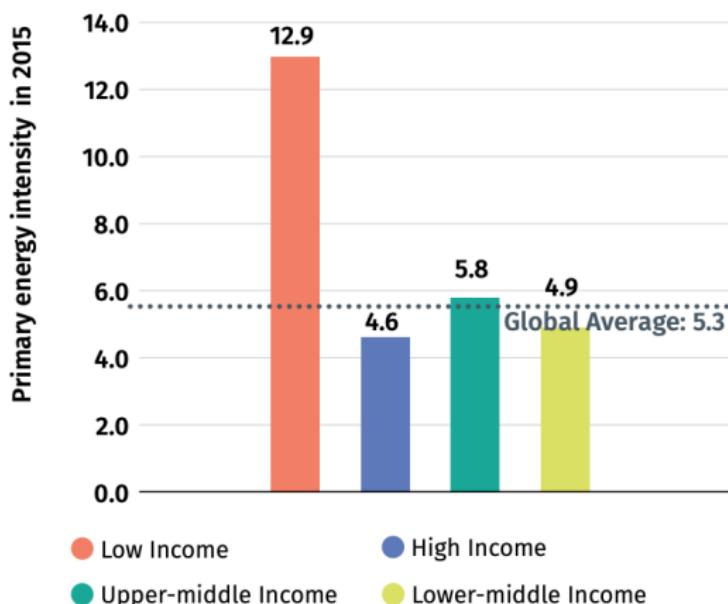
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Long-run  
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Health  
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## Energy efficiency uptake slow in low-income countries



Source: Energy Sector Management Assistance Program (ESMAP), International Energy Agency (IEA)

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3 billion people use wood, charcoal, kerosene to cook

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## 3 billion people use wood, charcoal, kerosene to cook

### Large environmental externalities

- ▶ 8 KG of  $CO_2e$  emitted per KG of charcoal
- ▶ Rapid deforestation

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## 3 billion people use wood, charcoal, kerosene to cook

### Large environmental externalities

- ▶ 8 KG of  $CO_2e$  emitted per KG of charcoal
- ▶ Rapid deforestation

### Large negative health impacts

- ▶ 'Respiratory infections' is single largest cause of death in low-income countries (WHO, 2016)

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## 3 billion people use wood, charcoal, kerosene to cook

### Large environmental externalities

- ▶ 8 KG of  $CO_2e$  emitted per KG of charcoal
- ▶ Rapid deforestation

### Large negative health impacts

- ▶ 'Respiratory infections' is single largest cause of death in low-income countries (WHO, 2016)

### Expensive

- ▶ Energy burden highest among the poor
- ▶ Median household earns \$5 per day and spends \$0.70 on charcoal (14%), \$1.15 on energy (22%)

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## Study setting: Charcoal cookstoves in Nairobi



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## Study setting: Charcoal cookstoves in Nairobi



- ▶ 60% of participants purchase charcoal at least once per day

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# Kenyan Jiko and Jikokoa



Kenyan Jiko stove



Modern Jikokoa stove

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## Jikokoa is well-known



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# Kenyan Jiko and Jikokoa cookstoves

Kenyan Jiko  
\$2-\$5



Jikokoa Stove  
\$40 (now \$30)



- ▶ Identical inputs: same charcoal
- ▶ Identical usage: almost no learning or behavior change
- ▶ Improved insulation materials

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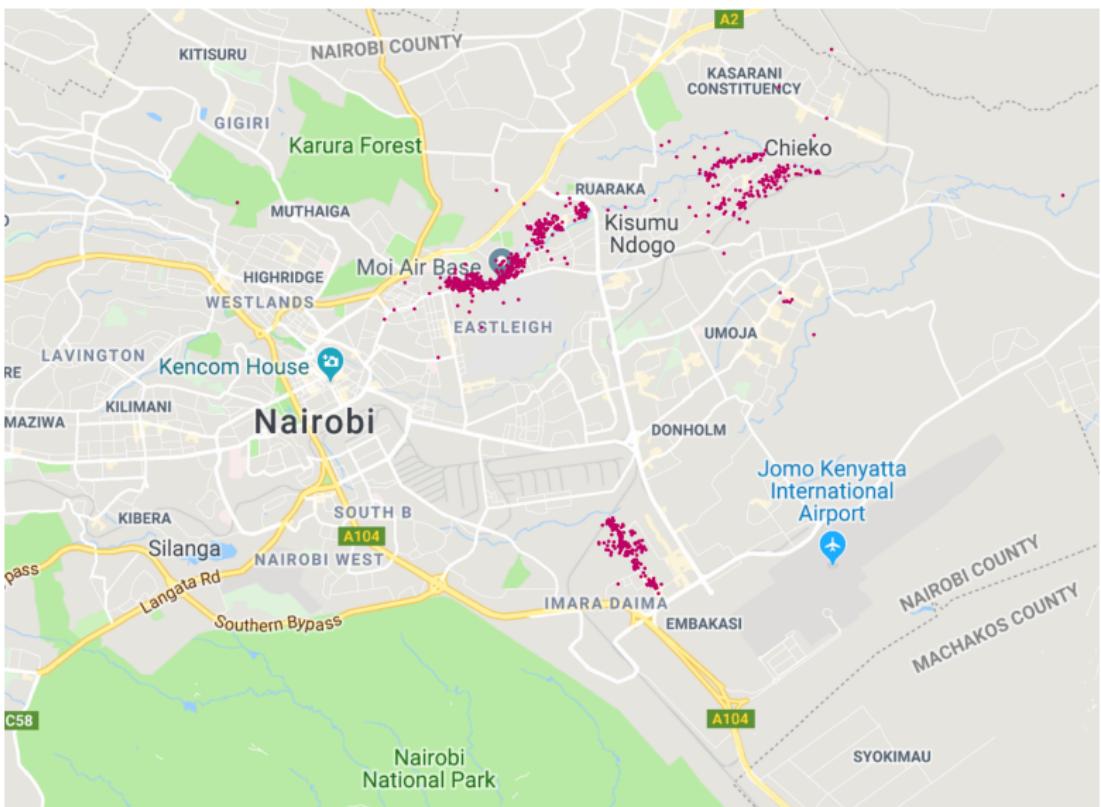
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# RCT with 1,000 households in Nairobi, Kenya

Participants are enrolled at their homes by field officers



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## Respondents have low incomes, high energy costs

	Mean	SD	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>
Household size	4.73	2.08	3	4	6
Age	37.24	11.83	29	35	44
Female respondent	0.95	0.21	1	1	1
Completed primary education	0.70	0.46	0	1	1
Completed secondary education	0.06	0.24	0	0	0
Respondent income (USD/week)	24.26	25.25	11	21	35
Household income (USD/week)	47.79	39.25	21	35	60
Energy spending (USD/week)	8.60	3.89	6	8	10
Charcoal spending (USD/week)	5.65	2.93	4	5	7
Savings* (USD)	74.59	129.07	1	30	82
Current cookstove price (USD)	3.40	1.34	3	3	4

\* Savings in bank account, mobile money account, or informal group savings

## Today: drawing from two academic studies

- ▶ “Credit, attention, and externalities in the adoption of energy efficient technologies by low-income households”  
S. Berkouwer and J. T. Dean. **American Economic Review** (2022). 122(10)1-41.
  
- ▶ “Cooking, health, and daily exposure to pollution spikes”  
S. Berkouwer and J. T. Dean. **NBER Working Paper #31614** (2024).

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## Preview of results

- ▶ **Financial benefits:** Private savings of \$86–\$120 per year (around 1 month of income)

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## Preview of results

- ▶ **Financial benefits:** Private savings of \$86–\$120 per year (around 1 month of income)
- ▶ **Climate benefits:** Reductions of 2–3.5 tCO<sub>2</sub>e/yr; CO<sub>2</sub> mitigation at \$5–\$10 per ton

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## Preview of results

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- ▶ **Pollution benefits:** 42% reduction in PM2.5 cooking spikes

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- ▶ **Health benefits:** 0.24SD reduction in self-reported respiratory symptoms, but no clinical health improvements

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- ▶ **Adoption barriers:** Upfront liquidity and access to credit

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## Preview of results

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*Accounts for stacking*

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# Today

Background

Study design

Financial savings

Climate

Barriers to adoption

Long-run impacts: 2022-2023 (3.5 years later)

Pollution impacts

Health impacts

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## We cross-randomize credit and attention treatments

- ▶ Each cell contains number of respondents
- ▶ Pre-analysis plan filed with AEA RCT Registry ex-ante

		Credit Control	Credit Treatment	
			Weekly Deadlines	Monthly Deadlines
Attention Control		96	98	98
Attention Treatment	Energy Savings	96	97	96
	Energy Savings – Costs	145	146	146

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## Credit: Control and Treatment groups

- ▶ **Control:** Pay (subsidized) price today, receive stove today

## Credit: Control and Treatment groups

- ▶ **Control:** Pay (subsidized) price today, receive stove today
- ▶ **Treatment:** Receive stove today, pay within 3 months
  1. Pay by 12 weekly deadlines
  2. Pay by 3 monthly deadlines
- ▶ If respondents miss deadlines:
  - ▶ SMS reminders
  - ▶ After 1 week, reclaim the stove
- ▶ Repayment: respondents have paid 80% on average
- ▶ Interest rate of 1.16% per month, 14.8% per year (*M-Shwari rate, excluding fees*)

## Credit: Control and Treatment groups

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- ▶ Repayment: respondents have paid 80% on average
- ▶ Interest rate of 1.16% per month, 14.8% per year (*M-Shwari rate, excluding fees*)
- ▶ All respondents receive basic information: 50% savings

Background  
ooooooooooooDesign  
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# Treatment: Attention to energy savings

12 months of money and utility (100 KSH ≈ 1 USD)

## Attention Sheet

Respondent ID: 1f1e1313!61ff	Akiba ya mwaka kwa Jumla: 10,350/- (KES)		
	Akiba inayotarajwa wiki hii (KES)	Akiba ya kila mwezi inayotarajwa (KES)	Ungesanya je na fedha hii mwezi huu?
Wiki 1, kuanzia 03 Juni 2019	200		
Wiki 2, kuanzia 10 Juni 2019	200		
Wiki 3, kuanzia 17 Juni 2019	200	100	add to the business
Wiki 4, kuanzia 24 Juni 2019	200		
Wiki 5, kuanzia 01 Julai 2019	200		
Wiki 6, kuanzia 08 Julai 2019	200		
Wiki 7, kuanzia 15 Julai 2019	300	1050	buy a goat
Wiki 8, kuanzia 22 Julai 2019	150		
Wiki 9, kuanzia 29 Julai 2019	100		
Wiki 10, kuanzia 05 Agosti 2019	250		
Wiki 11, kuanzia 12 Agosti 2019	250		
Wiki 12, kuanzia 19 Agosti 2019	250	1050	Savings

## Treatment: Attention to energy savings

If the price of the cookstove is USD 38 would you want to buy it?

You would need to pay USD 3 per week for the next 12 weeks.

### JUNE

Week 1: You would save USD 2

Week 2: You would save USD 3

Week 3: You would save USD 2.50

Week 4: You would save USD 4

### JULY

Week 5: You would save USD 2

Week 6: You would save USD 2

Week 7: You would save USD 4

Week 8: You would save USD 5

Week 9: You would save USD 4

### AUGUST

Week 10: You would save USD 2.50

## Treatment: Attention to energy savings and costs

If the price of the cookstove is USD 38 would you want to buy it?

You would need to pay USD 3 per week for the next 12 weeks.

### JUNE

Week 1: You would pay USD 1 (USD 2 – USD 3)

Week 2: You would save USD 0 (USD 3 – USD 3)

Week 3: You would pay USD 0.50 (USD 2.50 – USD 3)

Week 4: You would save USD 1 (USD 4 – USD 3)

### JULY

Week 5: You would pay USD 1 (USD 2 – USD 3)

Week 6: You would pay USD 1 (USD 2 – USD 3)

Week 7: You would save USD 1 (USD 4 – USD 3)

Week 8: You would save USD 2 (USD 5 – USD 3)

Week 9: You would save USD 1 (USD 4 – USD 3)

### AUGUST

Week 10: You would pay 0.50 (USD 2.50 – USD 3)

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## Implementation Timeline

1. Socioeconomic enrollment survey
2. Implement attention and/or credit treatments

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## Implementation Timeline

1. Socioeconomic enrollment survey
2. Implement attention and/or credit treatments
3. Use Becker-DeGroot-Marschak (BDM) mechanism:
  - 1) Elicit  $WTP$ ; using binary search

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## Implementation Timeline

1. Socioeconomic enrollment survey
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3. Use Becker-DeGroot-Marschak (BDM) mechanism:
  - 1) Elicit  $WTP_i$  using binary search
  - 2) Reveal random price  $P_i \in (0, 30)$  USD

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## Revealing random price:



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  - 1) Elicit  $WTP_i$  using binary search
  - 2) Reveal random price  $P_i \in (0, 30)$  USD
  - 3) WTP is binding: adopt iff  $WTP_i \geq P_i$ 
    - ▶ Pay  $P_i$ : incentive compatible

# Implementation Timeline

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    - ▶ Pay  $P_i$ : incentive compatible
    - ▶ 99% of respondents complied

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    - ▶ Pay  $P_i$ : incentive compatible
    - ▶ 99% of respondents complied

This generates random variation in adoption.

# Implementation Timeline

1. Socioeconomic enrollment survey
2. Implement attention and/or credit treatments
3. Use Becker-DeGroot-Marschak mechanism:
  - 1) Elicit  $WTP_i$  using binary search
  - 2) Reveal random price  $P_i \in (0, 30)$  USD
  - 3) WTP is binding: adopt iff  $WTP_i \geq P_i$ 
    - ▶ Pay  $P_i$ : incentive compatible
    - ▶ 99% of respondents complied
- This generates random variation in adoption.
4. Recurring SMS survey (every 3 days) on charcoal spending

# Implementation Timeline

3 visits scheduled 1 month apart:

## Visit 1

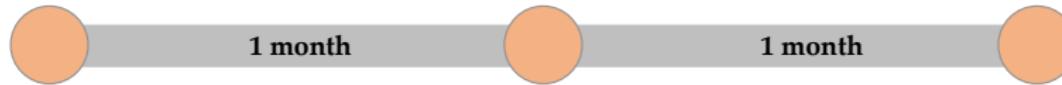
- Enrollment survey

## Visit 2

- Random treatments
- BDM WTP elicitation
- Stove transaction

## Visit 3

- Endline survey



# Implementation Timeline

3 visits scheduled 1 month apart:

## Visit 1

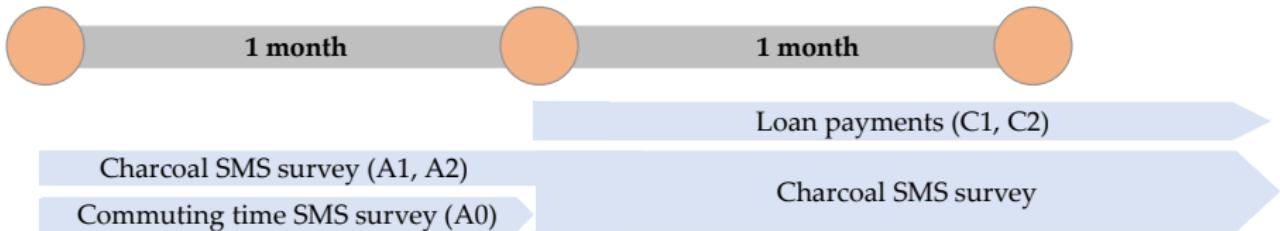
- Enrollment survey

## Visit 2

- Random treatments
- BDM WTP elicitation
- Stove transaction

## Visit 3

- Endline survey



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# Today

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Long-run impacts: 2022-2023 (3.5 years later)

Pollution impacts

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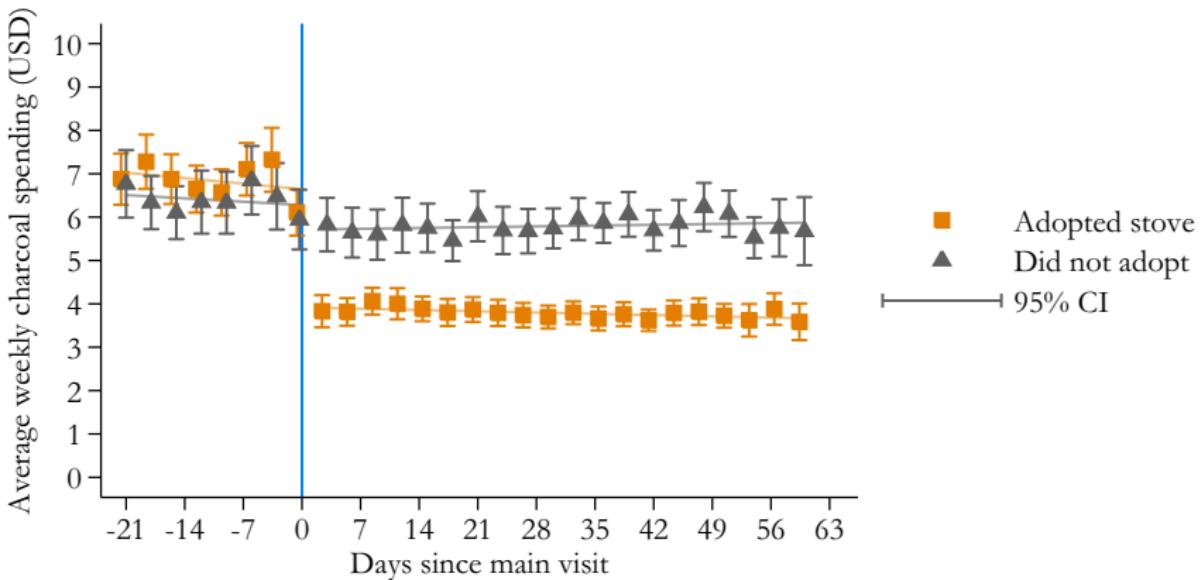
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## Stove reduces charcoal use by \$2.28 per week (40%)



- ▶ Weekly charcoal spending from SMS survey
- ▶ Effects are instant and stable over time
- ▶ Low variability

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## Stove reduces charcoal use by \$2.28 per week (40%)

Instrumental Variables: instrument for improved stove ownership with randomly assigned price (can also use credit treatment)

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# Stove reduces charcoal use by \$2.28 per week (40%)

Instrumental Variables: instrument for improved stove ownership with randomly assigned price (can also use credit treatment)

	OLS USD	First Stage Bought Stove	IV Estimate USD	IV Estimate IHS(USD)
BDM Price (USD)	0.002 (0.013)	-0.029*** (0.001)		
WTP (USD)	-0.003 (0.010)	0.024*** (0.001)	-0.004 (0.011)	-0.001 (0.003)
Bought Cookstove (=1)	-1.943*** (0.295)		-2.244*** (0.295)	-0.487*** (0.071)
Observations	7852	913	7852	7852
Control Mean	5.719		4.964	2.155
Socioeconomic controls	Yes	Yes	Yes	Yes
Data Source	SMSSes	Midline	SMSSes	SMSSes
F-statistic:		183.28		

SE in parentheses. \*  $\leq 0.10$ , \*\*  $\leq .05$ , \*\*\*  $\leq .01$ . Socioeconomic controls include baseline savings, income, risk aversion, credit constrainedness, number of adults and children. Errors clustered by respondent. Errors in SMS regressions clustered by respondent.

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We weigh KG ash output from 1 month of charcoal use



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## Stove reduces charcoal ash output by 40%

	First Stage Bought Stove	USD	IV Estimate IHS(USD)	IV Estimate IHS(KG)
BDM Price (USD)	-0.029*** (0.001)			
WTP (USD)	0.024*** (0.001)	-0.004 (0.011)	-0.001 (0.003)	0.003 (0.003)
Bought Cookstove (=1)		-2.244*** (0.295)	-0.487*** (0.071)	-0.479*** (0.083)
Observations	913	7852	7852	796
Control Mean		4.964	2.155	1.545
Socioeconomic controls	Yes	Yes	Yes	Yes
Data Source	Midline	SMSes	SMSes	Buckets

SE in parentheses. \*  $\leq 0.10$ , \*\*  $\leq .05$ , \*\*\*  $\leq .01$ . Socioeconomic controls include baseline savings, income, risk aversion, credit constrainedness, number of adults and children. Errors in SMS regressions clustered by respondent.

## Stove reduces charcoal ash output by 40%

	First Stage Bought Stove	USD	IV Estimate IHS(USD)	IV Estimate IHS(KG)
BDM Price (USD)	-0.029*** (0.001)			
WTP (USD)	0.024*** (0.001)	-0.004 (0.011)	-0.001 (0.003)	0.003 (0.003)
Bought Cookstove (=1)		-2.244*** (0.295)	-0.487*** (0.071)	-0.479*** (0.083)
Observations	913	7852	7852	796
Control Mean		4.964	2.155	1.545
Socioeconomic controls	Yes	Yes	Yes	Yes
Data Source	Midline	SMSes	SMSes	Buckets

SE in parentheses. \*  $\leq 0.10$ , \*\*  $\leq .05$ , \*\*\*  $\leq .01$ . Socioeconomic controls include baseline savings, income, risk aversion, credit constrainedness, number of adults and children. Errors in SMS regressions clustered by respondent.

- Regression estimate of 1.5–2% of ratio *Charcoal:Ash* matches chemistry

# Savings persist after one year

Phone survey in September 2020 (14 months after adoption):

	OLS USD	First Stage Bought Stove	USD	IV Estimate IHS(USD)	USD	IV Estimate IHS(USD)
BDM Price (USD)	0.002 (0.013)	-0.029*** (0.001)				
WTP (USD)	-0.003 (0.010)	0.024*** (0.001)	-0.004 (0.011)	-0.001 (0.003)	-0.003 (0.015)	-0.001 (0.003)
Bought Cookstove (=1)	1.943*** (0.295)		-2.244 *** (0.295)	-0.487*** (0.071)	-2.542*** (0.461)	-0.499*** (0.085)
Observations	7852	913	7852	7852	866	866
Control Mean	5.719		4.964	2.155	5.403	2.178
Socioeconomic controls	Yes	Yes	Yes	Yes	Yes	Yes
Data Source	SMSes	Midline	SMSes	SMSes	1 Year EL	1 Year EL
F-statistic:		183.28				

SE in parentheses. \*  $\leq 0.10$ , \*\*  $\leq .05$ , \*\*\*  $\leq .01$ . Socioeconomic controls include baseline savings, income, risk aversion, credit constrainedness, number of adults and children. Errors clustered by respondent. Errors in SMS regressions clustered by respondent.

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## These savings are large

- ▶ \$2.28 per week
- ▶ **\$120** per year, a **month** of income
- ▶ Spent on food (53%), school fees, household items, health costs

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- ▶ \$2.28 per week
- ▶ **\$120** per year, a **month** of income
- ▶ Spent on food (53%), school fees, household items, health costs
- ▶ 40% reduction aligns with engineering estimates (*Unlike Davis et al. (2018), Allcott and Greenstone (2017), Fowlie, Greenstone, Wolfram (2018), Burlig et al. (2019)*)

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Incorporating the \$40 cost of the stove:

- ▶ Internal Rate of Return (IRR): **300% per year**

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## These savings are large

Authors	Year	Country	Annual IRR
Berkouwer and Dean	2019	Kenya	300%
<b>Energy Efficiency</b>			
Allcott and Greenstone	2017	USA	-4%
Fowlie, Greenstone, Wolfram	2018	USA	-10%–0.21%
Davis, Martinez, Taboada	2018	Mexico	<i>less than</i> -8%

# These savings are large

Authors	Year	Country	Annual IRR
Berkouwer and Dean	2019	Kenya	300%
<b>Firms</b>			
Bigsten, Isaksson, Soderbom, et al.	2000	Africa	10–35%
McKenzie and Woodruff	2006	Mexico	36–180%
McKenzie and Woodruff	2008	Mexico	240–396%
De Mel, McKenzie, Woodruff	2008	Sri Lanka	55–63%
Kremer, Lee, Robinson	2013	Kenya	113%
Fafchamps, McKenzie, Quinn, Woodruff	2014	Ghana	180%
Banerjee and Duflo	2014	India	105%
Blattman, Fiala, Martinez	2014	Uganda	30–50%
<b>Agriculture</b>			
Udry and Anagol	2006	Ghana	30–50%
Duflo, Kremer, Robinson	2008	Kenya	52–85%
<b>Education</b>			
Bigsten, Isaksson, Soderbom, et al.	2000	Africa	1–5%
Duflo	2001	Indonesia	8.8–12%
<b>Other</b>			
Baird, Hicks, Kremer, Miguel	2016	Kenya	32%
Haushofer, Shapiro	2016	Kenya	15%
Blattman, Green, Jamison, et al.	2016	Uganda	8–24%

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Long-run impacts: 2022-2023 (3.5 years later)

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## This is a cost-effective abatement opportunity

- ▶ Reduction of ~365 kg charcoal per year
  - ▶ This reduces emissions by 2–3.5 tCO<sub>2</sub>e/yr (depending on fNRB)

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## This is a cost-effective abatement opportunity

- ▶ Reduction of ~365 kg charcoal per year
  - ▶ This reduces emissions by 2–3.5 tCO<sub>2</sub>e/yr (depending on fNRB)
- ▶ **Adoption is persistent:** after 3 years, 83% of adopters still own Jikokoa, whereas only 10% of non-adopters have since adopted
- ▶ No crowding in/out of other cooking technologies

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## This is a cost-effective abatement opportunity

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  - ▶ This reduces emissions by 2–3.5 tCO<sub>2</sub>e/yr (depending on fNRB)
- ▶ **Adoption is persistent:** after 3 years, 83% of adopters still own Jikokoa, whereas only 10% of non-adopters have since adopted
- ▶ No crowding in/out of other cooking technologies

### **Additionality:**

- ▶ Low subsidy group (\$13-15): 37% adopted
- ▶ High subsidy group (\$28-30): 77% adopted
- ▶ \$6,150 in subsidies incentivized 358 stove-years

**Abatement cost: \$5–10 per tCO<sub>2</sub>e**

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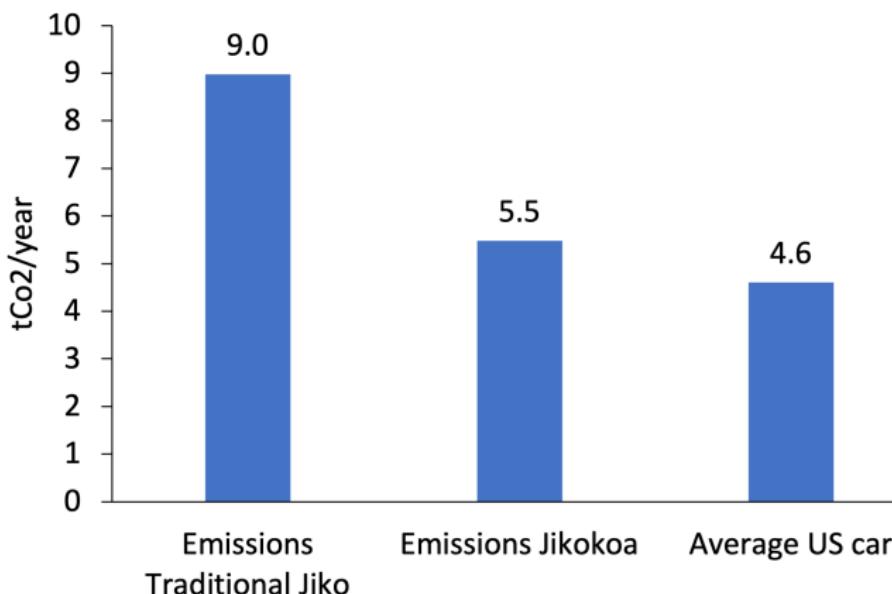
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## These are cost-effective emissions reductions

This \$40 investment yields a roughly equivalent annual tCO<sub>2</sub>e reduction as adoption of a \$40,000 EV:



(Source: Arvid Viaene)

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## Barriers to adoption

Long-run impacts: 2022-2023 (3.5 years later)

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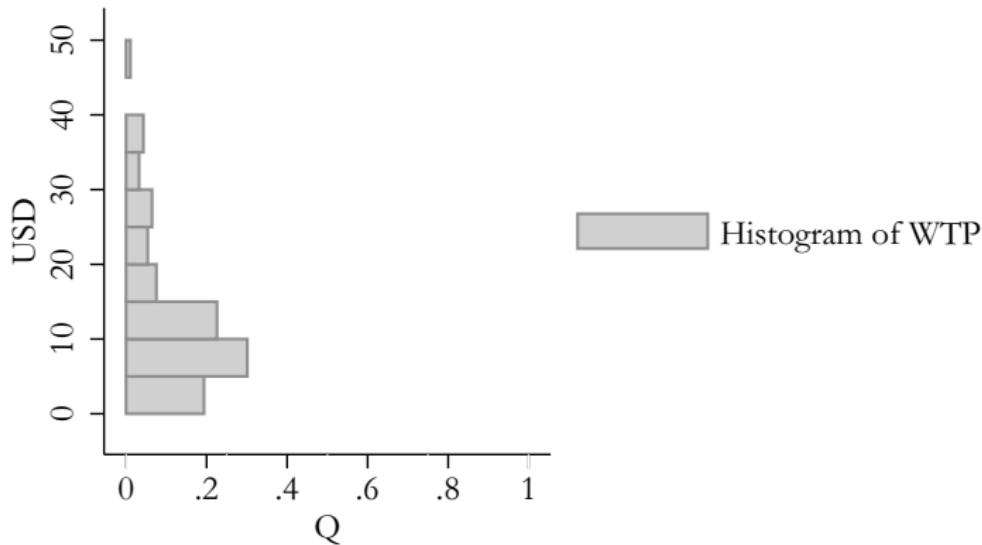
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## Adoption still low:

WTP for pure control group (no attention, no credit):



- ▶ Control group WTP: Average \$12, median \$10

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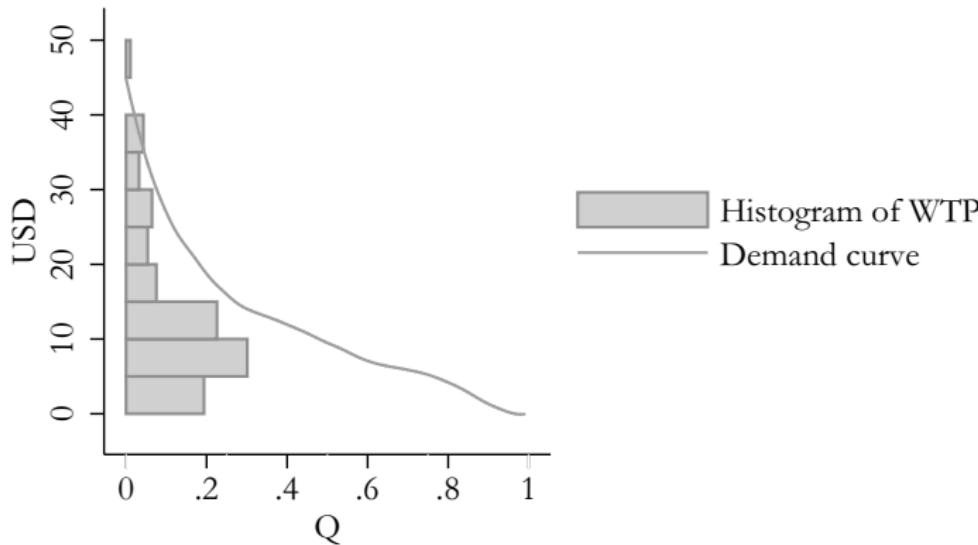
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## Adoption still low: Demand curve from BDM

WTP for pure control group (no attention, no credit):

$$Q(P) = \Pr(P \leq WTP_i)$$



- ▶ Control group WTP: Average \$12, median \$10

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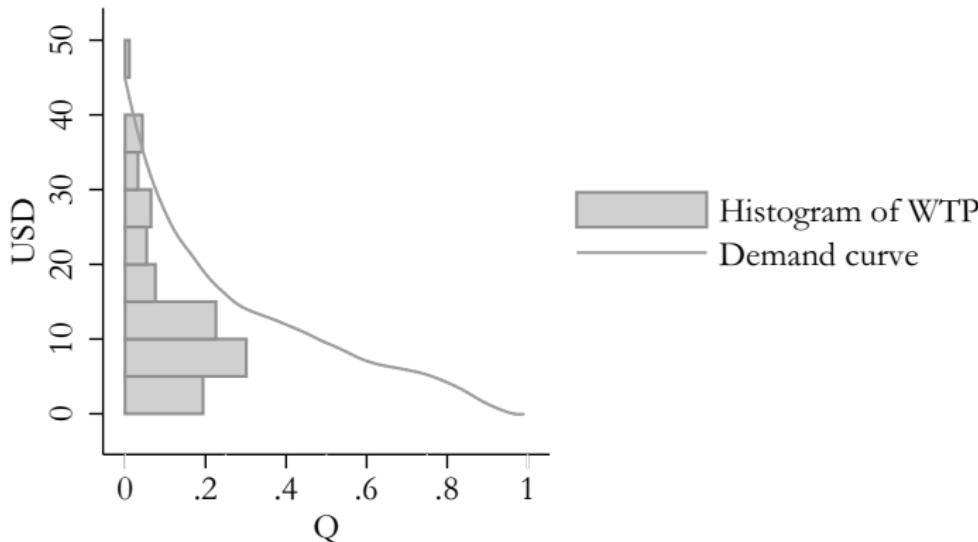
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## Adoption still low: Demand curve from BDM

WTP for pure control group (no attention, no credit):

$$Q(P) = \Pr(P \leq WTP_i)$$



- ▶ Control group WTP: Average \$12, median \$10
- ▶ Implied discount factor  $\delta = 0.88$  per week ( $\delta = 0.001$  per year)

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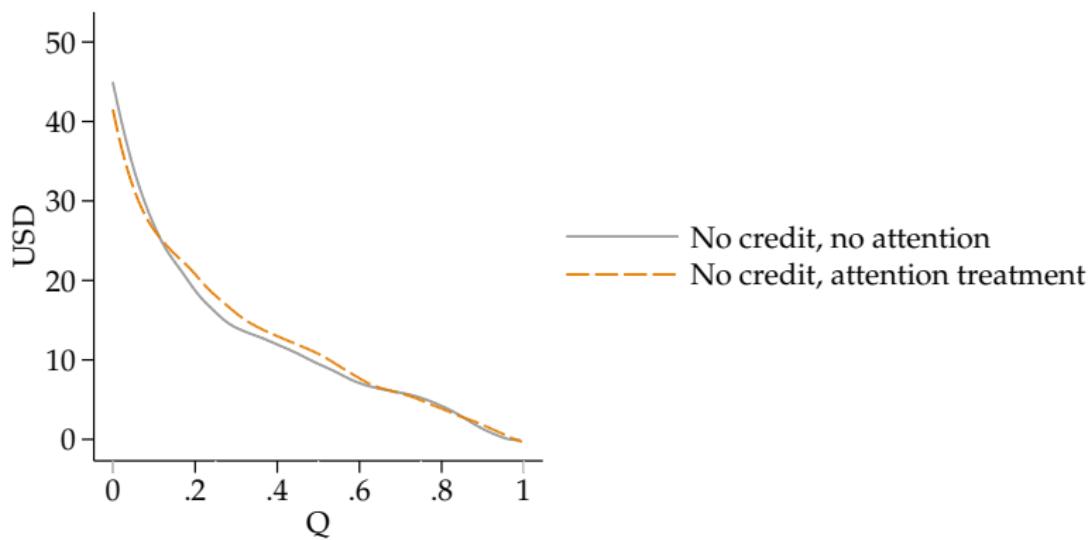
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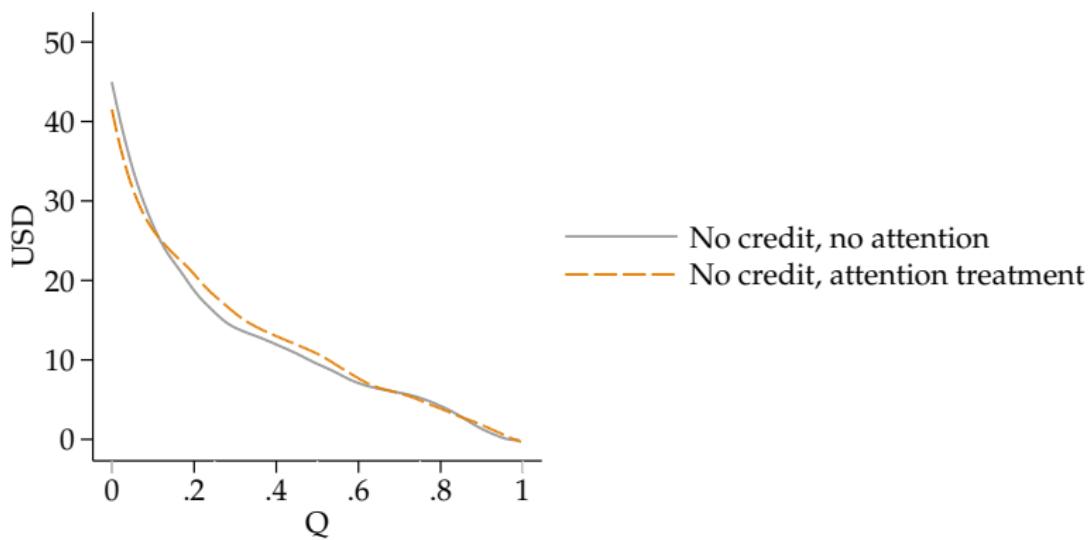
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## No evidence of inattention to energy savings



## No evidence of inattention to energy savings



- ▶ Nudges, behavioral interventions may not increase energy efficiency
- ▶ **Departs from:** Allcott and Taubinsky (2015); Allcott and Wozny (2014); Gillingham et al. (2019); Jessoe and Rapson (2014)

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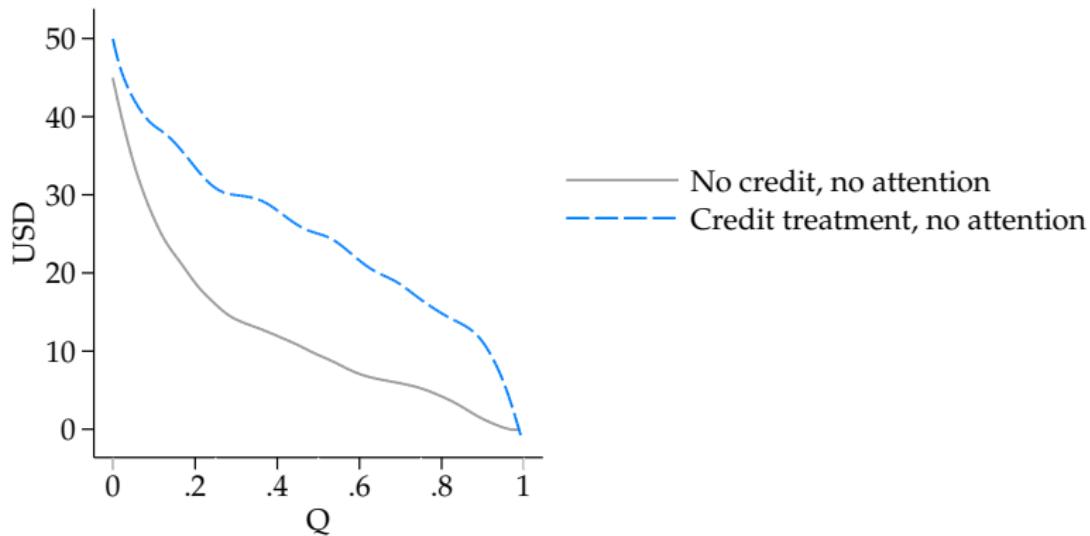
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## Access to credit doubles WTP



- ▶ Credit increases WTP by \$13 (95% CI: [11.2, 14.0])
- ▶ 104% relative to control

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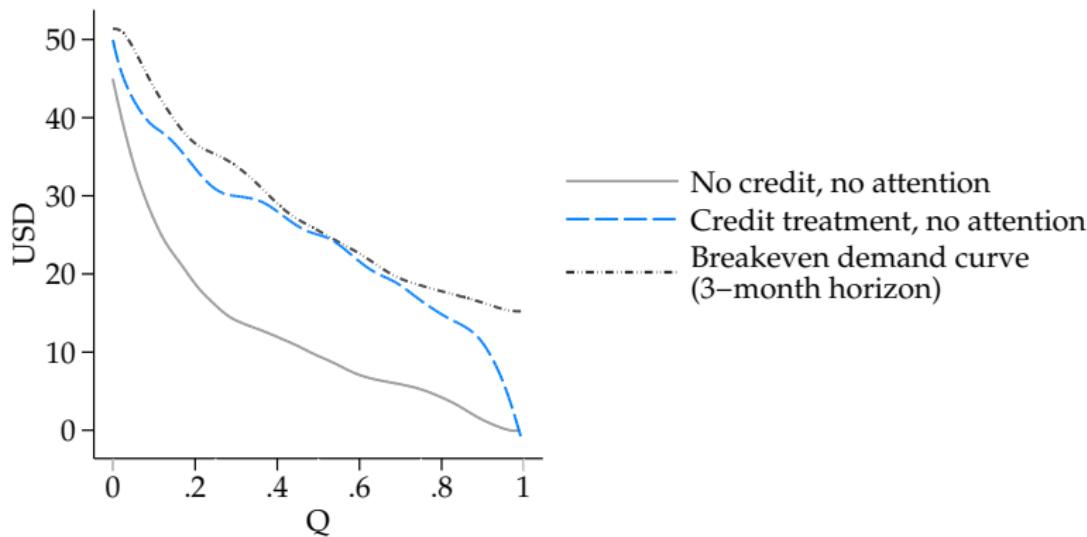
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## Access to credit doubles WTP



- ▶ Credit increases WTP by \$13 (95% CI: [11.2, 14.0])
- ▶ 104% relative to control
- ▶ Credit *alone* closes reaches breakeven point over the loan period
- ▶ Adopters use weekly savings to pay for stove

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## Large economic cost of credit market frictions

- ▶ Udry and Agamol (2006), Banerjee and Duflo (2005), Banerjee, Karlan, Zinman (2015), Pitt and Khandker (1998), De Mel, McKenzie, Woodruff (2008)

## Large economic cost of credit market frictions

- ▶ Udry and Agamol (2006), Banerjee and Duflo (2005), Banerjee, Karlan, Zinman (2015), Pitt and Khandker (1998), De Mel, McKenzie, Woodruff (2008)
- ▶ Technology is homogeneous; well-known as a high quality product
- ▶ Households can't invest even with 300% annual returns: high interest rates are not the primary barrier
- ▶ Other credit frictions are important: quantity constraints, time constraints, high cost of default

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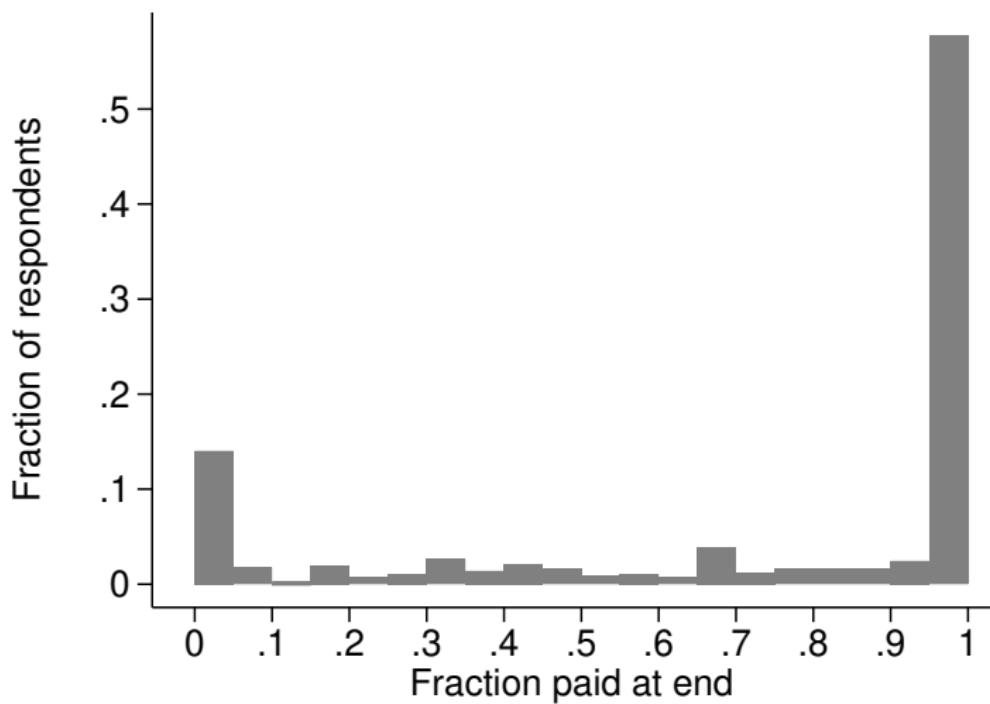
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## Repayment rates: good but still too low



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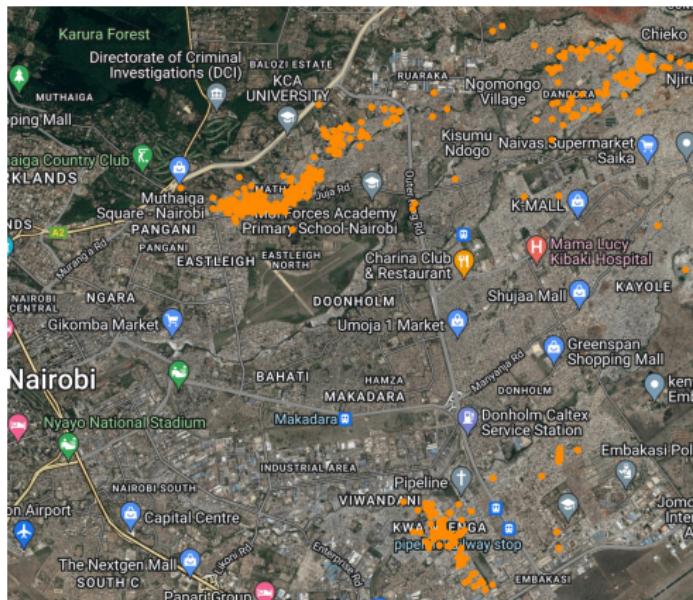
Barriers to adoption

Long-run impacts: 2022-2023 (3.5 years later)

Pollution impacts

Health impacts

# Follow-up population: 702 households (74%)



- ▶ 639 still reside in primary study areas
- ▶ 10 respondents reside elsewhere in Nairobi
- ▶ 53 respondents reside elsewhere in Kenya

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## Jikokoa ownership is persistent

	Control Mean	TE of 2019 Jikokoa Ownership	N
Owns other wood/charcoal stove in 2022	0.88 [0.33]	-0.54*** (0.05)	702
Owns Jikokoa in 2022	0.10 [0.31]	0.74*** (0.04)	702
Owns LPG stove in 2022	0.57 [0.50]	0.05 (0.06)	702
Owns bio-ethanol stove in 2022	0.15 [0.36]	0.01 (0.04)	702
Owns electric stove in 2022	0.00 [0.06]	0.02* (0.01)	702

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## Reduction in charcoal expenditures persist

	(1)	(2)
	2022	2019
Own Jikokoa	-1.50*** (0.47)	-1.12*** (0.35)
Own Jikokoa (Urban)		
Own Jikokoa (Rural)		
Rural	-1.05*** (0.36)	-1.08*** (0.38)
Control Mean	3.84	3.65
Weak IV F-Statistic	64.22	217.30
Observations	702	702

Regressions use the randomly assigned subsidy, offer of credit and their interaction as instruments for Jikokoa adoption

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## Reduction in charcoal expenditures persist – concentrated in urban areas

	(1) 2022	(2) 2019	(3) 2022	(4) 2019
Own Jikokoa	-1.50*** (0.47)	-1.12*** (0.35)		
Own Jikokoa (Urban)			-1.64*** (0.51)	-1.20*** (0.37)
Own Jikokoa (Rural)			-0.45 (1.05)	-0.40 (0.98)
Rural	-1.05*** (0.36)	-1.08*** (0.38)	-1.74** (0.85)	-1.58* (0.82)
Control Mean	3.84	3.65	3.84	3.65
Weak IV F-Statistic	64.22	217.30	26.75	96.17
Observations	702	702	702	702

Regressions use the randomly assigned subsidy, offer of credit and their interaction as instruments for Jikokoa adoption

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## Impacts on socio-economic well-being

	Control Mean	Treatment Effect	N
Has formal bank account (=1)	0.13 [0.34]	0.11 (0.07)	702
Total savings (USD)	53.64 [86.62]	-8.63 (19.88)	701
... in mobile banking (USD)	5.85 [12.29]	-0.22 (2.05)	702
... in SACCO payout (USD)	40.25 [64.75]	-15.30 (13.97)	701
... in formal banking (USD)	7.63 [34.99]	6.81 (8.69)	702
People in network who adopted Jikokoa	0.78 [2.04]	1.13*** (0.40)	702
... neighbors	0.28 [0.82]	0.56*** (0.16)	702
... family members	0.20 [0.69]	0.21 (0.13)	702
... friends	0.20 [0.69]	0.22* (0.13)	702
... other people	0.10 [0.45]	0.14 (0.10)	702

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## Adoption does not affect cooking behavior

	Minutes per day	Cooking (=1)		Cooking indoors (=1)	
		(1)	(2)	(3)	(4)
Own Jikokoa	4.131 (9.025)	0.013 (0.010)	0.014 (0.010)	-0.026 (0.047)	-0.065 (0.061)
Control Mean	137.013	0.101	0.101	0.889	0.872
HOD FE	N/A	N/A	Yes	N/A	Yes
Weak IV F-Stat	51	51	69	46	47
Observations	697	697	31887	649	3068

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Long-run impacts: 2022-2023 (3.5 years later)

Pollution impacts

Health impacts

# Air pollution

## Particulate Matter (PM)

- ▶ Purple Air device
- ▶ One reading every 2 minutes
- ▶ Calibrated using Ward et al. (AGU 2021)

PM1.0: Any particles  $< 1.0\mu\text{m}$  diameter

PM2.5: Any particles  $< 2.5\mu\text{m}$  diameter



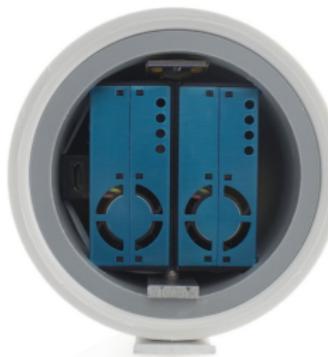
# Air pollution

## Particulate Matter (PM)

- ▶ Purple Air device
- ▶ One reading every 2 minutes
- ▶ Calibrated using Ward et al. (AGU 2021)

PM1.0: Any particles  $< 1.0\mu\text{m}$  diameter

PM2.5: Any particles  $< 2.5\mu\text{m}$  diameter



## Carbon Monoxide (CO)

- ▶ Lascar Electronics device
- ▶ One reading every minute
- ▶ Calibrated every 2 months



## Air pollution measurements

- ▶ Methodology and design developed by Berkeley Air Johnson et al 2021
- ▶ Best practices Chillrud et al 2021; Burrowes 2019; Gordon et al 2014; Gould et al 2022
- ▶ Each backpack contains 2 devices and a battery
- ▶ Dropped off during visit 1, picked up ~48 hours later



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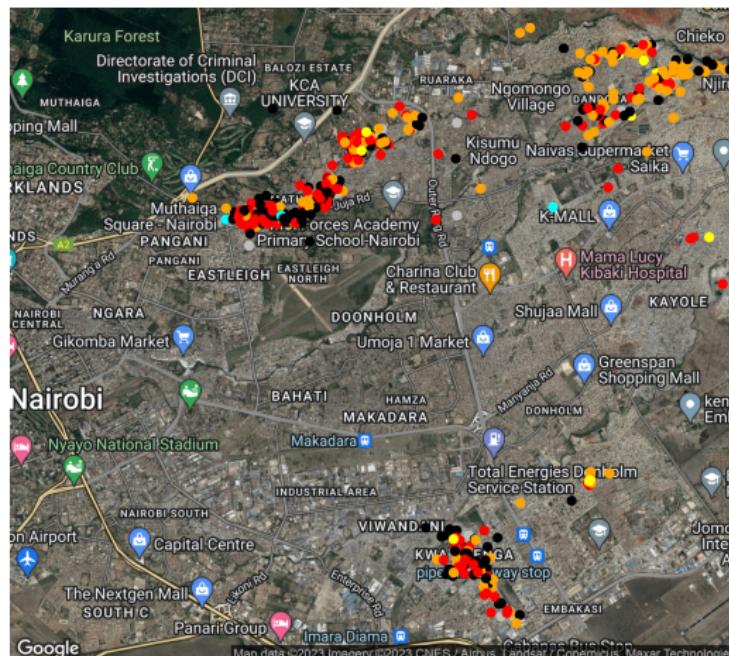
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# Average PM2.5 concentrations far exceed WHO guidelines



PM2.5 ( $\mu\text{g}/\text{m}^3$ ):

- 0 – 5
- 5 – 10
- 10 – 15
- 15 – 25
- 25 – 35
- 35+

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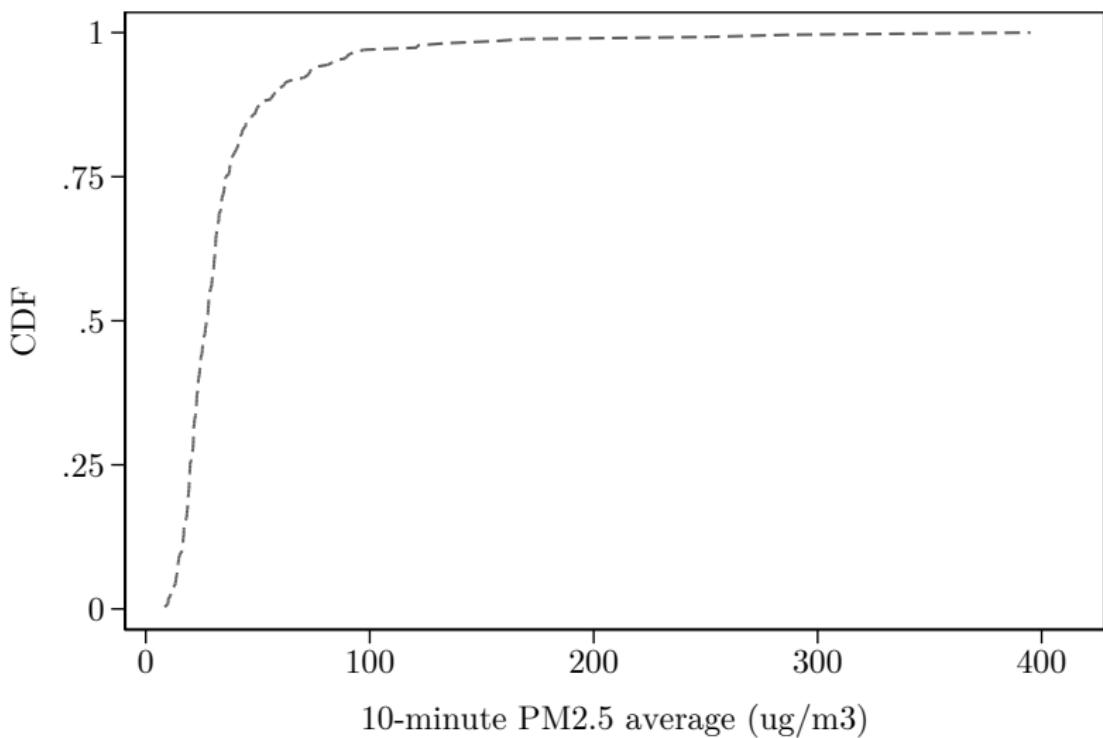
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## Each respondent's median 10-minute PM2.5:



$$35\mu\text{g}/\text{m}^3 = \text{AQI } 100$$

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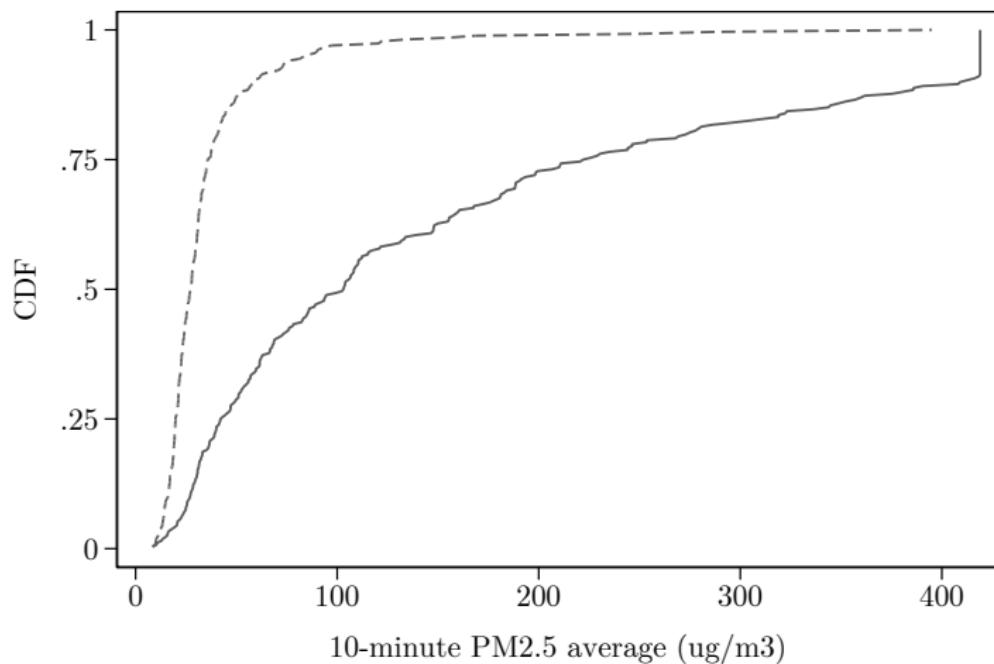
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## Each respondent's 99th percentile of 10-minute PM2.5:

(99th percentile is approx. 15 minutes per day)



$$100\mu\text{g}/\text{m}^3 = \text{AQI } 174$$

$$200\mu\text{g}/\text{m}^3 = \text{AQI } 250$$

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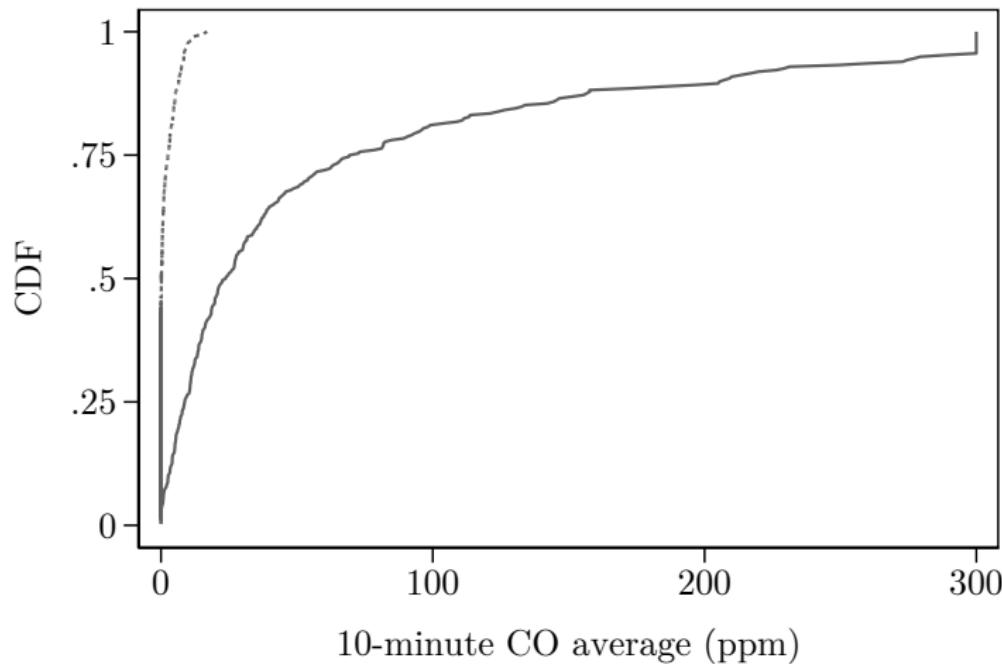
Pollution  
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Health  
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## 50th & 99th percentile of 10-minute CO average:

>10ppm: "Significant increase in heart disease deaths and hospital admissions for congestive heart failure"

>100ppm: "Headache, tiredness, dizziness, nausea, damage to hearts and brains within 2–5 hours" (EPA)



Background  
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Savings  
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Climate  
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Barriers  
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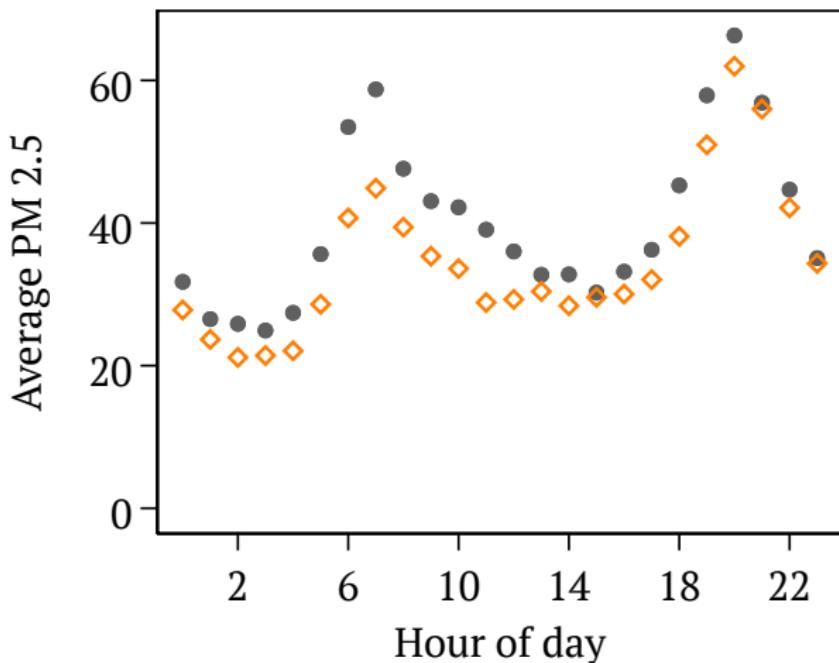
Long-run  
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Pollution  
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## Jikokoa adoption and hourly average PM2.5 exposure

● Jiko    ◊ Jikokoa



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# Cooking increases PM2.5 by $125\mu\text{g}/\text{m}^3$

Panel A) All hours

	Median	Mean	Max Hour	99th
Own Jikokoa	0.1 (1.7)	-0.8 (3.4)	-16.4 (19.0)	-8.3 (23.0)
Control Mean	25.2	37.8	153.3	200.3
Weak IV F-Statistic	53	53	53	53
Observations	651	651	651	651

Panel B) Hours when self-reporting cooking

	Median	Mean	Max Hour	99th
Own Jikokoa	-11.0** (5.2)	-16.6*** (6.4)	-31.0** (15.4)	-52.0** (22.5)
Control Mean	35.9	49.7	92.6	150.3
Weak IV F-Statistic	48	48	48	48
Observations	598	598	595	598

Background  
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Adoption reduces peak emissions by  $52\mu\text{g}/\text{m}^3$  (42%)

Panel A) All hours

	Median	Mean	Max Hour	99th
Own Jikokoa	0.1 (1.7)	-0.8 (3.4)	-16.4 (19.0)	-8.3 (23.0)
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Background  
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oooooooooooo●Health  
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## No detectable change in daily average

- ▶  $-0.8 \mu\text{g}/\text{m}^3$  is around 2%
- ▶ 95% CI: -7.5, 5.9  $\mu\text{g}/\text{m}^3$

Panel A) All hours

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## How big of an effect could private fuel switching have on average exposure?

- ▶ Respondents cook for 9% of the day (2 hours) on average
- ▶ Average PM<sub>2.5</sub> is  $38\mu\text{g}/\text{m}^3$  (AQI: 100)
  - ▶  $52\mu\text{g}/\text{m}^3$  when cooking
  - ▶  $36\mu\text{g}/\text{m}^3$  when not cooking
- ▶ Even if treatment consisted of a perfectly clean stove, then treatment would still only reduce average exposure by  $1.9\mu\text{g}/\text{m}^3$  (4%)

# How big of an effect could private fuel switching have on average exposure?

- ▶ Respondents cook for 9% of the day (2 hours) on average
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  - ▶  $36\mu\text{g}/\text{m}^3$  when not cooking
- ▶ Even if treatment consisted of a perfectly clean stove, then treatment would still only reduce average exposure by  $1.9\mu\text{g}/\text{m}^3$  (4%)
- ▶ **In rural areas:**
  - ▶ Background is  $9\mu\text{g}/\text{m}^3$  (Pope et al, 2018)
  - ▶ Suppose cooking twice as long
  - ▶ **28%** reduction in aggregate exposure

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# Today

Background

Study design

Financial savings

Climate

Barriers to adoption

Long-run impacts: 2022-2023 (3.5 years later)

Pollution impacts

Health impacts

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Design  
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# Can clean cooking technologies improve health?

1. Many of the RCTs focus on **adoption** without measuring health impacts

- ▶ Bensch et al. (2015), Bensch and Peters (2019), Chowdhury et al. (2019), Levine et al. (2018), Miller and Mobarak (2013), Mobarak et al. (2012), and Pattanayak et al. (2019).
- ▶ Berkouwer and Dean (2022)

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2. Much existing evidence is **correlational**. Lancet Global Health (2020) reviews 437 papers: **6** were RCTS (3 from 1 RCT)

- ▶ RESPIRE (2011); HAPIN (2022)

# Can clean cooking technologies improve health?

1. Many of the RCTs focus on **adoption** without measuring health impacts
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2. Much existing evidence is **correlational**. Lancet Global Health (2020) reviews 437 papers: **6** were RCTS (3 from 1 RCT)
  - ▶ RESPIRE (2011); HAPIN (2022)
3. We find **9** RCTs that estimate the causal impact of improved stove adoption on air pollution concentrations and health
  - ▶ Only **one** RCT in an urban location (sample of pregnant women) CHEST (2015)
  - ▶ **None** measure non-kitchen exposure

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# Clinical health outcomes

Following methodology from public health Tielsch et al., 2016; Smith-Sivertsen et al., 2009; Checkley et al., 2021

1. **Blood pressure** using a sphygmomanometer
  - ▶ Following procedures set out by CDC NHANES (2019)
  - ▶ Average of 3 measurements of systolic and diastolic BP
  - ▶ Respondent to sit on a chair, straight back, feet flat on the floor, etc.
2. **Blood oxygen saturation** using pulse oximeter

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3. **Child anthropometrics**
  - ▶ Weight
  - ▶ Height
  - ▶ Arm circumference

# Clinical health outcomes

Following methodology from public health Tielsch et al., 2016; Smith-Sivertsen et al., 2009; Checkley et al., 2021

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  - ▶ Following procedures set out by CDC NHANES (2019)
  - ▶ Average of 3 measurements of systolic and diastolic BP
  - ▶ Respondent to sit on a chair, straight back, feet flat on the floor, etc.
- 2. Blood oxygen saturation** using pulse oximeter
- 3. Child anthropometrics**
  - ▶ Weight
  - ▶ Height
  - ▶ Arm circumference
- 4. Have you been diagnosed by a medical professional with...**
  - ▶ Asthma, pneumonia, COPD, hypertension, diabetes, TB, COVID, etc.
- 5. Pneumonia diagnosis** using UNICEF MICS6 (2020) methodology

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## Self-reported health outcomes

Following methodology from public health Tielsch et al., 2016; Smith-Sivertsen et al., 2009; Checkley et al., 2021

In the past two weeks, have you experienced...

*(split defined in pre-analysis plan)*

- ▶ **Self-reported respiratory symptoms:** Headache, fatigue, cough, runny nose, sore throat, etc.
- ▶ **Self-reported non-respiratory symptoms:** Fever, stomach pain, malaria, worms, myalgia, etc.

## Self-reported health outcomes

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In the past two weeks, have you experienced...

*(split defined in pre-analysis plan)*

- ▶ **Self-reported respiratory symptoms:** Headache, fatigue, cough, runny nose, sore throat, etc.
- ▶ **Self-reported non-respiratory symptoms:** Fever, stomach pain, malaria, worms, myalgia, etc.

**Child outcomes:** ask parents about any symptoms or diagnoses in children under 10

# A 0.24SD reduction in self-reported respiratory symptoms

- ▶ Split pre-specified in analysis plan

	Control Mean	Treatment Effect	N
Health symptoms index (z-score)	0.00 [1.00]	-0.15 (0.16)	702
Number of health symptoms	2.78 [2.93]	-0.72* (0.42)	702
Non-respiratory health symptom index	-0.00 [1.00]	-0.03 (0.19)	702
Number of non-respiratory health symptoms	1.09 [1.54]	-0.24 (0.25)	702
Respiratory health symptom index	-0.00 [1.00]	-0.24* (0.13)	702
Number of respiratory health symptoms	1.70 [1.76]	-0.48** (0.23)	702

# Reductions in sore throat, headache, cough, fatigue

	Control Mean	Treatment Effect	N
Respiratory health symptom index	-0.00 [1.00]	-0.24* (0.13)	702
Number of respiratory health symptoms	1.70 [1.76]	-0.48** (0.23)	702
Persistent cough	0.24 [0.43]	-0.09 (0.07)	702
Always feeling tired	0.30 [0.46]	-0.07 (0.07)	702
Breathlessness at night	0.08 [0.27]	-0.01 (0.04)	702
Frequent diarrhea	0.02 [0.15]	-0.02 (0.03)	702
Difficulty breathing / Chest tightness	0.07 [0.26]	-0.01 (0.04)	702
Runny nose	0.23 [0.42]	-0.05 (0.07)	702
Sore throat	0.16 [0.37]	-0.12* (0.06)	702
Headache	0.52 [0.50]	-0.12 (0.08)	702
Wheezing	0.03 [0.17]	0.01 (0.03)	702
Persistent mucus problems	0.04 [0.19]	-0.01 (0.02)	702

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## No detectable impact on clinical health outcomes

	Control Mean	Treatment Effect	N
Blood oxygen	96.61 [2.53]	0.31 (0.37)	696
Average systolic blood pressure	122.16 [18.97]	0.49 (3.30)	696
Average diastolic blood pressure	81.32 [11.73]	0.58 (2.15)	696
Hypertension: Stage 1 or higher (>130/80)	0.51 [0.50]	0.02 (0.09)	696
Hypertension: Stage 2 or higher (>140/90)	0.27 [0.44]	-0.02 (0.08)	696

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## No detectable impact on clinical health outcomes

- ▶ We can rule out a 0.14 SD or greater reduction in health diagnoses
- ▶ We can rule out a 6 mmHg or greater reduction in systolic BP
- ▶ Smoking acutely increases systolic BP by 20 mmHg (Cohen and Townsend, 2009); limited evidence on long-term impact on BP
- ▶ Comparing our cardiovascular impacts with the medical literature we can reject a 12% or greater decrease in major cardiovascular events

Background  
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- ▶ We can rule out a 6 mmHg or greater reduction in systolic BP
- ▶ Smoking acutely increases systolic BP by 20 mmHg (Cohen and Townsend, 2009); limited evidence on long-term impact on BP
- ▶ Comparing our cardiovascular impacts with the medical literature we can reject a 12% or greater decrease in major cardiovascular events
- ▶ No heterogeneity by baseline health, beliefs about health, age, WTP, or background pollution

## No impact on diagnoses by healthcare professionals

	Control Mean	Treatment Effect	N
Number of health diagnoses	0.30 [0.58]	0.13 (0.09)	702
Asthma	0.01 [0.08]	-0.01 (0.01)	702
Pneumonia	0.13 [0.34]	0.02 (0.05)	702
Chronic Pulmonary Disease	0.00 [0.06]	0.01 (0.01)	702
Tuberculosis	0.01 [0.08]	0.02 (0.01)	702
COVID	0.01 [0.08]	-0.01 (0.01)	702
Other lung disease	0.01 [0.08]	-0.01 (0.01)	702
Stroke or cardiovascular disease	0.01 [0.08]	-0.00 (0.01)	702
Diabetes	0.02 [0.14]	-0.00 (0.02)	702
Other	0.04 [0.19]	0.01 (0.03)	702

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## No impact on children's outcomes (ages <10, <5)

	Control	Treatment	N
	Mean	Effect	
Child weight (kg)	17.73 [7.57]	-1.02 (1.80)	224
Child height (cm)	98.59 [31.07]	6.02 (6.08)	199
Child arm circumference (cm)	16.37 [7.26]	1.24 (1.41)	220
Number of child health symptoms	1.19 [1.50]	0.34 (0.40)	343
Child health symptom index	0.00 [1.00]	0.32 (0.29)	343
Fever	0.18 [0.38]	-0.01 (0.09)	343
Vomiting	0.10 [0.30]	-0.01 (0.06)	343
Cough	0.40 [0.49]	0.03 (0.12)	343
Diarrhea	0.10 [0.30]	0.00 (0.07)	343
Breathlessness	0.04 [0.19]	0.08 (0.06)	343
Persistent headache	0.08 [0.27]	0.05 (0.05)	343
Very bad cough	0.25 [0.43]	0.10 (0.09)	343
Pneumonia - DHS	0.03 [0.18]	0.03 (0.05)	343

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## No impact on health expenditures

	Control Mean	Treatment Effect	N
Non-hospital health expenditures (USD)	4.34 [7.64]	0.80 (1.07)	702
Hospital visits in past 30 days	0.33 [0.57]	-0.01 (0.09)	702
Hospital visit expenditures (USD)	3.39 [11.17]	1.03 (1.48)	702

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## No impact on cognitive function

	Control Mean	Treatment Effect	N
Cognitive index	-0.00 [1.00]	-0.01 (0.15)	587
Working memory (Corsi)	-0.00 [1.00]	-0.48** (0.22)	305
Attention (d2)	0.00 [1.00]	-0.09 (0.15)	564
Inhibitory control (HF - % correct)	-0.00 [1.00]	0.18 (0.16)	516
Inhibitory control (HF - reaction time)	0.00 [1.00]	0.14 (0.19)	516

Sample size here is smaller due to technical issues with the tablets. Since the order of follow-up surveys was randomized, it is unlikely that this biased the results.

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## Evidence against measurement error, experimenter demand

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## Evidence against measurement error, experimenter demand

### 1. Medical diagnoses correlate with blood pressure

	Mean (1)	Blood Pressure (2)	N (4)
Health diagnoses index	-0.00 [1.00]	0.11*** (0.04)	696
Number of health diagnoses	0.28 [0.55]	0.06*** (0.02)	696

## Evidence against measurement error, experimenter demand

1. Medical diagnoses correlate with blood pressure
2. Impact on **respiratory** but not **non-respiratory** symptoms

	Control Mean	Treatment Effect	N
Non-respiratory health symptom index	-0.00 [1.00]	-0.03 (0.19)	702
Number of non-respiratory health symptoms	1.09 [1.54]	-0.24 (0.25)	702
Respiratory health symptom index	-0.00 [1.00]	-0.24* (0.13)	702
Number of respiratory health symptoms	1.70 [1.76]	-0.48** (0.23)	702

## Evidence against measurement error, experimenter demand

1. Medical diagnoses correlate with blood pressure
2. Impact on **respiratory** but not **non-respiratory** symptoms
3. No difference by size of subsidy (25% to 90%)

	Respiratory			Non-respiratory		
	(1)	(2)	(3)	(4)	(5)	(6)
Owns Jikokoa	-0.45*** (0.12)	-0.29 (0.28)	-0.30 (0.28)	-0.39*** (0.11)	-0.40 (0.26)	-0.38 (0.27)
Price (10 USD)	-0.00 (0.07)	0.05 (0.11)	0.05 (0.11)	-0.06 (0.06)	-0.07 (0.10)	-0.06 (0.10)
Owns Jikokoa		-0.09 (0.14)	-0.09 (0.14)		0.00 (0.13)	0.01 (0.13)
X Price (10 USD)						
WTP (10 USD)			0.02 (0.05)			-0.02 (0.05)

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## Evidence against measurement error, experimenter demand

1. Medical diagnoses correlate with blood pressure
2. Impact on **respiratory** but not **non-respiratory** symptoms
3. No difference by size of subsidy (25% to 90%)
4. Health—max pollution correlation persists among **non-adopters**

	Mean	Mean Pollution in SD	Median Pollution in SD	Max Hourly Pollution in SD	Hours Above $100\mu\text{g}/\text{m}^3$	N
	(1)	(2)	(3)	(4)	(5)	
Health symptoms index	0.02 [1.02]	-0.00 (0.06)	0.03 (0.07)	0.09 (0.07)	-0.00 (0.04)	291
Number of symptoms	2.82 [2.96]	0.01 (0.18)	0.10 (0.19)	0.33* (0.19)	0.01 (0.10)	291

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## Conclusion

- ▶ **Financial benefits:** Private savings of \$86–\$120 per year (around 1 month of income)

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## Conclusion

- ▶ **Financial benefits:** Private savings of \$86–\$120 per year (around 1 month of income)
- ▶ **Climate benefits:** Reductions of 2–3.5 tCO<sub>2</sub>e/yr; CO<sub>2</sub> mitigation at \$5–\$10 per ton

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## Conclusion

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- ▶ **Pollution benefits:** 42% reduction in PM2.5 cooking spikes

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## Conclusion

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- ▶ **Pollution benefits:** 42% reduction in PM2.5 cooking spikes
- ▶ **Health benefits:** 0.24SD reduction in self-reported respiratory symptoms, but no clinical health improvements

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## Conclusion

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- ▶ **Pollution benefits:** 42% reduction in PM2.5 cooking spikes
- ▶ **Health benefits:** 0.24SD reduction in self-reported respiratory symptoms, but no clinical health improvements
- ▶ **Adoption barriers:** Upfront liquidity and access to credit

## Conclusion

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- ▶ **Health benefits:** 0.24SD reduction in self-reported respiratory symptoms, but no clinical health improvements
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Thank you!

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