

Replication Study: Assessing the Impact of a Mobile Money-Based Conditional Cash Transfer on Antenatal Care Adherence among Pregnant Adolescents in Rural Kayes, Mali

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Abstract

Conditional cash transfers (CCTs) are a strategy to improve health service use. A prior study in an urban Malian setting found a mobile money-based CCT increased antenatal care (ANC) attendance. Its effectiveness for pregnant adolescents in remote rural areas, where access barriers are acute, is not known. This replication study assessed the impact of a mobile money-based CCT on adherence to recommended ANC visits among pregnant adolescents in rural Kayes, Mali. The primary objective was to determine if the positive effects from the original urban study could be reproduced in this high-need, rural context. A quasi-experimental design compared intervention and control groups across several rural health districts. Enrolled pregnant adolescents received mobile money transfers conditional on verified ANC attendance. Adherence was measured as the proportion of completed versus recommended ANC visits. Data were sourced from health facility records and participant surveys. The replication did not reproduce the strong positive effect of the original study. A modest increase in ANC attendance within the intervention group was observed, but the difference compared to the control group was not statistically significant. Only 38% of adolescents in the intervention group achieved the recommended four ANC visits. The mobile money-based CCT did not significantly improve ANC adherence in this rural adolescent population. This indicates the intervention model may not be directly transferable without addressing the distinct socio-economic

and structural barriers in rural settings. Future interventions should integrate complementary support, such as adolescent-friendly health services and transport assistance, with financial incentives. Further research is required to design and test CCT models tailored to this specific population. conditional cash transfer, mobile money, antenatal care, adolescents, replication study, Mali, rural health This study provides critical evidence on the contextual limitations of a previously successful health financing intervention, highlighting the necessity of adapting models for vulnerable subgroups in resource-constrained settings.

Keywords: *Conditional cash transfers, Antenatal care, Sub-Saharan Africa, Health service utilisation, Adolescent pregnancy, Replication study, Rural health*

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