

## Empowering frontline health workers: Farida's story

Often community health workers (CHW) are promised incentives for their work, but the complicated, protracted, and often insecure process of disbursing funds can be demotivating. This is a challenge faced by USAID's Mobile Alliance for Maternal Action (MAMA) project, implemented by Dnet, which is working to reduce maternal and child mortality by increasing community accessibility to information on maternal and children healthcare.

With the help of the USAID's mSTAR project, implemented by FHI 360, a decision to pilot test a transition from paying incentives in cash to mobile financial services was made. This transition resulted in reduced lag time between earning incentives and receiving payment, avoided long treks to the office, and increased safety by eliminating the need to personally collect cash. In addition to reducing cost and staff time, it led to increased CHW satisfaction, and in many cases, improved financial inclusion.

Farida Yeasmin is one such frontline community health worker who works with BRAC, a partner organization of MAMA. Farida has been working in Mymensingh district in Bangladesh's central region for over a year. She was trained by BRAC on maternal, neonatal and child healthcare (MNCH) and primary healthcare to provide appropriate guidance to the families she visits.

Farida's role is to register expectant and new mothers and their families to MAMA's services. Once community members become subscribers, they benefit from receiving maternal and neonatal healthcare messages via SMS, obtaining guidance from doctors via a call center, and accessing referrals.

Farida receives BDT 10 to 20 (equivalent to USD 0.13 to 0.26) as an incentive for each new subscriber she registers. In the past, incentives



*Farida after completing a training sessions on mobile money.*

were paid in cash and took 41 calendar days for processing. It was a costly system involving 32 person hours from Dnet's finance office. Once ready for collection, Farida had to travel three kilometers to the Upazilla (sub-district) office to collect her money in cash. This was even more challenging when the weather was bad. In some cases, the money she received was different than what she had calculated on her own since CHWs and the finance office were using different time frames, given the long processing delay. Collecting the incentive from the office also meant that Farida had to defer her field visits for that day—losing the potential to earn new incentives—and she had to carry cash on her way back, which put her at risk of theft. This was the case for all of the more than 1,200 community health workers of the MAMA program.

Dnet felt that their disbursement process could be improved, but was unsure of what alternative options were available. In 2014, this changed when Dnet received an mSTAR grant, which supported transition from cash to mobile payments. Dnet began adopting mobile payments using bKash and DBBL Mobile Banking into their project operations to test whether they could enhance the efficiency of disbursements. Since all of their community

health workers had access to a mobile phone, mobile payments presented a great opportunity in a country where only 40 percent of the population has a formal bank account.

Although the process seemed difficult to staff at the onset, Dnet soon saw [significant differences](#). Farida and all of the other community health workers received training on using mobile money accounts with technical assistance from mSTAR and soon started receiving their incentives directly in their mobile wallet. Now Farida receives her incentives in just 11 days—a full 30 days faster than previously—which encourages her to work and earn more.

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*“I feel safer and relaxed now.” - Farida*

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Opening a mobile wallet also gave her full control over her finances for the first time, without having to travel anywhere. Farida previously had her own bank account, although she was reluctant to use it since she lived far from the bank. Instead, she gave her incentive payments to her husband, who used the bank frequently for his business. Whenever she needed money, she would then need to ask him to withdraw it for her.

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*“I will be happy if our salaries are also transferred in our mobile accounts.” - Farida*

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Now, she says that receiving money in her mobile wallet makes her feel empowered and gives her a stronger say in family decisions. Also, since the switch to mobile payments, she no longer needs to worry about collecting her incentives from the office, or feel tense about carrying cash back home.

Moving forward, Farida envisions paying her son’s school fees and purchasing household groceries using her mobile money account. As Farida’s case exemplifies, mobile financial services bring more than just operational efficiencies, they are also empowering community health workers, increasing financial inclusion, and improving lifestyles.

It is a win-win situation; the cost of mobile financial services saves the project around \$300 – \$450 per month, and CHWs save time and money as well. Given this initial success, Dnet is planning to expand mobile payments to Aponjon CHWs in all of Bangladesh’s 64 districts through its outreach partners within 2015.

#### **DISCLAIMER**

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