



# INSTITUTE OF ECONOMIC GROWTH

University Enclave, University of Delhi (North Campus), Delhi-110 007, INDIA

October 9, 2019

## SEMINAR NOTICE

**Topic:** "HEALTH AWARENESS AND THE TRANSITION TOWARDS CLEAN COOKING FUELS: EVIDENCE FROM RAJASTHAN, INDIA"

**Speaker:** Professor Purnamita Dasgupta

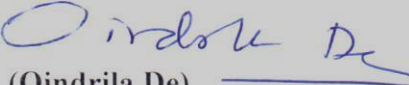
**Chair:** Professor Ajit Mishra, Director, IEG

The seminar details are as follows:

**Date & time:** FRIDAY, OCTOBER 18, 2019 AT 03.30 P.M.

**Venue:** A.M. Khusro Room  
Institute of Economic Growth,  
Delhi-110 007

All are welcome.

  
(Oindrila De)

### **Abstract:**

Available estimates from the WHO suggest that the health costs of cooking with simple stoves burning solid biomass like wood, dung or agricultural residues could be high in India. The inefficient combustion process causes high emissions of aerosols and gaseous pollutants evoking serious adverse impacts on human health and the environment. To mitigate these health risks and the associated detrimental climate active emissions, multiple initiatives have promoted the use of cleaner cooking technologies and fuels. The Indian government currently promotes the use of Liquefied Petroleum Gas (LPG) under its Ujjwala programme, which essentially covers the upfront costs of moving to the new technology. Currently the number of households with LPG stoves stands at more than 70 million. However, even after adopting LPG, a major fraction of the rural population continues to rely on solid biomass as their primary cooking fuel. While there can be several reasons for this, one reason for the limited use of LPG could be that the health effects of traditional cooking fuels are not sufficiently known to the households. We examine this hypothesis through an experiment providing randomized health information to 550 respondents with low LPG consumption in rural Rajasthan, in a situation where the high upfront costs of getting an LPG connection have been taken care of. Our results indicate that health information significantly increases the reported willingness to pay for LPG and has a strong positive impact on consumption behavior. We show that the causal mechanism indeed works via improved health knowledge, which is significantly higher among households receiving the health information. We also find suggestive evidence that knowledge-building regarding the health effects of cooking fuels should not target women alone. This seminar will present the methodological challenges and some empirical findings from the study.