

Internship at Evidence Action-Deworm the World Initiative

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Evidence Action launched formally in 2013 to scale up poverty interventions that have been proven to be effective in order to benefit millions of people.

Evidence Action leads and manages two programs incubated initially by Innovations for Poverty Action: [Dispensers for Safe Water](#) and the [Deworm the World Initiative](#). While Evidence Action grew out of a need to manage these programs, the larger goal of the organization was to design a process to bridge the gap between proven interventions that work and scaling them up to produce measurable impact for millions of people.

This led to the creation of [Evidence Action Beta](#) in 2014, where we are currently testing a number of other rigorously-evaluated interventions to be implemented as sustainable programs at scale. Beta functions to identify, filter, and scale up proven poverty interventions from the proof-of-concept stage to becoming institutionalized programs that serve millions. Beta's rigorous filtering criteria include scoring interventions based on impact, cost-effectiveness, scalability, and strategic fit.

Evidence Action values iteration, evaluation, learning, and adapting. We envision our role as leading a strategic approach to development that fills the gap between "what works" and implementing interventions at scale. By both incubating these proven interventions and also providing technical support and other functional services to our fully scaled programs, we span the continuum of evidence-based development that allows us to lay the foundations for effective monitoring and evaluation from the beginning. By strategically partnering, collaborating, and working with researchers, community members, institutions, and governments, we are looking to build a world where millions of people living in the poorest places have better opportunities and their lives are measurably improved. The Deworm the World Initiative envisions a world where all at-risk children have improved health, increased access to education, and better livelihoods potential as a result of being free of intestinal worms. We work in close partnership with governments to enable elimination of intestinal worms as a public health problem.

- We advocate for school-based deworming to policymakers, gaining and maintaining critical support amongst stakeholders responsible for children's health and education.
- We provide technical assistance to governments to launch, strengthen, and sustain high quality school-based deworming programs that leverage existing education and health infrastructure.
- We employ an evidence-based approach to rigorously evaluate and learn from programs we support, iterating on program design alongside governments to maximize reach in a cost-effective manner

Deworm the World Initiative: Partnership Model

1. POLICY AND ADVOCACY

We advocate with governments to launch deworming programs, and work collaboratively with ministries of health and education to establish effective policies and governance

structures. We support alignment of school-based deworming with other health and education priorities to enable long-term political and resource commitments, and share global best practices to improve cost-effectiveness and results.

2. PREVALENCE SURVEYING AND MAPPING

Guided by World Health Organization protocols, we work with epidemiologists and local partners to assess worm prevalence and intensity through field surveys. We use the survey results to support the development and implementation of appropriate treatment strategies. Once deworming programs are in place, we support governments to assess the impact of sustained mass treatment on worm infection.

3. PROGRAM PLANNING AND MANAGEMENT

We work closely with government partners to design their deworming program, develop operational plans and budgets, coordinate logistics, and provide on-the-ground support to ensure a high quality outcome.

4. PUBLIC AWARENESS AND MOBILIZATION

We work with governments to develop locally appropriate campaigns that educate children and communities about the negative effects of worms, the importance of being dewormed, and behaviors to prevent infection. These campaigns increase acceptance and participation in deworming.

5. TRAINING AND DISTRIBUTION CASCADE

We support governments to design and coordinate an efficient multi-tier training and distribution cascade that is tailored to the local context, ensuring that knowledge and program materials are relayed from the national or state level all the way to the teachers responsible for administering deworming drugs.

6. DRUG MANAGEMENT AND COORDINATION

We help governments evaluate appropriate treatment strategies, support drug procurement including through global pharmaceutical donation programs, and facilitate the development of robust protocols for tracking drug inventories and responding to adverse events.

7. MONITORING AND EVALUATION

We help governments design monitoring and data management systems to ensure accurate treatment data and measure program performance. We conduct rigorous independent monitoring to evaluate the efficiency of key processes and validate program results; we share monitoring results with government implementers, using data to inform programmatic decision making.

Our Results At A Glance

- In 2016, the Deworm the World Initiative supported governments to treat more than 196 million children in India, Kenya, [Ethiopia](#), [Vietnam](#), and [Nigeria](#).
- We support India's National Deworming Day, which targets all children ages 1-19 at schools and preschools; [in 2017](#) the program treated more than 260 million children.
- With our technical assistance, Kenya's National School-Based Deworming Programme has consistently treated over 6 million children per year since 2012, dramatically reducing STH and schistosomiasis infection.
- Since 2014, GiveWell has named the Deworm the World Initiative [one of its top-rated charities](#).

What's Next

The Deworm the World Initiative has ambitious plans to help eliminate the public health problem of parasitic worms in the coming years. Alongside evolving our technical assistance to existing government partners to meet their needs, we are leveraging opportunities to accelerate treatment coverage for at-risk children, with a focus on high-need countries like Pakistan and Nigeria.

We will:

- Decrease the worm burden by expanding high-quality school-based deworming into new geographies
- Build sustained government capacity to operate consistent, cost-effective, and high-quality school-based deworming programs
- With partners, drive further progress towards achievement of the WHO target of STH treatment for 75% of at-risk children by 2020

The evidence for mass school-based deworming

Parasitic worms are debilitating, widespread, and under-treated. School-based deworming is safe, cost-effective and scaleable. There is a robust evidence base for the work of the Deworm the World Initiative undertakes.

Deworming has important impacts on school participation, cognition and nutrition, and future earnings. Multiple rigorous studies have shown strong evidence of the effects of deworming, providing confidence in the benefits of treatment.

School Participation

Parasitic worms limit educational outcomes for children. Not only are infected children less likely to be enrolled in school, but they are also less likely to attend school and more likely to perform lower on testing.

- [A long-term follow-up study](#) linking aggregate infection data with individual socioeconomic data from the southern US in the 1910s found that a non-infected child

was 20 percentage points more likely to be enrolled in school than an infected child, and was also 13 percentage points more likely to be literate.

- [Miguel and Kremer's experimental evaluation in Western Kenya](#) found that deworming treatment resulted in a 25% increase in attendance at treatment schools.
- [In a long-term follow-up study](#) in Kenya, evidence shows that among females, deworming increased the rate of passing the national primary school exit exam by 9.5 percentage points on a base of 41%.

Nutrition and Cognition

Children with parasitic worms suffer from nutritional impairment, impacting their growth and physical development. Deworming treatment leads to significant weight gains and allows more energy to be focused on growth and development.

- [A meta-analysis authored by Croke et al. \(2016\)](#) finds a substantial and highly robust positive effect on child weight resulting from deworming. The effects are particularly large in areas with at least 20% prevalence; this is the same threshold at which the WHO currently recommends mass treatment.
- [A randomized controlled trial in Uganda](#) finds that the provision of periodic anthelmintic treatment as a part of child health services resulted in an increase in weight gain of about 10% above expected weight gain when treatments were given twice a year, and an increase of 5% when the treatment was given annually.
- Deworming has positive externalities even for children who are not directly treated. Owen Ozier's 2016 [study](#) finds that younger siblings of children who were treated show cognitive gains comparable to between 0.5 and 0.8 years of schooling ten years later.

Future Earnings

Children who were dewormed have higher earnings in adulthood. Higher earnings contribute to improved economies and significant returns on investment for governments, especially considering the extremely low cost of treatment.

- Hookworm infections could have explained as much as [22% of the income gap](#) between the U.S. North and South in the early 1900s.
- In Kenya, men who were treated as children [worked 3.4 more hours per week](#), spent more time in entrepreneurial activities, and were more likely to work in higher-wage manufacturing jobs compared to their untreated peers. This long-term impact study in Kenya calculates a rate of return between 32-52% for governments who invest in deworming.