A conversation with Rizwan Yusufali on June 19, 2014

Participants

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Note: This set of notes was compiled by GiveWell and gives an overview of the major points made by Mr. Yusufali.

Summary

GiveWell spoke with Mr. Yusufali about data collection for GAIN's salt iodization programs and about GAIN's funding.

The Global Alliance for Improved Nutrition (GAIN)'s salt iodization programs

GAIN's current program portfolio promotes USI in 16 countries with high rates of iodine deficiency and low household coverage of iodized salt: Bangladesh, China, India, Pakistan, Indonesia, the Philippines, Russia, Ukraine, Egypt, Ethiopia, Niger, Nigeria, Ghana, Senegal, Afghanistan, Tajikistan, and Zambia. 14 of these programs are implemented as part of the GAIN-UNICEF Universal Salt Iodization (USI) Partnership Project. There were originally 13 Partnership Project programs, but Russia and Ukraine are ending early, and GAIN is adding a program in Nigeria instead. Similarly, UNICEF is adding programs in Sudan and Madagascar. GAIN's two target countries outside the Partnership Project are Afghanistan and Tajikistan. GAIN provided a small amount of support to Zambia (project closed in March 2014).

Data collection for salt iodization programs

Iodine coverage surveys

GAIN measures improvements in iodine coverage compared to baseline data for its salt iodization programs. Rather than administering new iodine surveys at the beginning of its programs, GAIN used the most recent data collected prior to the beginning of the programs in 2008-2009. These data are widely accepted as the baseline data.

GAIN calculates the percentage of households with access to adequately iodized salt. Based on this data, it calculates the absolute number of people who have access to adequately iodized salt (the "reach" of salt iodization).

GAIN generally tries to distinguish between adequately iodized salt and inadequately iodized salt. Rapid Test Kits can only detect the presence of iodine in salt rather than the precise concentration of iodine, therefore GAIN has been promoting the use of quantitative measurement of iodine content salt especially in internal and external quality assurance and control, monitoring activities, and surveys. Titration and use of colorimeters are generally used. GAIN has also entered into a partnership with Bioanalyt® and promoting the use of an innovative colorimetric kit where the reagents come in sealed sample vials,

eliminating the need for a laboratory and enabling the test to be performed by virtually anyone with minimal training.

GAIN tracks three numbers in its programs:

- Number of people with no access to iodized salt
- Number of people with access to inadequately iodized salt: less than 15 parts per million (ppm)
- Number of people with access to adequately iodized salt: greater than 15 ppm

For example, in Bangladesh 80% of households have access to iodized salt, but only 57% of households have access to adequately iodized salt.

Urinary iodine concentration (UIC) surveys

Urinary iodine concentration (UIC) surveys previously targeted schoolchildren as a proxy for the general population, but now UIC surveys primarily focus on women of reproductive age, who are the most important targets for iodine programs.

Unrestricted funding within GAIN

GAIN has very little unrestricted funding. All of the funding for GAIN's various nutrition programs is specifically allocated to those programs, rather than being funded by GAIN's unrestricted funds.

Changes in the USI Partnership Project's plans

One of the main objectives of partnership project is to ensure long term sustainability of USI programs. This requires sensitivity and collaboration with multiple global and national stakeholders and alignment of plans and actions. Furthermore, as countries make progress towards achievement of universal salt iodization, the needs and priorities of the program change. The Partnership Project regularly assesses and reviews it strategies and has to therefore remain dynamic to program needs. For this reason, the USI Partnership Project goals and strategies for each country have evolved, and therefore, in many cases the current actions and strategies have changed from initial plans.

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