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Center for Methods on Implementation and Prevention Science (CMIPS)

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Today's seminar in three parts

Section I: Understand the types of economic evaluations for measuring costs and benefits for multisectoral and nutrition sensitive programs.

Section 2: What makes evaluating complex multisectoral strategies challenging?

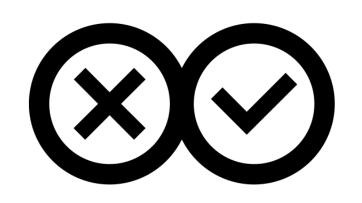
Section 3: Overview of a standardized approach for economic evaluations of complex multisectoral nutrition programs. (SEEMS-Nutrition)

Discussion and Q & A

Feel free to ask questions in the chat box too!

QUIZ QUESTION # 1

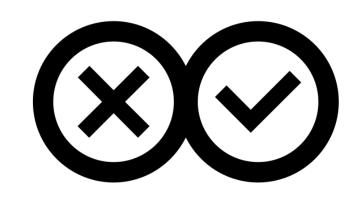
Economic evaluations include a range of comparative methods to help evaluate choices or trade-offs between costs and benefits.



- FALSE
- TRUE (Raise Hand)

QUIZ QUESTION # 2

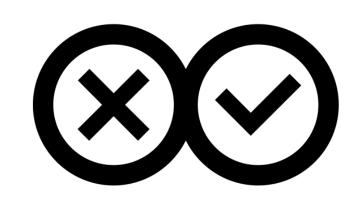
The total economic costs of an intervention includes the opportunity cost of all resources used, whether or not they were paid for.



- **FALSE**
- TRUE (Raise Hand)

QUIZ QUESTION # 3

It is easy to value the multiple benefits from improved agriculture, food security, health, nutrition and gender empowerment resulting from effective multisectoral nutrition strategies.



- FALSE
- TRUE (Raise Hand)

Section 1

PRIMER ON ECONOMIC EVALUATION

When spending is guided by evidence, millions of lives can be saved

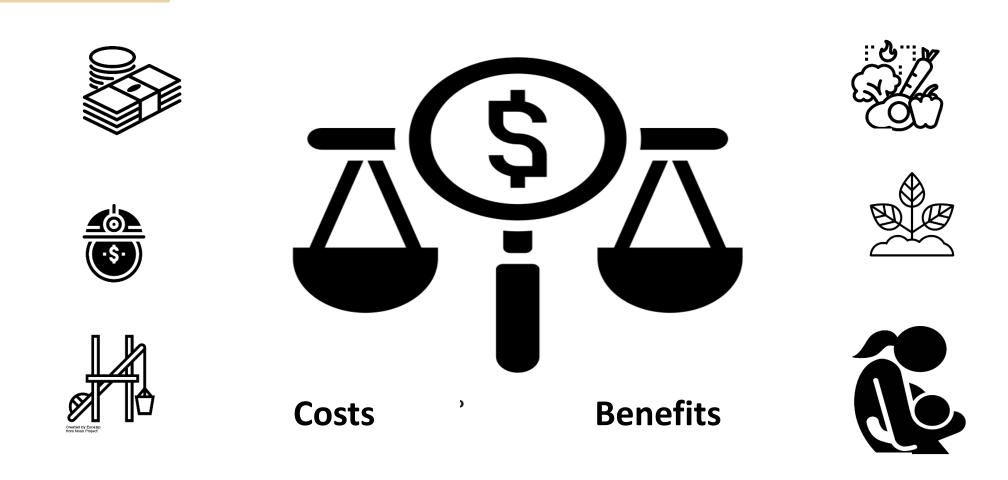
Priority setting for new interventions or introducing new technologies

Resource requirements and advocacy

Financial planning and budgeting

Improving technical efficiency

What is economic evaluation?



Types of economic evaluations

Method of Analysis	Cost	Effect			
Cost-efficiency Analysis	\$	Output achieved by an intervention			
Cost-Effectiveness Analysis	\$	Single "natural" unit outcome measure			
Cost-Utility Analysis	\$	Multiple outcomes—using a health index (DALY, QALY)			
Cost-Benefit Analysis	\$	\$			

Characteristics of all economic evaluations – Valuing resource use

- Inputs come from these resources:
 - Capital
 - Labor
 - Supplies and other inputs
- Once you value these inputs or resources in monetary terms ---you get COSTS!







Costs will represent the value of all resources used to reach program goals

- Estimate both economic and financial costs
- Economic costs include inputs that are not paid for in the current project budget:
 - Donated goods, volunteer labor, discounted goods, or services
 - Use for Economic Evaluations, such as CEA or CUA
- Financial costs represent actual expenditure on goods and services purchased:
 - Use for financial analysis (affordability, budget allocation)

Think about it!

- Think of a donated good in a health or nutrition intervention.
- List your response in the chat box!



Think about it!

- Think of one or more examples of typical financial expenditures in a multisectoral health or nutrition project
- List your response in the chat box!





Characteristics of economic evaluations – Measures of effectiveness

Changes in agriculture outputs, diets, nutritional status or health outcomes as a result of a program or intervention.









Example of what is included in cost effectiveness analysis

Provider costs

- Salary & time use
- Medical supplies
- Therapeutic foods
- Rent & utilities

Participant costs

- Wage loss
- Transport
- Food
- Medicine & doctor fees



children recovered

children treated

DALYs averted

Source, Puett et al 2013)

Reporting results

Cost efficiency

- Cost per output achieved
- i.e. This intervention cost \$55 per household reached.

Cost-effectiveness analysis

- Cost per outcome
- i.e. This intervention cost \$200 per child recovered from acute malnutrition

Cost benefit analysis

i.e. This intervention has a cost benefit ratio of 4:1 and a net present value that is > 0

How do policy makers use Economic Evaluations?

The effectiveness target is clear.

Minimize the expenditure needed to achieve the target.



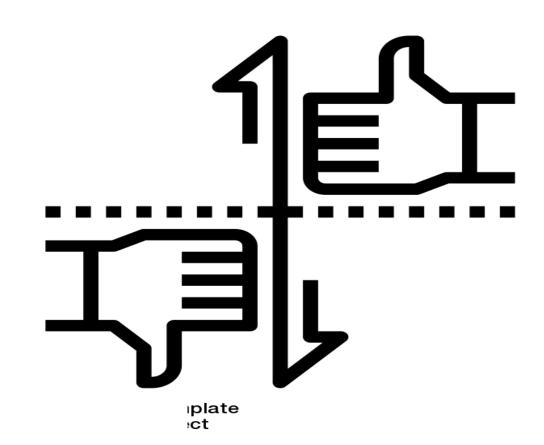


The budget constraint is clear.

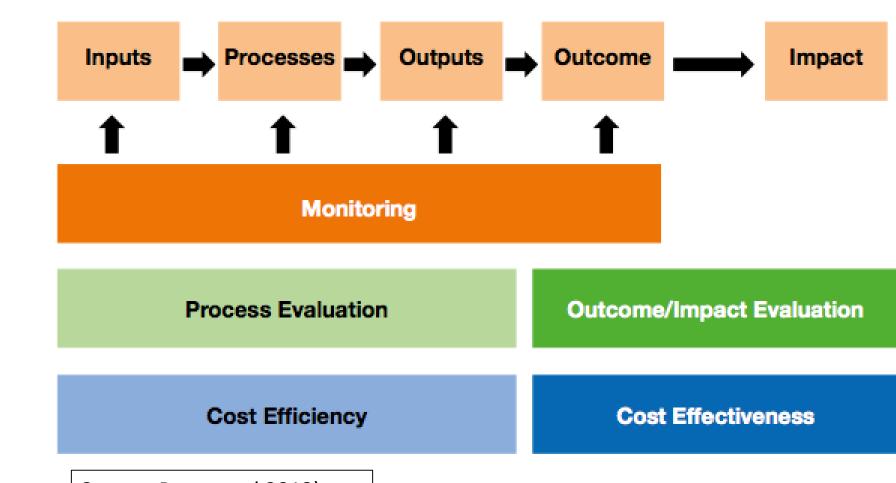
Maximize health and economic benefits within the given budget.

What is an acceptable threshold for cost-effectiveness?

- Most common threshold in LMICs is based on a country's GDP per capita.*
- Very cost effective
 - 1 x the annual GDP per capita.
- Cost effective
 - 3 * the annual GDP per capita.



When to conduct an economic evaluation?



UNIVERSIT Source, Puett et al 2013)

DEPARTMENT OF GLOBAL HEALTH

Four broad steps in cost-effectiveness analysis

- Defining the decision problem (also known as 'framing the evaluation').
- 2 Identifying, quantifying and valuing the resources needed (i.e. costs)
- Identifying, quantifying and valuing the health and economic consequences
- 4 Presenting and interpreting the evidence for decision-making.

Reference cases

iDSi Reference case on economic evaluation Wilkinson, T., Sculpher, M.J., Claxton, K., Revill, P., Briggs, A., Cairns, J.A., Teerawattananon, Y., Asfaw, E., Lopert, R., Culyer, A.J. and Walker, D.G., 2016. The international decision support initiative reference case for economic evaluation: an aid to thought. *Value in Health*, 19(8), pp.921-928GHCC Reference case on global health costing Vassall, A., Sweeney, S., Kahn, J., Gomez, G., Bollinger, L. and Marseille, E., 2017. Reference Case for Estimating the Costs of Global Health Services and Interventions. Seattle, WA: Global Health Cost Consortium. Harvard School of Public Health BCA guidelines Robinson, L.A., Hammitt, J.K., Jamison, D.T. and Walker, D.G., 2019. Conducting Benefit-Cost Analysis in Low-and Middle-Income Countries: Introduction to the Special Issue. Journal of Benefit-Cost Analysis, 10(S1), pp.1-14.

Resources for learning more

Guidance for public health, nutrition and early childhood development

- Moreland, S. F Shaylen and L Morris. (2019) <u>A Guide to the Fundamentals of</u> Economic Evaluation in Public Health. USAID, Measure Evaluation.
- Puett, C. (2013) Cost-Effectiveness Guidelines: An Introduction and Overview of Key Concepts for Cost-effectiveness Analysis within ACF. Paris: France: Action Contre le Faim.
- Gustafsson-Wright, E. I Boggild-Jones, S. Gardiner. (2017). *The Standardized Early Childhood Development Costing Tool (SECT)*. Washington DC: The Brookings Institute.

Additional reading on thresholds for decision making

- Remme, Michelle, Melisa Martinez-Alvarez, and Anna Vassall. "Cost-effectiveness thresholds in global health: taking a multisectoral perspective." *Value in health* 20.4 (2017): 699-704.
- Marseille, Elliot, et al. "Thresholds for the cost–effectiveness of interventions: alternative approaches." *Bulletin of the World Health Organization* 93 (2014): 118-124.

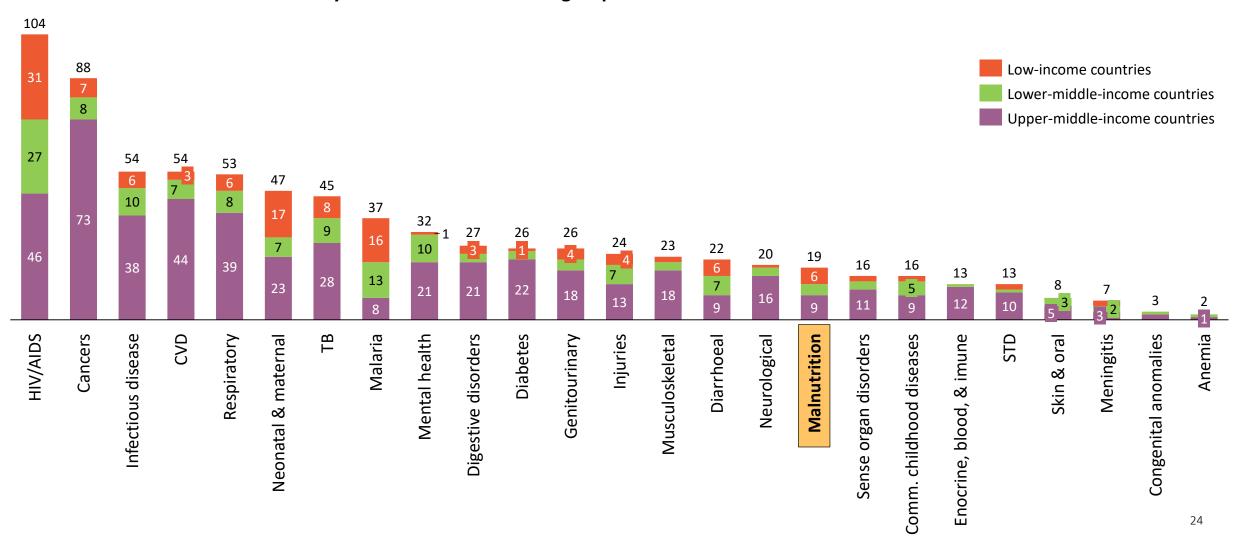
SECTION 2: What makes multisectoral programs to improve health and nutrition so challenging?

Overview

- What do we know already about economic evaluation of interventions to improve nutrition?
- What are the challenges?
- Results from a recent review of how economic evaluations of multisector approaches measure benefits
- Gaps in research

Economic evaluation is used to support decision-making in health, with some health areas more advanced than others

Number of economic evaluations by health area and income group



Examples where economic evaluation evidence has been used to strengthen decision-making and priority setting

Health technology assessment and innovations

 Eg, in the introduction of new vaccines or investment in underutilized vaccines that are cost-effective (HPV, HepB, etc)

Intervention prioritization

- Eg, CEA is critical in identifying a package of interventions for UHC, otherwise the intervention won't be included
- Eg, in the development of ART treatment guidelines and other policies

New program development or scale-up

 Eg, Benefit-cost analysis of wheat flour fortification by the Copenhagen Consensus led to the creation of Haiti's first food fortification program

Funding decisions

Eg, GAVI and Global Fund investment cases

We reviewed the current level of economic evidence available for nutrition interventions across sectors

Building on previous work looking at evidence of impact, we reviewed literature for economic evidence for interventions in the Compendium of Action for Nutrition:



Intervention has cost data



Intervention has evidence of cost effectiveness or return on investment



Intervention has evidence of economic outcomes

Nutrition interventions in **health** that work across the life course



Delayed cord clamping

Neonatal vitamin K administration Vitamin A supplementation Massage for promoting growth in preterm infants Zinc supplementation to treat infections Vitamin E supplementation in preterm infants



S Iron supplementation

Folic acid supplementation Family planning, delayed age at first pregnancy, & birth spacing

Pregnant women

Neonates

Infants and children

Adolescents and women of reproductive age



Balanced energy protein supplementation

MMN supplementation

Calcium supplementation

Folic acid supplementation

Iron and iron-folate supplementation

IPTp and ITN for malaria

Deworming

Vitamin D supplementation

Zinc supplementation

Omega-3 fatty acid supplementation

Antenatal psychosocial assessment & MH support

Control of household air pollution



Optimal breastfeeding promotion Complementary feeding promotion

\$ 6 **Management of SAM**

Management of MAM

Zinc supplementation

Vitamin A supplementation

Iron supplementation

MMN supplementation including iron

Lipid-based nutrient supplementation Deworming

Malaria prophylaxis and treatment Feeding practices in diarrhea

Zinc therapy for diarrhea

Vitamin D supplementation

Zinc supplementation to treat pneumonia Control of household air pollution

Studies show clear evidence of impact on nutrition outcomes

Studies show clear evidence of impact on intermediate outcomes

Studies show mixed or minimal evidence on outcomes included in the review

Intervention has cost data



Intervention has evidence of cost effectiveness or return on investment



Intervention has evidence of economic outcomes



Intervention is included in the priority package of interventions in The Lancet's Maternal and Child Nutrition Series (Bhutta et al. 2013)

Notes

- 1 Adapted from Synthesis of Evidence of Multisectoral Approaches for Improved Nutrition, November 2017, Banking on Nutrition Partnership
- 2 Universal salt iodization, included in the agriculture section of the review, is also included in the priority package of interventions listed in Bhutta et al. 2013

Interventions in agriculture that impact nutrition across the farm-to-fork value chain





Mass fortification

Food safety and aflatoxin prevention

Food storage support Fortification – community Promotion of processing for income generation Enhancing digestibility & nutritional value of foods Malting, drying, pickling, and curing



Price policies (taxes and subsidies)

Consumer BCC and education Household food storage

Production

Processing and storage

Retail and labeling

Purchase and consumption



Biofortification

Home gardening

Food safety and aflatoxin prevention

Cash cropping¹

Animal rearing (homestead and extensive)

Aquaculture and capture fisheries

Irrigation

Biodiversity (wild foods and local varieties) Improved access to inputs and financing

Household and extension worker nutrition ed./BCC

Rotation and intercropping

Insect farming

Production of lipid-based nutrient supplements

Marketing regulations Labeling regulations

Studies show clear evidence of impact on nutrition outcomes Studies show clear evidence of impact on intermediate outcomes

Studies show mixed or minimal evidence on outcomes included in the review



Intervention has cost data



Intervention investment Intervention has evidence of cost effectiveness or return on



Intervention has evidence of economic outcomes



Intervention is included in the priority package of interventions in The Lancet's Maternal and Child Nutrition Series (Bhutta et al. 2013)

Notes

Social protection interventions that impact nutrition primarily through intermediate outcomes addressing underlying causes of malnutrition



Social insurance

Labor market protections

Social security insurance

Weather-based insurance for crops and livestock

Skills training and asset transfer

Studies show clear evidence of impact on nutrition outcomes Studies show clear evidence of impact on intermediate

Studies show mixed or minimal evidence on outcomes included in the review

Intervention has cost data

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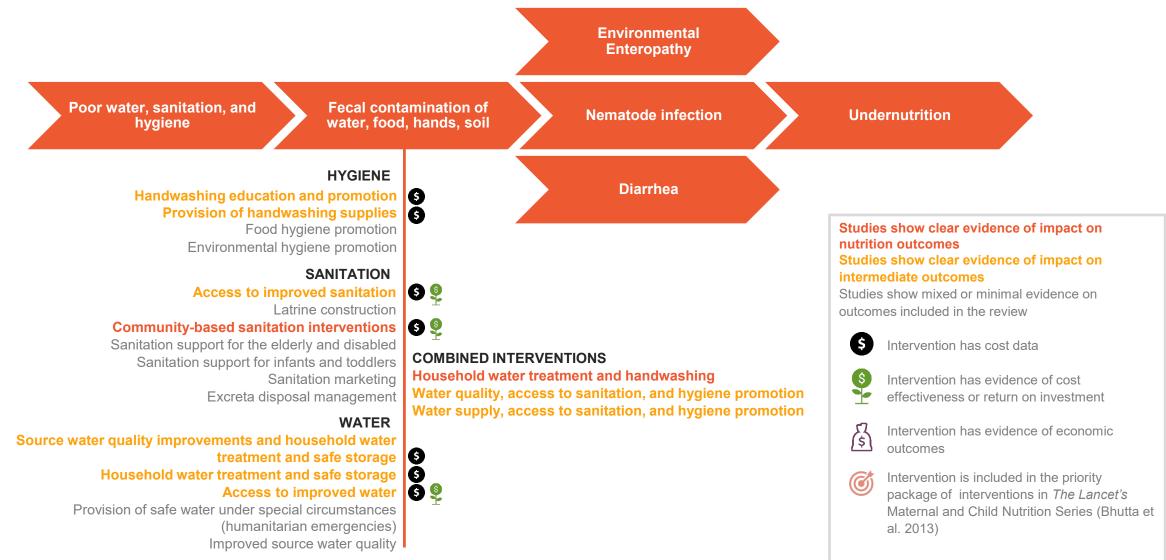
Notes

1 Adapted from Synthesis of Evidence of Multisectoral Approaches for Improved Nutrition, November 2017, Banking on Nutrition Partnership

(3)

2 General food distribution is classified in this evidence synthesis as an emergency response intervention

<u>WASH</u> interventions that have impact on intermediate outcomes on the pathway to better nutrition such as diarrhea



Challenges of measuring costs and benefits of multisectoral approaches for nutrition

Methodological challenges

- Evidence is missing for new areas of research or programmatic action.
- A lot of variability in multisectoral program components.
- Long causal pathways between agriculture or WASH interventions and nutrition outcomes.
- Health, agriculture and WASH intervention measure impacts and costs differently.

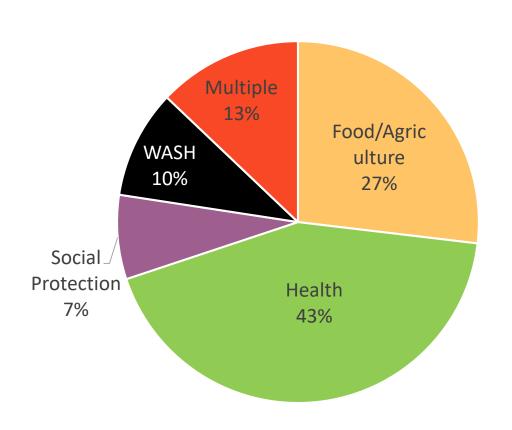
Measurement of benefits in economic evaluations of nutrition interventions in lowand middle-income countries: a systematic review Selected findings Jolene Wun, Christopher Kemp, Chloe Puett, Devon Bushnell, Jonny Crocker, Carol Levin

Study overview aims

We wanted to....

- Characterize the types of multisectoral nutrition interventions included in recent economic evaluations
- Assess the range of terminology and methodological approaches used to value the benefits of these interventions

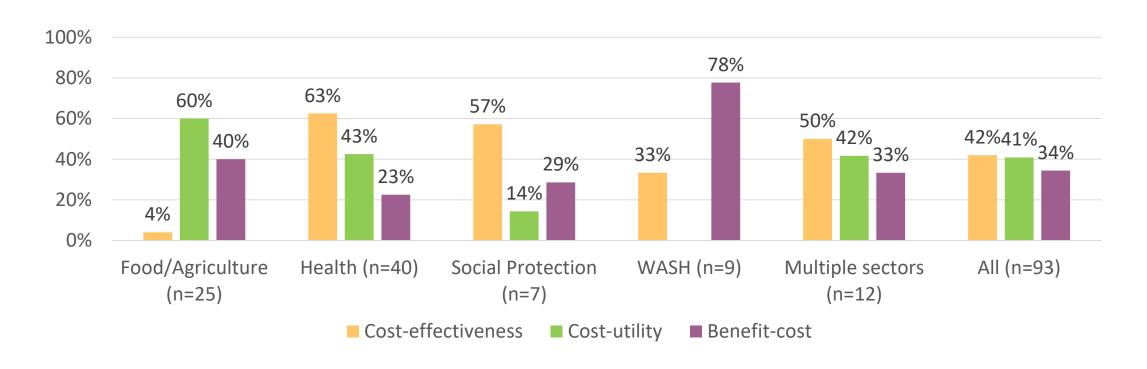
Studies by sector (N=93)



- Only 8 studies (9%) evaluated multi-sector programs
- Most frequently-studied interventions in each sector:
 - Health: management of SAM, zinc supplementation (12 studies each)
 - Food/ag: mass fortification (9 studies),
 biofortification (7 studies)
 - Social protection: food vouchers (4 studies), unconditional cash transfers (3 studies)
 - WASH: household water treatment & storage (5 studies), sanitation access (4 studies)

The choice of economic evaluation method varied by sector

CEA most frequently used in Health and Social protection BCA most frequently used in Agriculture and WASH studies



Types of benefits included in CEA, CUA, and CBA ratios by sector

(N=128)

		Food/		Social		
	All	Agriculture	Health	Protection	WASH	Multiple
Total # of economic evaluation ratios	128	27	54	16	14	17
Nutrition status improved	72 (56.3%)	15 (55.6%)	39 (72.2%)	5 (31.3%)	1 (7.1%)	12 (70.6%)
Other health status improved	8 (6.3%)	0 (0.0%)	5 (9.3%)	0 (0.0%)	0 (0.0%)	3 (17.6%)
Monetization of health status						
improvements	10 (7.8%)	3 (11.1%)	2 (3.7%)	0 (0.0%)	4 (28.6%)	1 (5.9%)
Productivity gain	15 (11.7%)	3 (11.1%)	6 (11.1%)	0 (0.0%)	4 (28.6%)	2 (11.8%)
Cognitive/education gain	3 (2.3%)	0 (0.0%)	0 (0.0%)	3 (18.8%)	0 (0.0%)	0 (0.0%)
Cost savings: health system	17 (13.3%)	0 (0.0%)	10 (18.5%)	0 (0.0%)	3 (21.4%)	4 (23.5%)
Cost savings: beneficiary	28 (21.9%)	1 (3.7%)	15 (27.8%)	0 (0.0%)	8 (57.1%)	4 (23.5%)
Dietary diversity	3 (2.3%)	1 (3.7%)	0 (0.0%)	2 (12.5%)	0 (0.0%)	0 (0.0%)
Knowledge/attitude/practice	9 (7.0%)	0 (0.0%)	3 (5.6%)	0 (0.0%)	6 (42.9%)	0 (0.0%)
Food security	6 (4.7%)	1 (3.7%)	0 (0.0%)	4 (25.0%)	0 (0.0%)	1 (5.9%)
Income	12 (9.4%)	9 (33.3%)	0 (0.0%)	2 (12.5%)	0 (0.0%)	1 (5.9%)

Gaps in current research

Summary of findings from the systematic review

- Economic evaluation of more non-health sector and multipronged interventions are needed.
- Choice of the type of economic evaluation and which benefits are included are strongly related to the intervention's sector.
- Several benefits (including women's empowerment and mental/social benefits) are often omitted, regardless of sector.
- Cost savings (indirect and direct) should be included in more economic evaluations, regardless of evaluation type.

Evidence on costs and benefits of multi-sectoral nutritionsensitive programming is limited and this delays progress



Multi-sectoral nutrition-sensitive actions are <u>critical</u> to achieve the WHA targets for nutrition by 2025 and the SDGs



Decision-makers rely on available evidence to inform **strategic planning**, **priority setting**, and **resource allocation** for multi-sectoral nutrition programming



Evidence on program costs and benefits is lacking and this limits the ability of decision-makers to invest in nutrition



Recent calls for increased integration and **standardization** of economic analysis as part of impact evaluation

e.g., World Bank SIEF Report 2019, 3IE Evidence Week webinar 5/22

Strengthening Economic Evaluation for Multisectoral Strategies for Nutrition: SEEMS-Nutrition

Overall objectives

- 1. Define most appropriate, standardized methods for measuring cost and cost effectiveness of integrated multisectoral nutrition strategies and interventions
- 2. Estimate the **costs** and **benefits**, as well as **cost-effectiveness**, of integrated multisectoral approaches to improve nutrition and health outcomes













SEEMS-Nutrition is developing a common approach to guide how economic evaluations for nutrition are conducted

1 Develop a typology of interventions

Map impact pathways and identify program activities, inputs, and costs

Develop standardized cost data collection tools and collect cost data alongside impact evaluation

Compare program costs and benefits to reflect the relevant question/decision and sector



Standardized data across programs and countries



Relevant information to decision makers



Stronger evidence for nutrition

ANH Academy Technical Brief

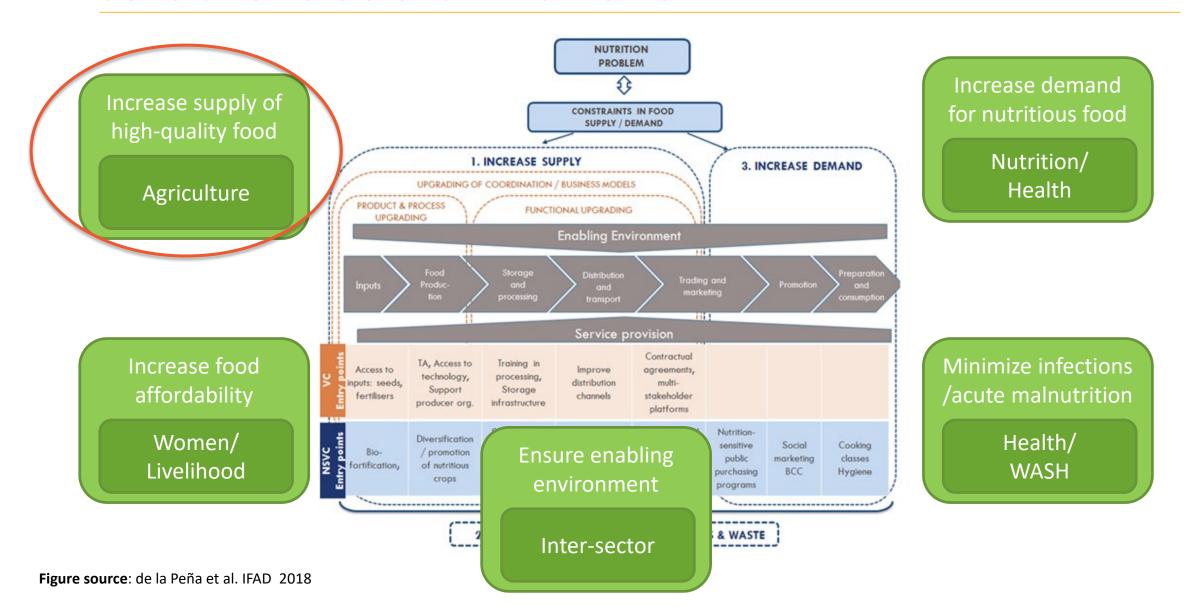
Economic Evaluation of Multisectoral Actions for Health and Nutrition



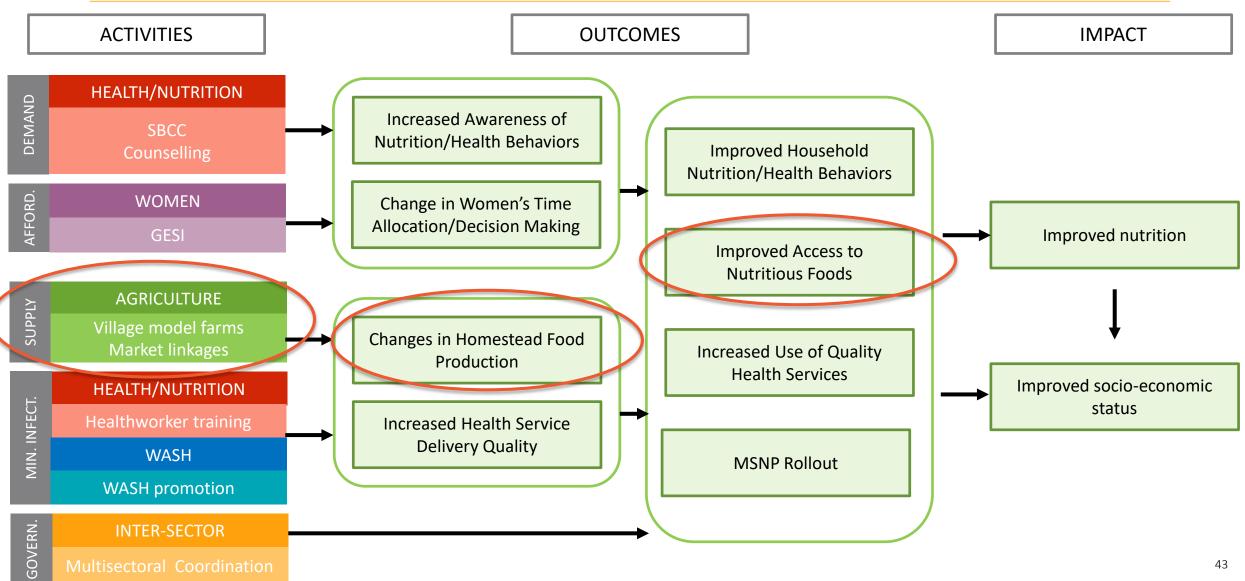
Section 3:

Overview of the common approach

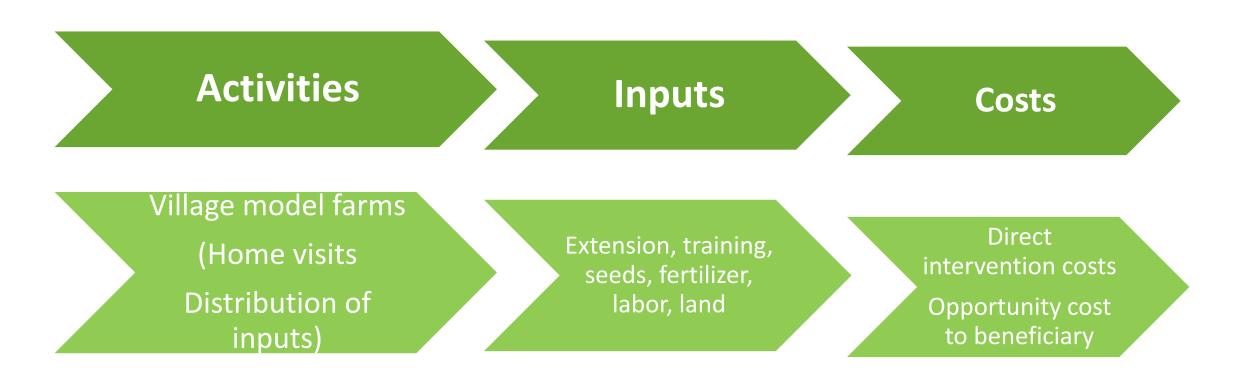
Develop a typology based roughly on nutritionsensitive value chain framework



STAGE 2 Map activities, inputs and costs along the program impact pathway

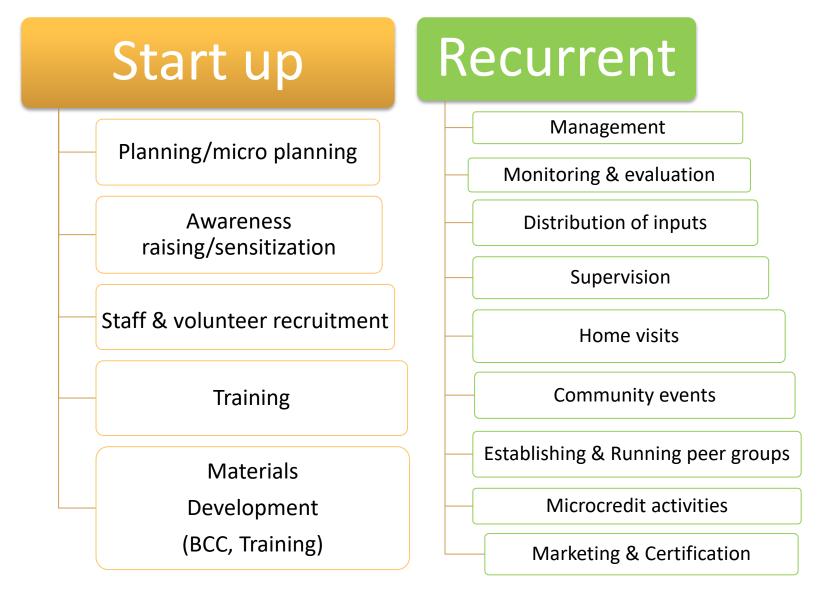


Define activities, inputs and costs based on the program impact pathway*

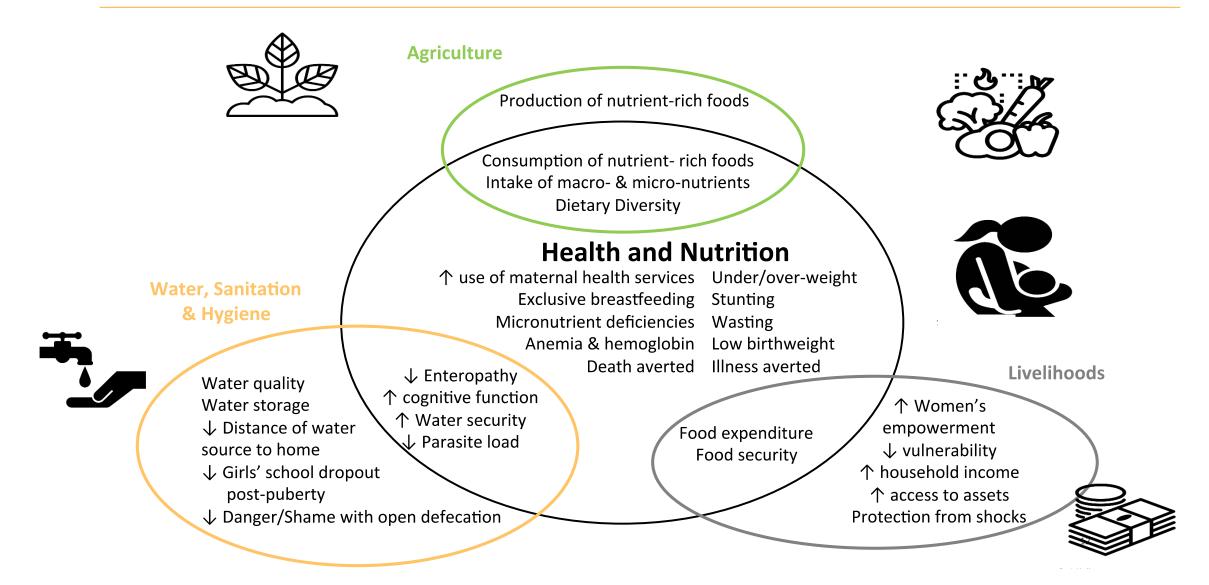


^{*}Example for agriculture activities, but do this for each intervention component!

Standardized activity cost categories by implementation stage



Estimate the costs of meeting a range of outputs and outcomes







What benefits are you likely to measure in your own research?

Text your answer in the chat box!

Toward a standard set of outputs and outcomes*

Activities Inputs Costs Outcomes

Village model farms
(Home visits
Distribution of inputs)

Extension, training, seeds, fertilizer, labor, land Direct intervention costs
Opportunity cost to beneficiary

Increased production diversity

*Example for agriculture activities, but do this for each intervention component!

Tally program costs and compare with benefits











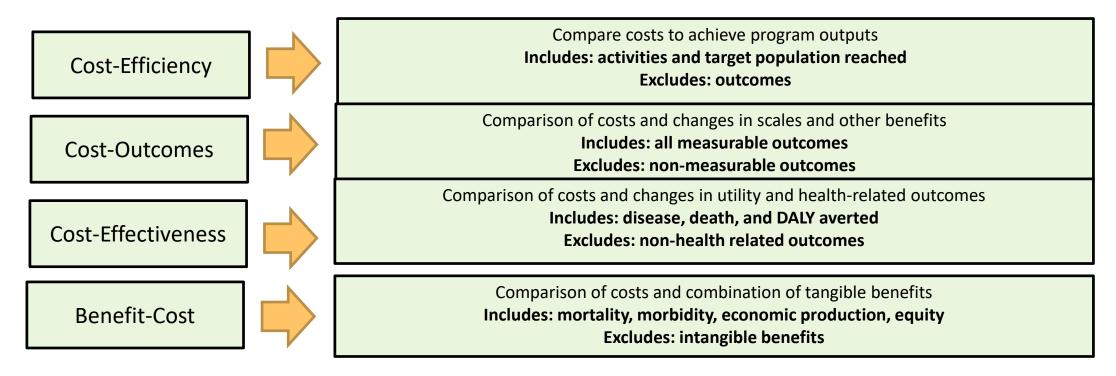






SEEMS-Nutrition is working on strengthening the measurement of multisectoral benefits!

Analysis Study Tools



COMING to you in 2021!

Thank you!

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