A conversation with Interactive Research and Development (IRD), July 27, 2021

Participants

- Dr. Aamir Khan - Executive Director, IRD
- Dr. Subhash Chandir - Senior Epidemiologist and Director, IRD
- Dr. Hamidah Hussain – Director, IRD
- Mariam Mehmood – Program Manager, IRD
- Karen Levy – Consultant, GiveWell; Partner & Co-Founder, Fit for Purpose
- Alex Cohen – Senior Researcher, GiveWell
- Teryn Mattox – Program Officer, GiveWell

Note: These notes were compiled by GiveWell and give an overview of the major points made by Dr. Khan, Dr. Chandir, Dr. Hussain, and Ms. Mehmood.

Summary

GiveWell spoke with Dr. Khan, Dr. Chandir, Dr. Hussain, and Ms. Mehmood of Interactive Research and Development (IRD), as part of GiveWell's investigation into IRD's electronic immunization registry "Zindagi Mehfooz" (ZM) and its mobile conditional cash transfer (mCCT) program to incentivize immunizations in Sindh Province, Pakistan.

In brief, conversation topics included:

- **The $1.8 million annual operating cost of ZM, which excludes IRD's mCCT program and the recurring replacement costs for old phones and laptops.** IRD expects this to be an accurate projection of future costs, although they would increase over time due to inflation.
- **Cost of mobile phones for ZM.** Low-cost phones could be purchased for a minimum of $120-140 each, and would last 1-2 years under field conditions (e.g., heavy use, high temperatures). IRD would prefer to procure Samsung phones that cost around $200 each. These phones were purchased in 2017 and remain operational, although IRD conservatively expects newly purchased Samsung phones to last 2-3 years. The total cost of replacement phones depends on the number of vaccinators in Sindh, which currently total between 2,000 and 3,000 but could eventually increase to as much as 4,500.
- **IRD's upcoming nine-month contract with a donor to develop a plan for transitioning ownership of ZM to the government of Sindh.** The grant will only fund planning activities. Actual government transition of ZM (e.g., conducting data analysis without assistance from IRD) will take at least 2-3 years, and would initially only include around 10% of the estimated $1.8 million annual cost of operating ZM. The government of Sindh, however, is strongly committed to ZM and would have already begun taking on partial ownership if not for the disruptions caused by the COVID-19 pandemic.

    - In particular, the government has expressed strong interest in taking on the costs of district field coordinators, who have been trained by IRD and are key components of immunization infrastructure at the district level.
- **The strong probability that ZM operations will remain unfunded beyond September 2021, absent additional funding from GiveWell or another donor.**
- **Benefits of ZM that likely lead to increased vaccination coverage.** These may be difficult to quantify and include, but are not limited to:
    - More frequent and improved training for vaccinators.
    - The ability to locate geographically where caregivers are refusing vaccines, for prompt follow-up.
    - The creation of an electronic child birth registry that infants are added to in birth centers that can support vaccination outreach efforts but that also facilitates child enrollment in government health benefits.
    - Improved management of vaccine supply due to increased visibility into where vaccination coverage rates are low.
- **A reduction in health facility visits as a result of COVID-19 lockdowns, which could necessitate increased outreach activities or higher cash incentives.**
- **Options for transferring cash incentives to caregivers, including Easypaisa and mobile top-ups.** For either option, IRD would work with the Telenor mobile network operator (and other mobile network operators as needed) to issue transfers, which would be triggered automatically once a child is recorded as having received a vaccination.
    - Easypaisa is the largest mobile cash transfer service and would enable recipients to cash out incentives at a local center. However, national identity cards are required to receive payments, which would exclude approximately 30% of the population in Pakistan.
    - Mobile top-ups refer to digital credits, which can be used to pay for phone service or other digital services but cannot be cashed out. Anyone, including those without national identity cards, can receive mobile top-ups.
- **The possibility that an mCCT program could lead to increased marketing of SIM cards, thereby increasing phone access and the potential reach of the program.**

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