

ANNUAL REPORT

Pictured: Zaliha and Yussura

MISSION

New Incentives' mission is to save lives in a way that does **the most good per dollar**. Guided by evidence, we provide cash incentives to increase childhood vaccination rates.



WHAT WE DO







We raise awareness about the benefits of childhood vaccinations. <u>PLearn more</u> about how we generate demand for immunizations and our program. We provide cash incentives at government immunization sessions. <u>Read</u>about a day in the life of a field officer.

We help improve the vaccine supply chain in order to ensure vaccines are available at the clinic. <u>Discover</u> the many ways we support government partners with vaccine supply efforts.

AT A GLANCE

In June, we celebrated enrolling our 2 millionth infant since launching the pilot program in 2017.

2023 Enrollment Exceeds All Previous Years Combined

In 2023, we enrolled more than 1.5 million new infants in our program, more than the previous six years combined (2017-2022).





GiveWell Top Charity

New Incentives was named a GiveWell top charity for the fourth year in a row.

Expansion

2023 was an exciting year of growth for us! We:

- Expanded to 3 additional states: Kano, Kaduna, and Kebbi
- Improved program quality, increasing stringent standards for execution and oversight within units
- Grew our team to 2,900 employees

Growing Partnerships

In 2023, our team expanded and deepened our relationships with LGA and state officials, as well as traditional leaders. Additionally, we entered a formal partnership with the Sultan Foundation for Peace and Development, a cultural institution with an extensive network across Northern Nigeria.

New Incentives operates as the All Babies Are Equal Initiative in Nigeria and is often referred to as NI-ABAE.



FROM THE FIELD

Magaji Soja works at a public health clinic in Kwalam, a town in Jigawa State. The state has historically had the highest burden of measles in the country and very low childhood immunization rates.

At the clinic, Magaji is responsible for administering routine vaccinations to infants based on Nigeria's immunization schedule. Clinic staff like Magaji also travel to hard-toreach villages, along with New Incentives staff, to offer vaccinations to children in rural households during outreach sessions.

We are very thankful for the support and hard work of clinic staff like Magaji, who play a critical role in our program and work hard every day to administer life-saving vaccinations to children.

Pictured: Khadija, Humaira, and Haruna

Up to 41% of deaths in Nigeria before the age of five are from vaccine-preventable diseases!

Under-Five Mortality

Nigeria is home to just 2.7% of the world's population.²

It accounts for 17% of the world's mortality of children under the age of five.³

Vaccinations

Nigeria has 2.3 million zero-dose children—the second highest in the world.⁴

¹ Global Burden Disease (2019), quoted by <u>Gavi</u>
² <u>World Bank</u> (2022)
³ <u>UN IGME</u> (2022)
⁴ <u>WEUNIC</u> (2022)

HISTORICAL GROWTH

We set an ambitious goal to enroll 1.5 million infants in 2023, hoping to achieve at least 80% of that goal.

We exceeded our goal despite numerous setbacks, including the demonetization of the Naira, pauses to the program due to both elections and program quality issues, and health worker strikes.

We reached record numbers of infants enrolled, cash disbursements given, and vaccinations encouraged.



2023 TOTAL IMPACT

Every 2 seconds, an infant enrolled in New Incentives received a life-saving vaccine.



2023 IMPACT BY STATE

KEBBI

68,689 Infants Enrolled 137,039 Cash Disbursements Given 566,321 Vaccines Encouraged



147,914 Infants Enrolled

469,342 Cash Disbursements Given

1,918,999 Vaccines Encouraged

4,091,663 Vaccines Encouraged

GOMBE

ZAMFARA

70,129 Infants Enrolled 271,052 Cash Disbursements Given 1,050,518 Vaccines Encouraged

KADUNA

72,567 Infants Enrolled 148,472 Cash Disbursements Given 597,690 Vaccines Encouraged

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STAFF

Our staff bring valuable knowledge of their own communities, supporting our program in accessing the hardest-toreach areas where vaccination is not always the norm. By using their knowledge and dialect, they can gain trust and help overcome local barriers to childhood vaccination.

Our staff increased to more than 2,900 by the end of 2023, nearly 1,000 more than in 2022.

Abubakar Aliyu, a field officer with New Incentives, works at four public health clinics in Jigawa, located in the North West region of Nigeria where only 25 percent of children are fully vaccinated. In his role, he is responsible for verifying babies have received vaccines and then disbursing cash incentives to their caregivers.

Pictured: Abubakar, Fatima, a

IN THE SPOTLIGHT



In June, New Incentives CEO and Founder Svetha Janumpalli shared some of our story in a talk at EA Global. She started the organization with \$300, no fancy degrees, but with a mission to do the most good possible. In the frank and detailed talk, she peels back the curtain on New Incentives' history to describe the pivots, failures, and lessons learned on the way to becoming a GiveWell top charity.



Nigeria Health Watch profiled New Incentives' work in June. The outlet interviewed caregivers, field officers, and clinic staff, providing a detailed portrait of New Incentives' work on the ground. "Cost-effective and scalable programs don't just happen. It takes determination to follow the data... and unwavering resolve to iterate until you get it right." - Svetha Janumpalli

RAPID ASSESSMENTS

Baseline (before program rollout)

First Follow-Up (six months after program rollout)

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Baseline surveys are conducted before the start of the program, and the first follow-up survey is conducted approximately six months after program rollout.

This data represents pooled results for cohorts 1-8 and 11 based on analysis by external researchers. New Incentives groups LGAs it expands to within a given state at a given point in time into cohorts. New Incentives conducts vaccination coverage surveys in order to keep a constant pulse on our program impact and cost-effectiveness.

The ongoing findings complement the positive findings from the randomized controlled trial of our program.

Pictured: Magaji

LEARNING, GROWING, AND IMPROVING UPTAKE

At New Incentives, we value **transparency** and the **pursuit of excellence**. Because of this, we incorporate tracking and verification into everything we do. By creating feedback loops, we use this data to continually measure, test, and iterate.

A total of 18% of disbursement sessions were visited by managers and internal field auditors.

Almost all of these visits were unannounced in order to ensure that clinic staff and New Incentives field officers acted as they usually would.

Staff participated in 18,478 awareness activities and 73,239 campaigns and outreaches.

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In order to increase awareness of the benefits of childhood vaccinations, NI-ABAE works closely with clinic staff, communities, implementing partners, the government, and local leaders to encourage community mobilization, sensitization, and outreach.



* This does not include CCT commitments (cash incentives committed to enrolled infants that they receive upon returning for subsequent vaccination visits).

** This includes grants from nonprofits and funding partners that pool grants from individual donors.

These figures are tentative and will be finalized upon completion of an external audit.

FUNDING

More than 1,150 individuals donated to New Incentives either directly or through funding partners.



Before expanding to a new area, New Incentives secures enough funds to operate in that area for a minimum of two years.

We factor in at least one year to enroll infants and at least one year to disburse promised cash incentives. This allows us to make commitments to partners and responsibly serve communities.

SCALING

New Incentives only works in areas that meet a high bar for costeffectiveness, determined in large part by baseline vaccination rates and disease burden. As we've scaled our program, our cost per infant has decreased.

COST PER INFANT



To calculate our cost per infant, we divide our total expenses (not just direct program costs) by the number of infants served. This provides a holistic understanding of the cost associated with enrolling each infant in our program.



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Pictured: Hajjara and Uzairu