A conversation with Dr. Michael Zimmermann and Dr. Jonathan Gorstein, October 2, 2015

Participants

- Dr. Michael Zimmermann – Chair of the Board, Iodine Global Network (IGN)
- Dr. Jonathan Gorstein – Executive Director, IGN
- Ben Rachbach – Research Analyst, GiveWell

Note: These notes were compiled by GiveWell and give an overview of the major points made by Dr. Zimmermann and Dr. Gorstein.

Summary

GiveWell spoke with Dr. Zimmermann and Dr. Gorstein of IGN to discuss ongoing work, budget, and room for more funding. Conversation topics included changes in IGN's budget, recent activities in several countries, and updates to IGN's internal management, monitoring and reporting procedures.

Budget update

Unrestricted funding

IGN can comfortably operate on a total unrestricted budget of $750,000–$1 million per year, but it must sustain this level of funding each year in order to be effective. Of this amount, IGN has projected $250,000 per year to fund its Secretariat and core functions, while the balance is focused on direct regional and country program support to sustain achievements and accelerate actions where progress has lagged behind.

The most recent version of IGN's budget (dated September 28, 2015) includes updates on contributions received from IGN's board members, which have been lower than anticipated. IGN expects to receive about $100,000–$150,000 from its board members, which would need to be supplemented with approximately $600,000–$800,000 in additional recurrent funds to reach IGN's unrestricted funding requirements.

Reduction in unrestricted budget

The $750,000–$1 million range is lower than the figure IGN had projected in 2014 (~$2.7 million). This reduction is in large part due to IGN's efforts to clarify the differences between its own mandate and that of implementing partners like UNICEF, the Micronutrient Initiative (MI), and the Global Alliance for Improved Nutrition (GAIN) and to ensure that its budget reflects the work that it is best suited to take on. IGN has a mandate which focuses on advocacy and convening major stakeholders to develop harmonized goals and strategies. Thus, IGN often leads on the development of work plans and providing technical guidance, but does not engage in direct implementation-related work. In contrast, UNICEF, GAIN, and MI
require large periodic investments for providing equipment, on-the-ground implementation assistance, and ongoing training.

Last year, as IGN explored a number of potential options to expand its reach, it considered providing discretionary funding to national coordinators (NCs) in several countries. However, it has since concluded that the NCs can perform their advocacy work and serve a convening function effectively with less funding than projected. IGN also had projected a large increase in budgets for all of its regional coordinators (RCs) so that they could devote 50% or more of their time to working for IGN, but has determined that the RCs can perform well with a lower time commitment (25%-45%). As such, while the RCs need an incremental increase in funding above pre-2014 levels (when the RCs were allocated funds to support about 10% of their time to IGN), it is less than projected in initial discussions with GiveWell.

**Restricted funding**

Beyond the core funding that will enable routine activities, IGN also anticipates getting restricted, earmarked funding for special projects or initiatives as needs warrant. Dr. Gorstein is working on drawing a clear distinction between the core functions that RCs carry out using unrestricted funds and the projects they carry out with restricted grants. He is working with the RCs to develop work plans with defined milestones and outputs in order to ensure that they can productively use all of the funds they receive and have the greatest impact on programs.

**Status of IGN’s operations**

IGN is currently transitioning to a new operational model which includes more robust planning and reporting, increased budget to RCs and expanded central capacity. It believes that its new operating model will begin to show positive results and more streamlined implementation of activities across its portfolio in the next six to 12 months.

**Increased budgets for regional coordinators**

IGN has increased its total budget for all RCs from about $250,000 in 2014 to about $375,000 in 2015. This has allowed IGN to expand its work in advocacy and convening partners to strengthen programs in support of iodine nutrition, as well as expand into new geographic areas. IGN is comfortable with this level of funding and plans to allocate between $25,000 and $50,000 per year per RC, with differences related to the size of the regions and scope of assistance required.

**Expanded central capacity**

IGN has used a significant share of the funds it received from its designation as a GiveWell standout charity to hire additional staff at the central Secretariat level. IGN plans to maintain this level of central management and spend about $250,000 per year on Secretariat staff and core functions, including annual meetings of the
Management Council (all RCs and the Executive Management Team) and the Board of Directors.

**Revised reporting schemes**

In his role as executive director, Dr. Gorstein has begun to review IGN's historical approach to the RCs’ financial and operational management. As a result of this review, IGN has developed new reporting schemes that are designed to keep central-level management in closer contact with the RCs, track changes in their plans, monitor their progress and leverage additional assistance and support in order to ensure that the RCs can be as effective as possible. As part of its reporting procedures, IGN has also increased its assessment of the impact achieved by RCs in the countries where they work, primarily employing metrics of increased supply of adequately iodized salt, better coordination and linking of iodine programs to the broader nutrition agenda.

**Country updates**

**Sudan**

IGN believes that Sudan is a prime example of a country in which it has been instrumental in convening all key stakeholders involved with USI and catalyzing action. In the last six months, Sudan has revised its national USI legislation. It has also developed an investment plan that will lead to consolidation of the salt industry. This will result in a single production facility supporting all salt producers in the Red Sea Province, which will include higher-quality production equipment. Funding to purchase this equipment will be provided by international investors, including business interests in Turkey and Germany.

Izzeldin Hussein, IGN’s RC for the Middle East and North Africa region, has played a leading role in the processes that led to the revised legislation and the investment plan, as well as in facilitating meetings of the national iodine coalition. Dr. Hussein is originally from Sudan, so he has a special interest in its progress. However, Sudan has required special attention because of the level of political upheaval there, which has impeded work on the USI program.

Through Dr. Hussein’s efforts, funding provided by IGN for feasibility studies and investment reviews, and negotiations with international donors, IGN believes that Sudan is close to transforming its salt industry. IGN believes that Sudan, similar to Ethiopia a few years ago, has shown a sufficiently high level of political commitment and coordination to enable it to raise its level of adequately iodized salt coverage from about 10% of households to 60–80% of households within a year.

**Lebanon**

In an effort to revive the country’s iodization program, IGN’s NC in Lebanon, Dr. Omar Obeid, has been working to leverage the results of the recent IGN supported national iodine survey to convene various salt industry actors, launch dialogue, and develop concrete work plans that will result in follow-up action.
Restarting the iodization program will depend on commitment among the major salt producers, better enforcement and revision of the legislation around iodization. The legislation must be changed in order to remove ambiguities and align more closely with the practical capabilities of salt producers, including reducing the amount of iodine added and introducing some regulatory monitoring requirements. Along with the Ministry of Health, UNICEF and salt producers, Dr. Obeid has been conducting a landscape analysis of the industry to determine what program revisions will be necessary, and will develop a detailed plan of action to implement. IGN is in a unique position to facilitate this work in Lebanon as there are no other agencies working directly on USI.

**Yemen**

Yemen is one of 25 countries in the world where iodine levels have remained low, but available information on iodine nutrition is out of date. To get a better picture of iodine nutrition and to begin to move forward on an iodization program, IGN has used some unrestricted funding to work with the country’s Ministry of Health to complete a survey and analysis of urinary iodine in order to assess iodine status. IGN has arranged for urine specimens in Yemen to be collected and sent to Tanzania for analysis, a challenging task in a country that has recently been in a civil war. In order to get export permission for the samples to be taken out of Yemen and arrange for their importation into Tanzania, IGN partnered with the World Health Organization (WHO). Dr. Hussein has worked closely with the Ministry of Health, Ministry of Trade, and WHO to get the urine samples analyzed. IGN is hopeful that obtaining new data on iodine nutrition will help to facilitate discussion and make iodization a political priority as civil unrest subsides.

**Djibouti**

Djibouti is also is one of the 25 countries in the world where iodine status is classified as ‘deficient’, but available evidence on the problem is outdated. IGN has used GiveWell funding to work with UNICEF and the Ministry of Health to develop a rapid survey protocol that will provide updated information on iodine nutrition. These data will be critical to facilitate program planning and generate political commitment and a sense of urgency.

**Madagascar**

In Madagascar, a lack of local proficiency in lab analysis presented a challenge to analyzing the urine and salt samples taken in the national nutrition survey in 2014. As a former director of Medical Research Council nutrition labs in South Africa, IGN’s RC for Southern Africa, Pieter Jooste, has expertise in this area. Dr. Jooste has facilitated training and cross-country learning between Madagascar’s labs and Tanzanian experts using funds from IGN. IGN has also provided some quality control equipment and protocols in Madagascar’s labs.

The samples collected in the survey are now being analyzed. IGN sees this as a significant development, considering Madagascar’s recent struggles with iodization
and the lack of knowledge among some officials about the extent of iodine deficiency disorders in the country.

**Morocco, Burundi and Haiti**

IGN has organized a series of advocacy workshops in Morocco, Burundi and Haiti to encourage these countries to jump-start universal salt iodization (USI) programs. In Burundi, IGN has been involved in discussions towards the design and implementation of a national IDD survey, but these have been stalled due to political and civil unrest. In each of these countries, IGN plays a role in bringing together key partners, reviewing critical bottlenecks in programs, and developing plans for program acceleration. To facilitate this, IGN has made use of GiveWell funds for field visits and consultations.

**Program guidance work with WHO and CDC**

**Updated program guidelines**

WHO views IGN as its primary technical advisor on iodine nutrition. IGN is currently working with WHO to update program guidelines to reflect the current iodine nutrition landscape. The resulting document will be the main source of operational guidance for iodization program managers worldwide. This is a joint project; IGN will lead on writing the document, and WHO and UNICEF will edit it. The guidelines will be published in mid-2016.

**Sustaining achievements**

IGN prioritizes not only ramping up iodization programs, as it is now doing in Sudan, Haiti, Yemen, Madagascar, Djibouti and Burundi, but also ensuring that mature programs continue to function. It views collaboration with WHO, UNICEF, and the Centers for Disease Control and Prevention (CDC) as necessary to make sure that structures exist to sustain IGN’s achievements in this field. IGN believes these collaborations will help define more clearly the specific components that ensure program sustainability.

For example, UNICEF recently introduced a new data collection tool called Nutridash, which monitors the progress of several nutrition programs, including micronutrient powders and breastfeeding programs in addition to salt iodization programs. IGN worked with UNICEF to populate the databases, which will provide information on the progress countries have made toward building sustainable programs, such as enacting legislation, creating national coalitions, and setting aside funding for nutrition programs in national budgets.

**Capacity building among NCs**

Although establishing national coalitions and getting strong commitment from governments is important, it is also essential to have an in-country champion who can convey a consistent message of the importance of iodine nutrition even when faced with turnover between political administrations. This is the role played by IGN’s NCs, who gain legitimacy from their association with a global organization that
is seen as an authority in the field. For this reason, IGN is trying to build capacity among its NCs and establish better communication between NCs and RCs.

**Regional workshops**

IGN recently held its fourth regional workshop of 2015, in Tajikistan, which convened representatives from Russia, Ukraine, and other Eastern European countries. Previous workshops this year have taken place in Dubai, UEA (for Arabic-speaking countries of the Middle East and North Africa), Casablanca, Morocco (for French-speaking countries of North and East Africa) and Dar es Salam, Tanzania (for East and Southern Africa). A fifth workshop, to be held in mid-October 2015 in Bangkok, will convene countries from the Asia/Pacific region. These workshops include technical presentations from experts representing implementing partners detailing updated scientific advances in the field, but focus primarily on presentations from the countries themselves to discuss their own successes and challenges. The workshops incorporated a series of planning activities which enabled countries to set strategic priorities and identify opportunities to further expand or strengthen their USI programs. IGN hopes to conduct a workshop in South Asia in early 2016, which will include representatives from India, Sri Lanka, Bangladesh, Bhutan, Maldives and Nepal, and is considering using some of the funds received through GiveWell’s recommendation to do this. IGN considers it important to hold a workshop in India because of its recent progress toward USI and to recognize the achievement.

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