A conversation with Fortify Health, December 14, 2018

Participants

- Brendan Eappen – Co-Founder, Fortify Health
- Nikita Patel – Co-Founder, Fortify Health
- James Snowden – Research Consultant, GiveWell

Note: These notes were compiled by GiveWell and give an overview of the major points made by Fortify Health.

Summary

GiveWell spoke with Mr. Eappen and Ms. Patel of Fortify Health to get an update on its work. Fortify Health received a GiveWell Incubation Grant in June 2018 to support its work on mass fortification of wheat flour with iron in India (https://www.givewell.org/research/incubation-grants/fortify-health/june-2018-grant). Conversation topics included organizational developments, progress in Maharashtra, the process of fortification, plans for work in West Bengal, and the renewal of funding.

Organizational developments

Hiring

Fortify Health now has five staff, including Mr. Eappen, Ms. Patel, a program officer, and two partnerships officers.

Relocation

Depending on future funding, Ms. Patel may relocate to Mumbai, India.

Progress in Maharashtra

Fortification training for millers

In January of 2019, Fortify Health plans to hold a fortification training for four to five mills in Maharashtra. Of the participating mills, it believes that one—likely the mill hosting the training—is likely to sign a fortification commitment prior to the training. Although it is possible that Fortify Health will commence fortification in one mill by the end of January, as projected in its last update, it is more likely that fortification will commence in February.

Targeting strategy

Fortify Health plans to commence fortification in small mills, with daily production capacities of approximately 10 metric tons, rather than large mills, which tend to have daily production capacities of 30 to 50 metric tons. It believes that its relationship with larger mills will be stronger and less risky if it first tests and improves its intervention in four to five small mills.

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1 Since this conversation, Fortify Health has let us know that the training did not occur in this format.
The mills Fortify Health has targeted are located in Mumbai and the immediately surrounding area for ease of implementation and in order to have staff continuously present during early stages of fortification. Within the next few months, it will expand its search for mills to other areas of Maharashtra.²

**Relationship-building**

With the aim of establishing a fortification alliance, Fortify Health has met with various non-governmental organizations in Maharashtra and will be traveling to India to meet with state government officials throughout January and February of 2019. Fortify Health hopes to identify a strong fortification advocate within the state government but has deprioritized this task until it has begun fortification in at least one mill and has built a strong evidence base for its intervention.

**Collaboration with the Food Fortification Initiative**

Fortify Health closely coordinates its activities with the Food Fortification Initiative (FFI). For example, since Fortify Health does not currently have the capacity to provide technical guidance to millers during fortification trainings, FFI has offered access to its technical specialists. FFI does not have the resources for a full-time consultant to sit in state government to facilitate fortification policy and the introduction of fortification into government safety net programs.

Fortify Health typically holds calls with FFI every month, although calls have recently been occurring more frequently (every one to two weeks) due to an increase in coordinated activities. Laura Rowe, the Deputy Director of FFI, has been a mentor to and primary contact for Fortify Health.

**Challenges**

*Skepticism about fortification*

No mills have yet signed a commitment with Fortify Health, as millers are still skeptical of fortification. Concerns include:

- **Compatibility with organic flour** – One mill, which produces organic flour, is concerned about the feasibility of fortifying its product.
- **Technical details** – One mill is concerned with the technical details of the installation process for machinery required to fortify flour.
- **Evidence for health benefits** – Various mills are skeptical of the health benefits resulting from fortification. Fortify Health is in the process of creating an advisory board composed of fortification specialists and medical professionals in order to establish more credibility for its intervention.
- **Acceptability of fortified flour** – Millers have expressed concerns about whether consumers will accept or reject fortified flour. Fortify Health is confident that if the fortification process is conducted properly, no

²Since this conversation, Fortify Health staff have let us know that they are beginning to work with mills from Pune.
perceptible changes in flour would exist. However, it is less confident of how customers in Maharashtra will react to a product labeled as “fortified.” Evidence from other areas of India suggest that consumers do not have an adverse reaction to fortified products. Furthermore, store owners in Maharashtra have expressed that customers do purchase the two fortified flour brands available for sale. In order to better understand acceptability of fortification, Fortify Health plans to collect data on consumer behavior and attitudes after it begins producing and distributing fortified flour. It also hopes to create marketing materials that highlight the health benefits of fortified flour, thereby increasing sales of its product.

Smaller millers have been less receptive to fortification due to lower awareness of the intervention. Fortify Health believes, based on its market research, that larger millers will be more receptive to fortification.

*Necessity of local evidence and track record*

Fortify Health has found that in India, stakeholders often trust evidence only if it has been gathered from the location in which an intervention is going to be conducted. Furthermore, both millers and government officials have suggested that Fortify Health will be more credible as an advocate of fortification after establishing a track record of successfully implementing its intervention.

Active fortification projects in India have achieved limited scale. Fortify Health believes that once it begins fortification, it will be able to promptly scale its intervention to achieve an output similar to other fortification programs in the country.

*Logistical slowdowns*

Fortify Health’s progress has been delayed by a few logistical challenges, including:

- **Recruitment and onboarding** – Fortify Health’s search for qualified employees, as well as the onboarding process, was lengthier than originally anticipated.
- **Receiving funding** – Fortify Health spent a significant amount of time attempting to surpass the logistical barrier of receiving foreign funding in India.
- **Difficulties with millers** – Initial meetings with millers have often been delayed due to scheduling conflicts. If Fortify Health’s decision to first fortify with small mills results in excessive delays and difficulties, it could approach larger mills with proposals for fortification.

Fortify Health is making progress on all of its logistical challenges and does not currently believe that these challenges are insurmountable.
Fortification process

After a miller commits to fortifying with Fortify Health, fortification machinery will be installed at the mill by the vendors of the equipment. Although installation will depend on the existing machinery at a mill, the process typically involves interlocking a premix dispenser with the flour milling machinery, such that if production of flour stops, dispensing of premix stops as well. Fortify Health is considering hiring a full-time engineer with significant milling experience to aid in the installation process. FFI has also offered to provide Fortify Health with staff that could aid in installation.

Time between commitment and fortification

The time between a mill’s commitment and the commencing of fortification should be approximately one month. Packaging for fortified flour would also need to be updated with labeling that complies with government standards, a process that may take a few weeks.

Plans for work in West Bengal

Fortify Health is not currently operating in West Bengal but believes that this area represents a strong opportunity for fortification. It plans to remain focused on its work in Maharashtra until it has built a strong and replicable model, at which point it could begin expanding its operations to West Bengal. Fortify Health expects to begin this expansion process prior to June of 2019.

Renewal of funding

Fortify Health believes that the best time for its next update with GiveWell should be the end of February of 2019, as it hopes to have commenced fortification in at least one mill by this time. If it is unable to begin fortification before the end of its current grant cycle, it may not seek further investment. Although Fortify Health expects that its current level of funding will enable it to continue operating until June of 2019, it would also consider returning funding to GiveWell if it realizes earlier that the program is no longer viable. If Fortify Health has already signed a fortification commitment with a mill and GiveWell decides not to renew its grant, it would still need to incur expenditures related to the procurement of premix, which its current budget should cover.

Although Fortify Health is considering the possibility that it will be unsuccessful, it still retains a high level of optimism for its intervention.

All GiveWell conversations are available at http://www.givewell.org/research/conversations