

A conversation with Michael Grudzinski on June 19, 2013

Participants

- Michael Grudzinski – Program Officer, The Eliminate Project, U.S. Fund for UNICEF
- Timothy Telleen-Lawton – Research Analyst, GiveWell
- Elie Hassenfeld – Co-Founder and Co-Executive Director, GiveWell

Note: This set of notes was compiled by GiveWell and gives an overview of the major points made by Michael Grudzinski.

Summary

GiveWell spoke with Michael Grudzinski. Mr. Grudzinski has been with U.S. Fund for UNICEF for two years and is currently involved in The Eliminate Project (MNTE).

Mr. Grudzinski: In 1999 Maternal and Neonatal Tetanus (MNT) had significant presence in 57 countries and a new effort to eliminate the disease was launched. Later, two more countries (East Timor and South Sudan) were added due to geopolitical divisions. With the elimination of MNT recently in Tanzania, East Timor, China, Cameroon, Iraq, and Cote D'Ivoire, there are now 31 countries in which it has been eliminated since 1999. The goal is to reach global elimination by 2015.

GiveWell: In June 2012 UNICEF told GiveWell about four countries that had the most urgent funding gaps (South Sudan, Papua New Guinea, Niger, and Ethiopia) as well as two more countries that had funding gaps as well as other issues that might be obstacles to the vaccinations going forward (Yemen and Afghanistan). What ended up happening in those countries?

Mr. Grudzinski: Funding for two rounds of immunization in South Sudan was eventually secured from a mix of sources, including the U.S. Fund for UNICEF, other UNICEF national committees, and Kiwanis International. One round of immunization was conducted in February 2013.

Funding for immunization in Papua New Guinea was also secured, and the immunizations are starting sometime in the next few weeks.

UNICEF was able to conduct an immunization round in Afghanistan in May, aiming to immunize approximately 1.8 million women of reproductive age in 92 out of 96 targeted districts in 27 provinces. The second round was completed in June.

GiveWell: What would have happened if GiveWell had caused \$1 million to be given to the MNTE program in June 2012?

Mr. Grudzinski: Such a gift would have been a big boon to the program; it would have helped fill some of the gaps that weren't met, and would have resulted in more immunizations. The MNTE team looks at the countries of greatest need and ability to move forward, and the funding available, before deciding where to conduct immunizations. They don't save a reserve of funds for future immunization projects.

GiveWell: What kind of monitoring and evaluation does UNICEF do to understand the impact it has had in the areas it implements the MNTE program?

Mr. Grudzinski: With each of the three rounds of immunization in a country, UNICEF and the local ministry of health evaluate how many people were immunized and how many more need immunization. If the coverage is high enough (80% or higher), then UNICEF completes an in-country review of data to determine if the country is ready to be validated as having eliminated MNT (Pre-validation Exercise). The determination is based on:

- Desk review of immunization, clean delivery, and neonatal tetanus case reporting
- Field visit to assess service delivery of health facilities
- Portion of women who were reached with immunizations
- Portion of births at home vs. in a health facility
- Clean cord care

If the findings indicate that protection against tetanus is high, the national government invites the World Health Organization (WHO) to perform a validation of MNT elimination in the country.

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