A conversation with Michael Zimmerman and Jonathan Gorstein,
May 11, 2015

Participants

• Dr. Michael Zimmerman – Chairman, Iodine Global Network
• Dr. Jonathan Gorstein – Executive Director, Iodine Global Network
• Timothy Telleen-Lawton – Research Analyst, GiveWell
• Ben Rachbach – Research Analyst, GiveWell

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

Summary

GiveWell spoke with Dr. Michael Zimmerman and Dr. Jonathan Gorstein of the Iodine Global Network (IGN) as part of its investigation of IGN as a potential top charity. The conversation was intended to identify countries where GiveWell could more deeply investigate IGN’s impact. Conversation topics included IGN’s regional workshops, as well as an overview of IGN’s work in Lebanon, Nepal, Tanzania, Thailand, and the Persian Gulf states.

IGN’s regional workshops

IGN is co-hosting a series of regional workshops together with UNICEF for stakeholders in the field of iodine nutrition. The first workshop took place in Dubai, United Arab Emirates and three more are scheduled in the coming months in Morocco, Tanzania, and East Asia. Participants define strategic priorities and create or revise work plans to facilitate the implementation and monitoring of iodization programs. Progress as a result of the workshops can be very gradual, as it often takes significant amount of time and effort to effect change within government and industry.

Lebanon

Lebanon is a relatively small country with a population of approximately four million. It has a law mandating salt iodization. In the early 2000s, several measures were put into place to improve its iodine nutrition program. Surveys conducted approximately ten years ago indicated acceptable household coverage levels across the country. Since the influx of significant numbers of refugees from the Syrian war, the work of the Ministry of Health and development agencies has largely been focused on their needs. Enforcement, monitoring, and quality assurance of salt production has ceased. Recent data on iodine status and iodized salt in Lebanon is unavailable.

To address the lack of data, IGN’s national coordinator, Dr. Omar Obeid, led a partnership between IGN and the American University of Beirut (AUB), where he is a professor in the Department of Nutrition and Food Science. IGN designed a protocol for a urinary iodine concentration (UIC) survey of school children, funded
laboratory analytics, and supported Dr. Obeid in his advocacy with national stakeholders. The AUB funded the fieldwork.

Survey results were analyzed in 2014 and indicated clearly deficient iodine levels. The study also found that the country’s salt producers, many of whom are located close to the Syrian border, had deprioritized iodization activities due to the destabilizing effects of the war.

Professor Obeid presented Lebanon’s iodine action plan at the IGN workshop in Dubai. He formed a coalition that is currently preparing a policy brief. He also met with two salt producers who are ready to reinstate their iodization systems. IGN is planning to send producers a consultant in July or August to help them determine and address their technical needs.

Within the next few months, it is expected that government and industry stakeholders will meet to discuss the details of reinstituting the national iodine program. IGN believes that the Ministry of Health will welcome a partnership with AUB and IGN to revive the iodine program, and is eager to see further progress.

If all proceeds according to plan, adequately iodized salt could begin appearing on the Lebanese market by early 2016. It is expected that this increase in the availability of iodine in the diet will cause UICs to increase to adequate levels. These improvements could also increase the availability of iodized salt in Syria, as one of Lebanon’s four main producers is the primary supplier of iodized salt to Syria.

**Nepal**

Nepal imports all of its salt from India. This trade relationship is governed by a bilateral agreement, which is overseen by India’s Salt Commissioner, Nepal’s Salt Trading Corporation Ltd., and the countries’ respective foreign offices. Since 1985, when IGN (then the International Council for Control of Iodine Deficiency Disorders) helped Nepal build its first national action plan, IGN has played an important role in facilitating and sustaining bilateral dialogue between Nepal and India.

IGN’s regional coordinator in South Asia is Dr. Chandrakant Pandav. His role with IGN has enhanced his legitimacy as an influential stakeholder. He has been an instrumental part of IGN’s successful facilitation of negotiations between countries in the region.

This work has also favorably impacted the USI programs and the iodine status in neighboring countries such as Bhutan.

**Tanzania**

Tanzania has one of the most successful iodine programs in East Africa. Sentinel studies have been conducted in areas where stakeholders feared the existence of coverage gaps; the results indicated adequate UIC levels. In general, both household coverage levels and iodization levels in salt production appear to be adequate. Tanzania’s salt producers also supply neighboring countries (e.g. Burundi).
Dr. Vincent Assey is both IGN’s national coordinator for Tanzania and its regional coordinator for Eastern Africa. He has previously worked at the Tanzania Food and Nutrition Centre and is currently the Assistant Director of Nutrition Services in Tanzania’s Ministry of Health and Social Welfare. His current position has allowed him to effectively advocate with government officials and form a national coalition on iodization. Due in large part to his efforts, iodine nutrition has been incorporated into the national nutrition plan, and is included in Tanzania’s Scaling Up Nutrition (SUN) action plan.

Dr. Assey has also implemented solutions to address the technical needs of Tanzania’s salt producers. Even small producers in remote areas now have access to laboratories to conduct quality control procedures.

**Thailand**

IGN’s Thailand coordinator, Dr. Sangsom Sinawat, has successfully facilitated high-level discussions on iodine nutrition between government officials, the Royal Family of Thailand, and IGN’s technical experts (e.g. Dr. Creswell Eastman, Dr. Pandav, and Dr. Basil Hetzel). She has also worked with the country’s salt manufacturers. Thailand’s new Public Health Minister, Rajata Rajatanavin, is a strong proponent of iodine programs. He continues to request Dr. Sinawat’s support in facilitating iodine nutrition work.

**Gulf states**

Dr. Izzeldin Hussein is IGNs coordinator for the Middle East and North Africa region. He has facilitated successful iodine programs in countries where iodine nutrition had never been a priority. His affiliation with IGN has lent additional legitimacy and integrity to his advocacy work. He does a significant amount of low-budget travelling, and quickly forms beneficial relationships with stakeholders.

A few years ago, the United Arab Emirates (UAE) government decided to conduct national iodine nutrition surveys in the Gulf. The government awarded IGN a grant of $100,000 in unrestricted funds; this was the primary source of funding for the project.

IGN has provided the technical expertise for the project. Over the past two or three years, Dr. Hussein spearheaded national survey efforts in seven countries, including the UAE, Qatar, and Oman. Survey results indicate that the region’s iodine programs have been effective. In some countries, however, iodine levels were too high.

The findings have brought to light the potential risks of excessive salt consumption, and placed salt intake reduction on the agenda of IGN’s workshop in Dubai. Some member countries of the Gulf Cooperation Council (UAE, Oman, Qatar, and Kuwait) decided to implement a synergistic surveillance system to monitor both iodine status and salt consumption. Dr. Hussein has been asked to provide the technical expertise required to design the system. This work might lead countries where iodine levels are too high (e.g. Qatar) to adjust their salt standards in order to bring iodine levels within a healthy range.
In a recent regional workshop in Dubai, IGN worked with delegations from country teams in the Gulf, Northern Africa and the Middle East to develop refined strategic action plans to address iodine deficiency. In order to comprehend Dr. Hussein's significant impact on iodine nutrition in the region, GiveWell could contact English-speaking stakeholders who are familiar with his work (e.g. employees of the Kuwait or Qatar Ministry of Health).

All GiveWell conversations are available at [http://www.givewell.org/conversations](http://www.givewell.org/conversations)