

## **A conversation with Vitamin Angels, May 17, 2018**

### **Participants**

- Amy Steets – Senior Program Manager, Vitamin Angels
- Dr. Kristen Hurley – Director of Programs, Vitamin Angels
- Robert Parker – Chief Operating Officer, Vitamin Angels
- Chelsea Tabart – Research Analyst, GiveWell

**Note:** These notes were compiled by GiveWell and give an overview of the major points made by Vitamin Angels.

### **Summary**

GiveWell spoke with Ms. Steets, Dr. Hurley, and Mr. Parker of Vitamin Angels to learn about developments in Vitamin Angels' monitoring and evaluation processes. Conversation topics included reduced funding for vitamin A supplementation and updates to Vitamin Angels' monitoring and evaluation.

### **Reduced funding for vitamin A supplementation (VAS)**

#### **UNICEF report on VAS coverage**

In May of 2018, UNICEF published a report detailing the global decline in funding for VAS and the resulting decline in VAS coverage rates.

#### **Requests for Vitamin Angels' support**

Due to the decline in available funding for VAS, Vitamin Angels has been receiving an increased number of requests for support, both from national governments as well as local and international non-governmental organizations (NGOs). Vitamin Angels has significant experience in increasing VAS coverage rates, although it does not currently possess sufficient funding to fully satisfy all of the requests it has received.

#### *Requests from priority countries*

Vitamin Angels targets nine priority countries to which it allocates a majority of its resources. Of the nine countries, Vitamin Angels has received direct requests from four national or state ministries of health to support government programs to deliver VAS:

- **The Democratic Republic of the Congo (DRC)** – The supply of vitamin A that the DRC has historically received has decreased significantly over the past three years. In 2016, approximately 44% of children in the DRC were being covered by VAS, compared to approximately 70-80% of children a few years earlier. In response to a request from the national government, Vitamin Angels is increasing its support in the DRC by delivering vitamin A to areas of the country that do not have an available supply.

- **Haiti** – Vitamin Angels is working with the national government in Haiti to coordinate its support through local NGOs that are able to deliver vitamin A to areas of the country not supplied by other sources.
- **Nigeria** – Various state governments in Nigeria have observed declines in vitamin A supply and are working with Vitamin Angels to increase VAS coverage.
- **Uganda** – Vitamin Angels is working with the national government in Uganda to coordinate its support through local NGOs that are able to deliver vitamin A to areas of the country with historically low coverage.

Vitamin Angels’ ongoing support of targeted NGO vitamin A supplementation programs in four additional priority countries (India, Philippines, Indonesia, and Mexico) continue to reflect the limits of coverage.

## **Updates to monitoring and evaluation**

### **Collection of documents that prove non-duplicated services**

Vitamin Angels utilizes several monitoring and evaluation processes to ensure that it is targeting beneficiaries not being served by another VAS program. One new process that Vitamin Angels has incorporated into its monitoring system is the collection of official documents demonstrating that its support was requested and is not duplicating existing services. Examples of the types of documents Vitamin Angels collects include:

- **Letters addressed to Vitamin Angels** – For example, for its work with governments, Vitamin Angels often receives letters directly from state governments confirming requests for vitamin A.
- **Letters addressed to international NGOs (INGOs)** – For example, for its work with INGOs, Vitamin Angels receives letters—written by national governments and addressed to reputable INGOs—that include details of the amount of supply Vitamin Angels is providing to the INGOs.
- **Letters addressed to local NGOs** – Vitamin Angels often works through local NGOs in order to effectively target the most isolated populations. In these contexts, Vitamin Angels may receive a letter from a local health facility addressed to a local NGO that confirms the NGO’s support and the vitamin A supplied by Vitamin Angels.

### **Strengthened onsite monitoring**

Vitamin Angels now conducts onsite examinations of its field partners’ stock and beneficiary registers to ensure that partners’ annual reports on vitamin A supply and number of children treated are accurate. It also visits distribution sites to evaluate distributions and obtain information from caregivers.

Vitamin Angels has strengthened its onsite monitoring system in order to improve its programming. For example, if it observed a distribution staff member providing an incorrect dosage or targeting the wrong beneficiaries, Vitamin Angels investigates whether or not the processes for training staff were adequate.

### *Process*

To ensure that it is monitoring a representative sample, Vitamin Angels stratifies by location and size before randomly selecting a total of 15% of all field partners. It then coordinates with the partners to ensure that Vitamin Angels staff makes site visits at a time when vitamin A distributions will be occurring.

Vitamin Angels has trained 20 monitors, who visit the selected partners' headquarters to electronically catalogue inventory and beneficiaries. The same monitors visit distribution sites to determine whether beneficiaries are the appropriate age, whether the appropriate dosage is being provided, and whether vitamin A is being supplied according to best practices. Monitors also talk with site managers as well as five to ten caregivers per site to determine whether or not children have had access to vitamin A from other sources during the preceding six months.

### *Findings*

Findings from Vitamin Angels' onsite monitoring in 2018 include:

- 96% of field partners' inventory and beneficiary registers match with the annual reports Vitamin Angels receives.
- Partners are largely delivering vitamin A to appropriately aged beneficiaries at correct dosages.
- 92% of caregivers or guardians have reported that Vitamin Angels is their only source for vitamin A.

### **Coverage surveys**

Vitamin Angels has solicited advice from experts in the field of monitoring and evaluation to design coverage surveys that it hopes will demonstrate an increase in vitamin A coverage for hard-to-reach populations due to Vitamin Angels' supply. Vitamin Angels' planned coverage surveys in India and Nigeria exemplify the types of designs it will utilize.

#### *Coverage survey in India*

Vitamin Angels allocates 30-40% of its program support to India, where it conducts its largest operation reaching approximately 13 million children, providing vitamin A both to the state government and various local NGOs.

In India, national and state governments distribute vitamin A as a syrup. Since Vitamin Angels' product is in capsule form, it would be simple for a coverage survey in India to determine from what source a child received vitamin A. Furthermore, vitamin A syrup is not widely available in some states, making it more straightforward to attribute increases in VAS coverage to the work of Vitamin Angels.

*Coverage survey in Nigeria*

Unlike in India, the Nigerian government procures vitamin A in capsule form, making it difficult to distinguish between the sources from which a child received vitamin A. However, based on its knowledge of available supply from other sources and its conversations with partners and the state government, Vitamin Angels would assume that an increase in vitamin A coverage in select districts may be due to its work.

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