Leveraging evidence to improve child immunization in Haryana, India

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Highlights

Evidence impact

- Engagement on findings prompted Haryana's National Health Mission directorate to enter into a partnership with the research organisation.
- Evaluation findings have informed a pilot that uses community networks and the government's mobile health platform to promote timely and full immunization among children.
- The most effective approach according to the study informed the founding of the Suvita program working in two states of India.

Factors that contributed to impact

- A memorandum of understanding between the researchers and the health department allowed the researchers to work closely with the government and sustain the project, even as key government personnel changed.
- By working within the government system and training community frontline health workers to implement key intervention components, the study was able to provide contextual process insights valuable to the government.
- The evaluation provided timely evidence around mobile health interventions as the government was beginning to roll out its own 'mHealth' platform and private organizations such as Charity Science Health and Suvita were looking for evidence informed interventions to increase immunization.

Impact evaluation details

Title: Evaluating the impact of interventions to improve full immunization rates in Ha...

Authors: Abhijit V Banerjee, Arun G Chandrasekhar, Esther Duflo, Suresh Dalpath, John Floretta, Matthew O Jackson, Harini Kannan, Anna Schrimpf and Maheshwor Shrestha

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Context

Immunization is one of the most cost-effective ways to improve child health and survival in developing countries. Yet, in 2018, a fifth of all children in India's Haryana state still did not receive all the required vaccinations. To address drop-outs and improve vaccine coverage, 3ie funded the evaluation of a new programme in seven districts of Haryana between 2016 and 2019.

Researchers affiliated to the Abdul Latif Jameel Poverty Action Lab (J-PAL) South Asia worked with Haryana's National Health Mission directorate to evaluate *Teekakaran Protshakan Karyakram* (encouraging immunization programme). The programme used a variety of ways to improve immunisation, such as leveraging social networks for information dissemination within the community, providing mobile recharges as incentives and sending reminders to caregivers.

Evidence

The study team found that spreading health messages through community-nominated information disseminators (immunization ambassadors) was a cost-effective approach to improving immunisation outcomes. Identifying ambassadors in the community by asking a simple and direct question and leveraging them to spread immunization-related messages in the community cost only US\$4.95 per additional fully immunised child.

The mobile recharge incentive had significant effects only when the recharge amounts were higher for the last two vaccines a child should receive in her first year: the third dose of pentavalent and the measles vaccine. Where higher amounts were transferred for pentavalent 3 and measles, there was an 11.8 per cent increase in the rate of full immunization. There was no effect when the recharge amounts were uniform for all five vaccines. Thus, what mattered was how the recharges were transferred, rather than their monetary value. Even a large overall amount transferred through equal-sized recharges after every vaccine did not have any impact.

Targeted text and voice call reminders did not affect immunization outcomes.

Evidence impacts

Prompted a pilot project to leverage community social networks

The evaluation highlighted the value of leveraging community social networks and prompted the Haryana state National Health Mission directorate, the Health Systems Resource Centre and the researchers to launch a partnership to pilot health information dissemination through community-identified immunization ambassadors in one of Haryana's most challenging 'aspirational' districts. The government's September 2019 memorandum of understanding with the J-PAL South Asia researchers also proposes working together to improve the use of administrative data to improve health, leveraging the government's online mobile data platform for Auxiliary Nurse Midwives , known as ANMOL.

6 When such studies happen, you deliberate upon what works and what did not work. Something which is low cost and high impact, when that has been aemonstrated to work so beautifully, why not use it?'

Dr Sonia Trikha Khullar

Executive director

Haryana State Health System Resource Centre

Informing approaches to promote full immunization in Bihar and Maharashtra

The most effective approach according to the study has also informed the work of the nonprofit programme Suvita, which works in Bihar and Maharashtra in India. Suvita is implementing both SMS reminders to caregivers and community-nominated immunization ambassadors. Early results from the study prompted its founders to launch Suvita, focusing on recruiting immunization ambassadors as a highly cost-effective way to boost immunization uptake. The final results of the study then prompted Suvita to merge with another nonprofit, Charity Science Health, which had been focused only on delivering SMS reminders. This decision to merge the two organisations (and therefore run both programmes together) was a direct response to the study's findings that combining immunization ambassadors and SMS reminders was a more effective and cost-effective approach than either approach in isolation.

6 Funders prioritize cost-effectiveness in their own decision-making, so we know that it has been a factor in much of the funding we have received to date - and we expect it will continue to be important for securing future funding to scale programs

Fiona ConlonCo-founder
Suvita

Suggested citation

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