Roadmap to National Benefit Cost Ratio

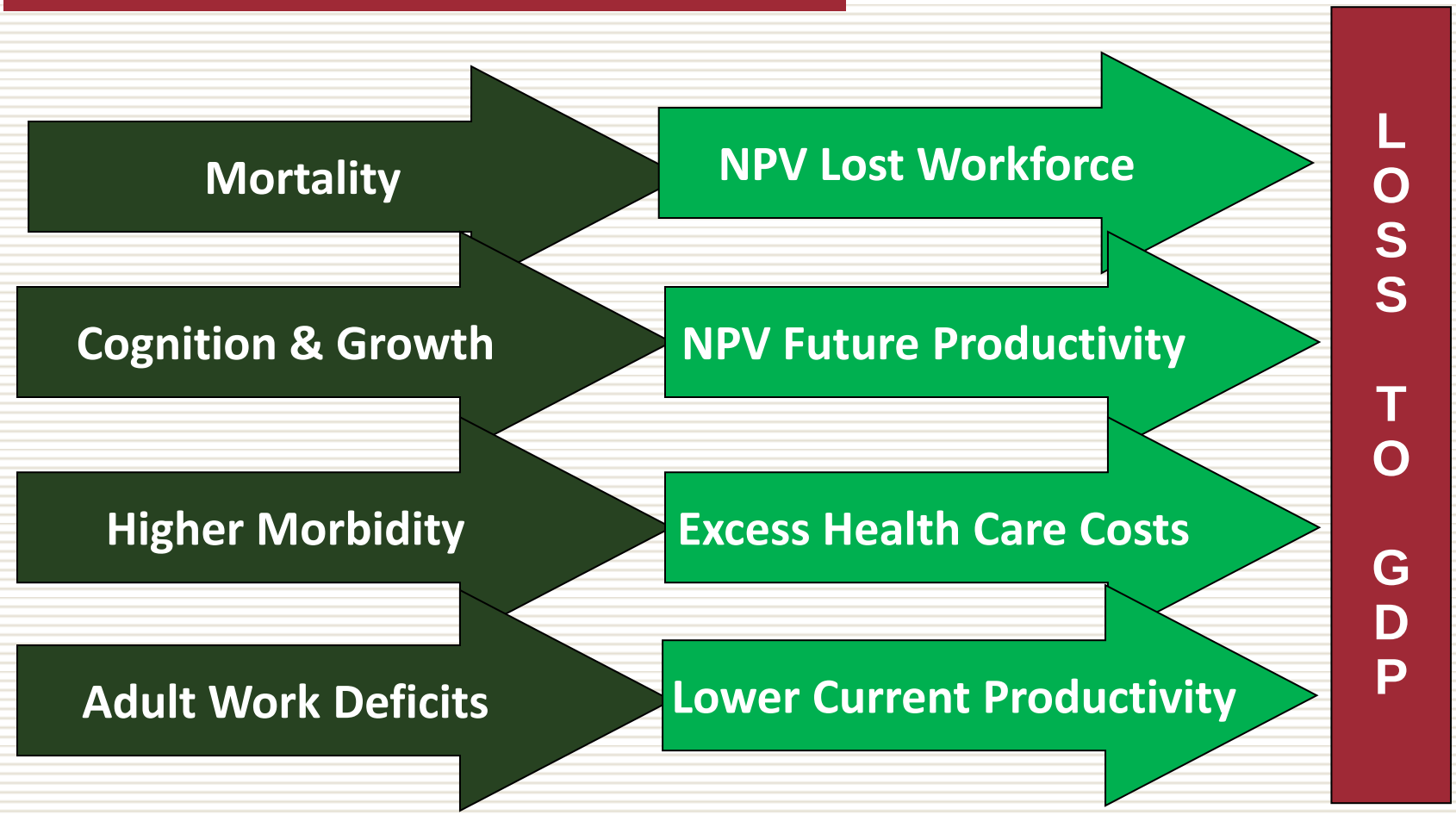
Baseline Losses (Status Quo)		Coverage		Effective		Benefits (Saved Losses)		Cost		Benefit Cost Ratio
$/yr	X	%	X	%	=	$/yr	/	$/yr	=	#

Defining National Economic Consequences Micronutrient Deficiencies

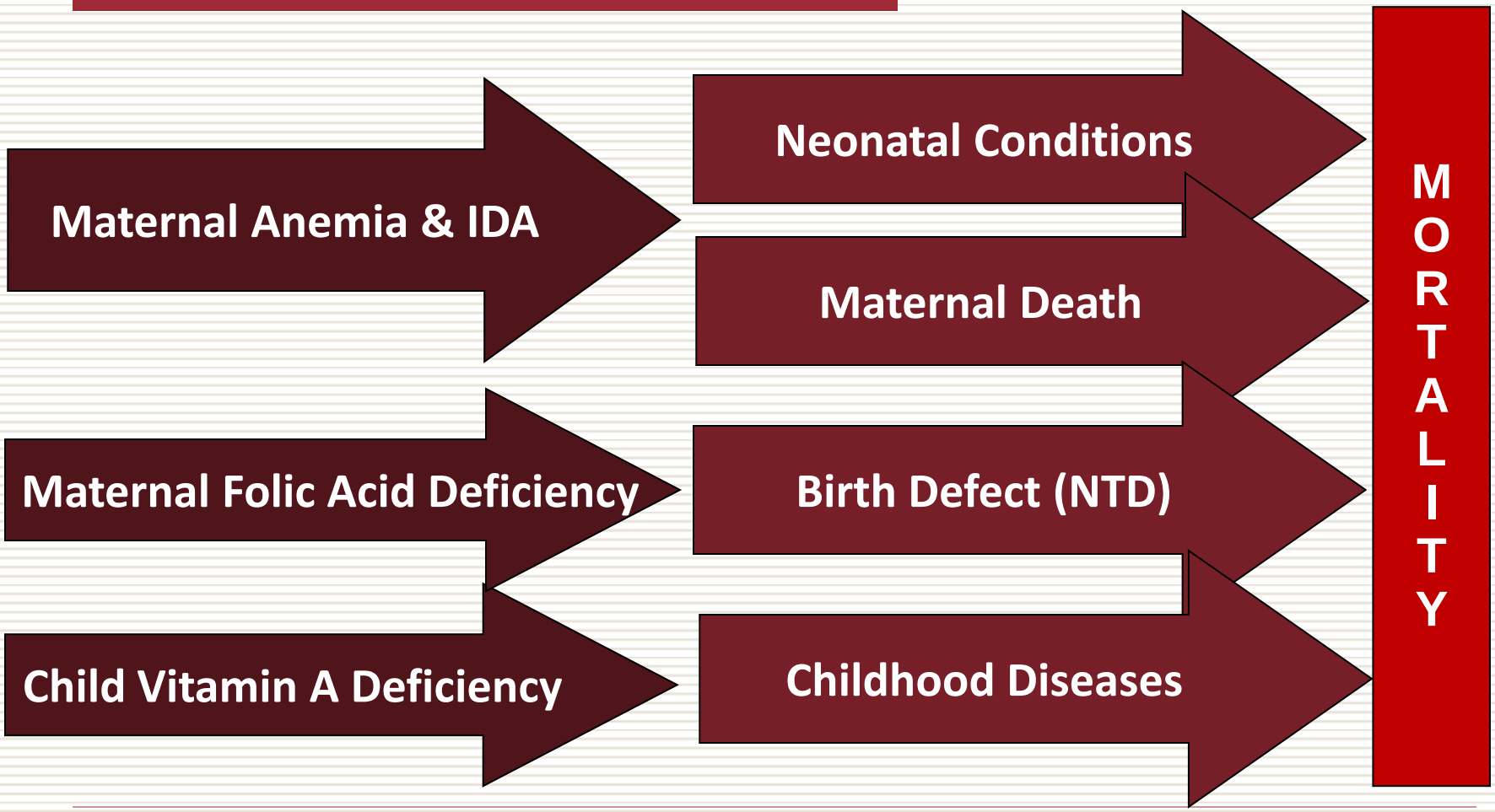
- Scientific literature has established coefficients on Health Risks or Performance Deficits related to specific Nutrition Indicators.
- These Coefficients can be applied to national data and statistics to project magnitude of loss for each of s indicator by indicator.

Size of Population Affected	X	Potential Earning	X	Labor Participation Rate (%)	X	Coefficient Of Risk or Deficit	=	Baseline Annual Loss
National Data: Prevalence & Mortality		National Data		National Data		Global Scientific Literature		$/yr

4 Pathways of "Damage" to Measure Baseline Economic Loss



Pathway #1: Mortality

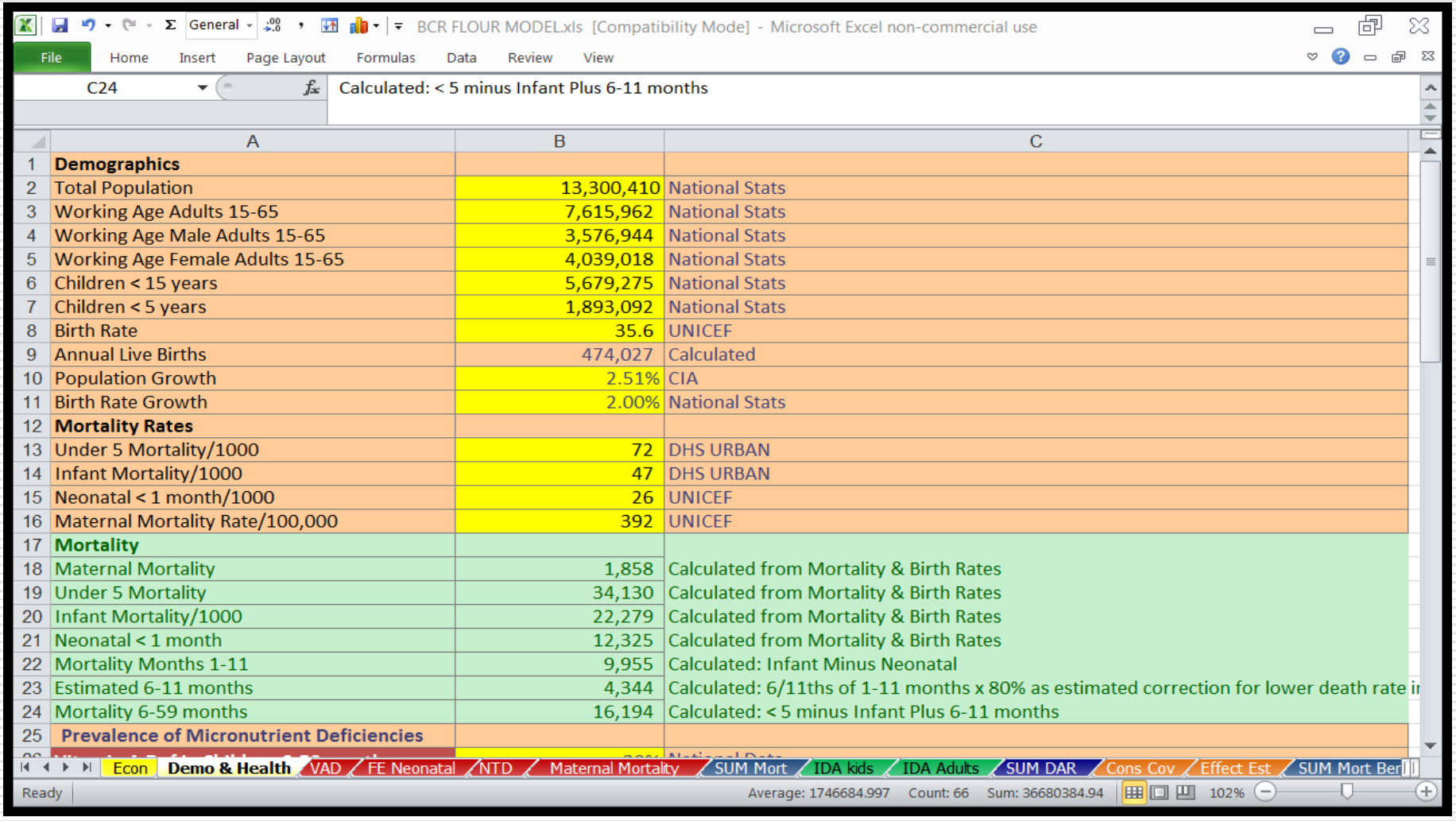


Applying Global Evidence (RR) to National MNM Prevalence & Mortality Rates

Prevalence Indicator Risk Group	X	Relative Risk of Mortality	=	Population Attributable Risk (PAR)	X	Mortality in Risk Group	=	Number Deaths/yr Fraction Mortality Attributed To Indicator*
From National Statistics		RR From Global Literature		Fraction or % of Risk Group Affected		From National Child Mortality Statistics		

W/ statistical adjustment for periods of multiple risks

National Data: Baseline Micronutrient Deficiency and Mortality



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C24: Calculated: < 5 minus Infant Plus 6-11 months

	A	B	C
1	**Demographics**		
2	Total Population	13,300,410	National Stats
3	Working Age Adults 15-65	7,615,962	National Stats
4	Working Age Male Adults 15-65	3,576,944	National Stats
5	Working Age Female Adults 15-65	4,039,018	National Stats
6	Children < 15 years	5,679,275	National Stats
7	Children < 5 years	1,893,092	National Stats
8	Birth Rate	35.6	UNICEF
9	Annual Live Births	474,027	Calculated
10	Population Growth	2.51%	CIA
11	Birth Rate Growth	2.00%	National Stats
12	**Mortality Rates**		
13	Under 5 Mortality/1000	72	DHS URBAN
14	Infant Mortality/1000	47	DHS URBAN
15	Neonatal < 1 month/1000	26	UNICEF
16	Maternal Mortality Rate/100,000	392	UNICEF
17	**Mortality**		
18	Maternal Mortality	1,858	Calculated from Mortality & Birth Rates
19	Under 5 Mortality	34,130	Calculated from Mortality & Birth Rates
20	Infant Mortality/1000	22,279	Calculated from Mortality & Birth Rates
21	Neonatal < 1 month	12,325	Calculated from Mortality & Birth Rates
22	Mortality Months 1-11	9,955	Calculated: Infant Minus Neonatal
23	Estimated 6-11 months	4,344	Calculated: 6/11ths of 1-11 months x 80% as estimated correction for lower death rate i
24	Mortality 6-59 months	16,194	Calculated: < 5 minus Infant Plus 6-11 months
25	**Prevalence of Micronutrient Deficiencies**		

Econ | Demo & Health | VAD | FE Neonatal | NTD | Maternal Mortality | SUM Mort | IDA kids | IDA Adults | SUM DAR | Cons Cov | Effect Est | SUM Mort Ber

Ready Average: 1746684.997 Count: 66 Sum: 36680384.94 102%

Global Sources:
Major Medical & Public Health Sources

- Relative Risk:
  - *Ratio of risk of death or disease among those exposed to the risk among those not exposed.*
  - *>1 = Threat*
  - *< 1 = Protection*

Evidence of Elevated Risk
Relative Risk for 4 Indicators

	Risk*	Source
Maternal Anemia: Neonatal Mortality	RR 1.45	In Black et al Lancet, 2013
Maternal Anemia: Maternal Mortality /per 1 g/dL Hb increase	RR 1.41	In Black et al Lancet, 2008/2013
Maternal Folic Acid Deficiency: Neural Tube Defect (NTD)	RR 1.38	Cochrane Review, 2012
Child Vitamin A Deficiency Mortality 6-59 Months	RR 1.32	In Black et al Lancet, 2013

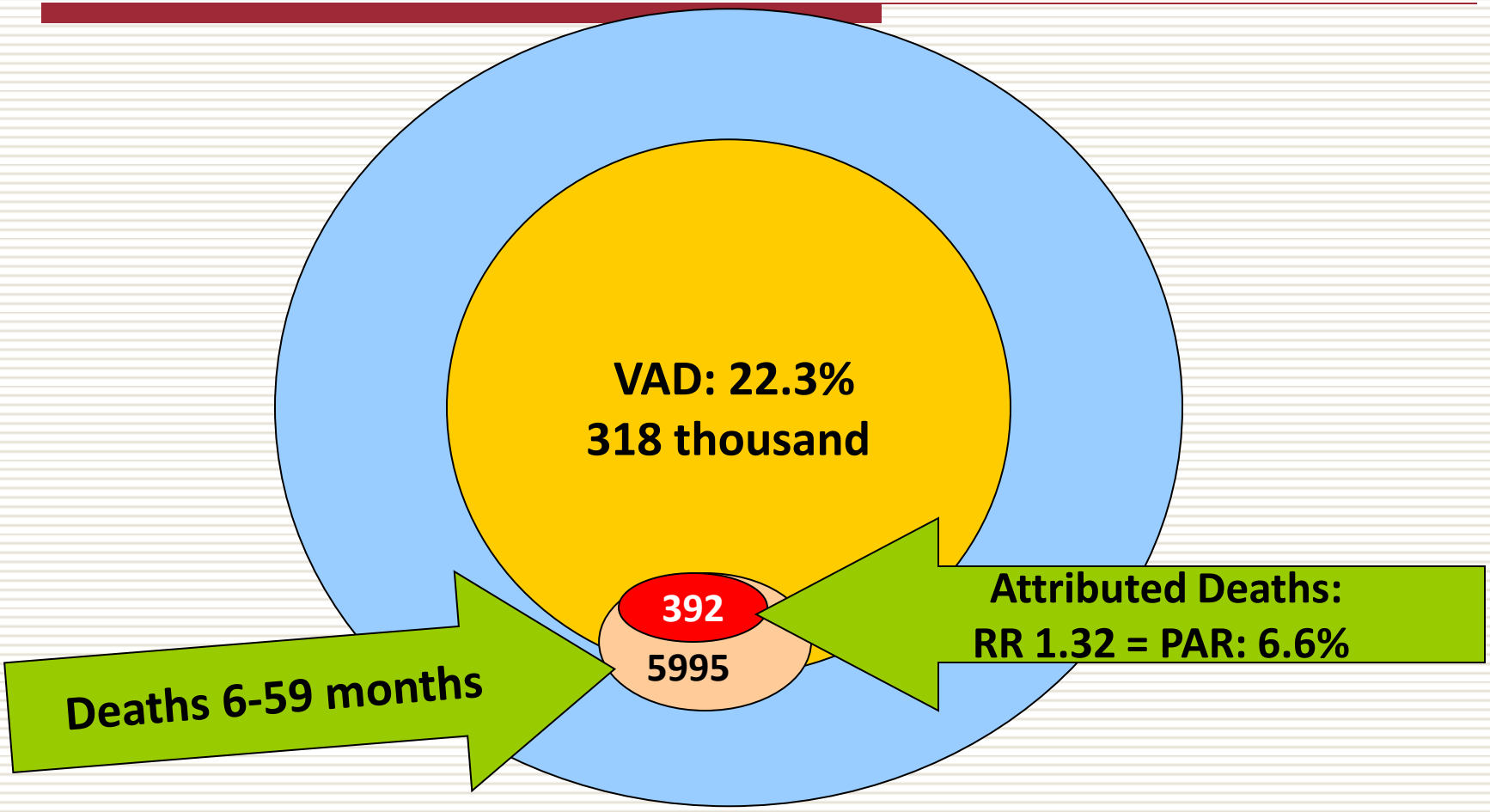
Converted from protective as inverse/

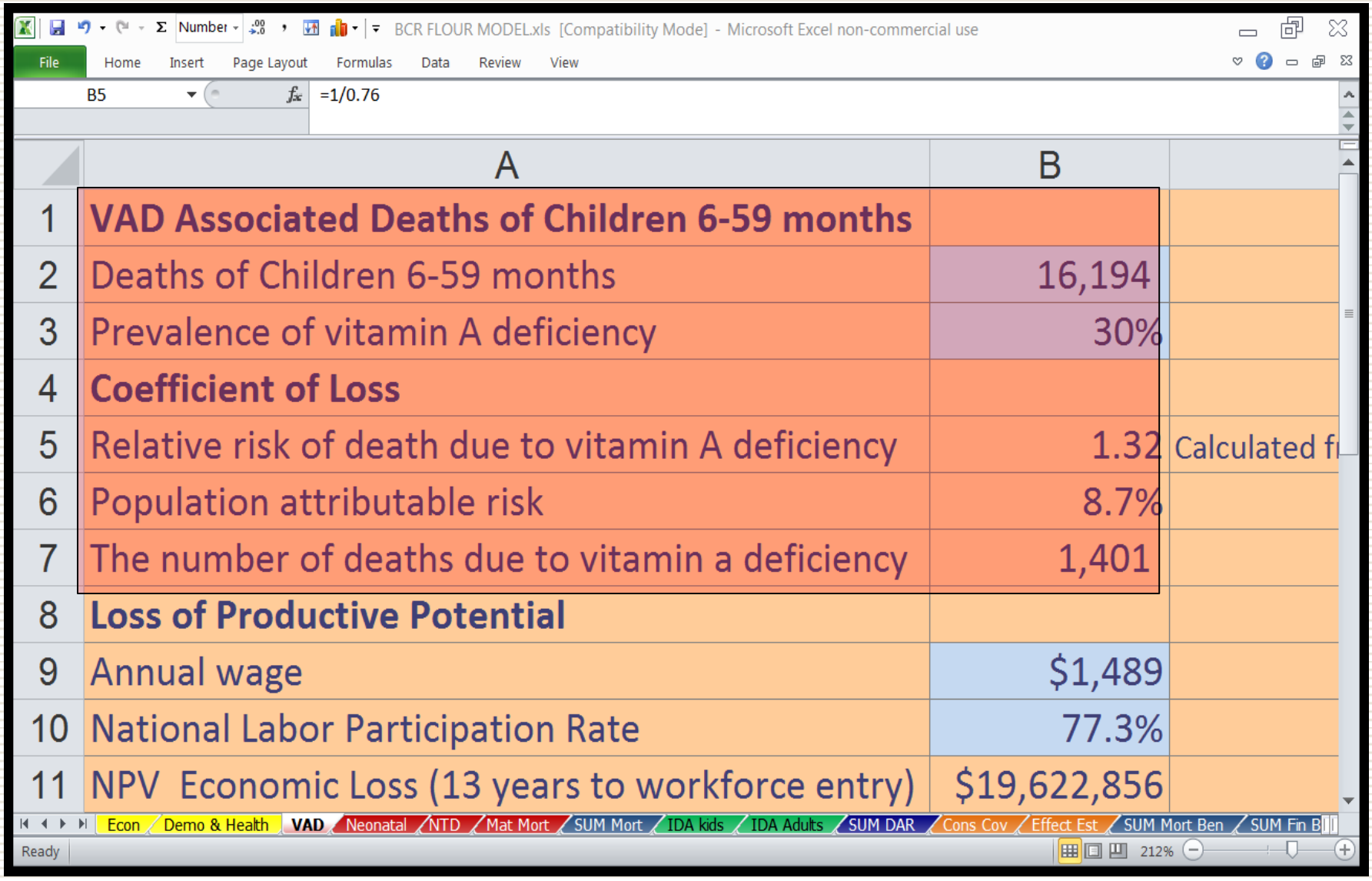
Population Attributable Risk:

- ***Population Attributable Risk***
  - Proportion of cases that can be attributed to a specific exposure.
  - *Proportion of mortality that can be attributed to current rates of anemia, folic acid or vitamin A deficiency?*
- PAR in a population depends on:
  - National Data: Prevalence of the risk factor
  - Global Evidence strength of association (RR) with disease.
    - The formula: (PREV*(RR-1))/(1+(PREV*(RR-1))

http://medical-dictionary.thefreedictionary.com/relative+risk

Deaths from Vitamin A Deficiency

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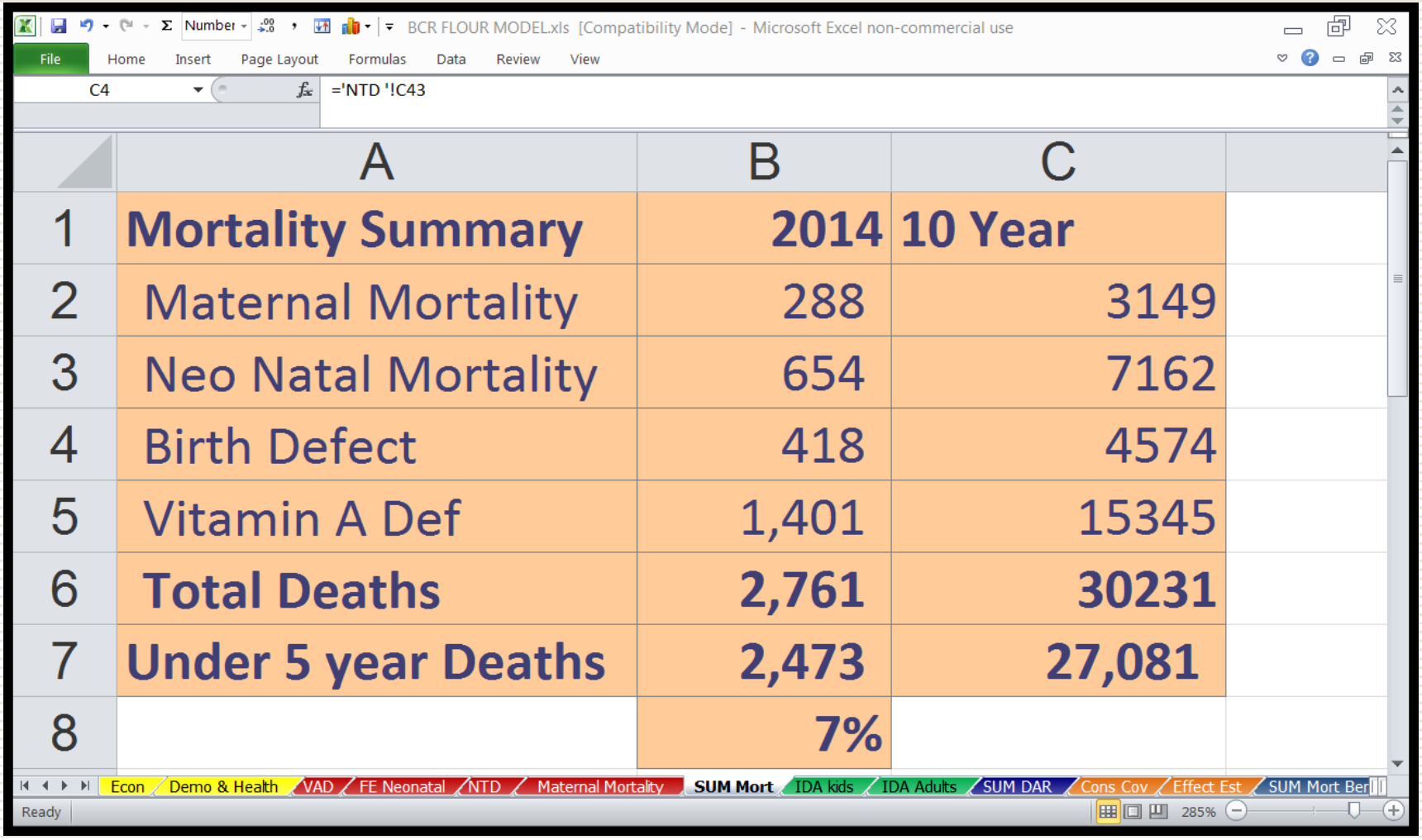
=1/0.76
A
B
1 VAD Associated Deaths of Children 6-59 months
2 Deaths of Children 6-59 months 16,194
3 Prevalence of vitamin A deficiency 30%
4 Coefficient of Loss
5 Relative risk of death due to vitamin A deficiency 1.32 Calculated f
6 Population attributable risk 8.7%
7 The number of deaths due to vitamin a deficiency 1,401
8 Loss of Productive Potential
9 Annual wage $1,489
10 National Labor Participation Rate 77.3%
11 NPV Economic Loss (13 years to workforce entry) $19,622,856
Econ
Demo & Health
VAD
Neonatal
NTD
Mat Mort
SUM Mort
IDA kids
IDA Adults
SUM DAR
Cons Cov
Effect Est
SUM Mort Ben
SUM Fin B
Ready
212%

Summary Projections for 4 Mortality Indicators (Blue Tab)



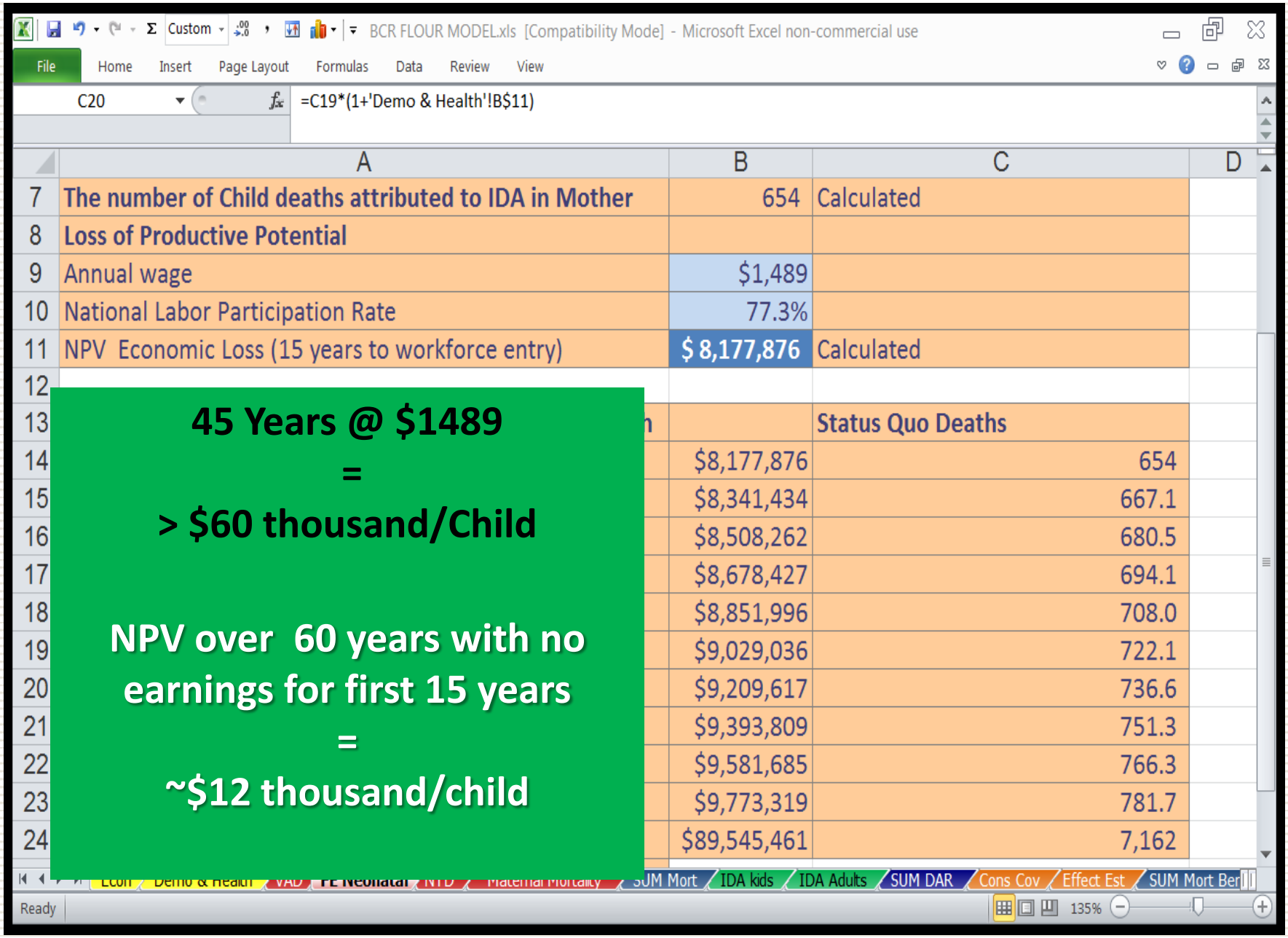
	A	B	C
1	**Mortality Summary**	**2014**	**10 Year**
2	Maternal Mortality	288	3149
3	Neo Natal Mortality	654	7162
4	Birth Defect	418	4574
5	Vitamin A Def	1,401	15345
6	**Total Deaths**	**2,761**	**30231**
7	**Under 5 year Deaths**	**2,473**	**27,081**
8		**7%**	

Converting Lives to Currency: A Cold Banker's Approach

Net Present Value of Work Lost to Childhood Mortality Discount over 45 Year Projected Work-life @ 3%								
Size of Population Affected	X	Average Earning	X	Labor Participation Rate (%)	X	NPV Lifetime Earning:*	=	Baseline Annual Loss
Nutrition Attributed Deaths		$/y National Data		% National Data		45 years 15y Delay 3% Rate		$/yr

Net Present Value (NPV): Converting Units to Value Future Benefits

- Human perceptions of value change over time.
  - People value current money more than future money.
  - Value diminishes with added “waiting time” for benefits.
- FF Costs current. FF benefits extend far into future
  - Period of No Returns. Earnings 2028-2073
- What’s the value or discount of waiting for the Benefit?
  - NPV converts future into present value using a discount rate.
  - Discount Rate charges for waiting:
- NPV % Discount Rate makes big difference in assessing value of interventions that yield long term benefits.
  - Higher % rates diminish the value of future benefits.
    - Model Default: 3% World Bank from World Development Report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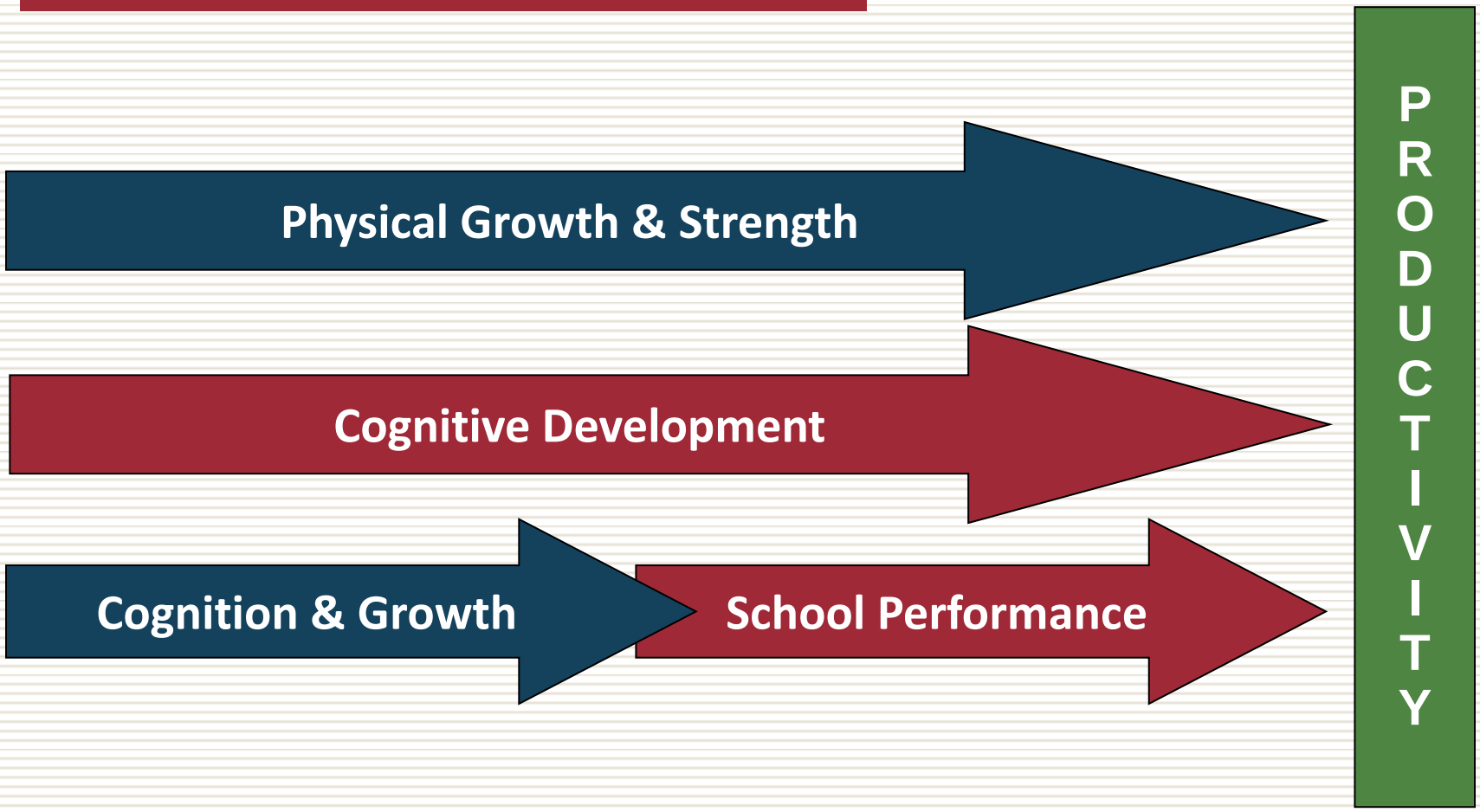
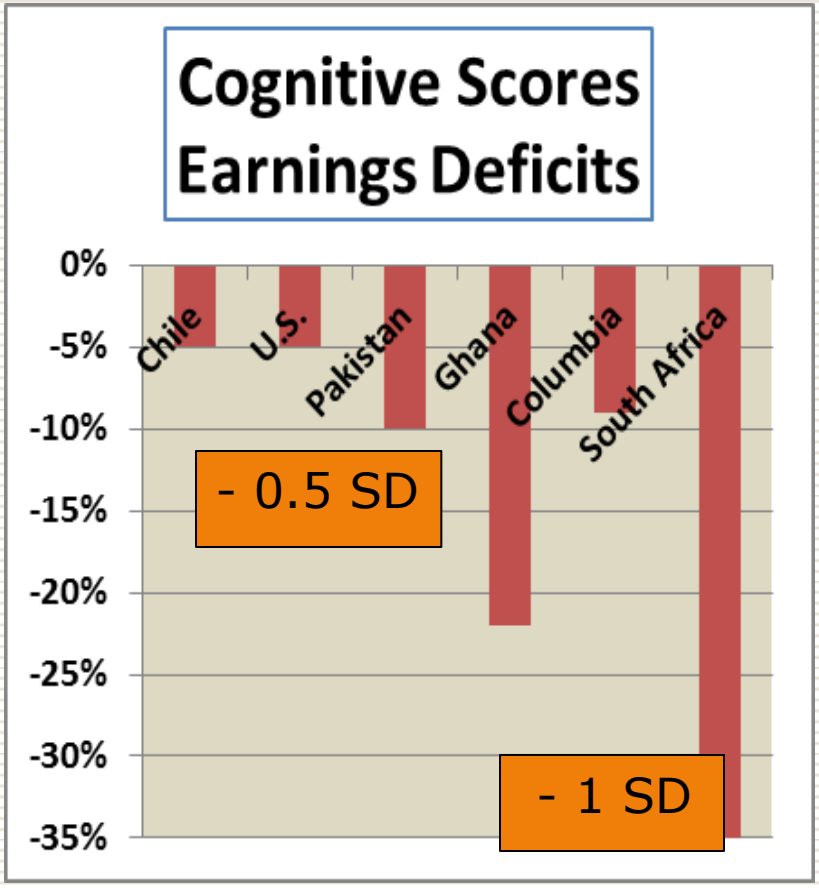
=C19*(1+'Demo & Health'!B$11)
A
B
C
D
7 The number of Child deaths attributed to IDA in Mother 654 Calculated
8 Loss of Productive Potential
9 Annual wage $1,489
10 National Labor Participation Rate 77.3%
11 NPV Economic Loss (15 years to workforce entry) $ 8,177,876 Calculated
12
13 Status Quo Deaths
14 $8,177,876 654
15 $8,341,434 667.1
16 $8,508,262 680.5
17 $8,678,427 694.1
18 $8,851,996 708.0
19 $9,029,036 722.1
20 $9,209,617 736.6
21 $9,393,809 751.3
22 $9,581,685 766.3
23 $9,773,319 781.7
24 $89,545,461 7,162
45 Years @ $1489
=
> $60 thousand/Child
NPV over 60 years with no earnings for first 15 years
=
~$12 thousand/child
IDA kids
IDA Adults
SUM DAR
Cons Cov
Effect Est
SUM Mort Ber
Ready
135%

Pathway #2: Anemia
Lost Future Earnings Potential Children



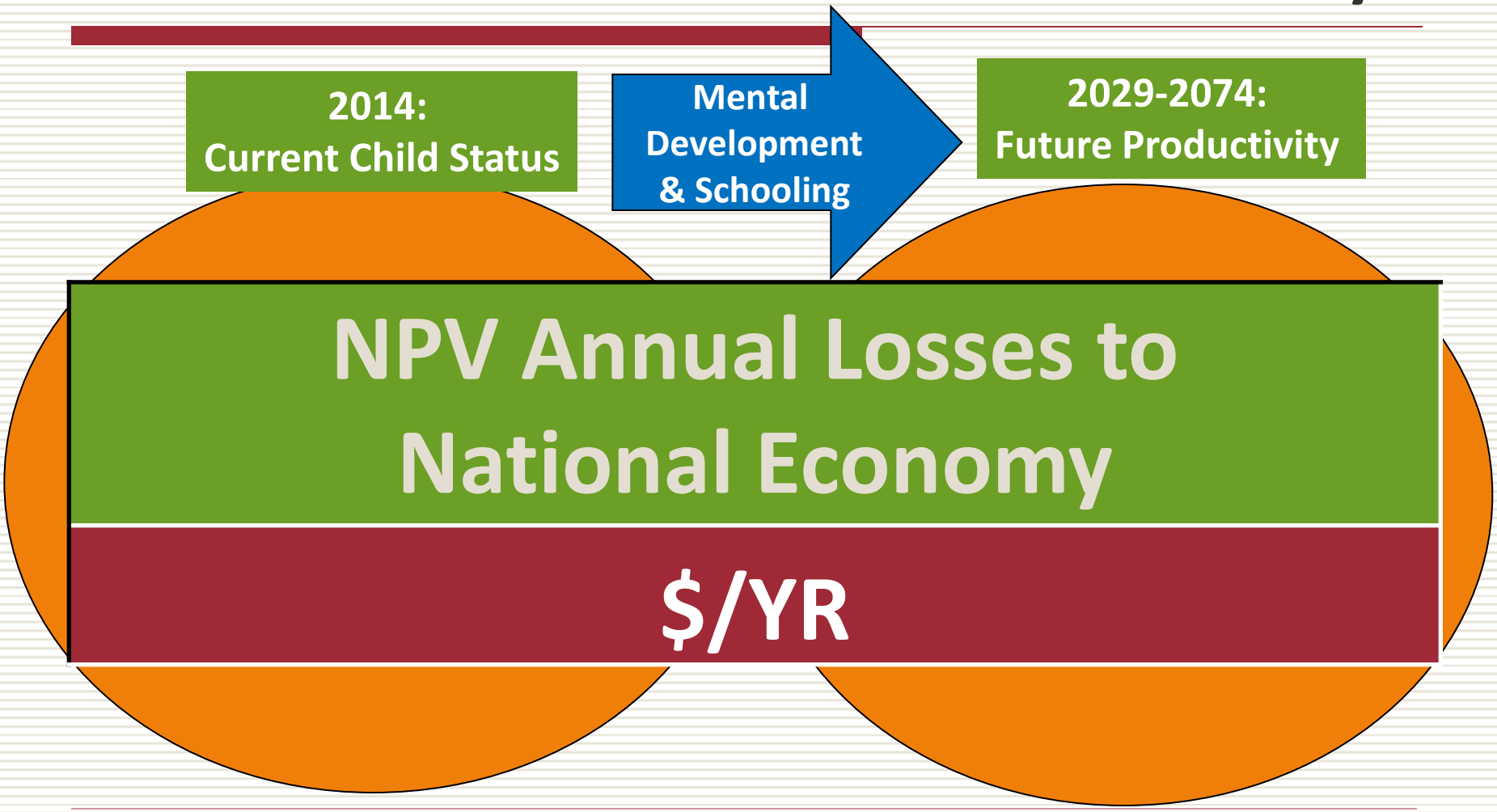
Childhood Anemia and Iron Deficiency: Future Productivity and Earnings

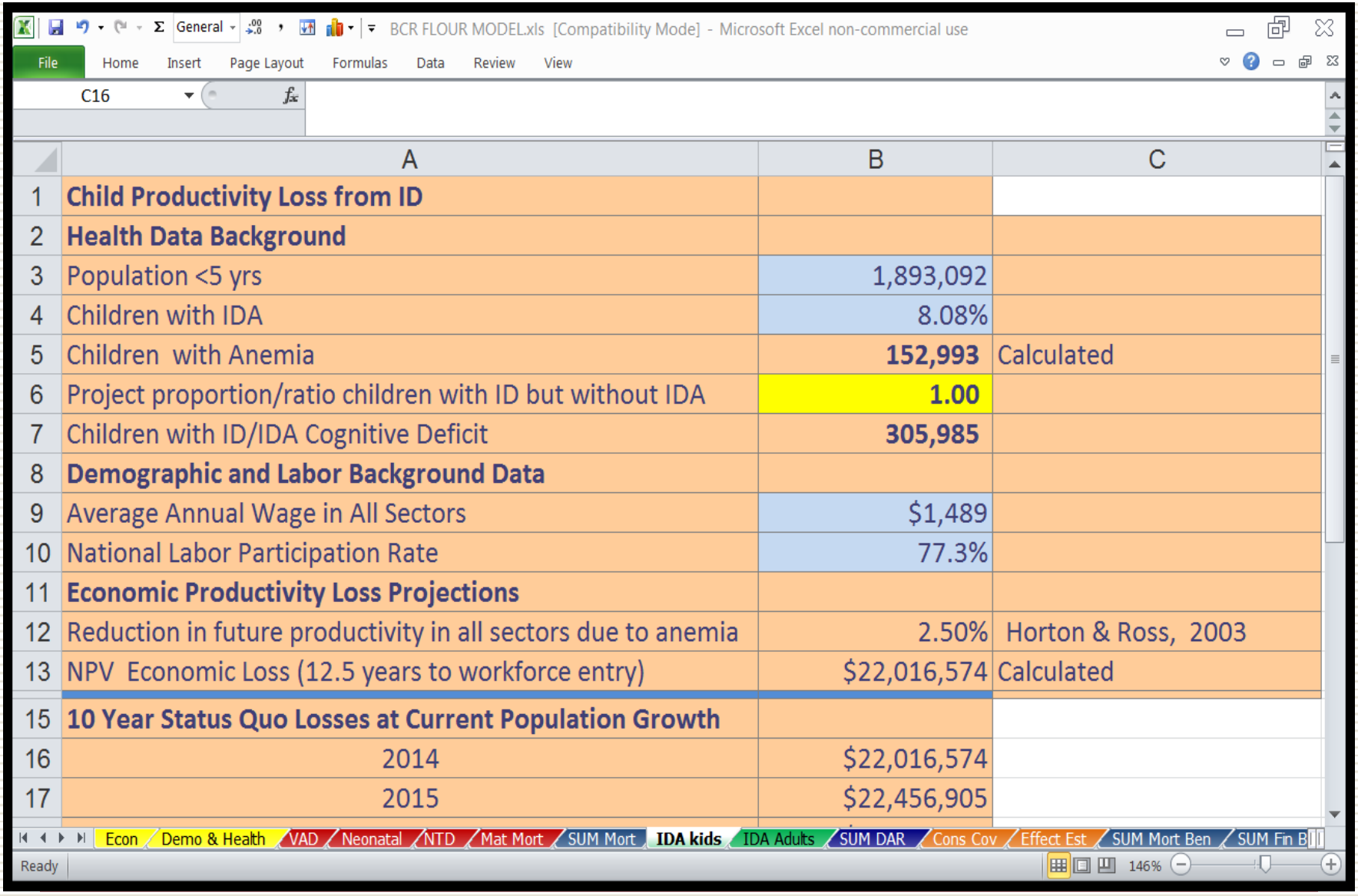
- Nutrition Literature:*
  - Iron deficiency in childhood causes cognitive deficit.*
  - Iron interventions improve cognition 0.5 to 1 SD.**
- Economic Literature:
  - 0.5 SD increase in IQ = increase in wages 5-10%**
- Future earnings deficit in anemic children **2.5%.*****



* Multiple./Journal of Nutrition **Lancet/multiple ***Copenhagen Consensus

Childhood Anemia and Future Productivity





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	A	B	C
1	**Child Productivity Loss from ID**		
2	**Health Data Background**		
3	Population <5 yrs	1,893,092	
4	Children with IDA	8.08%	
5	Children with Anemia	**152,993**	Calculated
6	Project proportion/ratio children with ID but without IDA	**1.00**	
7	Children with ID/IDA Cognitive Deficit	**305,985**	
8	**Demographic and Labor Background Data**		
9	Average Annual Wage in All Sectors	$1,489	
10	National Labor Participation Rate	77.3%	
11	**Economic Productivity Loss Projections**		
12	Reduction in future productivity in all sectors due to anemia	2.50%	Horton & Ross, 2003
13	NPV Economic Loss (12.5 years to workforce entry)	$22,016,574	Calculated
15	**10 Year Status Quo Losses at Current Population Growth**		
16	2014	$22,016,574	
17	2015	$22,456,905	

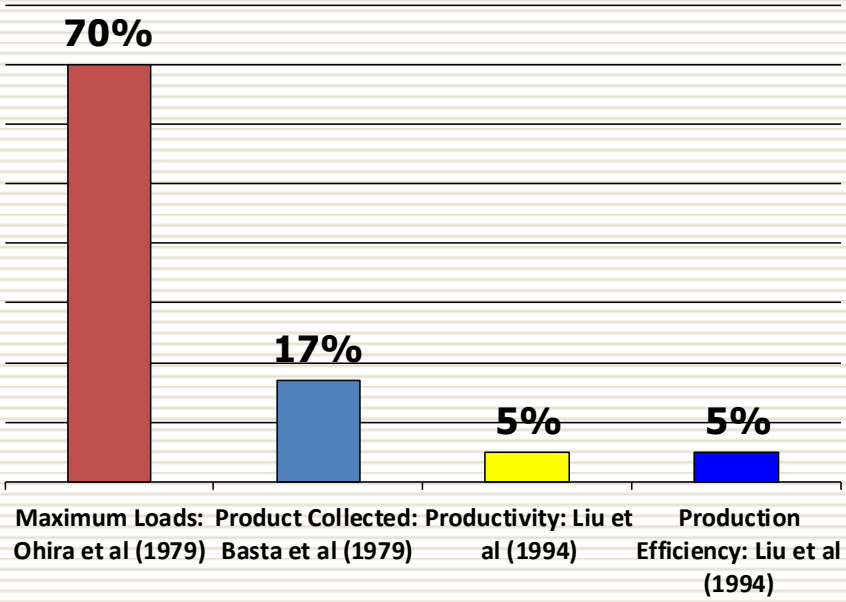
Econ | Demo & Health | VAD | Neonatal | NTD | Mat Mort | SUM Mort | IDA kids | IDA Adults | SUM DAR | Cons Cov | Effect Est | SUM Mort Ben | SUM Fin B

Ready 146%

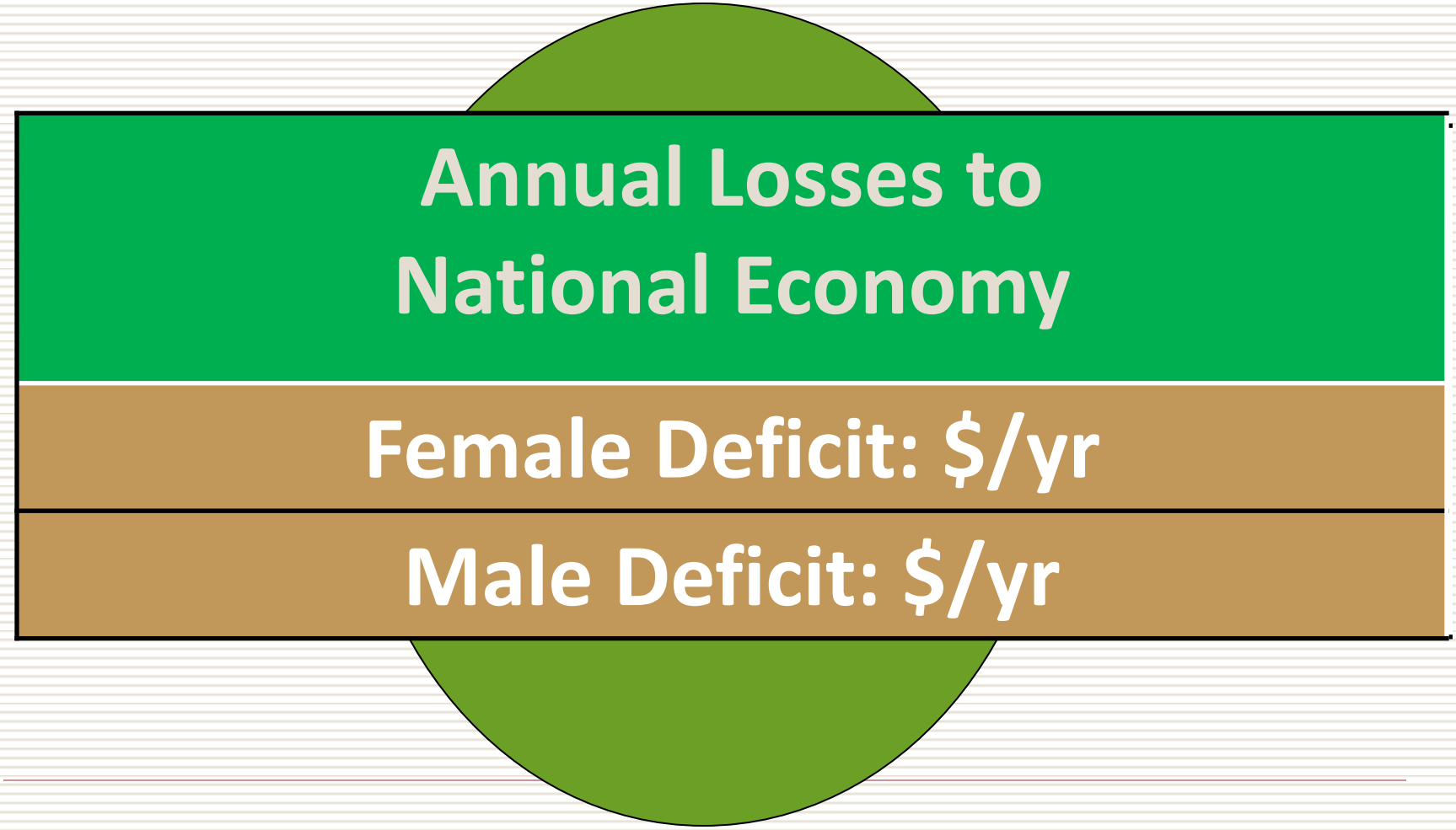
Pathway #3:
Anemia Impact on Adult Productivity

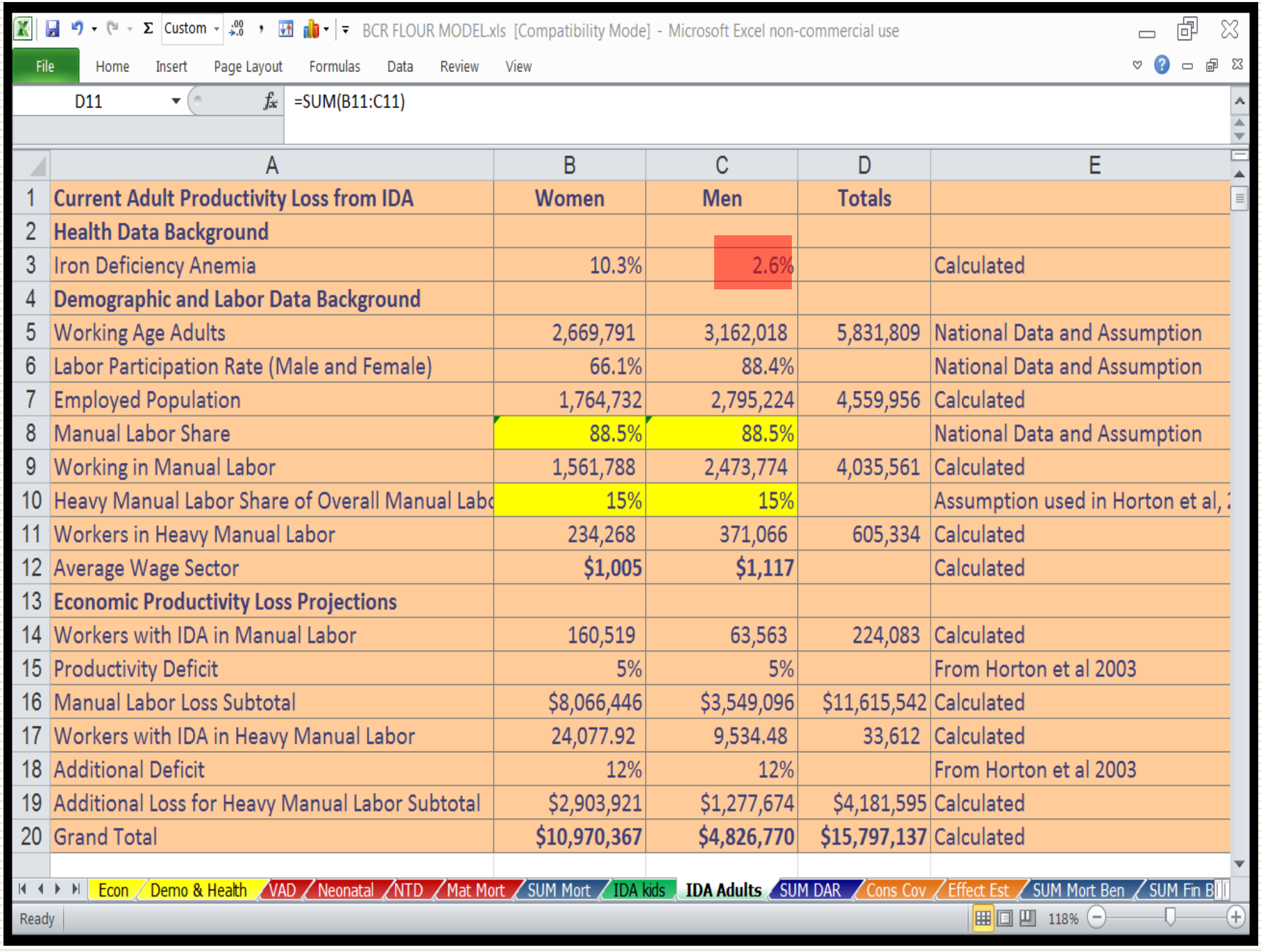
- Health Impact
  - Weakness & fatigue
- Work Impact:
  - Lower performance or output
- Consensus Estimates
  - Copenhagen Consensus, PROFILES/USAID, ADB/CIPs
  - 5% in Manual Labor
  - 17% Heavy Manual Labor
- White-Collar, Parenting & Voluntary work not calculated

Controlled Studies:
Improved Productivity
From Correction of Anemia



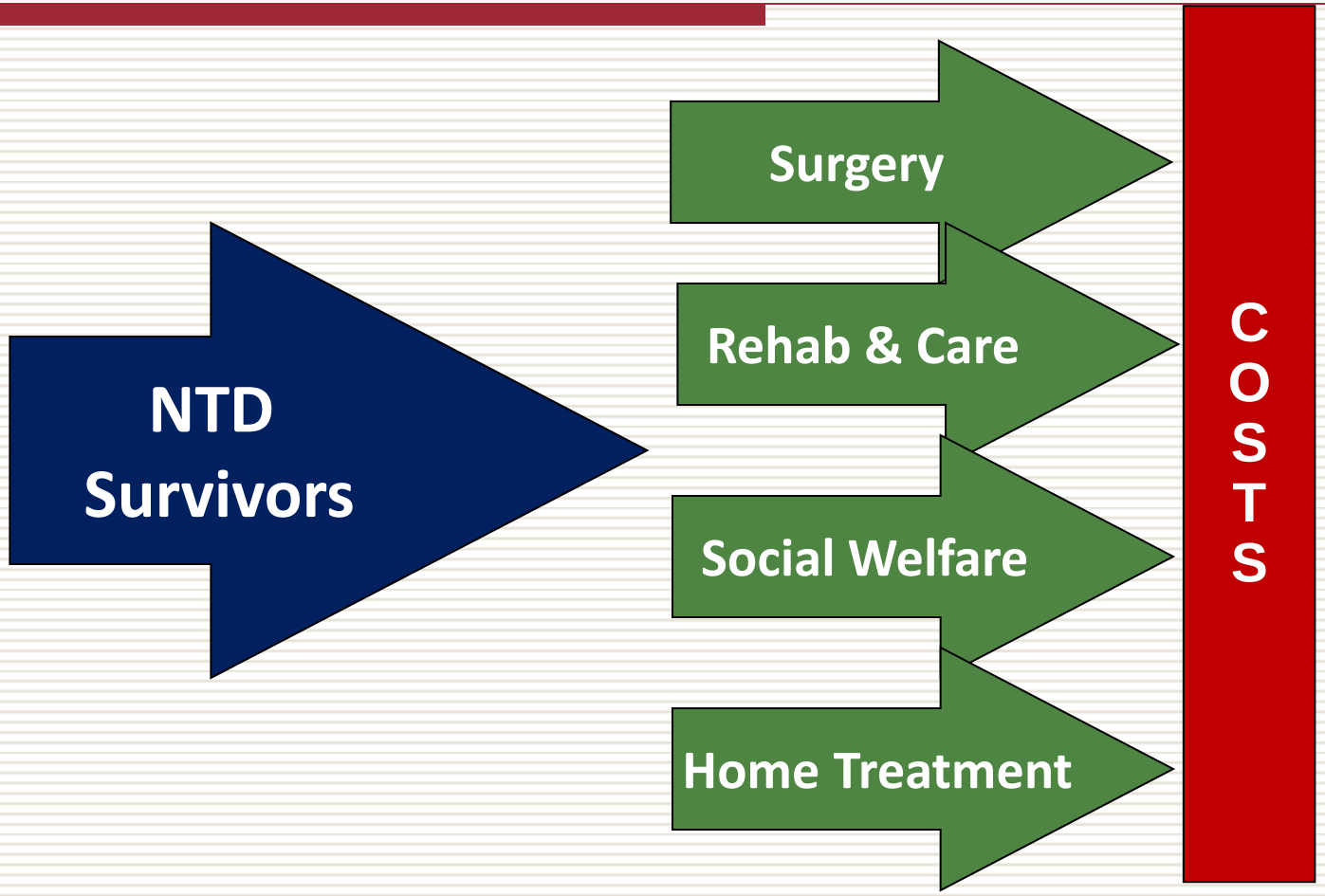
Adult Female Workers
Productivity Deficits from Anemia

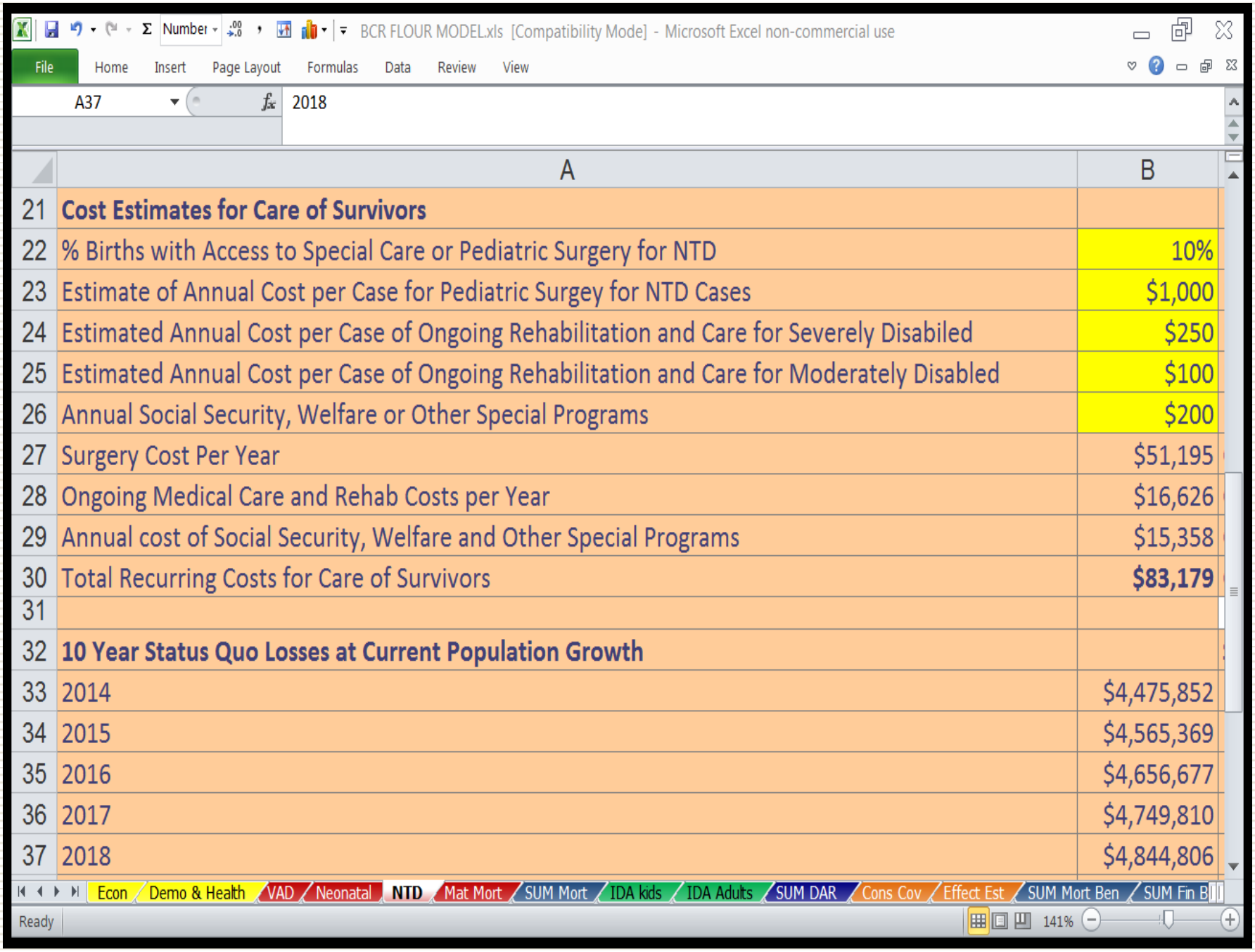




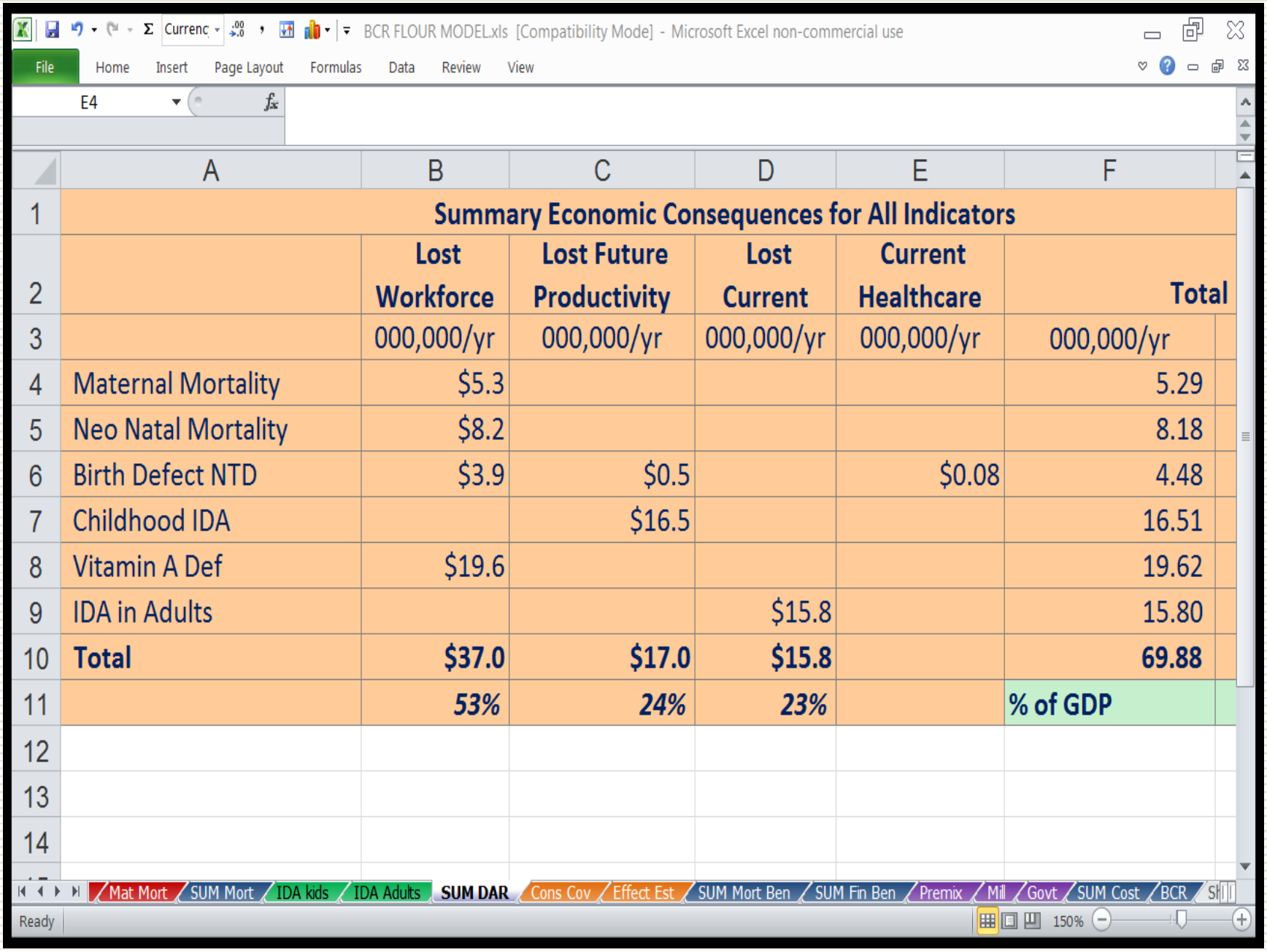
	A	B	C	D	E
1	**Current Adult Productivity Loss from IDA**	**Women**	**Men**	**Totals**	
2	**Health Data Background**				
3	Iron Deficiency Anemia	10.3%	2.6%		Calculated
4	**Demographic and Labor Data Background**				
5	Working Age Adults	2,669,791	3,162,018	5,831,809	National Data and Assumption
6	Labor Participation Rate (Male and Female)	66.1%	88.4%		National Data and Assumption
7	Employed Population	1,764,732	2,795,224	4,559,956	Calculated
8	Manual Labor Share	88.5%	88.5%		National Data and Assumption
9	Working in Manual Labor	1,561,788	2,473,774	4,035,561	Calculated
10	Heavy Manual Labor Share of Overall Manual Labo	15%	15%		Assumption used in Horton et al, 2
11	Workers in Heavy Manual Labor	234,268	371,066	605,334	Calculated
12	Average Wage Sector	**$1,005**	**$1,117**		Calculated
13	**Economic Productivity Loss Projections**				
14	Workers with IDA in Manual Labor	160,519	63,563	224,083	Calculated
15	Productivity Deficit	5%	5%		From Horton et al 2003
16	Manual Labor Loss Subtotal	$8,066,446	$3,549,096	$11,615,542	Calculated
17	Workers with IDA in Heavy Manual Labor	24,077.92	9,534.48	33,612	Calculated
18	Additional Deficit	12%	12%		From Horton et al 2003
19	Additional Loss for Heavy Manual Labor Subtotal	$2,903,921	$1,277,674	$4,181,595	Calculated
20	Grand Total	**$10,970,367**	**$4,826,770**	**$15,797,137**	Calculated

Pathway #4: Excess Health Care Costs





	A	B
21	**Cost Estimates for Care of Survivors**	
22	% Births with Access to Special Care or Pediatric Surgery for NTD	10%
23	Estimate of Annual Cost per Case for Pediatric Surgey for NTD Cases	$1,000
24	Estimated Annual Cost per Case of Ongoing Rehabilitation and Care for Severely Disabiled	$250
25	Estimated Annual Cost per Case of Ongoing Rehabilitation and Care for Moderately Disabled	$100
26	Annual Social Security, Welfare or Other Special Programs	$200
27	Surgery Cost Per Year	$51,195
28	Ongoing Medical Care and Rehab Costs per Year	$16,626
29	Annual cost of Social Security, Welfare and Other Special Programs	$15,358
30	Total Recurring Costs for Care of Survivors	**$83,179**
31		
32	**10 Year Status Quo Losses at Current Population Growth**	
33	2014	$4,475,852
34	2015	$4,565,369
35	2016	$4,656,677
36	2017	$4,749,810
37	2018	$4,844,806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Summary Economic Consequences for All Indicators
Lost Workforce
Lost Future Productivity
Lost Current
Current Healthcare
Total
000,000/yr
Maternal Mortality $5.3 5.29
Neo Natal Mortality $8.2 8.18
Birth Defect NTD $3.9 $0.5 $0.08 4.48
Childhood IDA $16.5 16.51
Vitamin A Def $19.6 19.62
IDA in Adults $15.8 15.80
Total $37.0 $17.0 $15.8 69.88
53% 24% 23% % of GDP
Mat Mort
SUM Mort
IDA kids
IDA Adults
SUM DAR
Cons Cov
Effect Est
SUM Mort Ben
SUM Fin Ben
Premix
Mill
Govt
SUM Cost
BCR
Ready
150%

Team Work Session 1: 3-4 Hours

- 1A: Review National Data Inputs (Yellow)
- 1B: Review Mortality Projections (Red)
- Review Lost Productivity Projections (Green)
- Consider Results:
  - Discuss work to be done as follow-up
  - How to use in communications and advocacy.

Session 1A: Yellow Worksheets Background Information 30 Minutes

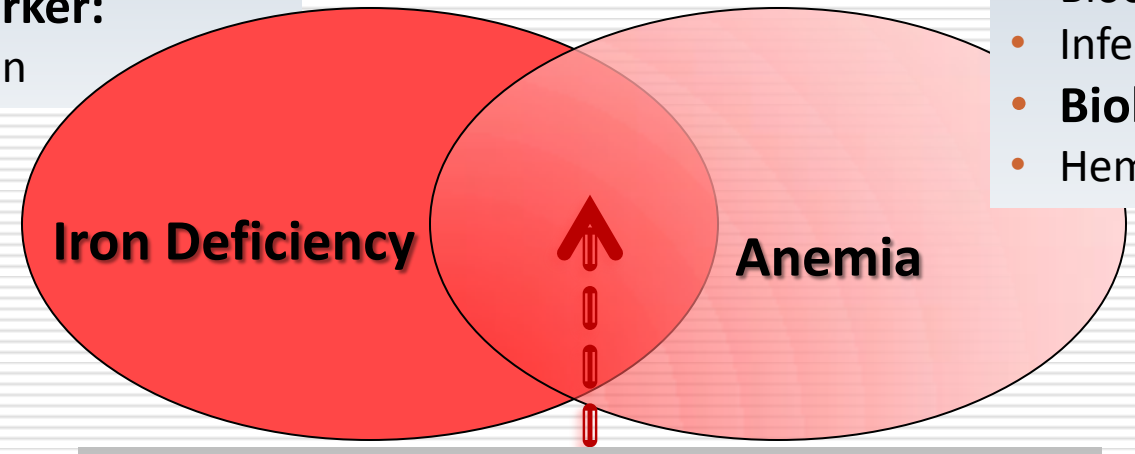
- Demo-Health and Econ Data Sheet
  - Discuss and Fill In Data
  - If no data: discuss & agree on educated assumption
    - A placeholder until you get better data
  - Review assumption cells and calculations (no highlight)
- IDA Issues
  - Review Lancet Table Link (DEMO Lines 44-51)
  - Review " region" from web table.
- Average Over-all Wage Earnings (ECON Line 19)
  - Fill in you best estimate for line 19 OR
  - Review logic of Model's Assumption (lines 16-19)

Flour Fortification Protection for Iron Deficiency & Iron Deficiency Anemia

Causes of Iron Deficiency:
- Deficient iron intake
- Excessive iron loss

Biological marker:
- Serum ferritin

Causes of Anemia:
- Deficiency of iron, folate, vitamin A & B12
- Blood Disorders
- Infections
- **Biological marker:**
- Hemoglobin



Causes of Iron Deficiency Anemia:
- Iron deficiency

Biological marker:
- Serum ferritin & hemoglobin

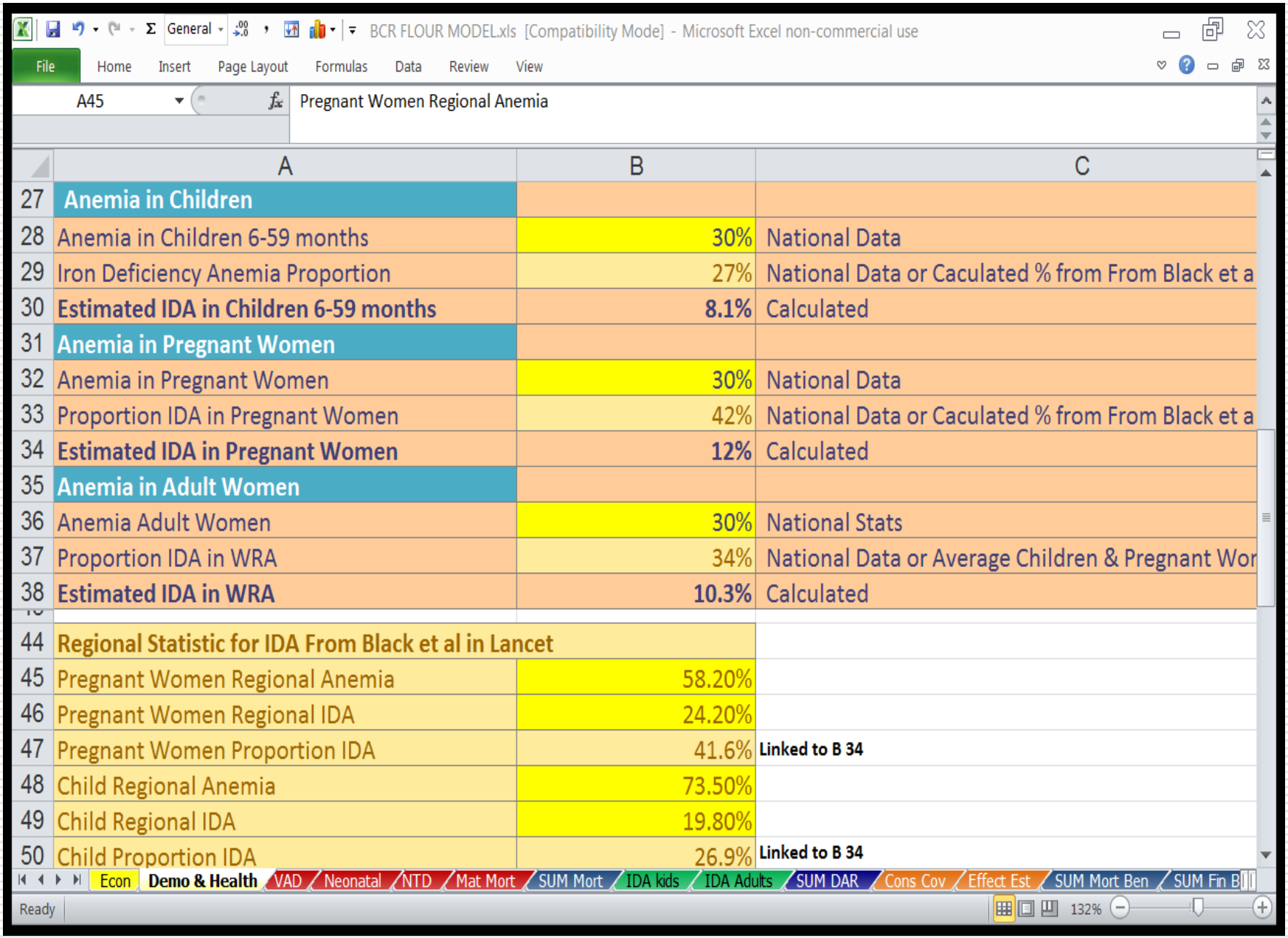
Courtesy of H. Pachon, FFI Zimmermann 2008; Gleason 2007; Scott 2007; West 2007; Cameron 2011

Lancet Web Table: Anemia and Iron Deficiency Anemia in Africa Regions

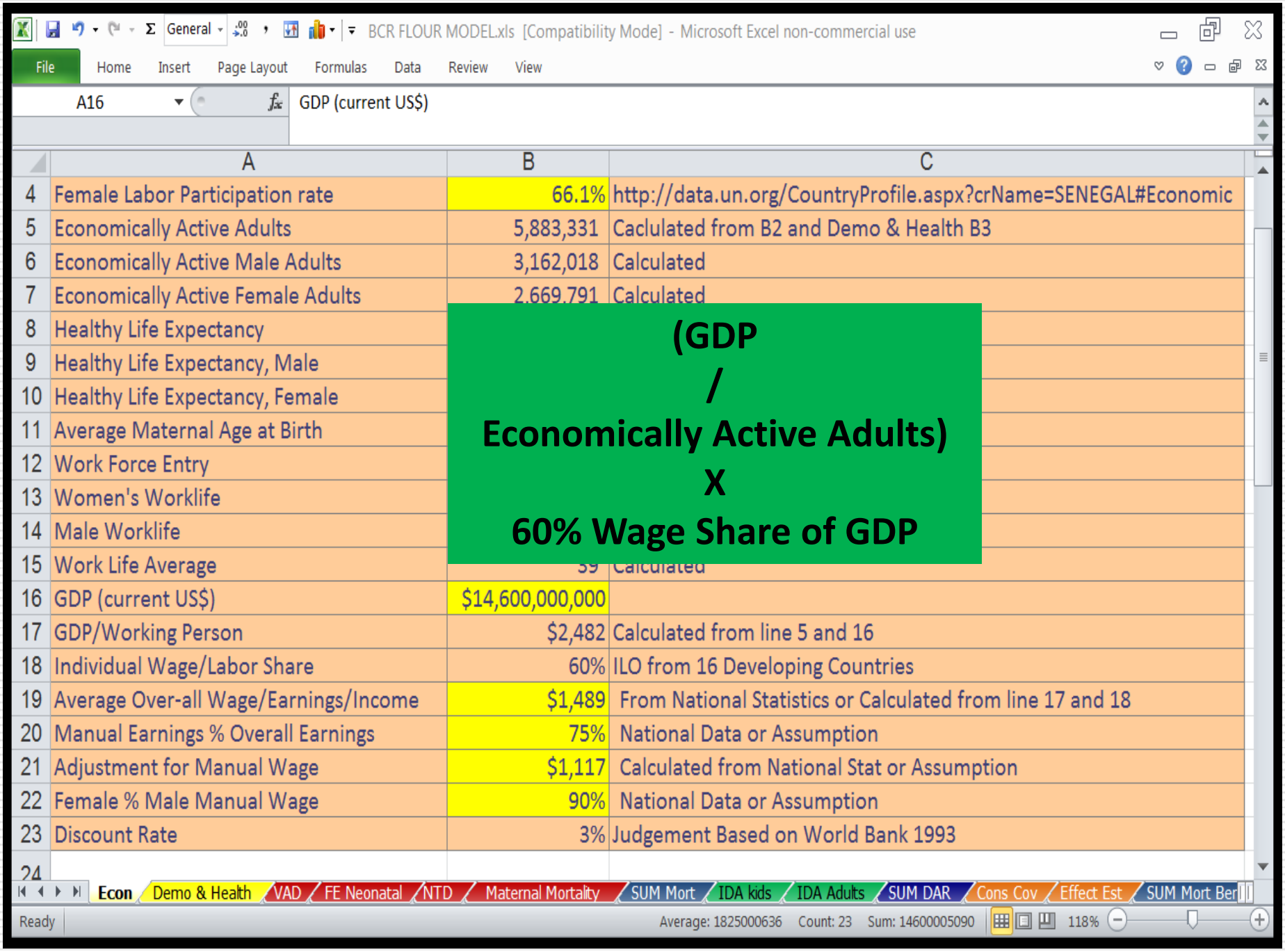
Web Table 3: Prevalence of total and severe iron deficiency anemia (IDA) in children under 5 years of age and pregnant women

UN regions and sub-regions	Anemia prevalence in under-5 Children (%)				Anemia prevalence in pregnant women (%)			
	Total anemia (95% CI)	IDA total anemia (95% CI)	Severe anemia (95% CI)	IDA severe anemia (95% CI)	Total anemia (95% CI)	IDA total anemia (95% CI)	Severe anemia (95% CI)	IDA severe anemia (95% CI)
Africa	60·2 (57·6, 63·1)	20·2 (18·6, 2	3·3	1·9			1·4 (0·9, 1·8)	0·8 (0·5, 1·2)
Eastern Africa	54·3 (51·3, 57·3)	20·6 (19·0, 2					1·2 (0·9, 1·5)	0·7 (0·5, 0·9)
Middle Africa	64·9 (57·9, 71·7)	21·0 (17·8, 2					1·6 (0·7, 2·5)	1·0 (0·5, 1·6)
Northern Africa	44·7 (32·0, 57·7)	19·2 (12·3, 2					0·5 (0·0, 1·0)	0·3 (0·0, 0·7)
Southern Africa	41·6 (23·2, 61·1)	20·3 (9·7, 32					0·4 (0·0, 0·8)	0·3 (0·0, 0·6)
Western Africa	73·5 (69·8, 76·9)	19·8 (17·6, 22·0)	4·1	2·5	(48·1, 67·6)	(19·8, 28·6)	1·8 (0·4, 3·1)	1·2 (0·3, 2·1)

IDA%
/
Anemia %
=
% Anemia from IDA



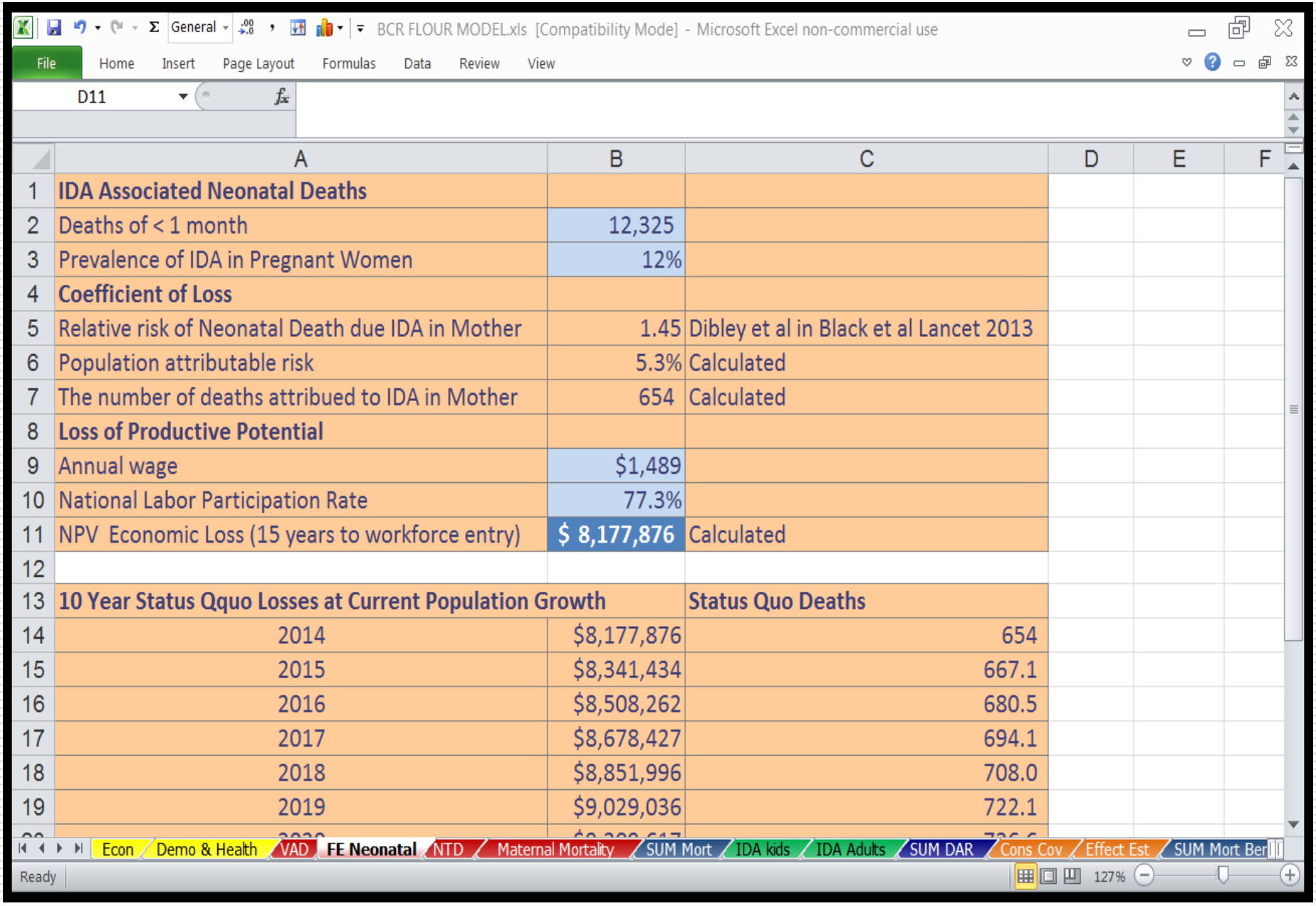
	A	B	C
27	**Anemia in Children**		
28	Anemia in Children 6-59 months	30%	National Data
29	Iron Deficiency Anemia Proportion	27%	National Data or Caculated % from From Black et a
30	**Estimated IDA in Children 6-59 months**	**8.1%**	Calculated
31	**Anemia in Pregnant Women**		
32	Anemia in Pregnant Women	30%	National Data
33	Proportion IDA in Pregnant Women	42%	National Data or Caculated % from From Black et a
34	**Estimated IDA in Pregnant Women**	**12%**	Calculated
35	**Anemia in Adult Women**		
36	Anemia Adult Women	30%	National Stats
37	Proportion IDA in WRA	34%	National Data or Average Children & Pregnant Wor
38	**Estimated IDA in WRA**	**10.3%**	Calculated
44	**Regional Statistic for IDA From Black et al in Lancet**		
45	Pregnant Women Regional Anemia	58.20%	
46	Pregnant Women Regional IDA	24.20%	
47	Pregnant Women Proportion IDA	41.6%	**Linked to B 34**
48	Child Regional Anemia	73.50%	
49	Child Regional IDA	19.80%	
50	Child Proportion IDA	26.9%	**Linked to B 34**



	A	B	C
4	Female Labor Participation rate	66.1%	http://data.un.org/CountryProfile.aspx?crName=SENEGAL#Economic
5	Economically Active Adults	5,883,331	Caclulated from B2 and Demo & Health B3
6	Economically Active Male Adults	3,162,018	Calculated
7	Economically Active Female Adults	2,669,791	Calculated
8	Healthy Life Expectancy		
9	Healthy Life Expectancy, Male		
10	Healthy Life Expectancy, Female		
11	Average Maternal Age at Birth		
12	Work Force Entry		
13	Women's Worklife		
14	Male Worklife		
15	Work Life Average	39	Calculated
16	GDP (current US$)	$14,600,000,000	
17	GDP/Working Person	$2,482	Calculated from line 5 and 16
18	Individual Wage/Labor Share	60%	ILO from 16 Developing Countries
19	Average Over-all Wage/Earnings/Income	$1,489	From National Statistics or Calculated from line 17 and 18
20	Manual Earnings % Overall Earnings	75%	National Data or Assumption
21	Adjustment for Manual Wage	$1,117	Calculated from National Stat or Assumption
22	Female % Male Manual Wage	90%	National Data or Assumption
23	Discount Rate	3%	Judgement Based on World Bank 1993
24			

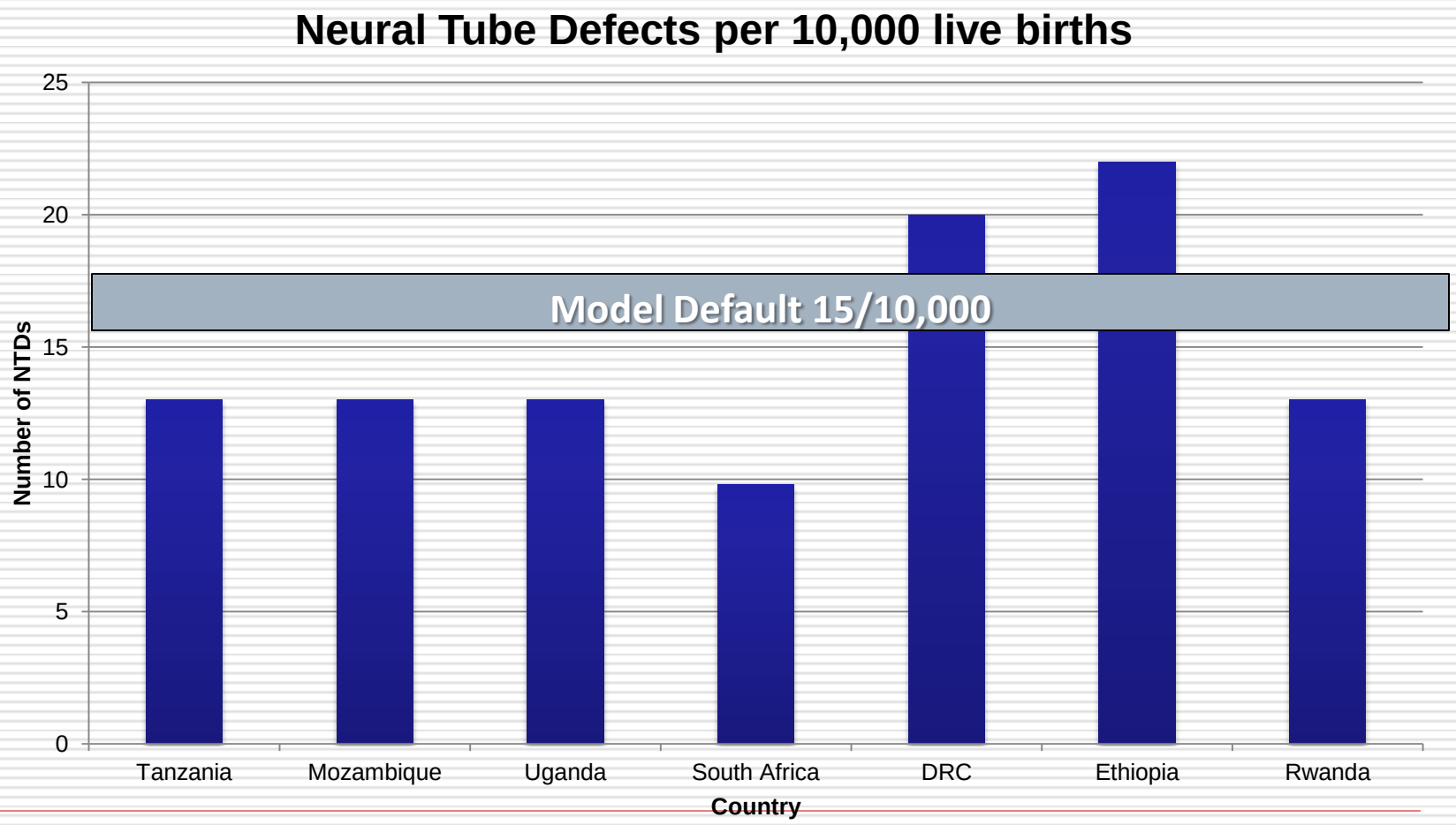
Session 1B: Mortality: (4 Red Worksheets) 1 hour

- For Each Red Worksheet: Consider & Explore Results:
  - Review logic in the sequence of cells:
    - Reasonable? Credible?
    - Sensitivity Analysis: Consider impact of light blue cells:
  - Issue: NTD Worksheet
    - Review and correct assumptions made in yellow cells
    - If no data, use a placeholder until you get better data
  - Issue: Maternal Mortality Worksheet
    - RR Based on Hb distribution not simple prevalence
- Review Blue Worksheet: SUM Mort
- Consider & Discuss:
  - How would you communicate these results?
    - Balance of mortality and economics



	A	B	C	D	E	F
1	**IDA Associated Neonatal Deaths**					
2	Deaths of < 1 month	12,325				
3	Prevalence of IDA in Pregnant Women	12%				
4	**Coefficient of Loss**					
5	Relative risk of Neonatal Death due IDA in Mother	1.45	Dibley et al in Black et al Lancet 2013			
6	Population attributable risk	5.3%	Calculated			
7	The number of deaths attribued to IDA in Mother	654	Calculated			
8	**Loss of Productive Potential**					
9	Annual wage	$1,489				
10	National Labor Participation Rate	77.3%				
11	NPV Economic Loss (15 years to workforce entry)	**$ 8,177,876**	Calculated			
12						
13	**10 Year Status Qquo Losses at Current Population Growth**		**Status Quo Deaths**			
14	2014	$8,177,876	654			
15	2015	$8,341,434	667.1			
16	2016	$8,508,262	680.5			
17	2017	$8,678,427	694.1			
18	2018	$8,851,996	708.0			
19	2019	$9,029,036	722.1			

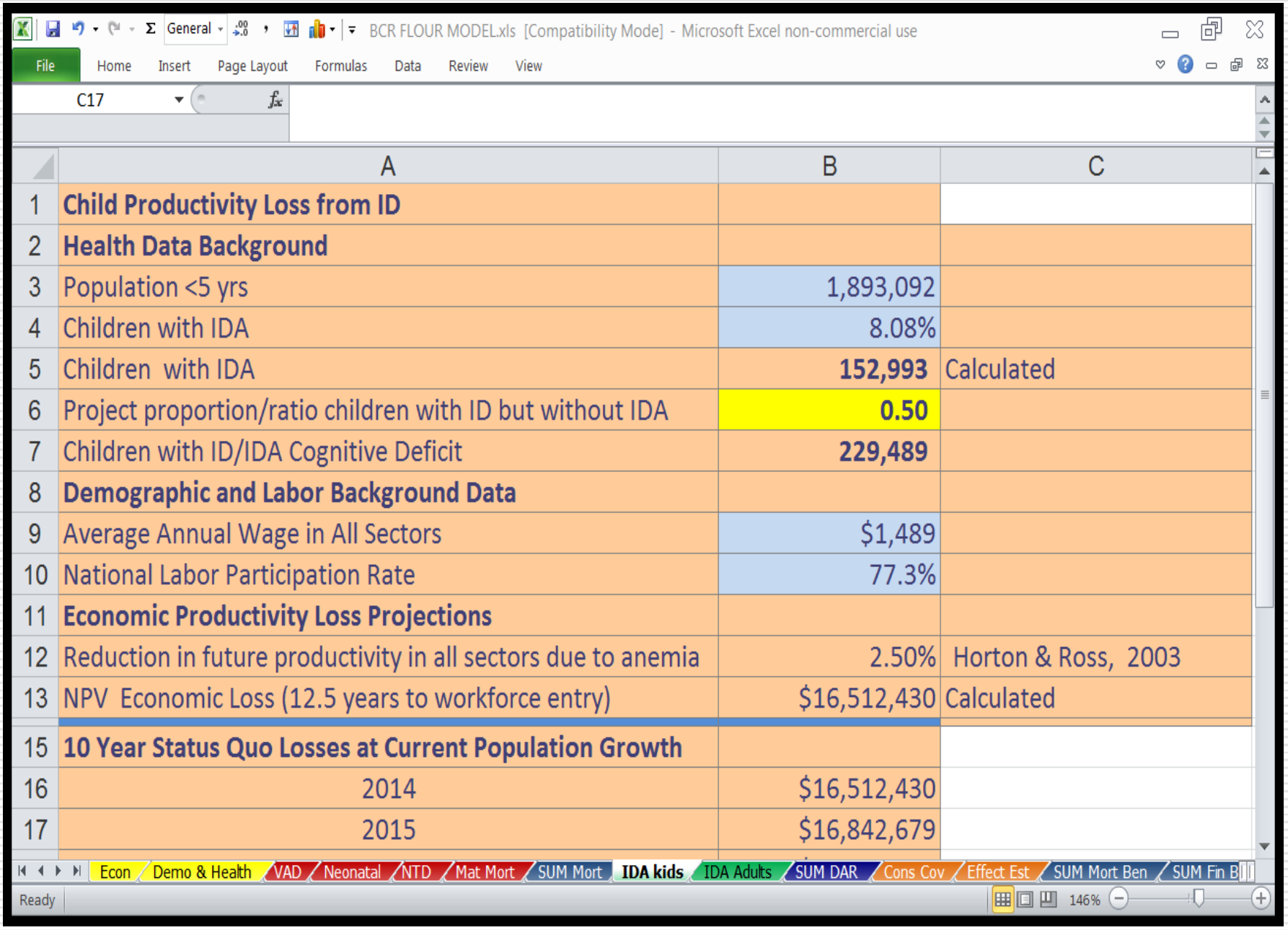
Incidence of Neural Tube Defects



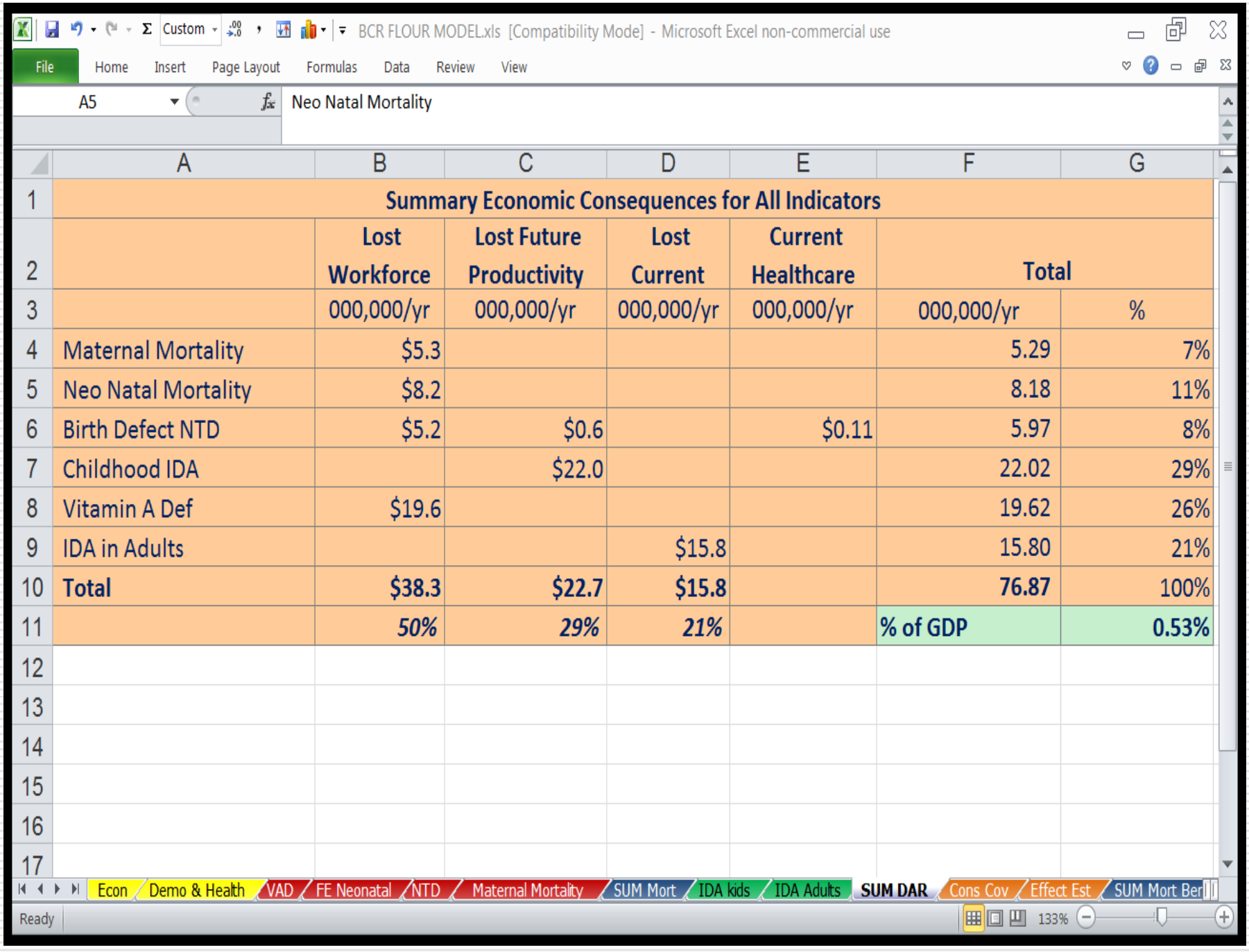
March of Dimes estimates for all countries except South Africa. South Africa data from 2008 literature.

Session 1C: Future and Current Productivity (2 Green Tabs) 1 hour

- Worksheet: IDA Kids
  - Discuss and agree on Yellow Cells
    - Case Iron Deficiency as well as IDA
  - Review logic in the sequence of cells:
    - Reasonable? Credible? Agree?
- Worksheet: IDA Adults
  - Discuss and agree on Yellow Cells
    - Line 8, Manual Labor Share: (% Agriculture + %Industry)
    - Line 9, Heavy Manual Labor: Make credible estimate



	A	B	C
1	**Child Productivity Loss from ID**		
2	**Health Data Background**		
3	Population <5 yrs	1,893,092	
4	Children with IDA	8.08%	
5	Children with IDA	**152,993**	Calculated
6	Project proportion/ratio children with ID but without IDA	**0.50**	
7	Children with ID/IDA Cognitive Deficit	**229,489**	
8	**Demographic and Labor Background Data**		
9	Average Annual Wage in All Sectors	$1,489	
10	National Labor Participation Rate	77.3%	
11	**Economic Productivity Loss Projections**		
12	Reduction in future productivity in all sectors due to anemia	2.50%	Horton & Ross, 2003
13	NPV Economic Loss (12.5 years to workforce entry)	$16,512,430	Calculated
15	**10 Year Status Quo Losses at Current Population Growth**		
16	2014	$16,512,430	
17	2015	$16,842,679	


BCR FLOUR MODEL.xls [Compatibility Mode] - Microsoft Excel non-commercial use
File
Home
Insert
Page Layout
Formulas
Data
Review
View
A5
Neo Natal Mortality
Summary Economic Consequences for All Indicators
Lost Workforce
Lost Future Productivity
Lost Current
Current Healthcare
Total
000,000/yr
000,000/yr
000,000/yr
000,000/yr
000,000/yr
%
Maternal Mortality $5.3 5.29 7%
Neo Natal Mortality $8.2 8.18 11%
Birth Defect NTD $5.2 $0.6 $0.11 5.97 8%
Childhood IDA $22.0 22.02 29%
Vitamin A Def $19.6 19.62 26%
IDA in Adults $15.8 15.80 21%
Total $38.3 $22.7 $15.8 76.87 100%
50% 29% 21%
% of GDP 0.53%
Econ
Demo & Health
VAD
FE Neonatal
NTD
Maternal Mortality
SUM Mort
IDA kids
IDA Adults
SUM DAR
Cons Cov
Effect Est
SUM Mort Ber
Ready
133%

Session 1D: Consider & Discuss 1 hour

- How would you communicate these results?
  - Balance of mortality, human impacts and economics
- Will policymakers and colleagues consider the outputs credible?
  - What can you do to make them more credible?
- How would you frame & present these results?
  - First part of Thursday's Presentation .
- Continue to consider these projections during the week.