

Health

Improving Health Outcomes for the Poor Around the World



PHOTO: WILL BOASE

Lack of income, inadequate health services, and poor infrastructure contribute to poor global health. With more than 100 health-related studies, IPA generates evidence on effective ways to improve access to quality health services and products, and ensure people use them.

In recent years, great progress has been made in global health. Rates of chronic hunger and child mortality are half what they were two decades ago. However, at the same time, progress has been slow in other areas, such as maternal mortality, access to improved sanitation, and the incidence of malaria. To determine how best to address these challenges and many others, IPA partners with health ministries, civil society organizations, and NGOs working in the sector to discover and encourage the use of effective approaches for improving health systems and programs. Among its findings, this research has identified cost-effective methods to reduce the incidence of diarrhea in children under five years of age, examined the role of subsidies in improving access to preventive health, and ways to recruit effective community health workers.

Key Health Policy Lessons

1. Reducing and eliminating costs substantially increases access to preventive health products and services.
2. Nudges and small incentives can increase take-up of health products.

Policy Impact: Free Malaria Bednets

In 2007, IPA affiliates Jessica Cohen and Pascaline Dupas conducted a study showing that in rural Kenya, charging even small prices to pregnant women for insecticide treated bednets (ITNs) significantly reduced take up. In 2009, the British government cited the study in calling for the abolition of user fees for health products and services in poor countries. Other governments and many organizations have also reconsidered their policies to charge for health services in recent years, opting instead to distribute ITNs and other health products free of charge. Read more » www.poverty-action.org/impact/free-malaria-bednets

Key Findings

IPA has worked with researchers to create evidence from more than 100 health studies. Explore a few of our key findings below and find all of our health findings at www.poverty-action.org/health

Advertising career incentives attracted community health workers who performed better on the job, leading to health improvements

In Zambia, advertising career incentives rather than social incentives attracted workers who performed better on the job. This was matched by an increase in institutional deliveries, breastfeeding, immunizations, deworming, and a 25 percent reduction in the share of underweight children. The Zambian Ministry of Health has begun using career incentives in its nationwide recruitment of community health workers. *Read more » www.poverty-action.org/impact/evidence-based-community-healthcare-zambia*



Regular immunization camps and small incentives boosted vaccination rates in India

In India, offering families in resource-poor settings small, non-financial incentives in addition to reliable access to services through regular immunization camps was a cost-effective method of increasing uptake of vaccinations. *Read more » www.poverty-action.org/study/improving-immunization-rates-through-regular-camps-and-incentives-india*

Combining latrine subsidies with community motivation bolstered improved sanitation coverage in Bangladesh

In Bangladesh, a community-motivation model that has been used in over 60 countries to increase use of hygienic latrines had no effect, yet latrine

coverage increased substantially when that model is combined with subsidies for hygienic latrine construction targeted to the poor. *Read more » www.poverty-action.org/study/bolstering-coverage-improved-sanitation-bangladesh*

Chlorine dispensers at water sources increased access to safe water in Kenya

In Kenya, a chlorination system at the point of water collection, in combination with encouragement from community promoters, dramatically increased rates of water chlorination. In response, IPA launched and incubated a program called Dispensers for Safe Water. The program is now part of Evidence Action, and today provides on-going access to chlorine to over 3 million people in Kenya, Malawi, and Uganda today, of which an estimated

1.3 million use chlorine to treat their water. *Read more » www.poverty-action.org/impact/chlorine-dispensers-safe-water*

Removing fees for children's healthcare increased timely use of clinic resources in Mali

In Mali, families that received subsidized care from the NGO Mali Health were much more likely to bring their child to a clinic on days when they needed to see a doctor. The probability that families that received subsidies would seek care on a given illness day increased by 250 percent over the comparison group, and did not lead to notable overuse of clinic resources. *Read more » www.poverty-action.org/study/role-fees-and-information-healthcare-decisions-mali*

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Innovations for Poverty Action (IPA) is a research and policy non-profit that discovers and promotes effective solutions to global poverty problems. IPA designs, rigorously evaluates, and refines these solutions and their applications together with researchers and local decision-makers, ensuring that evidence is used to improve the lives of the world's poor. Our well-established partnerships in the countries where we work, and a strong understanding of local contexts, enable us to conduct high-quality research. This research has informed hundreds of successful programs that now impact millions of individuals worldwide.

