

Ecosystem services to alleviate iodine, selenium and zinc malnutrition in sub-Saharan Africa

# Health economic analyses

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#### Structure

- Ecosystem services
- Nutritional deficiencies
- Health outcomes
- Comparison of outcomes
- Global dimensions
- Socio-economic impacts
- Impact of interventions
- Cost-effectiveness of interventions

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# Ecosystem services and valuations

- Soil formation (incl. release of minerals from rock)
- Nutrient cycling (incl. trace elements)
- Provision of renewable resources (incl. food)
- Valuation according to market values
- Valuation based on indirect market values (e.g. replacement cost, travel cost, hedonic pricing)
- Contingent valuation
  (e.g. hypothetical questions, willingness to pay)



+ vitamin deficiencies = multiple deficiencies

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## Health outcomes

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- Maternal mortality, cognitive impairment, fatigue, child mortality, pneumonia, diarrhoea, stunting, goitre, cretinism, heart diseases, etc.
- Health outcomes of mineral deficiencies not uniform
- They affect different target groups
- They impose different levels of suffering
- Magnitudes of some outcomes are intuitive, but impact of others difficult to grasp

# Burden of disease

- The deficiency that affects most people (incidence) is not necessarily the one representing the biggest overall health loss
- ▶ How to measure loss of health consistently?
- World Bank and WHO introduced
  "disability-adjusted life years" (DALYs)
- Single index taking into account the <u>duration</u> and <u>severity</u> of each health outcome

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# Burden of disease

- Severity is captured through a "disability-weight" ranging from 0% (no health loss) to 100% (death)
- No measurement of the intrinsic value of life but measurement of loss of functioning
- Loss is expressed in the number of DALYs
- Adding up DALYs gives the "burden of disease"
  - o Premature death is counted in "Years of Life Lost" (YLL)
  - o Morbidity in "Years Lived with Disability" (YLD)

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# Burden of disease

- Burden = DALYs<sub>lost</sub> = YLL + YLD<sub>weighted</sub>
- More formally:

$$DALYs_{tost} = \sum_{j} T_{j} M_{ij} \left( \frac{1 - e^{-rL_{j}}}{r} \right) + \sum_{i} \sum_{j} T_{j} I_{ij} D_{ij} \left( \frac{1 - e^{-rd_{ij}}}{r} \right)$$

- $T_i$  = total number of people in target group j
- $M_i$  = mortality rate associated with the condition in target group j
- $L_i$  = average remaining life expectancy for target group j
- $I_{ii}$  = incidence rate of condition *i* in target group *j*
- $D_{ii}$  = disability weight for condition *i* in target group *j*
- $d_{ii}$  = duration of the condition *i* in target group *j*
- *r* = discount rate for future life years

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#### Socio-economic impacts

- Mineral deficiencies also affect cognitive abilities, hence they even reduce *future* productivity
- Babies of malnourished mothers are more sickly later on in life, which again affects future productivity
- Fogel (2004): 30% of UK's per capita income growth over the last 200 years due to better nutrition
- Other estimates indicate annual losses of 2-5% of GDP due to micronutrient deficiencies
- Farther reaching effects (MDGs: education, gender, ...)

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#### Impact of interventions

- Different micronutrient interventions are available
- Calculating their impact in the DALYs framework:

$$DALYs_{lost} = \sum_{j} T_{j} M_{ij} \left( \frac{1 - e^{-rL_{j}}}{r} \right) + \sum_{i} \sum_{j} T_{j} I_{ij} D_{ij} \left( \frac{1 - e^{-rd_{ij}}}{r} \right)$$

How to get from fertilisers to incidence rates?

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Poor

diets



## Cost-effectiveness of interventions

- Impact alone is a bad guide for policy making!
- Alternatives may use resources more efficiently
- If they save more DALYs with given funds they give "more bang for the buck"
- Or they may save as many DALYs but use less funds, thus leaving resources for other interventions
- Implementing the most cost-effective interventions first ensures the biggest overall public health gain

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#### Impact of interventions

- Impact of fertilisation = DALYs lost in status quo *minus* DALYs lost in a "with fertilisation" scenario
- Impact can be expressed in indicators like
  - percent reduction of the burden of mineral deficiencies
  - o number of DALYs saved per 1m population
- The direct benefit of fertilisation consists in the averted health loss (i.e. the DALYs saved)

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# Cost-effectiveness of interventions

- Impact (effectiveness) can be quantified with DALYs
- For the costs all the resources used to achieve the impact have to be expressed in monetary terms
  - o start-up costs (new formula and production process)
  - o share of inputs (incl. labour and depreciation)
  - o overheads, monitoring, marketing, etc.
  - o subsidies or price premiums
  - o etc.

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# Cost-effectiveness of interventions

- Total costs and DALYs saved can be juxtaposed
- The result is a metric for cost-effectiveness: "Dollars per DALY"
- The more it costs to save a DALY, the less favourable the intervention from an economic point of view
- This metric allows to compare and rank different interventions in the field of public health and beyond

# Cost-effectiveness of interventions

- Biofortification (BF) of rice and wheat in India
  - *Fe* = 20-60% lower burden (1-2m DALYs saved), 50¢ to \$5.40 per DALY saved
  - *Zn* = 20-50% lower burden (0.5-1.5m DALYs saved), 70¢ to \$7.30 per DALY saved
- World Bank threshold for cost-effectiveness: \$200 per DALY saved
- Others use a country's per capita income or proxies like \$1,000 per DALY saved

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## Questions

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- Coverage and targeting of fertiliser?
- Consumption of fertilised crops by target group?
- Link between mineral fertilisation, crop mineral content and human mineral intake?
- Cost of the fertiliser? Timeframe?
- All data and statistics available for calculation?



# Thank you very much for your attention!

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