

2020 ANNUAL REPORT



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A WORD FROM THE CO-FOUNDERS

Dear friends and supporters of New Incentives,

We are excited to present this Annual Report, which highlights our work over the past year and recaps the last 5 years of New Incentives, showcasing how we got to where we are today.

With more than 170 committed staff members working together across 7 countries, New Incentives marked an important milestone this year by surpassing its 1,000,000th cash disbursement in North West Nigeria. As COVID-19 spread throughout the region, we demonstrated our ability to take fast action, aligning our COVID-19 response with guidelines provided by the Government of Nigeria and making substantial changes to our operating protocols in order to minimize risks. This allowed us to reach more than 70,000 infants during the pandemic.

Despite the challenges encountered throughout the year, 2020 has been a successful one for New Incentives. The randomized control trial evaluation of our program was concluded, and the result showed a highly positive impact. This led to us being named a top charity by GiveWell, an organization that is widely recognized for their in-depth research in evaluating charities. This recognition represents an important achievement and milestone on our journey to scale up our operations dramatically to reach over half a million children in Nigeria over the next three years. We are driven by a desire to do as much good as we can – to maximize our impact and deliver the most good per charitable dollar.

Thank you to our supporters, our stakeholders, and most importantly, the communities we serve. We are immensely grateful to the more than 250,000 caregivers who have chosen to ensure their infants receive life-saving vaccinations. We are in this because of you.

Sincerely,



Srutha Janampalli

CEO



Pratyush Agarnal

COO

2020 AT A GLANCE



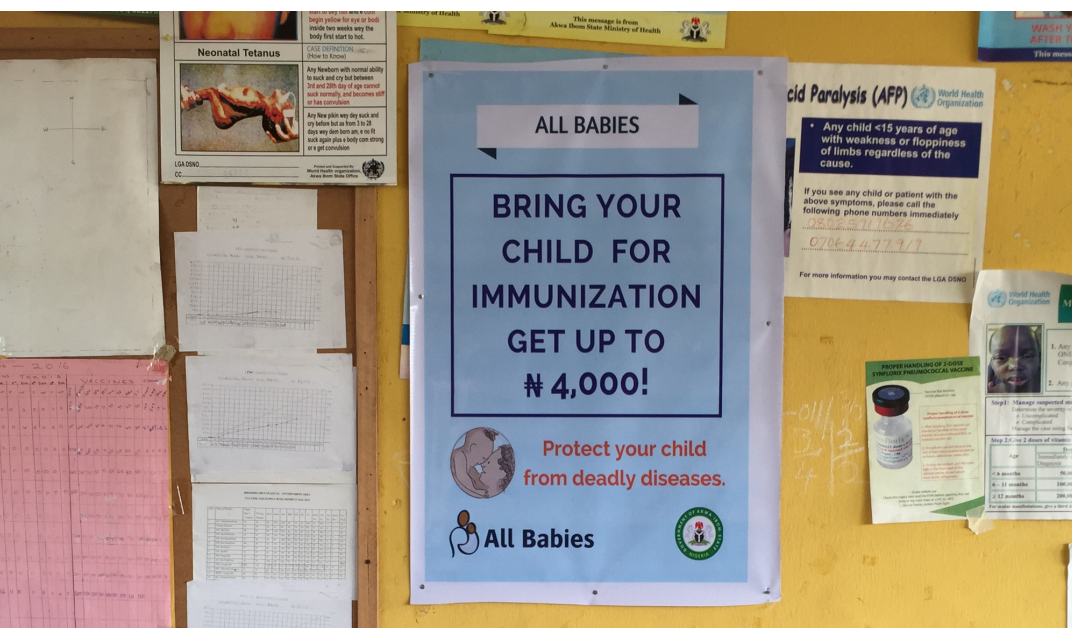
New Incentives enrolled **70,705** infants in the Conditional Cash Transfer for Routine Immunization Program and issued **323,837** cash transfers after verifying vaccinations.



The results of a recent randomized controlled trial showed that New Incentives' program has a substantial **positive impact** on vaccination coverage. This study confirmed that the conditional cash transfer program **doubled the percentage** of infants who were fully immunized, increasing vaccination coverage from roughly a quarter of all infants to just over half of all infants.



New Incentives' Conditional Cash Transfer for Routine Immunization Program was added to GiveWell's prestigious **top charity list**.



Program posters in clinics with the CCTs for Routine Immunization program.

WHO WE ARE

ABOUT

New Incentives is an international non-government organization that aims to reduce child mortality through cost-effective and evidence-based health interventions. In Nigeria, the organization operates as the All Babies Are Equal Initiative. New Incentives operates a conditional cash transfers for routine immunization (CCTs for RI) program in North West Nigeria that seeks to increase uptake of routine immunizations, raise public awareness of the benefits of vaccination, and reduce the frequency of vaccine stockouts. In 2020, New Incentives was named as one of only 9 top charities globally by GiveWell, a nonprofit dedicated to finding outstanding giving opportunities.

MISSION & VALUES

New Incentives' mission is to use evidence-based strategies to save lives in a manner that does the most good per dollar.

Evidence and Data-
Driven Decisions



Science, evidence, and data drive our program design and implementation.

Doing the Most
Good



We seek to maximize impact and continuously evaluate methods to deliver the most good per dollar donated.

Accountability



We build both digital and manual tracking and verification systems into everything we do and have a culture of critical thinking and self-assessment.

Transparency



We believe in honest and efficient communication with all stakeholders, and we ensure availability of relevant and reliable information about our work.

Do No Harm



In carrying out our actions, we are determined to do no harm and to preserve the best interests of the people we serve.

Inclusivity



We respect and value the diversity of all individuals and are committed to providing flexible, safe, and accessible services to all, free of barriers and discrimination.

OUR WORK

SAVING LIVES WITH CHILDHOOD VACCINES

Childhood vaccines prevent an estimated 2 to 3 million deaths every year. They are recognized as one of the most cost-effective child health interventions in low-income countries. Yet, an estimated 19.4 million infants around the world did not receive routine vaccinations in 2018. In Nigeria, 40% of under-five deaths are from vaccine-preventable diseases, and low immunisation rates are a significant contributor to its high under-five mortality rate (120 deaths per 1,000 live births).

The CCTs for RI program disburses cash incentives to caregivers conditional on infants receiving four vaccines: BCG (against tuberculosis), PENTA (against diphtheria, tetanus, whooping cough, hepatitis B, and Haemophilus influenzae type b), PCV (against pneumococcal disease), and MCV (against measles). These vaccinations are part of the routine schedule for infant immunizations in Nigeria and are provided at no cost to the caregiver through government-supported clinics.

WHERE WE OPERATE

New Incentives operates where it can have the biggest impact: rural Nigeria. The West African country is home to just 3% of the world's population, yet accounts for 13% of the world's mortality of children under five, the second highest rate in the world. According to the 2017 National Immunization Coverage Survey (NICS), the North West region has the lowest vaccination coverage rate in Nigeria, where 61% of children are not vaccinated, 31% are partially vaccinated, and only 8% are fully vaccinated. To create the best opportunity for change, New Incentives' CCTs for RI program is implemented in 3 states in rural North West Nigeria: Katsina, Zamfara, and Jigawa. New Incentives works closely with the governments of these states and currently operates in clinics that provide routine immunization.

CONDITIONAL CASH TRANSFERS TO IMPROVE VACCINATION COVERAGE

What are conditional cash transfer programmes (CCTs)? CCTs give money to low-income households in return for fulfilling specific behavioural conditions. CCTs have been successful at improving a wide range of health-related outcomes, including regular visits to a health care facility by pregnant women, children's school attendance, and importantly, improved vaccination rates. The conditions of the CCT program, such as achieving full vaccination for their infants, provide caregivers with a direct cash transfer for abiding by this condition. CCTs have a direct effect on poverty by providing an immediate additional income for the poor. Recipients can make their own choices as to how to spend or save this money, further incentivizing caregivers to take time out of their day to come to the health clinic or outreach location. CCTs have the most benefit in areas where the baseline rate of vaccination is low, making the potential impact of the CCT program in North West Nigeria especially promising.

HOW DOES IT WORK?

Conditional Cash Transfers



NI-ABAE advertises locally with town criers, advertising cards, and posters



On each RI day, NI-ABAE staff encourage the clinic staff to procure more vaccines if stock is low



Caregivers bring their infants to the clinic or to outreach sites according to Nigeria's recommended immunization schedule

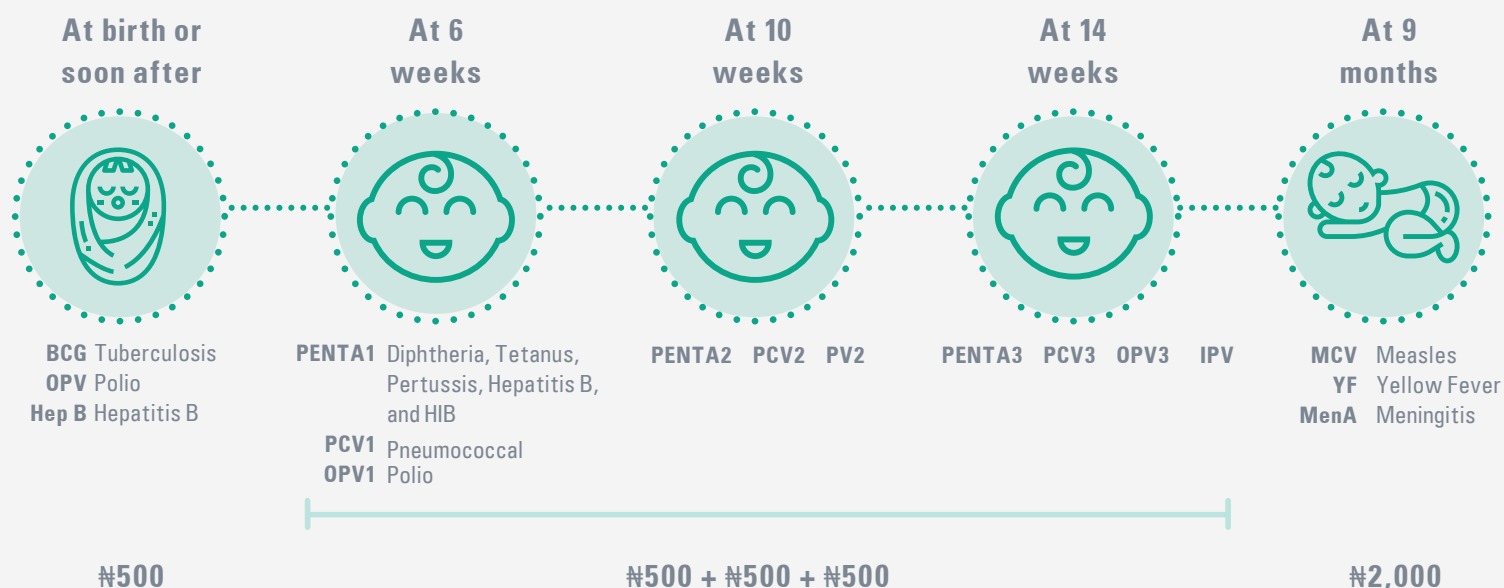


After immunization, NI-ABAE staff provide cash to those who meet the eligibility criteria

Caregivers who bring their infants to clinics for routine vaccines, which are provided through government clinics free of charge, can receive a total of US\$11 over the course of five clinic visits. New Incentives provides four CCTs of 500 Naira (~ US\$1.40) for each of the first four vaccine visits (from birth to 14 weeks), and one CCT of 2,000 Naira (US\$5.50) for the fifth visit (at 9 months). Different amounts per vaccination were tested to identify the most impactful incentive structure.

Incentives of approximately USD \$11 per infant can double the percentage of infants getting fully vaccinated (evidence from RCT).

Immunization schedule



Raising Public Awareness of the Benefits of Vaccination

New Incentives' awareness-raising activities aim to improve the demand for routine immunization by increasing awareness of the program itself and educating caregivers about immunization.

Activities include:



Awareness meetings in targeted communities where concerns about vaccinations are addressed and cards communicating the program and life-saving benefits of immunizations are distributed by NI staff and volunteers.



Directed outreach sessions within targeted settlements with existing low vaccination rates.



Mobilization of community members to increase program awareness and to track infants who are behind in their vaccination schedule. The objective of this mobilization is to encourage caregivers to complete the immunization schedule for their infant.



Announcements by "Town Criers" who are hired to inform caregivers about upcoming immunization days and outreach sessions.

Reducing the Frequency of Vaccine Stockouts

New Incentives' supply-side work targets vaccine supply at the local, zonal, and state levels for BCG, PENTA, PCV, OPV, Measles, and Yellow Fever vaccines. This work consists of collecting data on issues with the supply of vaccines and investigating and addressing the problems that are identified. Supply chain issues are identified via two main sources of data:

Clinic-level data

The day before a scheduled immunization day, a New Incentives' field officer calls partner clinic staff to check whether the clinic has vaccinations in stock for the following day. During each immunization day, field officers note the vaccine stock at the clinic.

Data at the apex clinic, zonal, and state levels:

Every two weeks, New Incentives staff "cold call" chain officers working at apex clinics (larger clinics that store vaccines for clinics with more limited storage capacity) and chain officers at the local government area, zonal, and state levels to collect information about vaccine stocks.

Based on the data collected, New Incentives staff identify problems with vaccine supply, such as stockouts, or low vaccine stocks. Furthermore, since clinics must submit reports detailing their utilization and supply needs to the local authorities, New Incentives staff can also identify when local authorities have not received the required documentation from clinics. New Incentives then informs relevant decision-makers about the problems identified and occasionally provides financial support to relieve bottlenecks (for instance, by paying for transport costs to deliver vaccines).



New Incentives

PROGRAM HISTORY

2017

Started implementing the CCT program in the North West states called **learning sites** to assess if the program is viable in the operating context of these target sites.

Received funds to operate the program as part of a **randomized controlled trial**, conducted by an independent research partner.

2019

Reached **100,000th** enrollment

Disbursed a total of nearly **400,000 CCTs**.

2016

After **learning** it did not have sufficient impact, we shifted focus from our previous intervention to routine childhood vaccinations.

Received a small GiveWell Incubation Grant to **pilot the Conditional Cash Transfers for Routine Immunization** program in Nigeria.

Started **collecting data** from clinics to understand childhood vaccination dropout rate.

Conducted pilot to test potential program design and incentive amounts.

2018

Grew to a team of **100+** in North West Nigeria to implement the CCT for RI program.

Rolled out program to **98** clinics in total.

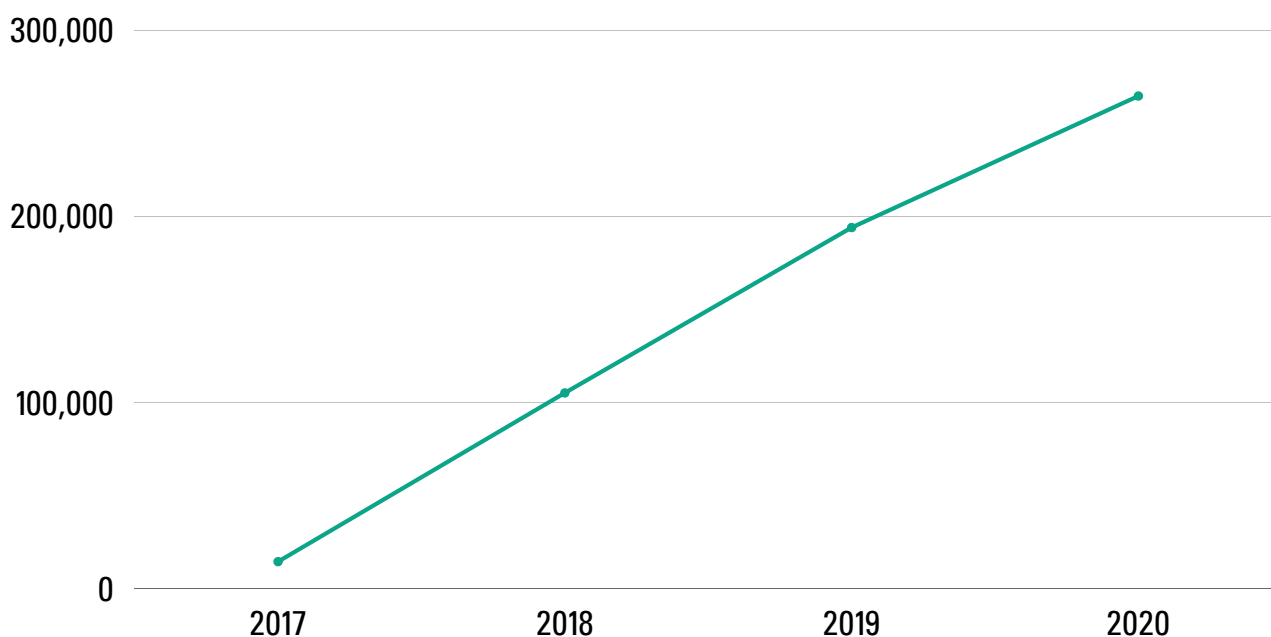
2020

Received the results of the **randomized controlled trial**, which demonstrated that the program has a substantial, positive impact on vaccination coverage.

Conditional Cash Transfer Program added to GiveWell's prestigious top charity list.

250,000th enrollment and **1,000,000th** cash transfer.

Total number of infants enrolled from 2017 until 2020 (cumulative)



Since the inception of the NI-ABAE initiative in 2017 until 2020, NI has enrolled 264,578 infants and has issued 1,032,379 cash transfers after verifying vaccinations.

Cumulative program enrollments, disbursements, and cash disbursed by State (2017-2020)

STATES	ENROLLMENTS	DISBURSEMENTS	CASH DISBURSED
KATSINA	96,062	372,404	N293,522,000
ZAMFARA	77,700	298,506	N239,336,500
JIGAWA	90,816	361,469	N278,760,500

ACHIEVEMENTS IN 2020

OPERATIONAL PERFORMANCE DATA

Program enrollments, disbursements, and cash disbursed by state in 2020

STATES	ENROLLMENTS	DISBURSEMENTS	CASH DISBURSED
KATSINA	23,879	111,848	N92,745,500
ZAMFARA	19,184	83,413	N70,761,500
JIGAWA	27,642	128,576	N105,289,000

In 2020, New Incentives enrolled 70,705 infants and issued 323,837 cash transfers after verifying vaccinations.

NEW INCENTIVES NAMED TOP CHARITY

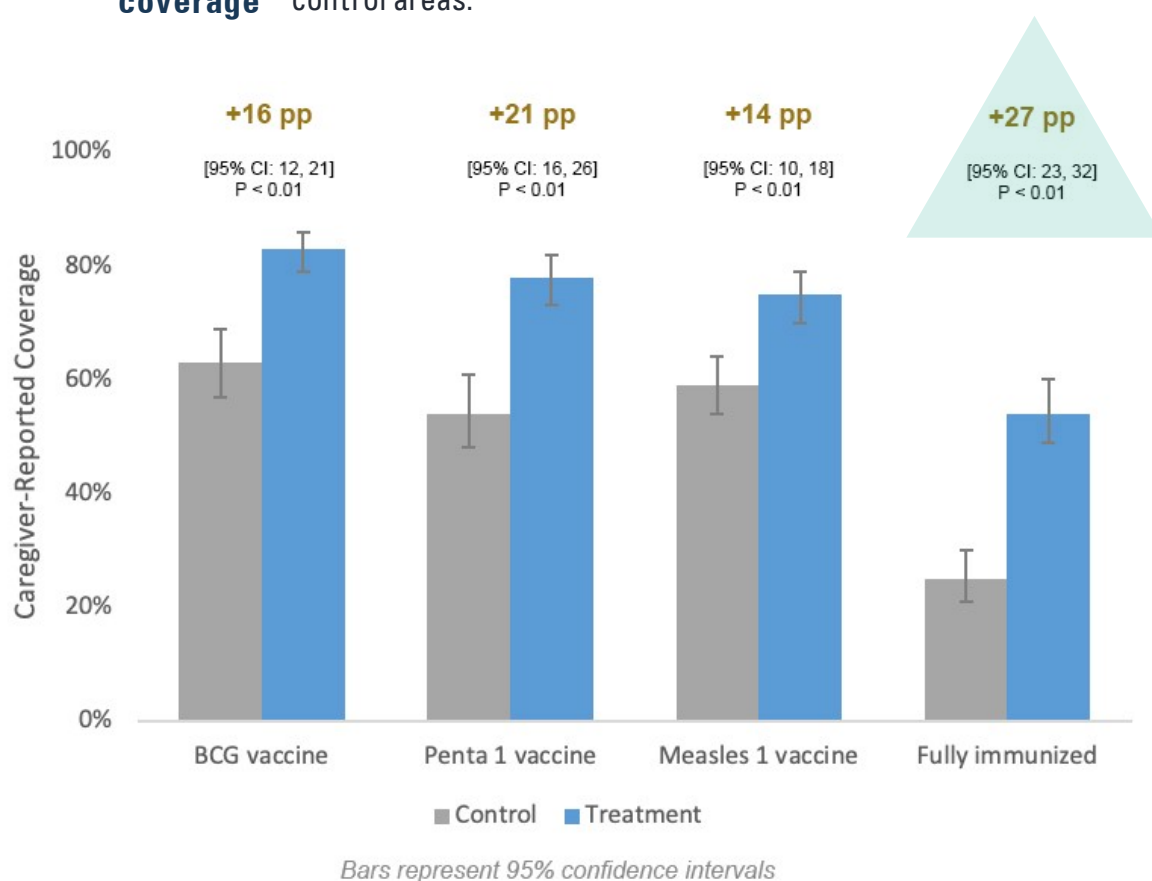
On November 19, 2020, New Incentives was named a new 2020 top charity by GiveWell, an Oakland-based organization that rigorously researches and evaluates giving opportunities with the goal of directing funding where it can do the most good per dollar. New Incentives was the only new organization to be added to the list in 2020. GiveWell is widely recognized as one of the most rigorous and thoughtful charity evaluators, spending over 20,000 hours each year conducting in-depth research to identify the most outstanding giving opportunities for donors. Based on GiveWell's recommendation, Open Philanthropy awarded \$16.8 million to New Incentives over the next three years to expand its work. With these funds, the organization plans to scale to reach over 600,000 infants in North West Nigeria over the next three years.

RCT RESULTS

The Conditional Cash Transfers for Routine Immunization Program (CCTs for RI) was evaluated by a randomized control trial (RCT) from July 2017 until late February 2020 to measure the impact of the CCTs for RI Program on routine childhood vaccination coverage in North West Nigeria. RCTs are the gold standard to evaluate the impact of an intervention on the existing infrastructure and can determine if change is occurring as a result of the program's implementation. In this study, vaccination coverage among children who were part of the CCTs for RI Program was compared to the vaccination coverage among children from the same geographic area but who lived outside the catchment areas of the clinics served by the program. This comparison allowed the study to determine the direct effect of the CCTs on vaccination rates among families from similar backgrounds and geographic location.

The RCT found that the CCTs for RI Program had five important positive impacts ([Source](#)):

- Increased vaccination coverage** Children in areas served by the CCTs for RI Program were **27 percentage points** more likely to be fully immunized than children from control areas.



- Improved vaccination timeliness** Infants who received the Measles vaccines were **33 percentage points** more likely to receive it within one month of the recommended age.

3. Further Positive Externalities Children in areas served by the program had **higher coverage** for all major injectable vaccines – including those not directly incentivized by the program – and were more likely to have visited a health clinic.

4. Improved Knowledge The RCT found that the program contributed to improved knowledge and attitudes among caregivers in the catchment areas served by the program, who not only had better knowledge about the timing of vaccines, but also more **favorable attitudes toward immunization**.

5. Reduced Stockouts Government clinics with the CTs for RI Program were **18 percentage points** less likely to report vaccine stockouts during the last 12 months. Since there was no significant difference between treatment and control clinics in the frequency of vaccinations stockouts prior to the implementation of the CCTs for RI Program, this finding suggests that the program’s impact goes beyond strengthening the demand for vaccines and includes the reduction of supply-side constraints.

“

The State Primary Health Care Development Agency now has an evidence-based strategy that works for consideration in further improving its immunization coverage aimed at preventing vaccine preventable diseases.

Dr. Nafisa Sani Nass - Director of Primary Health Care, Katsina State Primary Health Care Development Agency



Caregivers receive a program card with a unique ID

OUR RESPONSE TO COVID-19

As COVID-19 began to spread in Nigeria, we aligned our COVID-19 Response with the guidelines provided by the Government of Nigeria. These guidelines advised that essential primary health care services like immunization should be prioritized, so New Incentives was able to continue our CCTs for RI Program throughout the COVID-19 pandemic. In addition to aligning with both state and national guidelines, we made substantial changes to our operating protocols in order to minimize risks to caregivers and infants. These measures included education, awareness, handwashing, physical distancing, and related monitoring to assess adherence of these efforts.

In order to preserve access to essential services without creating undue additional risks, we systematically identified risk vectors and designed ways to mitigate them. Measures were divided into 3 categories based on the occurrence of immunization sessions.

BEFORE IMMUNIZATION SESSION

- Manager Check-in
- Review of COVID-19 Cases and Decisions
- Education through Town Announcer

DURING IMMUNIZATION SESSION

- Field Officer Check-in, Mobile Application Screening and Reporting
- Use of Face Masks and Hand Sanitizer
- Handwashing Stations
- Education and Awareness During Health Talk and Disbursements
- Physical Distancing at Clinics (including mats as visual cues)
- Staff Hygiene while Disbursing Cash

AFTER IMMUNIZATION SESSION

- Manager Check-in
- Managerial Review of Monitoring

Our Goals

Protect the rural communities where our staff travel



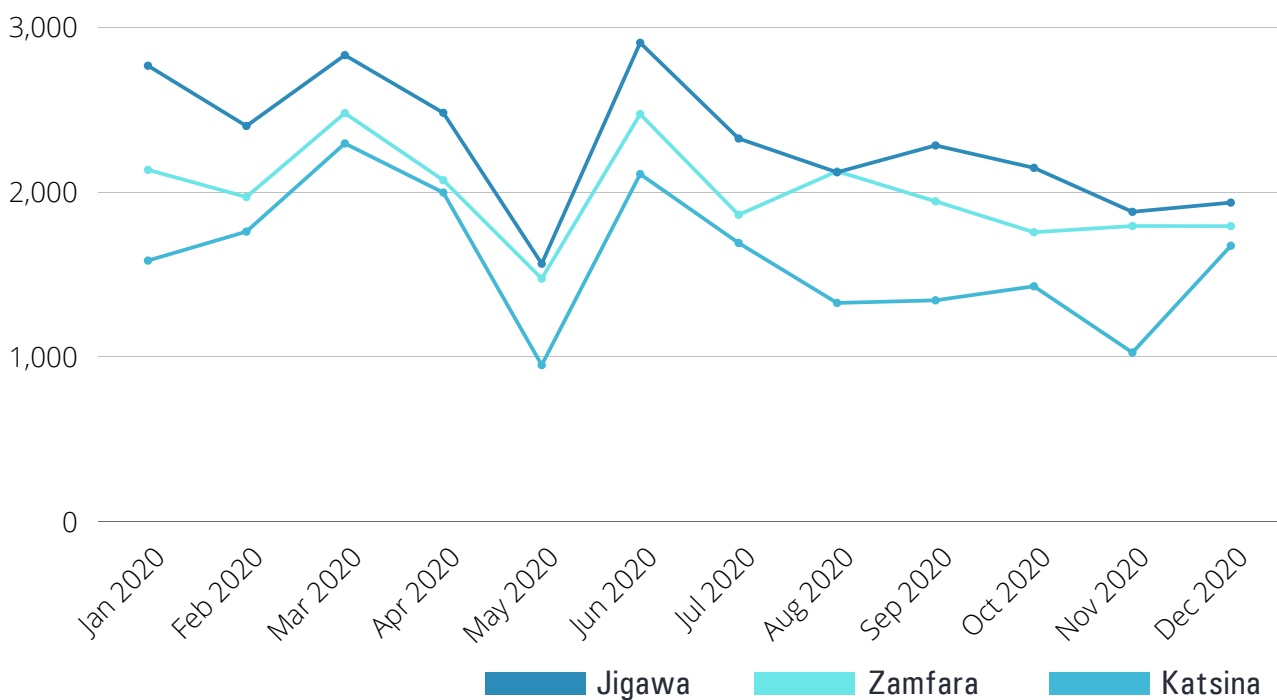
Protect caregivers and clinic staff at clinics



Protect our staff



Enrollment trend during the pandemic



We began implementing our COVID-19 measures immediately after the pandemic hit Nigeria (March 2020). However, once we introduced further monitoring measures in April, we started to identify that the adherence to these measures in many of our clinics was inadequate. Based on this monitoring, we had to temporarily pause our operations in some clinics to allow for time to problem-solve with the clinic and government stakeholders and determine ways to ensure adherence to the COVID-19 measures. After this temporary pause in May 2020, we have been able to operate in almost all clinics with limited but intermittent pauses in operations, and we have continued our weekly monitoring by senior managers of the organization.

Following this, we have largely been able to operate in almost all the clinics with limited but intermittent pause in operations and have continued our weekly monitoring by senior managers of the organization.

“

Overall a very pragmatic approach.

Michael O'Neill, NI Consultant and Chair
of the International NGO Safety and Security Association (INSSA)

2020 FINANCIAL REPORT

CONSOLIDATED STATEMENT OF ACTIVITIES YEAR ENDED DECEMBER 31, 2020

OPERATING REVENUES

Foundation and Private Grants	\$18,873,472
Individual Contributions	\$63,482
Interest and Other Income	\$6,096
Total Operating Revenues	\$18,943,050

OPERATING EXPENSES

Conditional Cash Transfers	\$636,955
Staffing, Mandatory Contributions, Taxes	\$1,043,281
Field Activities and Transportation	\$240,411
Field Supplies	\$55,265
Stakeholder Relations	\$22,595
Communications and Technology	\$75,296
Office Expenses and Accessories	\$10,476
Accounting, Legal, Insurance and other expenses	\$123,232
Total Operating Expenses	\$2,207,511

NET ASSETS, End of Year	\$18,309,760
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**Funding secured in 2020 will serve 588,000 infants on
81,000 immunization days.**

OUR TEAM

We are a global team with more than 170 passionate team members working together for a common purpose. Our field staff, who make up the majority of the team, operate from where New Incentives currently works: Katsina, Zamfara, and Jigawa in North West Nigeria.



Despite working in challenging contexts, we are committed to our mission and are driven by excellence and integrity.

BOARD MEMBERS



Amanda Glassman is executive vice president and senior fellow at the Center for Global Development, leading work on priority-setting, resource allocation, and value for money in global health, with a particular interest in vaccination.



Salina Yeung is a finance professional with extensive experience in financial management and reporting, investments oversight, and financial planning and analysis. Salina is a strategic thinker and gained her diverse perspectives from working in public accounting, private industry, investment firms, and from providing volunteer services to various non-profits.



Patrick Stadler is a Director at the NGO incubation program Charity Entrepreneurship and mentor to evidence-based startups. Previously, he was a political advisor for Switzerland's economic development agency and worked for the United Nations in New York.



Svetha Janumpalli is the Founder and Chief Executive Officer of New Incentives, an organization she started in 2011 after doing research at the Center for Effective Global Action with faculty who conducted evaluations of leading conditional cash transfer programs.



Pratyush Agarwal is the Co-Founder and Chief Operating Officer of New Incentives. Before joining New Incentives, he was the Head of Business Development at a leading enterprise mobility company in Silicon Valley. He was responsible for managing marketing and business development efforts among a customer base spanning four continents, including Fortune 500 companies.



Annie Flanagan's work with New Incentives is informed by her experience teaching in diverse settings, and her passion for social justice. Her education work has taken her from Minnesota classrooms to Chilean middle schools, into the rural Chinese province of Jiangxi, and finally to an education center in New Orleans.

We would also like to thank our advisors Alhaji Aminu Danmalam, Dr. Ahmad Abdulwahab, Charlie Petty, Teling Peterson, Prof. Auwal Gajida, and Hajiya Rabia Daura for their expertise and guidance.

OUR PARTNERS

GOVERNMENT PARTNERS

For your unwavering support for our CCTs for RI Program, thank you to the governments of Jigawa, Katsina, and Zamfara States, the State Primary Health Care Development Agencies/Boards & State Emergency Routine Immunization Coordination Centres. Together, we look forward to continuing to improve immunization coverage through our partnership.



DONORS

Thank you to our donors and partners for your support. We couldn't have done it without you!

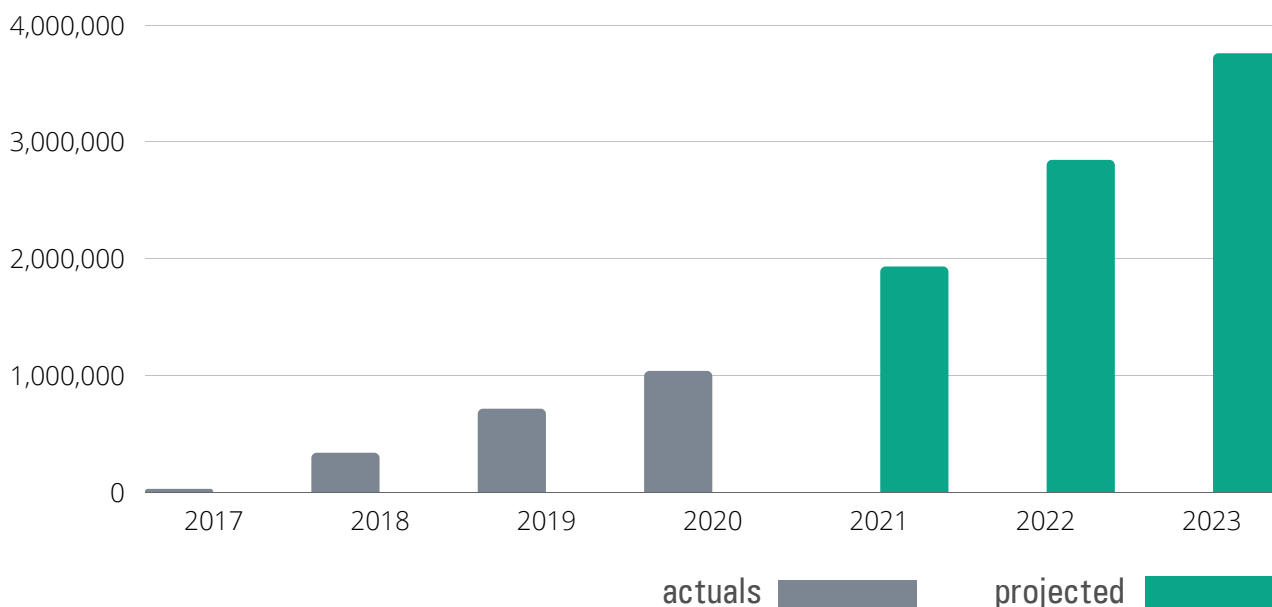


Since the announcement of New Incentives as a GiveWell top charity, we have formed new partnerships with organizations who now raise funds on our behalf and enable us to accept international donations in other countries such as Canada, the UK, and Australia. Thank you Giving What We Can, Giving Multiplier, Giving Tuesday, RC Forward, The Life You Can Save, Centre for Effective Altruism, and Silicon Valley Community Foundation for trusting our organization to make a difference with your funds. Finally, thank you to our 148 individual donors who have contributed to our program's success with your donations. You are helping to save lives, and we sincerely thank you for your contributions!



LOOKING TOWARD 2021

Disbursements timeline (cumulative)



Based on GiveWell's recommendation, Open Philanthropy awarded \$16.8 million to New Incentives to expand its work. With these funds, the organization plans to scale to reach over 600,000 infants in North West Nigeria over the next three years.

GOALS

New Incentives proves its potential to deliver a high-quality, cost-effective, and rigorously monitored CCTs for RI program at scale.



New Incentives operates in compliance with all regulations, in an enabling environment supported by robust partnerships.

New Incentives' organizational development, governance, and fiduciary oversight functions keep pace with its growth and expansion.





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our website



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