## Discussion: NALA project

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Workshop on Israeli agriculture and the developing world Tel Aviv University

July 13, 2016

### **Comments**

#### Health education for behavioral change .1

... Local partners?

Volunteers - who? (Björkman Nyqvist et al., 2015 Deserranno, 2016)
Community participation in decision making - how?
Community-based decision making /-owned process? (Olken, 2010;
Stryjan et al. 2016).

#### WASH .2

- Behavioral change challenges?
  - Maintenance of services?
    - Drug administration .3
- How is it funded who bears cost? Connected to sustainability and cost effectiveness.
  - Continuous or long term? Reinfection rates?
- Sustainability: 3 years may not suffice to conclude that effects are sustainable (Miguel & Kremer 2007)



# Suggestion/Open question

- Evaluation with control group in same area to ensure that fall in infection rate is not caused by time trend, general development.
- A control group can be given the services later, or different components of the NALA modality could be combined differently.
- Views/results diverge about the effectiveness of deworming programs (Hicks et al. PLOS Neglected Tropical Diseases, 2015; Kremer & Miguel Quarterly Journal of Economics, 2007; Daivy et al. Int. Journal of Epidemiology 2015; Aiken et al. Int Journal of Epidemiology, 2015)
  - Previous studies emphasize economic and cognitive outcomes (labor market participation, education) and general welfare.
  - NALA stresses connection between NTDs on one hand and major epidemics (AIDS, Malaria) on the other.
- Broader health effects: Is the link between NTDs and these epidemics well established? This would be interesting to evaluate in systematic way.