Demonstrating value-for-money to our donors

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There are always lots of calls to NGOs to ensure they provide value to money. The DfID scandal over exploitative practices of contractors earlier this month may add steam to those calls. One approach which has a lot of traction in this debate is called **Effective Altruism**. It is a philosophy and social movement that applies evidence and reason to determine the most effective ways to benefit others. Effective altruism encourages donors to seek the greatest positive impact, based upon their values.

Effective altruists seek to compare the relative importance of different causes. One of the key indicators they use to rate the impact of health interventions is the number of disability-adjusted life years (DALY) averted, per dollar spent. This measure of global disease burden is expressed as the number of years lost due to ill-health, disability or early death.

When we look at leprosy (and some other NTDs) under such an indicator, they don’t look like great investments. The Global Burden of Disease study\(^1\) does not rank leprosy (or some other NTDs) as having substantial burden, largely because few people die from leprosy.

At the recent NTD Summit in Geneva, Professor David Molyneux provided a much fuller analysis of the impact of stigmatising NTDs on people affected, their families and communities. He noted that calculations of DALYs for these conditions don’t include estimates for the anxiety and depression that often accompany them. However, when his team calculated the likelihood of mild, moderate and severe depression for stigmatising NTDs they estimated up to a 10-fold increase in the calculated burden. When the likely mental health symptoms are included in the measures of burden, stigmatizing NTDs are recognized as major contributors of global burden, and when the burden of caregivers is included, those estimates increase further.

While we can assume these estimates are also relevant for people affected by leprosy, they haven’t yet been calculated for leprosy. Maybe a priority for us should be to support such a full accounting of the burden of leprosy to genuinely inform effective altruism. With accurate and full estimates of the burden, we will have better indications of the benefit of preventing leprosy, and of reducing leprosy-related impairment.

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