ABSTRACT

As recently as 1999, 13 million measles cases and 500,000 measles-related deaths occurred in sub-Saharan Africa per year. Over the past decade, vaccination coverage across the continent has improved dramatically, largely as a result of the Measles Initiative, an international effort coordinating and funding national mass-immunization campaigns. We estimate the reduction in all-cause child mortality after initial countrywide measles vaccination campaigns using variations in the timing of the campaigns across countries and sub-national regions. This framework accounts for competing and complementary risks as well as for contemporaneous trends in mortality rates that may have biased case-based estimates. We use birth and death history data compiled from multiple demographic and health surveys for 25 countries and control for country-specific trends in child mortality and time-varying factors that were associated with campaign timing. Our findings show that the Measles Initiative campaigns raised the probability of a child’s survival to 60 months by approximately 2.4 percentage points for cohorts treated by the campaign. The campaigns cost approximately $86 to $104 per child life saved, remarkably low in absolute terms as well as relative to other interventions to reduce global child mortality.

BIOGRAPHY

Ariel BenYishay is a Lecturer (Assistant Professor) in Economics at the Australian School of Business at the University of New South Wales. His primary interests are development economics, program evaluation and empirical microeconomics.