

## **A conversation with Dr. Alix Zwane, February 3, 2015**

### **Participants**

- Dr. Alix Zwane – Executive Director, Evidence Action
- Elie Hassenfeld – Co-Founder and Co-Executive Director, GiveWell

**Note:** These notes were compiled by GiveWell and give an overview of the major points made by Dr. Alix Zwane.

### **Summary**

As part of its work aiming to support the creation of future GiveWell top charities, GiveWell spoke with Dr. Zwane of Evidence Action. Conversation topics included potential sources of funding for No Lean Season, a seasonal income support project in Bangladesh; an overview of Young 1ove, including the evaluation of its “sugar daddies” intervention, plans to scale up the intervention, and potential sources of funding for the scale-up; and the importance of evaluating scalability when deciding whether to support interventions.

### **Funding for No Lean Season**

Good Ventures, with GiveWell's guidance, provided \$250,000 in funding to support Evidence Action's No Lean Season project (Evidence Action's seasonal income support program) in early 2014, and followed up with an additional approximately \$170,000 in early 2015. In response to GiveWell's question about whether the No Lean Season project might be a good candidate for a GiveWell top charity recommendation, Dr. Zwane responded that there are several other funders that may be interested in the program and that Evidence Action would be approaching those prior to decisions being made by GiveWell. This would allow a clear sense of the room for funding.

### **Young 1ove**

Young 1ove is an organization that is currently delivering a “sugar daddies” HIV education intervention in Botswana. Modeled after a similar intervention delivered and studied in Kenya, Young 1ove's “sugar daddies” intervention attempts to educate young adults about the relative likelihood of HIV infection among men of different age groups and to correct the misconception that young men are more likely to carry the virus. This intervention has the potential to be low-cost and sustainable because it can likely be integrated into existing government curricula.

### **Initial “sugar daddies” impact evaluation results**

Professor Pascaline Dupas of Stanford University evaluated the implementation of the “sugar daddies” intervention in Kenya. Standard Kenyan government HIV education was compared to the “sugar daddies” intervention. The evaluation showed that girls who experienced the “sugar daddies” intervention were more likely to choose younger sexual partners than girls who experienced the standard

HIV education. They were also less likely to become pregnant because, independent of the intervention, girls are more likely to use birth control with younger men.

It remains to be seen if the results of the “sugar daddies” intervention in Kenya will be replicated in Botswana, because Kenya and Botswana differ for at least two reasons:

1. The rate of HIV infection in Kenya is much lower than in other southern African countries, including Botswana.
2. Kenya is a poorer country than Botswana.

### **Botswana “sugar daddies” impact evaluation**

Evidence Action and the Abdul Latif Jameel Poverty Action Lab (J-PAL) contributed funding to Young 1ove’s impact evaluation of the “sugar daddies” intervention in Botswana along with MAC AIDS/Baylor University. With this funding, Young 1ove was able to conduct a randomized controlled trial that included 343 primary and junior schools (combined) spanning 3 grade levels (standard 6, form 1, and form 2) and a little of a third of regions in Botswana. In one arm of the evaluation, Young 1ove staff delivered the “sugar daddies” curriculum to students. In another arm of the evaluation, teachers delivered the curriculum. In the control arm of the evaluation, students were taught a standard curriculum. The intervention component of the trial is complete and the second round of data will be collected in the third quarter of 2015.

### **Scaling up Young 1ove**

Evidence Action would like to scale up the “sugar daddies” intervention across other southern African countries with high HIV rates if the evaluation of the intervention in Botswana shows a large, positive result and there is a clear path to scale-up. Young 1ove in Botswana could serve as the hub for its partners in other Southern African countries as they replicate the “sugar daddies” intervention. Evidence Action would ideally target small, HIV-prevalent countries for this scale-up. Expansion into South Africa is also a possibility.

#### *Intervention delivery*

Evidence Action is using the results of the “sugar daddies” evaluation in Botswana to understand how to best support the scale-up of the intervention in other countries. If teachers can effectively deliver the intervention, the best way to scale it up could be to provide technical assistance programs for governments. If teachers cannot deliver the intervention, the best way to scale it up could be to identify NGOs that can do so.

#### *Funding for scale-up*

Young 1ove needs funding to maintain momentum while the impact evaluation in Botswana is finalized. Dr. Zwane believes that \$100,000 in additional funding will be important to ensuring that a robust Young 1ove remains operational during this time.

Scaling up the “sugar daddies” intervention, and growing Young 1love as an organization, requires additional funding. This funding would cover three types of activities:

1. Collection and analysis of data on HIV prevalence rates, pregnancy rates, and people’s knowledge of relative and absolute risks of HIV infection. Most of this information can likely be collected from administrative data, but doing so would take some effort, as it will entail working with 10 different national surveys from 10 different countries. J-PAL Africa in Cape Town, South Africa would do this work.
2. Identifying potential partners in other countries, including organizations and government agencies. Evidence Action would do this work, with Young 1love’s support as content experts.
3. Transitioning Young 1love from its start-up phase to having systems for scale. Processes, policies, and procedures need to be put in place that would make Young 1love a more resilient organization with an eye toward serving as a regional hub for the “sugar daddies” intervention.

Dr. Zwane believes that \$300,000 would allow for Young 1love to make necessary organizational changes and to pay for consulting services related to the scale-up of its intervention, including services provided by J-PAL and Evidence Action. Evidence Action has submitted a proposal for Young 1love’s scale-up to the Global Innovation Fund and is waiting for its decision.

Scaling up Young 1love quickly is important because donors likely want to see evidence that the intervention can work outside of a small country like Botswana. Dr. Zwane believes that plans to scale up a promising intervention should be developed in parallel to the evaluation, rather than after the evaluation is completed.

### **The importance of scalability**

When considering organizations or interventions to support, funders should consider the potential path to scale in addition to the impact evaluation results. Interventions with excellent impact evaluation results that cannot feasibly be scaled up may not be a good investment.

*All GiveWell conversations are available at <http://www.givewell.org/conversations>*