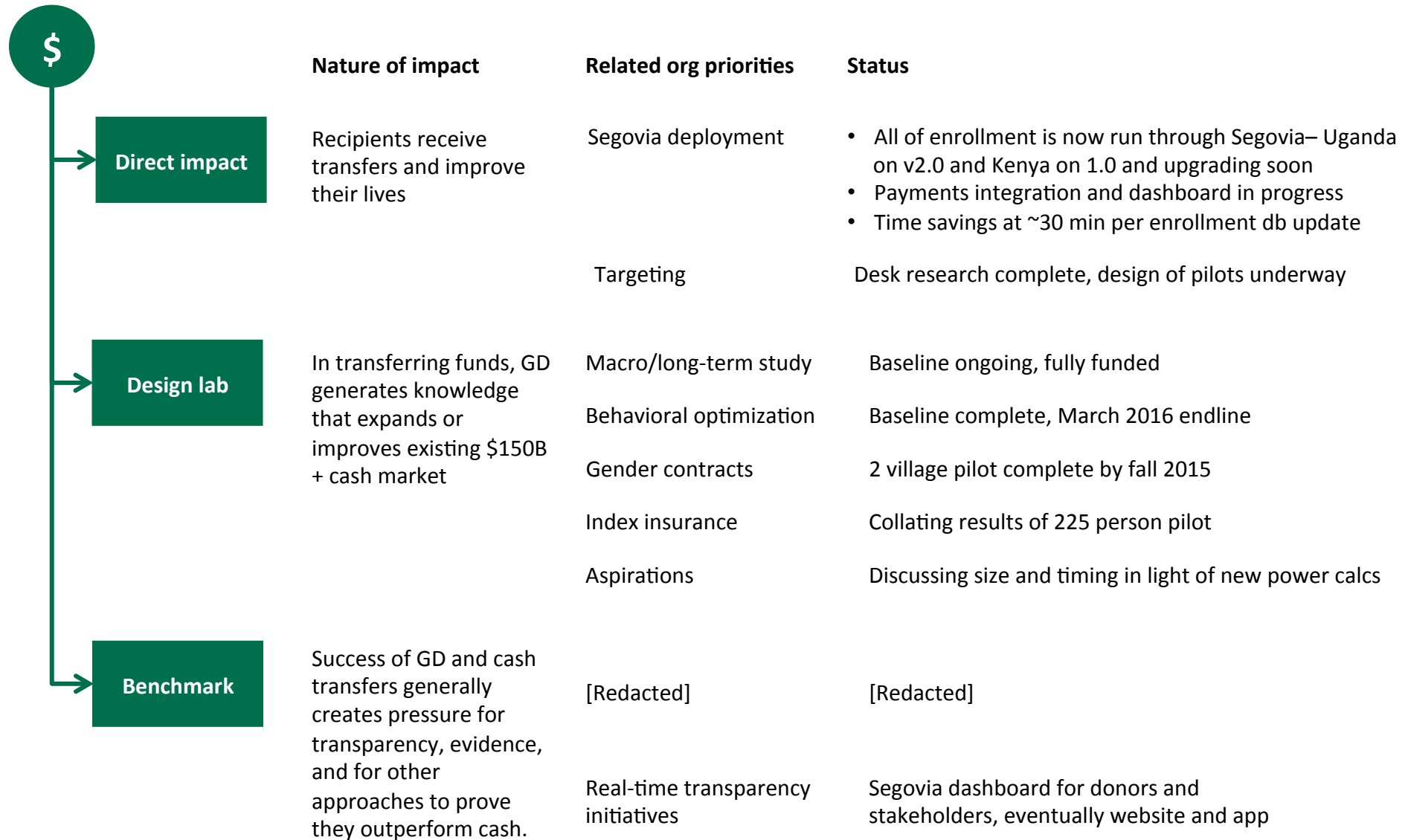


**GiveDirectly**

**May 2015**

# GD continues to structure work around three impact channels



# Kenya rolling campaign increased speed, with smaller campaigns driving learning in both Kenya and Uganda

## Uganda

- Began enrollment for a new campaign, 201503, in March 2015
- Roughly \$2M, located in Bukedia district where all operations to date have been
- Will push learnings on cash-out models via new partnership with a bank
- Using biometrics to authenticate recipients at the cash-out point
- Stuart's last campaign before heading to business school, recruitment ongoing for a new FD to replace him
- Bukedia district still has 27,000 un-visited, eligible households, and country-wide registration is in process that will provide approval for all 7.3m households in Uganda.

## Kenya

- Rolling campaign ongoing– paced increased to enrolling ~1,400 new HH / month at peak
- Smaller “design lab” projects (ideas42, index insurance, targeting project) occur either in parallel to rolling campaign or are folded into its operational flow
- Operating now in Ukwala, moving Rachuonyo North in Homa Bay County in July
- County-level government approval equivalent to ~70 K additional eligible households in Siaya and Homa Bay counties

# We want to better understand how you are thinking about cost-effectiveness, and how we can help

## Outcome measures directly affected by CTs

Area	Outcome from Haushofer Shapiro
Assets	<ul style="list-style-type: none"><li>▪ 58% increase in assets, mostly home and livestock</li><li>▪ 23% more likely to have iron roof</li></ul>
Earnings	<ul style="list-style-type: none"><li>▪ Revenue from self-employment up 38%</li></ul>
Food security	<ul style="list-style-type: none"><li>▪ 42% reduction in # days children go without food</li><li>▪ 20% increase in food consumption</li></ul>
Mental health	<ul style="list-style-type: none"><li>▪ .18 SD increase in happiness</li><li>▪ .14 DS reduction in stress</li></ul>
Domestic violence	<ul style="list-style-type: none"><li>▪ Spillover effect: .23 SD increase in empowerment index</li><li>▪ Suggested but non significant reduction in violence</li></ul>

## Methodological questions to consider

- Is it important to convert all metrics to a single common unit?
  - Do any of the metrics matter in their own right for the purposes of comparison– to us, to donors, or to recipients?
  - Do we have multiple metrics from other interventions that we can compare to?
- If we need to convert, are there other papers that can translate these outcomes into a common unit?
  - What is the return on good mental health?
  - What is the return on childhood food security?
- How can we use the 5 year studies from Uganda and Sri Lanka to project forward these short term outcomes?
- How do we weigh recipients' own preferences?
  - How much would recipients pay to get the outcomes from malaria nets, deworming? How much of the CT outcomes would that buy?
  - If they choose to invest some of their transfer but not all, is it fair to assume the other expenditure is equally valuable to them?

# Results from ongoing studies will become available over the next 2 years, with smaller studies concluding sooner

Size



## Macro/long term (GE)

- Baseline still in progress
- Some midline results likely available fall 2016
- Final results of GE portion likely by mid 2017, with long term follow up thereafter

## Behavioral optimization (ideas42)

- Baseline and initial treatment complete
- A few bullets on baseline results available and in appendix
- Endline scheduled for March 2016, with paper which we can share available a few months thereafter

## Gender contracts

- Initial focus groups complete, second round underway
- Actual usage of contracts in villages pending, results available by fall 2015

## Index insurance

- Research and scoping project with The Rockefeller Foundation exploring synergy between cash programs and index insurance that included a field pilot
- Gave 225 past recipients a \$100 transfer and option to purchase index insurance protecting against drought with transfer, showing much lower acquisition costs than typical insurance providers get and high recipient demand ( 62%)
- Final read-out available summer 2015

# We would value your guidance on what documentation of policy impact to provide

- We see broader impact on the aid sector as core part of the rationale for donating to GD
- We understand from previous discussions that GW tries to measure broader impact by speaking with actors whose decisions have been influenced
- We would value input on which references and what documentation to provide

## Areas of potential policy impact we could expand on

[Content redacted]

# Appendix

[Redacted]

[Content redacted]