

GiveWell NYC Research Event November 1, 2018 – Top Charities

12/04/18 Page 1 of 12

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00:03 Catherine Hollander: All right, we're going to get started now. Welcome everyone. Thank you so much for coming to the GiveWell research events today in New York. I'm Catherine Hollander, a research analyst focused on outreach at GiveWell, and the goal of this event is to share some of GiveWell's latest research and to provide a lot of chance to answer any questions that you have, and also for everyone to get to know each other. We'll have lots of time at the end to hang out and eat more pizza and chat.

00:39 CH: I wanted to quickly introduce a few other GiveWell staff who are in the room. If Olivia and Dan and Caitlin could give a wave. Dan and Caitlin are back there, and Olivia's up here. They are all very happy to chat about GiveWell's work and the things that they work on. Erin Wolff is the person who greeted you downstairs to let you in, and she will be coming up shortly and also glad to chat after this part of the evening.

01:10 CH: So just briefly, I'm going to be covering the following topics tonight, and then really happy to answer questions about things beyond the scope of what I'll talk about. The first is our plans for publishing our updated list of top recommended charities later this month, and some kind of sneak preview information related to that.

01:32 CH: The second is to talk through some of our major research priorities in 2018, and also some of our other organizational priorities in 2018 and beyond, and then, finally, to discuss some of the things that you can do if you're interested in talking about GiveWell during giving season, which is the industry term/slightly-broader-than-industry-term for the period at the end of year when most people in the United States donate to charity.

02:01 CH: Before we get started, I wanted to let you know that I'm recording the event. We like to record events so that we can share them on our website with folks who don't live in New York or the Bay Area, where we have these events. If at any point you ask a question or say something on the recording that you would prefer not to be published on the GiveWell website, please just let me know. You can talk to me after the event or email the info@givewell.org address, which is I-N-F-O @ givewell.org.

02:32 CH: The final note related to the recording is that I will be doing my best to remember to repeat questions for the sake of the recording. If you ask a question, I will repeat it back to you, and that is primarily to help with the recording.

02:46 CH: With that said, the first thing that I wanted to talk about is our plans for updating GiveWell's list of top charities for the end of year. Briefly, if you're not very familiar with GiveWell, we're a non-profit that looks for and recommends outstanding giving opportunities that we believe offer donors a chance to have a very significant impact with their donations. And every year we publish a list of top charities that we think represent the places that have some of the strongest evidence of effectiveness and can use additional dollars the most effectively, and that's our recommendation for where donors interested in having a lot of impact should consider giving.

03:29 CH: We currently, as of our top charities update at the end of 2017, have nine top charities on our list that work in global health and development. I'm not planning to get into great depth on what those charities are, but I'm really happy to answer any questions about how we arrived at this list, what's on it, but for this event I'd like to focus on some expected changes.

03:52 CH: So, first for the timing to keep in mind, we're planning to publish our updated list of top charities by November 27th at the very latest. This is Giving Tuesday, which, if you're not familiar with it, you should think of it as Black Friday for giving to charity. It's a day that there's been a lot of momentum behind on the internet for getting people to donate to charity, and GiveWell sees a lot of traffic then. It's a good deadline for us. If you're looking for a list of updated top charities, by November 27th at the latest, you will have it.

04:25 CH: We expect one major update to our list this year. This section of what I'm going to be talking about, this update, should be considered confidential at this point. Obviously, I'm sharing with a roomful of people, but please don't tweet it or share it more widely beyond this, and if you're a member of the media, please consider this under embargo, if you will.

04:46 CH: With that caveat, the update that I would like to share is that we expect to remove Evidence Action's "No Lean Season" from our top charity list this year. So a brief summary of this decision, and then I'll get into a little bit

12/04/18 Page 2 of 12

more of the details of why we're making this. No Lean Season is a program that provides loans to support seasonal migration, and they operate in rural Bangladesh. It's implemented by an organization called RDRS Bangladesh, and also Evidence Action provides strategic direction, conducts program monitoring, and has a variety of other roles in the implementation of the program.

05:25 CH: We updated our assessment of No Lean Season this year, based on preliminary results we received from a 2017 study of the program. This study was a randomized control trial, which GiveWell considers to be some of the strongest ways to assess the types of programs that we're interested in. The RCT, I'm going to use in lieu of "randomized control trial", RCT, because it's a mouthful. This RCT suggested that the program, as it was implemented in 2017, did not successfully induce migration.

05:56 CH: Taking this new information into account, alongside the previous studies that we had seen of the program, both we and Evidence Action no longer believe that No Lean Season meets our top charity criteria at this time.

06:12 CH: We think that this update removing No Lean Season from our list, speaks very positively of Evidence Action. Very few charities subject their work to rigorous evaluations, in the way that they did. And we're excited to work with a group, like Evidence Action that is committed to rigorous program evaluation and open discussion of the results of those evaluations. So, in terms of the open discussion, you should expect to see a detailed blog post on GiveWell's website, as well as plenty of discussion on Evidence Action's part, I think, about the results and what they mean for GiveWell's recommendation.

06:48 CH: With that overview, I do wanna provide some additional context of the No Lean Season study and how it factored into our recommendation. GiveWell first began engaging with No Lean Season as a potential Incubation Grant recipient in 2013. GiveWell Incubation Grants are a program I'll talk a little bit more about later on, as part of our discussion of what GiveWell is working on in our research, but it's a part of our work where we're trying to seed potential top charities and to improve our understanding in more current top charities. It's part of our work we're trying to support things that we think are really promising and to increase the evidence base for things that we think we might potentially want to support with the GiveWell recommendation.

07:32 CH: We saw No Lean Season when we first connected with them, as a promising program that lacked the kind of track record that we would want to see to consider them for our top charity recommendation. And we made an Incubation Grant at that time and followed them for a few years. When we decided to recommend No Lean Season as a top charity, that happened in around this time last year, so a very, the round two giving season of 2017. We based that decision on three different randomized control trials or RCTs, that we'd seen. Two of them were conducted in 2008 and 2014, and they indicated that the program increased migration income and consumption for program participants.

08:16 CH: The 2013 RCT, the third RCT that we were looking at, is unpublished but suggested that the program did not induce migration, and this is potentially due to political violence that occurred that year. Still, weighing this body of evidence, these three RCTs, the cost of the program and the potential impacts, we decided that No Lean Season met our criterion to be named a top charity in November of 2017.

08:41 CH: At the time we made this recommendation, we knew that No Lean Season, and we noted this in our review, was conducting another RCT of their program, during the 2017 Lean Season, which is a period of the year that occurs during the fall. It is the time of year that No Lean Season is targeting, providing support to induce migration, because it's the time of year when job opportunities tend to be the hardest to come by in the areas of Bangladesh where they work. So this summer, No Lean Season began to discuss these preliminary results with us from this RCT, which suggested that the program as it was implemented in the Lean Season of 2017, did not successfully induce migration.

09:24 CH: The implementation of this program, in 2017, was different from how it had been implemented in previous years. One notable difference was that the scale of the program, was significantly larger reaching around 150,000 households in 2017, as compared to around 16,000 in 2016. And they also had a higher intensity delivery of the intervention and broader eligibility requirements at that time. This new RCT that we saw looked different in terms of how the program is structured, than in the previous RCTs we had looked at.

10:01 CH: At this point, neither GiveWell nor Evidence Action nor the researchers have a conclusive understanding of why the program failed to induce migration, during the 2017 Lean Season. There are a few different possibilities. One is that the way that the program was targeted in 2017, may have been suboptimal. So the migration organizers who are the people involved with implementing the organization that actually go door-to-door to households, in Bangladesh, and

12/04/18 Page 3 of 12

ask if people are eligible and interested in participating in the program. They may have targeted the people that were most likely to migrate already. That's one possibility.

10:42 CH: A second possibility is that the 2017 Lean Season was particularly bad for the program. There was severe flooding in 2017, that could potentially have impacted the program's implementation. This isn't sort of unprecedented possibility in 2013. I mentioned that there was an RCT that showed a failure to migrate, and our reason for that might have been due to political violence that year. There's a possibility this was a particularly bad year for the program.

11:11 CH: The third possible category of reasons, is something else that we don't know about.

11:18 CH: Maybe conditions in Bangladesh have changed, maybe there are negative spillovers, maybe there's some other reasons that the program functions differently, or doesn't work as well, at scale. We don't yet know which of these possibilities is most likely.

11:32 CH: But in order to update our understanding of No Lean Season, we incorporated these results into our understanding and ultimately concluded that between the failure to induce migration, and the now more mixed picture that we had of the evidence for No Lean Season's impact, that we decided to not recommend them this year. In terms of what's next for No Lean Season, they are no longer seeking funding right now, but they do have two additional years of funding on hand. They are planning to run another randomized control trial at scale, during the 2018 Lean Season, which we understand will include some design changes to reflect some of what we saw in the 2017 RCT results. They're also planning to perform other analyses to help us better understand why the program in 2017 may have failed to induce migration and they plan to have preliminary results from this work to share with us in mid 2019.

12:36 CH: The decision to remove a top charity, is never an easy one, but we think that continuously evaluating our recommended charities is a really important part of our work, and we take it very seriously. It's very easy to talk about a commitment to evidence when the results are positive and it's a lot harder to do that when the results are not. But as I mentioned before, we're very excited to work with a group like Evidence Action that's committed to doing rigorous program evaluation and also discussing the results of those evaluations, and its openness about these results has increased our confidence in Evidence Action as an organization. And so, we're looking forward to seeing the results from the 2018 RCT that's being done now in mid 2019, to see whether we should update our understanding of the program at that time.

13:26 CH: So that is the biggest headline update to our top charities recommendation that we expect to make when we publish our new list. We're not planning to add any new top charities or stand-outs in November, but an element of our recommendation that we do expect to change, is what we call our recommended allocation. So, as I mentioned earlier, GiveWell has nine top charities on our list. These all meet the criteria that we use to assess whether an organization is a top charity, but we have a bottom line recommendation that we publish to donors, that says, "If you want your dollar to go the furthest, here is the top charity or top charities that we believe can do the most good with that max marginal dollar." And we've noticed that this is typically one of the most misunderstood elements of our work. And so I wanted to just take a moment to walk through what I mean when I say, "Recommended allocation." I can't unfortunately give you a preview of what our recommended allocation will be this year, as it's one of the final pieces that we finalize before publishing our update. So this is something we're currently, actively working on.

14:33 CH: But just so you know what it means when you see it. For 2018 to date, we've had a recommended allocation for donors of giving 70% of their donation to the Against Malaria Foundation and 30% to the Schistosomiasis Control Initiative. This means that we're trying to target filling those two top charities funding gaps next. And the way that we came to that recommendation is that at the end of year, so around this time last year, we looked at all of the funding gaps at all of our top charities. When I say, "Funding gaps," I mean how much money do you think they can absorb effectively. And then we slice that even further into saying, "What are the different gaps at each charity?" For example, looking at Deworm the World initiative, which is one of our top charities, looking at Deworm the World initiative's funding gap in India, which we think is particularly cost effective and ranking that as the most cost effective thing that we could fill, and then maybe another top charity's funding gap in another country. Kind of slicing them fairly granularly, according to how cost effective we believe they are.

15:37 CH: We then fill up the funding gaps starting at the top, and the first entity to fill them is an organization called Good Ventures, which is a large foundation that we work very closely with that donate significantly to GiveWell's top charities. Last year, they gave around \$75 million to our top charities. They will typically fill the funding gaps starting at the top and working their way down. And then the next recommendation that we have is where we think the next

12/04/18 Page 4 of 12

dollars can do the most good, and that was AMF and SCI looking like they had comparably cost effective funding gaps, but AMF's was larger and hence the 70% to AMF, 30% to SCI, which was just my...

16:19 CH: Control initiative. So it's not literally true that those are our top ranked top charities in some sort of absolute sense, but it is where we want the next marginal dollars to go.

16:31 CH: And I should flag that, in addition to understanding the recommended allocation, we also want to make sure that donors use our research, are aware of clearly our number one recommendation, which is to give to grants to GiveWell's recommended charities at GiveWell's discretion. So if you trust our research, we think that one of the best ways that you can donate is to give it to us to allocate it among our top charities according to where we think the most pressing funding need is at the time that we grant the funds. And this might track the recommended allocation, it might sometimes not if we become aware of other funding gaps that our top charities that are more pressing.

17:08 CH: So for example, in the fourth quarter of 2017, we ended up giving all of the funding that had been given to grants to GiveWell to give at our recommended, to give at our discretion, to the Schistosomiasis Control Initiative. So 100% instead of the 70/30 split because AMF, Against Malaria Foundation, the 70%, had been slower to move funds that we expected, so we didn't think that their funding need was as pressing. And the Schistosomiasis Control Initiative had received fewer funds from other donors that we expected, and so we thought that there was more room for them to absorb funding. And so we were able to use that funding to sort of correct for that. So that's our very bottom line recommendation. If you're feeling highly aligned with our research, we're happy for you to support that option.

17:56 CH: Before I get into everything else, I think I would love to pause for questions about the top charities' work for about a... Yeah, 15 minutes and so we can chat about that and then I'll come back and talk about some of the other work that we're doing. So yeah.

18:13 Speaker 2: So when you talk about Good Ventures filling the funding gaps, does that mean when there are two left that if it fills the funding gaps on the [18:23] _____?

18:23 CH: Yeah. So the question is, if we recommend that Good Ventures fill funding gaps initially, does that mean that only two of our top charities have funding gaps left? The answer to that is no. So, we are slicing the funding gaps at a more granular level than just at the top charity levels. So I mentioned, like we might look at the funding gap of just one country's operations. So Deworm the World might still have a funding gap in Kenya that's much lower on our list, so we might say, fill Deworm the World India, and then fill AMF's gap in Papua New Guinea, and then fill this grant which will allow SCI to scale up a bit, and then fill... So top charities can have different funding gaps that we prioritize differently. And so yes, it's not the case that we think that the other top charities don't have funding gaps, it's that those funding gaps... Some of them might have been filled and then some of them might be ranked lower than AMF and SCI.

19:19 Speaker 3: Have you been considering something like cataract surgery charities?

19:25 CH: Yes. The question is: Have we been considering cataract surgery charities? We have, although that investigation is currently de-prioritized. So we de-prioritized it in January. Cataract surgery was an area that we became interested in after doing sort of an initial... The first step of our research process is looking at the evidence for, the academic evidence for a particular program, sort of independent of a given charity. So looking at, say, how effective do we think cataract surgery is at correcting cataracts?

19:57 CH: We felt good about cataract surgery as being potentially competitive in terms of the evidence of effectiveness and cost effectiveness with the other programs that our top charities implement. And we're interested in potentially moving forward with a cataract surgery organization. But we realized that we had a lot of questions about the monitoring that we were seeing from cataract surgery organizations to demonstrate that they were reaching people that had severe visual acuity problems and that the cataract surgeries were effectively reversing that. And we wanted to see much better monitoring from cataract surgery organizations than we had seen to date.

20:36 CH: And so we actually made a grant to a group called IDinsight, that we've supported through our incubation grants program. And IDinsight is an organization that does a lot of RCTs and other types of studies that are designed to provide decision-relevant information to charities and policy makers. And we worked with Evidence Action, to try to identify a contract surgery that was a good fit for helping them implement better monitoring to help us answer the monitoring questions that we had. We didn't find that we were identifying a promising candidate from our initial investigation, and we've written about this on our website, I should say, if you're curious for more of the details. But we

12/04/18 Page 5 of 12

spoke with, I think around 17 or 18 cataract surgery organizations and decided that it wasn't our top research priority this year, but it's still something that we're interested in potentially moving forward with. So we have a note that's like, "Deprioritized January 2018," but we might come back to it.

21:32 Speaker 4: How do you decide what your priorities are?

21:38 CH: Yeah.

21:38 S4: If you're looking globally and there's probably a million options?

21:45 CH: Yeah, that's a great question. Okay, the question is, how do we decide what our priorities are? Because we're looking globally and there are many different options, millions maybe, of things we could support. So we have a process of monitoring research that comes out about new programs, or new research that comes out about existing programs, that we keep an eye on to see if things pop up that we might potentially be interested in investigating, or investigating further. We also are fairly well networked now within the global health and development space, where we hope that people are calling to our attention things that seem like a promising fit for GiveWell's recommendations. And we are sort of proactively looking for things that seem promising.

22:26 CH: So this is kind of the beginning of the funnel. Like, how do things get onto our radar? And then also, sometimes charities or researchers will approach us directly if there are things that they think that we should be aware of that might be a good fit for our recommendations. From that we have a very large Excel spreadsheet where we put all the plausible candidates for things that we would want to look into there. And then we do very shallow investigations at the start to see just what does the evidence base look like? For example, are there randomized control trials or other studies that look like they might be potentially strong that we could assess? Are there charities working in this space? Does this seem plausibly cost-effective based on an incredibly quick, back-of-the-envelope calculation?

23:12 CH: And then we spend more and more time with the things that seem more and more promising. So if something looks great after an hour, we might prioritize it to spend another five to 10 hours, or just an increasing amount of time. And the way that we focus our processes, is we really want to prioritize things that are most likely to become GiveWell top charities or GiveWell priority programs. So programs that we're interested in finding charities in, and to not spend a lot of time with things that don't look like they're likely to meet our criteria. And that's sort of our best heuristic for thinking about how we prioritize, given our... We have a research staff of I think a little over 10, maybe 12 people, so we can't look into everything. But that's our system for deciding what we do spend time on.

23:57 Speaker 5: Do you assist with the randomized control trials, RCTs, it is a mouthful? And would you consult on how to best conduct those? Or is more just they [24:07] _____?

24:10 CH: Yes. The question is, do we assist with our RCTs or provide input on how best to conduct them? I would say broadly. And in GiveWell's traditional top charities research we are looking for RCTs that have already been conducted, and trying to get a sense of how strong is the evidence base that already exists for a particular program. But as part of this newer piece of our work, the incubation grants program that I mentioned a few times that Evidence Action came out of, we are interested in supporting RCTs. And that can include providing input on RCTs that we're funding.

24:44 CH: So one example is IDinsight. This group that I mentioned in the context of cataract surgery is also working with GoodWell to run an RCT of an organization called New Incentives, that we've made a number of incubation grants to. And we're speaking with them about the way that that RCT is set up so that we can make sure that we'll get the information that we want to see at the end of it to understand whether or not we should recommend the charity that they're studying. So in our classic traditional non-incubation grants work, we're reviewing studies that already exist. And in our incubation grants work we're helping fund, and sometimes providing input on new studies that might get done.

25:26 S6: So you stated [25:27] _____, what would you say is your biggest... It's a two part question. What would you say is your biggest blind spot, or your biggest vulnerability, when you're committing to like these are the top in a given year? And then, is there anything that you've done to get a better accurate... A more accurate depiction of what actions a certain charity will take? Like if they're redesigning a program or something, is there anything you do... I don't know if can't contractually elect them commit a certain way [26:00] _____.

26:00 CH: Yes, the question is twofold. So what might be our biggest blind spot and also are we taking steps to actively

12/04/18 Page 6 of 12

tell charities how we think they could be most effective? In terms of our biggest blind spot, I might punt that primarily to the second piece of updates that I'm going to share, but I think broadly, it might be that we are assessing things that are the most evidence-backed under our current criteria, so things that we can really clearly draw a causal story for their impact, and we might be missing things that have more complex evidence bases that are potentially also very impactful. And that's something that we're actively working on as a research priority right now in the realm of policy advocacy. And I'm happy to talk about that. I think I'll talk about that a little bit more in the second half, research updates, but that's certainly an area that we're working on. And then the question of, are we actively kind of guiding charities as to how they can improve or providing input or kind of, making...

27:04 S6: I think it's a little bit more like, how much are you trying to get a clear picture of what is ahead for them in a given year? So not even you telling them, but just what exactly are you discovering?

27:13 CH: Oh yeah, okay, how much are we trying to get ahead of what a charity is going to do over the next year? That one, very much. And the reason for that is that we are... Our recommendation relies on what we believe a charity will do with additional funding, and so it's a major factor to understand where they're planning to operate and sort of what the conditions are there, if they look similar to where the charity has operated in the past or where the research that we've relied on that has led us to recommend that charity was conducted. We're also very interested in charities' budget and their expectations for getting funding from other non-GiveWell influenced supporters so that we can try to target directing them the amount of funding that we think would be most effective. So asking charities about their future plans is definitely a big part of our review process.

28:04 CH: I think, I might, I see one more hand, so I think we'll do one more question here and then I'm going to just talk through a couple of other things we're working on, and then we'll have more more Q and A. So this will be the last one before I share a few more updates.

28:16 S7: Okay thanks. My question I guess is around how do you allocate next however many millions of marginal dollars that come in. So you started off talking about a program that actually didn't deliver benefits of scale. So I guess the question is like, how do you think about or balance on the one hand, putting all dollars into the next top program or programs versus just inherent benefits of diversification in supporting no greater impactful charities and programs?

28:46 CH: Yeah, so the question is how we think about the benefits of basically going maybe all in on something that we believe is strongly evidence-backed and would be really great in terms of where we direct dollars, and diversifying more among our top charities, because maybe one of our charities is less impactful than we thought, or there are other benefits to diversification. I think we do aim to diversify somewhat in terms of the funding that we direct to our top charities. So we have given a sort of minimum grant to all charities that make our list of top charities each year. Last year, that grant was 2.5 million each. So that's both an incentive for participating in our process, but also ensures that they get some amount of funding to impact, to implement the programs that we think are highly impactful. I think because we're generally slicing funding gaps like somewhat granularly, I think it would be very unlikely that we would try to direct 100% of funding just to one organization, even if it looked really great.

29:43 CH: In part, because any given really cost-effective spending gap might not be that big. Like I was mentioning the Deworm the World gap in India. We thought that was the most cost-effective thing that we found last year by far, but it wasn't a huge gap. I can't remember the specific figure, but I think in the single millions, relative to the amount of money that we direct which I should say last year was \$117.5 million. So I think it's unlikely that we would end up going all in on a single thing. Less, I think, because of the sort of qualitative value of diversification, but more because of the way that our process is set up and the way that we're looking at funding gaps.

30:25 CH: I had one other thought there. I feel like I had one other thought, but apologies, it's escaping me. Yeah, I think that would be fairly unlikely. Oh! The other thing that I wanted to say. So GiveWell makes public recommendations for anyone to use. And so we also do see some amount of departure from our recommended allocation, and our sort of bottom line recommendation because we have nine things on our site, donors will choose to support things that are outside of GiveWell's recommended allocation. So I would also expect some of the other top charities on our list to receive funding above and beyond what GiveWell is explicitly targeting them receiving by virtue of us making a recommendation of them.

31:04 CH: And there are plenty of reasons that donors diverge from GiveWell's bottom line recommendations. Some involve values that diverge from that of the media and GiveWell staff member or other connections that they have with top charities. But, yeah, so I think there's... Usually when things make it on our list they get definitely a minimum and

12/04/18 Page 7 of 12

then above and beyond what we're recommending that they receive from other donors who use our research as well.

31:30 CH: So I'm just going to quickly talk through a couple of other things that we're working on before we go back to some questions and then break to hang out again and eat pizza. Some of the major research priorities that we've had in 2018, we're continuing on GiveWell's, I'm going to call it GiveWell's traditional top charities research as I mentioned. So this is work that we're doing to identify organizations that meet all of our criteria, that already exist in the world. They're very evidence-backed, they're very cost effective, they have a great track record. We think they can use more funding. We're continuing that work as well as our program research to, as I mentioned, kind of keep an eye on the academic literature and look for things that seem potentially promising that we should spend more time assessing.

32:14 CH: We're also doing quite a bit of work on our Incubation Grants program, which I mentioned earlier, is a part of our work that we're aiming to grow the pipeline of potential future top charities and to improve our understanding of our current top charities, and one of the Incubation Grants that we made this year, that we're excited about is a grant that we made in June to Evidence Action Beta. So you recognize Evidence Action as the organization I mentioned that's the parent organization of No Lean Season. They have a beta program which is sort the piece of their work where they're trying new things like designing and testing and scaling things, and within that beta program they have an incubator that we have recommended in the Incubation Grant too, so everyone is incubating in this scenario. We're incubating their incubator.

33:04 CH: We sometimes run into an issue with our research process where, as I mentioned, we start by looking for highly evidence-backed programs and then if we find them, we look for a charity that's implementing those programs. And every now and then we will do that first part of our process, we'll look for a program and find one, and it seems really evidence-backed. Maybe there's a lot of RCTs that have been done. We do the cost effectiveness, and it looks really good, but there's not a charity on the other side of it. So, we come down, we say, "Great, we'd love to recommend a charity that's working on this. There's no charity implementing that program."

33:38 CH: And so, our goal with the Evidence Action Beta incubator is for them to have a portfolio of interventions or programs that GiveWell is excited about, that they can help design and scale and test with us, with the goal of creating new top charities through that program. So we're really excited about this because it's addressing an issue that we've had for a long time as a results of our research process, which is that sometimes charities don't exist that are doing things that we're excited about. And so one of the intervention, or programs, that we're interested in through this incubator that I mentioned at the June event so it might be repetitive if you were here then, is a program to identify pregnant women who have syphilis and to treat them. That's an intervention or program that we've looked into that we think seems very strongly evidence-backed, it might be really cost-effective, but we have not found a charity that's implementing that program. And so that's one that we might be interested in scaling through the incubator.

34:41 CH: The other major organizational priority that we have in 2018 is growing the amount of money that we're directing to GiveWell's recommended charities. So for a long time, we were fortunate that people were finding GiveWell and choosing to use our research without GiveWell doing very much of sort of strategic growth thinking. We decided in 2017 that we should start thinking about this quite seriously because we realized that we were identifying much more high-value room for more funding at our top charities that we expected to fill at the rate that our donor base was growing. And so we made outreach and growth a major organizational priority. And this June, we hired Ben Bateman from Indiegogo to be our first head of growth.

35:32 CH: And so, the goal of Ben's initial work is to increase the amount of funding that we're directing from donors other than Good Ventures, that very large foundation that I mentioned, from around 40 million in 2017 to 100 million by giving season 2022. So Ben spent his first few months at GiveWell familiarizing himself with our donors, chatting with a number of them, and trying to test out a few experiments on our website, get to know where the low hanging fruit is for us, things we should try, and has developed a strategy for the next three to six months that he'll be focusing on.

36:10 CH: The first thing that we're going to focus on is trying to acquire new very large donors. This is our highest priority, we think it has the highest expected value, and in 2017 donors that gave \$100,000 or more accounted for about a third of our money directed to top charities outside of good ventures. So we think that this is a good place for us to start. That being said, we also think that this work is likely to take a lot of time and be a slow process, so we don't expect to spend most of our time on this, but we do think it's really important.

36:46 CH: And some of the initial areas that we thought about focusing on, or Ben has thought about focusing on within this growth area is building connections with the cryptocurrency community as that seems to be a particularly well-

12/04/18 Page 8 of 12

aligned community, based on our engagement with them so far, and also building relationships with support institutions like donor-advised funds and wealth advisors, since that also seems like a potentially promising avenue for this work. The second area that we're looking at is improving our donor retention. So the number of our donors who choose to continue to use our research after they've given for the first time, I think this will probably be where we focus most of our growth work over the next three to six months. We're focused on this because it has a long-term return, it seems highly tractable, it has good expected value. The first thing that we're planning to work on with respect to donor retention is trying to better understand our current donor retention. So we don't have great data on this right now, for two reasons, one is just the way that our systems are set up.

37:50 CH: We can't access this information automatically, we have to pull it manually, and there are some issues with the tools that we're using, but we're planning to focus on that, first solve that problem. And then secondly, once we do solve that problem, we do think that we'll continue to have some challenges with understanding our retention rates, because of the way that data is reported to GiveWell. So many of our donors choose to give directly to the charities that we recommend. We were happy for people to do that, if they prefer to do that, if they tell us that they're influenced by our research so that we can include them in our understanding of how impactful we're being, but we're not sure that we're always getting reports from when people continue to donate to our top charities after they've maybe made that initial donation. And so we think that we'll have some challenges to understanding our retention rates.

38:39 CH: But we do want to prioritize trying to get some better information about that. And so after doing that, then the second priority would be testing ways to increase engagement from our donors and to improve our retention among different groups. The team focusing on outreach and growth is new, we're working with very limited information, limited existing data, limited history of experimentation to guide us and so we expect that our strategies might change over time. This is all quite early for us, but is something that we're prioritizing quite a lot as an organization. And we expect to expand the teams focusing on outreach and growth over the coming years.

39:22 CH: I wanted to just conclude with one last thing as we head into giving season. The first is just to flag that we still see very large funding gaps at all of our top charities. We're in the process of finalizing the reviews for all of the charities and to publish the amounts but some quick examples from some of the reviews, the we have finished. We think Malaria Consortium, which is one of our top charities that works on seasonal malaria chemoprevention can effectively absorb another \$66 million over the next three years. And SCI, the deworming charity I mentioned earlier can absorb around \$19 million over the next three years. We see that the global malaria gap is very large, we did our project earlier this year to look at the global needs for interventions to prevent malaria, and we thought that the gap for insecticide treated nets so the amount of nets that we think could be used, that will not be funded, is around \$640 million and the amount of seasonal malaria chemoprevention which is preventive antimalarial drugs that we think are effective at reducing malaria mortality in children. We think that there will be a gap of around \$200 million globally for that work.

40:40 CH: So we do still see very significant needs at our top charities, and working on the programs that they're working in. And one of the things that we get asked a lot, which is awesome for people at events like this is, you're here, you're interested in GiveWell... Maybe your friends would be interested in GiveWell or we get asked, you know how do I talk to people about GiveWell or tell them about GiveWell, so we thought we would share some ideas that we had for how that might... Ways that you might be able to do that. One is just sending people to our website and telling them why do you care about GiveWell. Another would be to give them a copy of the book 'The Life You Can Save' by Peter Singer. Or 'Doing Good Better' by William MacAskill. These are two books that many of our current donors have told us were really instrumental in getting them excited about the idea of giving effectively, and supporting the types of charities that GiveWell recommends. So we think they might be a particularly good introduction to thinking about evidence backed giving.

41:43 CH: Another idea is to write a giving guide. This would be similar to, if you've seen people write up information about where they're planning to donate, or sorry, to vote, like ballot guides, this would be a document or a post on Facebook about where you're planning to donate and why. We've seen this from a number of our donors and think it's really cool when they share it with us. If you write one we'd love to see it. GiveWell writes a blog post every year where the staff talk about, where we donate, so you can keep an eye out for that. We think that might also be a pretty good way to kick off the discussion in your network if you're comfortable doing that. And finally, if someone might want to make a large gift to GiveWell, we're also very happy to talk through the different considerations to GiveWell's recommended charities. We're happy to be put in touch directly, so please don't be shy about reaching out if you think that we might be able to be helpful in talking about the work that we do and why we recommend, what we recommend.

12/04/18 Page 9 of 12

- 42:41 CH: So, I'm going to pause for a few more questions here before we break one more time. Yes.
- 42:47 S2: I know you do a lot of research to make sure that where you give to is effective. What kind of research do you do to make sure that it's the most needed in the world?
- 43:01 CH: So, the question is, we do a lot of research to make sure that the work that we do is effective. How do we know that it's the most needed in the world?

43:09 S2: Yeah.

43:09 CH: Yeah, so we typically start from looking at the ways that we're able to have the most impact that we can according to the evidence base that exists. So we don't start from framing of, "What are the world's greatest problems?" Although certainly we think malaria is a huge problem, but we don't kind of start at that approach. We typically look for things that have been well studied that we think we can do to have a lot of impact with a lot of confidence. I'm not sure. Does that answer your question or was there a slightly different angle?

43:44 S2: Okay, so you don't try to fill the most needed gaps?

43:49 CH: We do try to fill the most needed gaps that we see in our top charities and among the things that we recommend and those things represent the most cost effective ways that we're aware of to help people that meet our criteria of being very evidence-backed and very cost effective. So we think they represent some of the best ways that you can possibly help people. It's a very... There're very cheap ways to improve or improve someone's life or avert their death.

44:19 S8: After the No Lean Season change, have you looked back at your process and learned anything? Did you think it was a mistake in the end to have added them? Or is this how things should work?

44:32 CH: Yes, the question was, was it a mistake to have added No Lean Season last year and what did we learn from the process of removing them? I think one of our takeaways from going through the No Lean Season process was that we probably should have had slightly... We should have adjusted our confidence that the program at scale would work in a similar way to how it worked at a smaller scale. So I think we had something like... I think, we had, I wanna say, 80% adjustment, external validity adjustment for those studies, the previous studies that were done, and we probably should have had something like maybe a 60% or 70% external validity adjustment. So that was definitely one of the reflections that we had.

45:14 CH: But I think broadly we don't think that it was a mistake to have added No Lean Season. I think our process needs to adapt to new information when we get it, and so I think that this is what we might expect. It's a program that we got new information on, it changed our opinion and we updated and we'll keep an eye to see if we get more information. I don't believe that we're reflecting on this and feeling like it was something we should have made a really different decision about last year, other than the too optimistic estimate for how the program at scale would look relative to how it looked at a small scale.

45:50 S8: What would you have done if the evidence were the same but they had no money to do the program this year and evaluate it next year?

46:00 CH: Well, that's a great question. What would we have done if the evidence was the same for No Lean Season? So failure to induce migration and scale, but they didn't have two extra years of additional funding to run an RCT. I'm not sure. I do know in a related, or maybe a similar situation, we have this charity, New Incentives, which was an Incubation Grant recipient. I mentioned earlier that there is an RCT going on of their program. We had been looking at New Incentives for a number of years, and at the end of 2016, decided that we weren't going to recommend them. So they were never a top charity, but we considered them as a top charity in 2016 and came to a negative conclusion; they would not meet our criteria. But we decided to make an Incubation Grant to support them to pivot and then also to study with an RCT, the new program. That could be a plausible avenue I could see, would be deciding that we wanted to fund a study to better understand No Lean Season's research, but I don't think we mapped out what we would have done in that case. But I could see that as something that is in the realm of things we could've done. Yeah.

47:04 S9: What are some of the qualities you see in the organizations [47:10] _____.

12/04/18 Page 10 of 12

47:15 CH: Yes. So what are some of the qualities we see in our top charity organizations? I think two things immediate come to mind, one is extremely excellent monitoring. So this is the work that a charity does to go back to the recipients of its programs, and see whether or not they received the program, how it impacted them. Very high quality monitoring is uncommon for most charities, it's expensive and difficult to implement. We look for extremely strong monitoring. So I think our top charities are unusual in the level of monitoring that they do and the quality of that monitoring. Another characteristic for our top charities that stands out to me is the transparency of their willingness to share results.

48:00 CH: So I mentioned No Lean Season being a pretty good example of the level of transparency that they have their willingness for us to share all of the questions and shortcomings and uncertainties that we have about their programs. This is true of all of our top charities, they share a lot of information with us and they allow us to make that information public so we can share it with the donors who use our research. I think if you go to most charities websites we'll not find this level of information. So those are two of the characteristics that stand out a lot to me for the charities that we recommend.

48:37 S10: Brian mentioned earlier about doubling the policy advocacy, I don't know if that's something you were going to talk about [48:42]
48:43 CH: Oh great, I didn't get back to that.
48:43 S10: [48:44]
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48:45 CH: Thank you for reminding me. Policy advocacy. Yes. So policy advocacy is an area that we are, we have been investigating as a potential GiveWell recommended area. The reason that we started looking into policy advocacy, was that we have identified a fairly significant amount of, what we call, room for more funding, so these high value funding gaps that we see that are similarly cost-effective to one another. So our top charities right now are generally within the range of five to ten times as cost-effective as cash transfers, the program implemented by Give Directly, one of our top charities, and that we use as a benchmark. This to us suggests that there is an even higher value to finding something that is much better than the cost-effectiveness of this band of top charities. And so even though we think that something like policy advocacy is much more challenging for us to assess, the reason being that where with something like, the Against Malaria Foundation distributing insecticide treated net, we have a lot of information from RCTs of insecticide treated nets that give us confidence that they help reduce malaria.

49:53 CH: And also a lot of monitoring information from AMF that shows that people are reached with those nets, and are using them. So we have this kind of fairly straightforward causal story. With policy advocacy, the types of things that we're thinking about are supporting organizations that work to get a low and middle income country governments to pass things like regulations for road safety, or tobacco taxation or led paint removal. And understanding whether a particular organization was instrumental in having a policy be passed is going to be harder than knowing if the Against Malaria Foundation reached someone with an insecticide treated net. But we think, policy has a potential to be a lot more cost-effective because you could fund an organization to help a policy get passed and that policy impacts many, many people for a long amount of time, so it might be very cost-effective as a result as a way to help people.

50:46 CH: And so we have put on a GiveWell research capacity into trying to understand this area better. We're still... We don't recommend anything in the space yet, we're still in the investigatory phase. We made an incubation grant to one group that's working to advocate to the governments of India and Nepal, to ban the most lethal types of pesticides that are used in suicide, that is an Incubation Grant that we made last year and we're in the process of investigating some other policy advocacy areas. But that's been the reason that...

51:17 S10: A small question about that. I guess I think it seems like GiveWell by themselves [51:21] _____, so wildly speaking, or what do you guys thinking about how to assess what sort of evidence you can bring there. Let's say a policy like that does get passed or doesn't. Yeah, how would you look at that [51:40] _____?

51:44 CH: So the question is you can't run an RCT on policy advocacy. So what kind of evidence will GiveWell be looking at to understand whether a given organization is having an impact in that space? We're going to want to spend a lot of time understanding the counterfactual of an organization's impacts and talking to policy makers, who maybe engage with that organization, talking to other players who were involved with the passage of a particular policy, and trying to really understand as best we can, whether there is a, you know logical plausible case for impact that we can make publicly. So, we publish all of our rational for a top charity recommendation, so it's important to us that we're able to sort of say, "Yes, this is less certain than an RCT, but you can see the logic for why we think this organization might

12/04/18 Page 11 of 12

possibly have a big impact in passing this policy," and then we'll also be able to look at the body of evidence that exists for something like, what is the impact of road safety laws on reducing traffic deaths?

52:42 CH: So that'll be sort of another piece of the evidence that would get us out separately, but it is more along the lines of doing case studies of organizations past impacts as I understand it. And I think this is also kind of an open question for us, we're in the process of thinking through what does a GiveWell style analysis of policy advocacy look like? But that's sort of my best guess as to where we would take it and my understanding of where we are now with that.

[background conversation]

53:12 S11: And so related to that question, I was thinking that some of advocacy if you look at it. So you can give a little bit of money to Against Malaria Foundation, they can buy you the net, but with a critical mass of money, then you can advocate programs so, not just for road safety but you could advocate for the defense ministry of a government to provide the bed nets themselves. And so I was wondering relative to those questions, if you guys are looking into that, so seeing what is the most effective defense space and seeing if you could do some lobbying throughout the government or towards some large NGO sharing more broadly the results so that people start doing this internal. Because I feel that, maybe you're, I don't know maybe you have given \$100 million or \$200 million to Against Malaria Foundation and use a fraction of that to get the governments to then committed to that standard.

54:00 CH: Yes. The question is, could we as a part of our policy advocacy work, encourage low and middle income country governments to spend more funding on the interventions that we think are most effective? I think in one sense these governments are already spending on the interventions that we're supporting, so it's not that they're not supporting the types of things that GiveWell is recommending. And I think a question that we would have would just be, how effective an organization could be at getting a government to change how it spends its funding and how confident we could be that that would be the most impactful thing that we could do. I know, we've also considered as part of this project thinking about whether GiveWell could, support something to get USAID, the US aid agency or DFID the UK aid agency to allocate their funding to more effective things that we are interested in supporting, and I think it's just tough with government advocacy to sort of know...

55:00 CH: We first want to know how those decisions are made, and whether there's a plausible route to getting a government to allocate funding more effectively. That seems potentially even more challenging than something like passing a road safety law, but it's something that we could consider. I just think it's more likely to be difficult to know what to do and who to support to do it at the start. I also want to know, it's 8 o'clock, so I think I'm going to pause the sort of official presentation time. I do want to thank everyone again for coming, and to encourage everyone to hang out and mingle, get to know each other. Talk to GiveWell staff, if GiveWell staff could again give a wave, we've got Erin back there, Caitlin and Dan and Olivia and they're all really happy to talk about our work. I'm happy to keep talking about our work and... Yeah, really appreciate everyone coming here. It's so much fun to meet everyone and hear the questions here and get to hang out with our friends here in New York. Thank you very much.

12/04/18 Page 12 of 12