

Stanford Effective Altruism
GiveWell's Top Charities

Introductions: your name, something you are unusually good at, something you are unusually bad at, how likely you are to donate to global poverty organizations in the future

(On the back of this sheet are summaries of two of GiveWell's top global poverty charities, if you are unfamiliar with them.)

How much would each of the following affect whether you'll support a global poverty charity? (If something is relevant to you only insofar as it is related to how well you can estimate something that you actually care about, don't estimate it.)

quality of life of the people affected

whether the people affected are likely to go on to contribute to groundbreaking technology

whether the people affected are likely to get an education

whether the people running the charity are themselves members of the affected group

transparency in the charity's decisionmaking procedures

whether the translation-to-impact from your donations is sufficiently high that you'll be able to name a person whose life was affected by your donation

whether the charity's marketing feels deceptive/feels like inspiration porn

whether increased wealth leads to increased factory farming

whether the charity's actions lead to increased inequality

If deworming prevents malnutrition and lack of brain development, therefore on average increasing IQ by 5 points, how many children dewormed would you consider equivalent to saving one child's life from malaria?

Is saving the life of an infant roughly the same thing as saving the life of a five-year-old or a ten-year-old? If not, what's the morally relevant difference?

Is it relevant to how good it is to save a life whether lowering child mortality usually causes a fall in family sizes?

Is it relevant to how good deworming treatments are whether better-nourished and healthier populations can more effectively advocate for other interventions later?

Against Malaria Foundation - Summary

What do they do? AMF provides funding for long-lasting insecticide-treated net distributions (for protection against malaria) in developing countries. **Does it work?** There is strong evidence that distributing nets reduces child mortality and malaria cases. AMF has relatively strong reporting requirements for its distribution partners and provides a level of public disclosure and tracking of distributions that we have not seen from any other net distribution charity. AMF has begun building a track record of funding and tracking fairly large-scale (\$1 million or more) distributions.

What do you get for your dollar? We estimate that the cost to purchase and distribute an AMF-funded net is \$5.30 in Malawi and, very roughly, \$7.50 in DRC (the two countries that AMF has worked most extensively in). The numbers of malaria cases prevented and lives saved are a function of a number of difficult to estimate factors, which we discuss in detail below. **Room for more funds?** AMF currently holds approximately \$6.8 million in funds that it could allocate to future distributions; this includes approximately \$2 million committed to a distribution scheduled for 2017. We believe AMF could conceivably absorb as much as \$25 million more in the next year. Considering AMF's track record of finalizing distributions and the past scale of its operations, we hope to see AMF receive an additional \$10 million.

AMF is recommended because of its:

- Focus on a program with a strong track record and excellent cost-effectiveness.
- Strong processes for ensuring that nets reach their intended recipients and monitoring whether they are used over the long-term.
- Standout transparency and commitment to self-evaluation.
- Room for more funding – we believe AMF will be able to use additional funds to deliver additional nets.

Major unresolved issues include:

Though we now have increased confidence in AMF's ability to find new partners and countries to work in, there is still significant uncertainty as to its ability to scale up. AMF has completed only a small number of large distributions, the type it aims to focus on in the future, and all completed distributions have been with a single partner. Its track record of collecting the data it seeks from these distributions is good so far but limited due to the small number of distributions. Many of its upcoming distributions are in DRC and our impression is that DRC is a particularly difficult place to work.

The best evidence for nets was collected before they were widely used and there is some evidence that mosquitoes have since adapted to the insecticide used in nets, possibly making them less effective. Further research is needed to determine how important of a problem this may be.

Schistosomiasis Control Initiative – Summary

What do they do? SCI works with governments in sub-Saharan Africa to create or scale up deworming programs. SCI's role has primarily been to identify country recipients, provide funding to governments for government-implemented programs, provide advisory support, and conduct research on the process and outcomes of the programs. Despite SCI sharing a number of spending reports with us, we do not feel we have a clear and complete picture of how SCI and the governments it supports have spent funds in the past. **Does it work?** We believe that there is relatively strong evidence for the positive impact of deworming. SCI has conducted several studies to determine whether its programs have reached a large proportion of children targeted. These studies provide some evidence that SCI has successfully implemented its programs but also have some significant limitations. **What do you get for your dollar?** We estimate that children are dewormed for a total of around \$1.23 per child. This figure relies on several difficult-to-estimate inputs including (a) how to account for donated drugs and (b) the portion of costs paid for by the governments with which SCI works. The number of lives significantly improved is a function of a number of difficult-to-estimate factors, which we discuss in detail in a separate report. **Is there room for more funds?** It is difficult to predict how much additional funding SCI will be able to use productively in the next year. Overall, we believe that SCI will likely have opportunities to spend or commit at least \$3.8 million in the next year, and that it is possible, but less likely, that up to an additional \$4.5 million (total \$8.3 million) would enable SCI to undertake work that it would otherwise not be able to due to funding constraints. SCI holds about \$1 million in uncommitted funds. **SCI is recommended because of its:**

- Focus on a program with a strong track record and excellent cost-effectiveness. ([More](#))
- Track record – SCI has repeatedly demonstrated success at starting and expanding national deworming programs.
- Room for more funding – we believe SCI will use be able to use additional funds to deliver additional treatments. ([More](#))

Major unresolved issues include:

- We have a limited understanding of SCI's work at a detailed level because we have limited and perhaps unreliable data on how SCI has spent funds in the past. We know fairly little about how successful SCI has been at reaching those it has targeted for treatment.