This is an edited version of a document that was shared with the Board. It has been redacted, in alignment with the guidelines on our Approach to Transparency page. We do not indicate each redacted item. However, we may indicate specific places where redactions were made if they improve the readability of the document (for example, clarifying that a link has been made confidential, or explaining the jump from one topic to another) or may make minor clarifying edits.

Annual summary of GiveWell research and grant deprioritizations, Q3 2024 - Q2 2025

GiveWell research and grant deprioritizations, Q3 2024 - Q2 2025
Background
Deprioritized interventions
Deprioritized research questions and intervention areas
Deprioritized grant investigations (presented in chronological order, by subteam)

Background

In October 2024, the GiveWell Board adopted a new grants approval process. As part of that new process, we committed to sharing an annual summary of deprioritizations.[1] This document is our annual read-out on work that the GiveWell research team has deprioritized.

Our goal in sharing this information is to make sure that we are being fully transparent with the Board about GiveWell's research work, which includes our deprioritization decisions. We suggest that members of the Board review the "deprioritized interventions" section, which is the broadest category. We are providing the list of individual grant deprioritizations for completeness and transparency, but we do not expect the Board to engage at the level of individual grants unless you wish to do so.

GiveWell's research process typically involves assessing the cost-effectiveness and feasibility of an intervention at a high level, then digging in deeper to specific grantmaking scenarios as an investigation proceeds. At every stage of the process, we may deprioritize further work for various reasons.

This document describes the research process, as well as our deprioritized research and grant deprioritizations from the past year.

[1] Quoting from the current grants approval process: "Annually, also at the board meeting roughly at year-end, GiveWell will share a list of programs or questions we are actively deprioritizing. This list will be inclusive of any new programs or questions and any material updates to previously shared programs or questions."

Stage of GiveWell process[2]	Explanation of stage	Potential reasons to deprioritize
Quick Evidence Assessment (QEA)	Before beginning a grant investigation into a program, we first complete preliminary research to better understand a particular intervention area. This usually involves 1-2 days of desk research (literature reviews, modeling) and sometimes speaking with experts on the topic. If we think an intervention is unlikely to be cost-effective, we write and publish a "short note" on the topic, which details what we did and what we concluded. (These are all stored here). *We do not publish organization-specific deprioritizations – only general interventions.* (In some cases, this has been helpful for getting feedback publicly – for example, we published a short note about family planning radio campaigns, and Family Empowerment Media (FEM) let us know that their costs per person reached were considerably lower than the estimate we used in our initial evaluation. We ended up funding an RCT of FEM's program.)	• Low cost-effectiveness • Low uptake of intervention • Low expected benefits, or benefits only to a small subset that would be difficult to target • High expected costs • Limited room for more funding • Negative spillover effects • Low-certainty evidence, unclear evidence, or lack of evidence
Intervention Research	After our initial review of an intervention looks promising, we dig further into evidence, uncertainties, and potential implementation opportunities. This mostly involves further contextualizing of an intervention (e.g., which areas have the highest burden or most need?), speaking with experts, and sometimes exploring various potential implementation or grant opportunities.	• Low cost-effectiveness • Capacity. *This has been one of the biggest deprioritization factors for us in the past couple of years, because it takes significant staff time to open up a new intervention area for investigation.* • Low-certainty evidence, unclear evidence, or lack of evidence *(Note: We may consider funding evidence generation if we think there are opportunities and we think the learning value is high, generalizable, and/or useful for others.)*
Early-stage grant investigation	The first steps of a grant investigation typically involve connecting with a potential grantee through email and/or call(s) to discuss the general opportunity and funding need. Once we have a general idea of the opportunity and we think it looks promising, we write an *Investigation Plan (IP)* for leadership approval. This is essentially a step to ensure alignment on	• Low cost-effectiveness • High costs • Other funder(s)s expected to step in • Limited room for more funding • Lack of capacity to investigate, especially for a new area we haven't explored much before, and especially when a quick decision is needed. *We do our best to make trade-offs between*

[2] For a more in-depth overview of the GiveWell research process, see this document.

	next steps, including the promisingness and the plans for the investigation.	*the opportunities we have available to investigate, and to right-size investigations based on the size of the grant.* • New research or monitoring and evaluation findings • Another implementer would be better suited
Investigation Plan approval		
Late-stage grant investigation	After leadership approves the Investigation Plan for a grant, our team engages in deeper investigation of an opportunity. This typically involves speaking with the potential grantee and other external stakeholders, modeling the program in a cost-effectiveness analysis, and digging in on key questions we have. Typically, we're working with the potential grantee on open questions, and iterating on program components, learning goals, or learning methods with them. We also often speak with government officials to ensure their buy-in and hear their perspectives on the concerns and opportunities, and we may talk to other relevant experts about other details of the program we're considering.	*Note there is a lot of overlap here with early-stage investigations.* • Lost cost-effectiveness • High costs • Other funder(s) expected to step in • Lack of alignment about core drivers of impact, learning needs/methods, or other program details • New research or monitoring and evaluation findings • Funding a smaller grant instead (e.g., instead of funding a full scale-up, we may choose to focus on a pilot or data collection to start) • Another implementer would be better suited • Limited learning potential • For learning grants: How much we think the learning will update our views on the program being evaluated • Costs outweigh marginal benefits of additional GiveWell funding
Conditional Approval (Grant is approved)		

Deprioritized interventions

Here are the deprioritization "short notes" we published in the last year on interventions that we are not pursuing for further research:

- GiveWell, Secondary school vouchers short note, 2025 (public)
- Oral cholera vaccines (OCVs)
- GiveWell, Typhoid conjugate vaccines (TCV) in India – Deprioritization short note, …
- Anticipatory cash transfers – Deprioritization short note, 2025 (public)

- Larval source management for malaria control
- Magnesium sulfate for preeclampsia (public)

[*The rest of this document covered the details of deprioritized research questions, intervention areas, and grant investigations. We have redacted that detail to avoid sharing information that we have not yet made public or confidential information about organizations.*]