



DIALOGUE

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Focus :

Fighting poverty during a pandemic: what can be expected from social experiments?

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In October 2019, the “Nobel” Prize in Economics was awarded to Esther Duflo, Abijit Banerjee, and Miguel Kremer, for their work on adapting the method of random assignment experiments – clinical trials – used in medicine to interventions in the field of development. The Nobel Committee considered that this new type of experiment, which will be called “social” here, “has considerably improved our ability to fight global poverty” and “has transformed development economics.” Fifteen months after the prize was awarded and one year after the start of the Covid-19 pandemic, the world is experiencing an unprecedented surge in poverty, especially in the Global South (Oxfam 2021, World Bank 2020). This offers a grim but exceptional opportunity to examine the ability of social experiments to respond to this global challenge.

While the method of random experiments in the field of development policies may seem attractive, it is unlikely that it will be able to meet current challenges. For nearly 10 years, we have scrutinized the promises of the method in its technical, social, economic, and political dimensions (Bédécarrats et al. 2019a, 2019b). Like many others before us, we have criticized its alleged superiority in terms of internal validity and questioned its external validity. In a more innovative way, we have explored the artefacts of its implementation, both by working in the fields where RCT research was carried out and by replicating the researchers’ econometric analyses. This exploration, though thankless and tedious, has the virtue of revealing the many tweaks but also manipulations in which some RCT researchers engage. We have also studied the political economy of social experiments. Far from being merely a scientific method, they have all the trappings of a unique business model, which is both unprecedented in the history of economic methods and surprisingly powerful in its ability to generate symbolic and financial rents.

We have continued this examination in an edited volume, which was published in October 2020 but finalized before the pandemic (Bédécarrats et al. 2020a). The book brings together high profile specialists and practitioners from various backgrounds and disciplines (economics, econometrics, mathematics, statistics, political economy, socio-economics, anthropology, philosophy, global health, epidemiology and medicine, and evaluation), as well as policy makers. The conclusions are indisputable. While social experiments can shed light on certain behaviors,

thus calling into question certain assumptions that economics as a discipline has taken for granted (Morduch 2020), they have very little to offer when it comes to understanding poverty and inequalities, and to fighting them. With the pandemic, the gap between the potential of the method and its ability to help alleviate the ensuing global poverty shock has become a chasm.

The method

The principle of clinical trials consists in randomly assigning individuals to two groups within a homogeneous population: the first receives a “treatment” (drug, subsidy, credit, training, etc.), the second a placebo, a different intervention, or nothing; after a certain period of time, the two groups are compared in order to assess the effectiveness of the intervention or to analyze two distinct modalities. Since the middle of the 20th century, this method has been widely applied in medicine, where it has given rise to much debate. The method was then transposed to the evaluation of public policies in the fields of education, crime, taxation, etc., notably in the United States in the 1960s-80s, with mixed results, as shown by one of the authors, himself a “Nobel” laureate in economics, in one of the chapters of the book (Heckman 2020).

For the past fifteen years, these social experiments (commonly referred to by their acronym: RCT for Randomized Control Trials) have been extended to a new field: public policies and development aid. A vast range of interventions has thus been put to the test of randomization, particularly in the areas of education, health, finance, agriculture, and even “governance.”

From theory to practice

Any impact assessment (of a project, policy, or program) comes up against a recurring challenge: how can the effect of this intervention be isolated from other changes that have occurred? Multiple methods exist, but the advantage of RCTs is theoretically unquestionable in that the random selection of representative samples ensures, in principle and on average, that any differences measured between the two groups are solely due to the intervention.

Yet such an advantage is far from guaranteed. Various studies have highlighted several types of limitations (Deaton, also a “Nobel” laureate in economics, 2020; Ravallion 2020): the results observed in an Indian village cannot be transposed to a Malagasy village or to a Bolivian city; the method measures an impact (of personalized support for the return to employment

of the unemployed, for example), but it does not allow explaining the underlying processes (better information, self-confidence, pressure, etc.); it measures average results, such as that of an overall increase in the standard of living, without taking their distribution into account, for example if some individuals have become very rich and others have grown poorer.

Moreover, the advantage of the method holds only in theory. A thorough analysis of the implementation in the field of the randomization protocol reveals a major problem: in many cases, it is impossible to respect the protocol, and this applies throughout the evaluation chain. This is the case with group assignment, which is not always random or focuses on very unique populations in order to ensure that they are “virgin” of any intervention. The intervention itself may be modified to meet protocol requirements, in particular by ensuring that there are enough participants for the difference between the control and treatment groups to be statistically measurable. This difference between the theoretical and actual protocols can be observed at the level of data collection, whose quality often leaves much to be desired because RCT researchers are often seasoned econometricians who do not necessarily have statistical skills, while these are very different jobs. Finally, this gap can be observed in the coding and in the interpretation of the data, two stages that involve multiple hypotheses, and even for the latter, a rhetoric that can prove very persuasive. The superiority of development RCT researchers lies perhaps above all in their superiority in the art of rhetoric and the masterful telling of anecdotes (Labrousse 2020).

Evaluating development policies or private goods?

Given the multiple requirements of the method, it is only applicable to simple or local short-term interventions targeting individuals. Concretely, these micro-interventions mainly concern individual private goods and services, and very rarely public common goods. For example, one of the most influential books on social experiments, with a promising title (*More Than Good Intentions: Improving the Ways the World's Poor Borrow, Save, Farm, Learn, and Stay Healthy*), highlights the “seven ideas that work” to reduce poverty in the world, i.e. whose causal impact has allegedly been demonstrated by randomized trials: microsavings, reminders to save, prepaid fertilizer sales, deworming, remedial education in small groups, chlorine dispensers for drinking water, and the use of commitment devices (Karlan and Appel 2012: pp. 272–275).

There is no doubt that such interventions are not useless, but what do they amount to in relation to the scale of the challenges in each sector? Four of them are dealt with in detail in the book and reveal the narrowness of the randomized approach. In the health sector, RCTs assess prevention and treatment actions, water filters, mosquito nets, training systems and bonuses for health professionals, free consultations, medical advice via text messages, and microinsurance. Yet RCTs do not answer the question of how to manage health systems, which are necessarily complex and systemic, and involve a skilled and motivated workforce, infrastructure, the supply of drugs, etc. (Garchitorena et al. 2020). In terms of sanitation, RCTs assess the distribution, construction, and use of latrines. Yet they do not answer the question of how to manage human waste flows and what type of sanitation, infrastructure, and regulation network should be created (Spears et al. 2020). In the area of poverty reduction, RCTs assess microcredit, savings, entrepreneurship training, and financial education services and their contribution to individual enrichment. Yet they do not answer the question of how regional or sectoral wealth is created, although these processes are decisive for the enrichment of some not to result in the impoverishment of others who are already poor or close to poverty (Bédécarrats et al. 2020c). In the governance of administrations and public institutions, RCTs assess random inspections, financial incentives, independent third-party audits, call centers, and telephone feedback. Yet they do not tackle the issues of the weak ability of the state, centralized bureaucracies marked by a lack of trust, limited resources, overburdened bureaucrats, and difficult working environments (Natarajan 2020).

Assessing the impact of real projects or testing hypothetical behaviors?

Even for private goods and services, and given the multiple gaps between theoretical and actual protocols, social experiments struggle to truly assess their impact. In fact, they prove particularly suited to testing the behaviors of populations in the face of an intervention that is proposed to them with variations (Morduch 2020). Social experiments may not allow assessing the impact of a microcredit or a water filter, but they will allow comparing the responses of populations to different modalities of microcredit or water filters. The intervention varies, for example in terms of price, information, training, etc., and the experimentation tests the variability of adherence rates, while the question of its impact remains unanswered. In other words, experimentation allows improving the sale or distribution of a product or service that is thought to have a positive social impact. However, in many

cases, it is not clear whether this is indeed the case, or just RCT researchers' beliefs.

The use of social experimentation is ultimately akin to social marketing. Social marketing consists in applying the tools of commercial marketing to design interventions aimed at changing behaviors and values in a way that is supposed to improve individual and collective well-being. Influenced by behavioral theory, social marketing combines nudge techniques, but also more traditional marketing methods (packaging, price, identification of the most appropriate distribution channels and places, etc.). Social marketing first appeared in the 1970s in areas such as reproductive health, AIDS prevention, rehydration therapy for diarrhea, and sanitation; it extends today to multiple sectors such as the environment, agriculture, education, financial management, and consumption. While social marketing is most likely useful in certain narrow areas where it has been shown to be successful, imagining that it could help solve poverty is unrealistic.

RCT researchers fit into a larger trend here, which they help legitimize in return: the relinquishment of ambitious objectives and national development policies in favor of "kinky" indicators (Pritchett 2020) and the accumulation of micro-interventions with which behaviors must comply (Servet 2018). Should there be resistant behaviors, social marketing will provide the solution. Yet far from denoting archaism and the rejection of progress, these resistances most often denote divergent representations of the world, for example of wealth and poverty, of clean and dirty, or even of care. Not only do these representations have their own local legitimacy, but they correspond to a vision of the world based on interwoven interdependencies, which is ultimately able to grasp the complexity of economic and social processes much better than RCT researchers' vision of a world composed of individual and atomized aggregates.

Protecting populations or advancing science?

Any research, whatever the method, assumes compliance with ethical obligations. However, social experiments are more concerned than other methods, for at least two reasons: first, they manipulate the environment that they study (people's lives); second, they bear on particularly vulnerable populations. Ethical standards exist and are the subject of various declarations and protocols to be observed. These include informed consent, the principle of "Do no harm," the offer of a specific protection for vulnerable populations, etc. It is striking to note that in experiments applied to development, researchers very often ignore these standards, as shown in one of the chapters of the book (Abramowicz and Szafarz 2020). They

do not hesitate to measure the effects of corruption on driver's licenses, which encourages both corruption and driving without a license (in India); to grant microcredits to people who are considered insolvent by a credit organization, without worrying about the risk of over-indebtedness (including in Bosnia and Mexico where the over-indebtedness of vulnerable populations has been established); or even to shut off tenants' water in a slum to see whether that prompts their landlords to pay their water bill (in Kenya), to name just a few examples.

Why is this so? The answer is quite simple: the faith in the advancement of science and the gains promised in the future are seen as outweighing the need to protect the populations concerned today. Note here the cavalier attitude of the ethics committees of these researchers' universities and of the academic journals that agree to publish the results of such studies. Here again, RCT researchers' excesses reflect a more general malaise: the current inability of the research world to guarantee its own code of ethics (Heckman and Moktan 2018). This situation is reminiscent of the relocation of clinical trials from the countries of the North to those of the South, which has been motivated both by cost savings and less resistance to participating in experiments, a recurrent problem for those carried out in the North. The poor in the South are not fully aware of their rights and caught in unbalanced power relations, so that they find it difficult to refuse. Regardless of all the scientific limitations mentioned so far, remedying the ethical failings of many of these social experiments is an immediate imperative, with some even calling for a moratorium (Hoffmann 2020).

What responses to the pandemic?

Finally, what can be expected from social experiments to fight poverty in the context of Covid-19? The answer is unfortunately pessimistic. In addition to all the limitations identified in the book and summarized here succinctly, there are new ones that are specific to this unique context. The magnitude of the shock is a game-changer. The problematic transposition of local results obtained in normal times simply cannot hold in times of upheaval in behavior. The transmission of the disease does not only depend on individual but also on collective behaviors, which implies generalized externalities for which the method is unsuitable. RCTs serve a knowledge-production strategy in which complex questions are not tackled as a whole, but are rather segmented into a series of simple questions that lend themselves to the requirements of the method. This micro approach, through "baby steps," is not suited to the need for macro responses, for scaling up imperatively, at the national level or at least at the regional one,

with systematic general equilibrium effects. It is a matter of massive emergency measures targeting short-time working, cash transfers to households, subsidies at the decentralized level, guarantees and lines of credit, etc., along with the fiscal, monetary, and budgetary policies to finance them; such interventions mobilize the whole machinery of the administration and thus cannot be evaluated through RCTs. In addition, the urgency of implementing measures compared to the long time required for the RCT method, as well as the ethical questions stemming from the exclusion of some populations drawn at random for the purposes of randomization are all additional reasons to rule out such experiments.

Governments around the world have not failed to realize this. While clinical trials have multiplied to develop a vaccine, to our knowledge, no public policy in the field of non-pharmaceutical interventions and especially in the economic and social field has been based on the results of RCTs conducted so far or still in progress. Even in the medical and epidemiological field, whenever interventions involving human behavior are considered, the clinical method has shown its limitations. Thus, a systematic review used by the WHO, which relies only on randomized studies, concludes that masks are ineffective for non-healthcare workers, even highlighting their negative effects (Jefferson et al. 2020). At the same time, another systematic review published by The Lancet, which relies mainly on observational studies, concludes that masks are highly effective for the general population (Chu et al. 2020). Does this mean that masks should be discarded, or more judiciously that the precautionary principle should be applied, while waiting for scientific studies to settle the question?

The ineffectiveness of social experiments does not mean that RCT researchers have given up, on the contrary. Drawing inspiration from old studies, specialists of the method have offered tips to improve insurance enrollment or online learning. They have organized massive campaigns (25 million people targeted in West Bengal) to test different incentive techniques to respect social distancing measures (Banerjee et al. 2020). One of these techniques is to stage a “celebrity” in an information video (in this case Abijit Banerjee himself). They have suggested that governments should invest heavily in two areas: cash transfers and digital infrastructure to efficiently distribute these transfers to the targeted population. This is not useless. Yet on the one hand, many others have also argued for this type of measure, and the randomized trial method does not give RCT researchers any particular legitimacy. On the other hand, here again, the structural dimension of these measures remains intact, both in their large-scale implementation and in their short-, medium-, and long-term effects

(Alvès and Kvamraven 2020). Yet this dimension is essential. As mentioned previously, what are the fiscal, monetary, and budgetary policies that allow financing these cash transfer policies? What is the technical and above all regulatory infrastructure that guarantees the democratic use of digital finance? While it may deliver money faster to vulnerable populations, it may also lead to monitoring and the invasion of privacy.

Considering that social experiments are an effective tool for poverty reduction comes down to considering poverty only in terms of a “lack” at the individual level (Shaffer 2015). Fighting against these lacks calls for policies aimed at filling them, and resorting to a counterfactual is therefore suitable to compare a situation “with” and “without.” On the other hand, a conception of poverty in terms of processes and power relations requires macroeconomic structural policies. Understanding the impact of these policies requires process analysis, which explores the diversity and complexity of the causal processes that generate the impact (Kabeer 2019).

While RCT researchers have rejected this controversy (Bédécarrats et al. 2020a), some have adapted their methods and practices (Ogden 2020), even if their responses have varied from one group of researchers to the other. Some have made their data available, thus encouraging replication. Others have recognized the legitimacy of methodological pluralism and have combined randomization with other methods. Some have focused in detail on impact mechanisms and processes, and have used specific theories (based primarily on behavioral economics). Others have taken the issue of external validity seriously and have multiplied case studies in different contexts (see Banerjee et al. (2015); even if Bédécarrats et al. (2020c) show that this does not solve the problem in any way). Others have re-analyzed a number of RCTs ex post (Meager 2019). Others still have taken the “baby step” critique seriously, focusing on large-scale programs and national policies. On the question of their weak influence on public policies (Pritchett 2020), some RCT researchers have created specialized organizations or have even become decision-makers themselves. In the field of ethics, a recent publication shows that this question is starting to be taken more seriously (Asiedu et al. 2021).

While such efforts are laudable, it is unfortunately doubtful that the responses provided, which are always of a technical nature, can withstand the vagaries of the field and really evaluate more complex interventions. One of the cruxes of the debate is the inveterate belief in the virtues of the

theoretical protocol, which is considered a priority over feasibility and ethical stakes. However, the more complex the programs and policies studied, the greater the risk of tampering and compromise, but also of dishonesty and manipulation. Technical sophistication is not enough. For many of the questions asked, pragmatism must prevail over scientism, and methodological pluralism over monotheism. However, many RCT researchers do not seem ready to give up this epistemological posture.

More than ever, RCTs must be put in their rightful place: they are one method among others, not an exception; they may be used and combined with others, and are ill-suited to responding to the challenge presented by the pandemic. Even though critical voices can be heard, many academic and other circles have yet to realize their limitations. RCTs, which have been bolstered by the “Nobel” prize and the redoubled efforts of their promoters to extol their merits, continue attracting millions of euros, often to the detriment of other approaches that are at least as rigorous and useful.

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