Improving Online Engagement of COVID-19 Self-Assessments

What incentivizes and motivates users to use online healthcare tools during the time of COVID-19?

**Key project details**

**Title of the project:**
Increasing uptake of our Self-Assessment tool through variations in message structure and timing.

**Organisation(s):**
Living Goods and Medic

**Initiative:**
The Virtual Design Lab (vLab)

**Researchers/Staff Involved:**
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**Summary Author:**
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**Behavioural Themes:**
Uptake, timing, incentives

**Workstream:**
CHIA-COVID 19

**Location:**
Busia, Thika

**Sample Size:**
This study is made up of 3 smaller studies. First, an SMS test was conducted with 3,345 respondents. Then, two sets of qualitative interviews were conducted with 20 respondents each.
Summary

**Brief overview:**

Text messages and chatbots can be an effective way to share health information with a wide audience. Due to the sheer number of similar services out there, it can be challenging to interact with end-users or even get a response. The Innovation Network’s pioneering self-assessment tool for COVID-19, Integrated Community Case Management (ICCM), Antenatal Care (ANC) and Postnatal Care (PNC) faced this very challenge. Using the Virtual Design Lab’s (vLab) expertise in rapid research design and testing, vLab created different variations of the same assessments, by making small changes in the day and time of interaction, the language of messages, and using visual aids to better understand their audience and make their tool more effective.

**Result:**

Varying the timings and days of messages showed that WHEN you reach out is key to getting a response. For vLab audiences, afternoons or evenings, especially on Wednesdays and Fridays, were the best time to engage. The language of messages did not matter as much, but how they were framed was important. Calls to action, such as “Reply with 1” triggered people to respond.

Many users receive up to ten messages from various providers during the day, many of which are promotional materials. Putting these findings in the context of message fatigue they experience strengthens the need for building useful action-oriented tools for healthcare.

For vLab, the process of testing these variations also showed them how to improve their processes to ensure reliability and trust in users, through an understanding of users’ sociodemographic background and access levels.
Context

The bloom of technology-based solutions has become a mainstay following the spread of COVID-19: there are now platforms for every purpose, including healthcare. While these platforms have brought remote populations into the fold and overcome last mile delivery challenges, the impact has not been completely positive. People are constantly bombarded by messages and offers that overload them with information. In this environment, overcoming attention deficits and message fatigue has become as important as the service itself. This raises several key questions:

1. What are the best times to reach users?

2. What is the best way to build trust and reliability with users of healthcare platforms?

3. How can we motivate users to engage with the platform and benefit from its services?

The Innovation Network’s developed a self-triage platform that allows users to self-assess themselves for a given illness, empowers individuals to take charge of their health and flag for further assistance from a CHW or visit a health facility when needed. Improving their systems and understanding the user experience is key to their contribution towards fighting COVID-19.
Intervention Design

The interventions targeted three main behaviors:

1) Getting people to start using the platform through brand awareness;

2) linking those who were suspected of an illness to a CHW or directing them to a health facility or the Ministry of Health’s (MOH) emergency response unit (in the case of Covid-19) for further assistance; and

3) Getting people to feel safe and comfortable while using the platform, leading to better engagement.

To get people to start using the platform, vLab needed to know the best time to reach them. To do this, over 3000 individuals received SMSs to start using the platform. These messages arrived at one of four times [7am, 1pm, 3pm, and 5:30pm] during the week. To account for those who might have missed the message or never received it, stickers containing the same information were also designed and distributed. Integrating a physical channel helped reach out to a different set of individuals and groups with less technological acumen.
As seen across behavioral science research, awareness of something does not instantaneously translate to usage. Moving in this direction required nudging individuals towards an action. By randomly assigning half the respondents to receive a message about what others are doing and the other half to receive an informational message, vLab tested how best to structure calls to action.

What others are doing: “10 People recently completed a health check-up in their community. Would you like to do the same? Type 1 to continue. The service is free.”

Informational message: “Wafula thinks that covid 19 is spread through contact but Samuel thinks differently. Check-out who is right by replying to this message with 1. The service is free.”

Building comfort and trust required better knowledge of how individuals think. Many of the communities vLab works with are multilingual. Using their preferred language would help build a sense of mutual understanding and respect. This prompted a small test of the same message in English and Swahili, which demonstrated no real impact of the language on usage of CIHA.

While the aforementioned designs helped capture how people might behave, there was no information or deeper understanding of WHY they behaved in this manner. A series of qualitative interviews delved into people’s perceptions of the self-assessment platform and the way they interact with online platforms. Some of the key perceptions were:

- Some household members thought that if they indicated symptoms for Covid-19, their details would be submitted to the government and they would be put under mandatory quarantine.

- Other household members mentioned the need for a variety of self-assessment services beyond what was offered with one male respondent requesting for HIV self-screening options.

Each of these designs was created in consultation with end users and utilized a human-centered design approach. This process involved designing with the target audience, prototyping with them, and rapid testing before incorporating learning into the following designs.
Intervention: Results

Getting people onto the CIHA platform depended on reaching them at the right time with a call to action. The communities served by vLab are most accessible in the afternoons or evenings, especially towards the end of the week.
Getting individuals to trust and continue using the CIHA platform does not depend on language of messages. Telling people what others are doing and getting them to respond motivates them to continue engaging, while simply sending them information does not.

Individuals are prone to message fatigue and information overload as most of them receive around ten promotional messages a day and are bound to ignore subsequent messages: “Nilithania ni message kama zile zingine za kawoida” (I thought it was a regular message like the others) explained one female respondent as to why she did not look at the SMS prompts.

Many do not get a chance to look at their messages during the day and can only address them in the evenings. Inquiring about phone habits brought to light how families often share phones and messages, which makes privacy and familial status important aspects of SMS-based interventions.

Many text messages are viewed with suspicion. A few respondents shared that they thought the tool was being used by the government for contact tracing, which was not the case.

**Discussion and Exploration**

While designing an idea to test is an exciting and thought-provoking process, the results showed us that investing in a strong messaging infrastructure is tantamount to executing good ideas. Knowing when to reach people and how they think of COVID-19 messages are extremely helpful inputs into the process of designing intervention.

These tests are the first step in understanding uptake in an online environment. While the issue of uptake has been studied across a number of sectors, conducting similar studies online will expose a host of new barriers, such as access to network, digital literacy, attention deficit, and information overload. As a number of essential tools and services move into this space, it will become more and more important to know how to speak to people and earn their trust.

The process of designing the ideas and implementing them have also shown promise for conducting remote research, where randomization is easy and implementation simply requires sending out a number of messages or stimuli. This allows us to do a lot more in less time, as well as integrate our learnings from one test to the next in the hopes of constantly improving and evolving our methods.