# The Reality of Using Segmentation to Drive Behavior Change

PANEL DISCUSSION | ICFP 2022









## Welcome!



Gwyn

BMGF







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#### What is psycho-behavioral segmentation?

SEGMENTATION TYPES	SEGMENTATION CHARACTERISTICS	
Attitudes, Norms & Agency	Segmentation that identifies subgroups within a population with different needs, attitudes, and willingness to change behavior. <i>Limitation: More challenging to target in outreach</i>	Optimal Approach
Behavioral	<ul> <li>Segmentation based on observable behavior, such as consumer activity or media use. Limitations: Intensive use data may not be available; identifies behavior but does not explain it</li> </ul>	
Psychographic	<ul> <li>Segmentation based on broad attitudes or personality traits, such as introversion or values. <i>Limitation: Identifies receptive audiences, but does</i> <i>not identify segments that will change behavior</i></li> </ul>	
Attributional	<ul> <li>Segmentation based on a single attribute, such as life-stage, or property status. Limitation: Ignores other attributes that may be greater determinants of behavior</li> </ul>	
Demographic	Segmentation based on a census or demographic factor, such as gender, urban/rural, or age. <i>Limitation: Assumes common needs &amp; behaviors</i> across or within demographic groups	
Impact on Behavior		



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# **Case Study: Beyond Bias**

Key factors to consider when integrating psycho-behavioral segmentation in your program

**Lydia Murithi** Pathfinder International

## **Beyond Bias Project**

**Goal:** To design and test scalable innovative solutions to address provider bias toward serving youth ages 15-24 with family planning services in **Burkina Faso, Pakistan,** and **Tanzania**.



## **Beyond Bias' User-centered Process**



## WE USED SEGMENTATION TO:

Better understand the major drivers of bias (bias profiles) by country:

- How do these drivers present in each context?
- Are there trends in the appearance of these drivers in segments across regions?
- What are the key opportunities and obstacles to shifting provider attitudes and behaviors in each country?

11 major drivers of bias were cross-validated by Camber's quantitative survey (n=811) and YLabs' qualitative interviews (n= 373).

#### **Biographic**

- Negative attitudes
- Willingness to change
- Provider attributes
- Difficulty
- communicating
- Product inexperience

#### Situational

- Lack of motivation
- Workload
- Workplace norms
- Competing SRH
- risks
- Clinic reputation



## Quantitative Psycho-Behavioral segmentation was used to identify six segments of providers, with different bias profiles.

service

DETACHED PROFESSIONAL	AVERAGE PASSIVE
Well-trained, though emotionally dis- connected from youth	Aware of AYSRH practices, but somewhat biased and relatively unsympathetic for youth
IMPROMPTU SISTER	SYMPATHETIC GUARDIAN
Most connected with young clients, though also prone to believe they know what's best	Well-intentioned, and though somewhat misinformed, exhibit overall high quality youth service



CONTENT **CONSERVATIVE** 

Generally open-minded and youth friendly, but distrustful of modern methods and independent women



PATERNALISTIC CLINICIAN

Busy older doctors who, despite some progressive attitudes, show strong marital and parity bias



Link to full segmentation report: https://www.pathfinder.org/publications/?keyword=beyond+bias

# Segment composition for each country



## Drivers and manifestations of bias by country







Refusal to serve unmarried clients

• Deny LARCs to nulliparous clients

• Require spousal or parental consent

DOMINANT
SEGMENT



Detached Professional (79%) Content Conservative (60%)

WHAT BIAS LOOKS LIKE

MAJOR

DRIVER

S

Bias against LARCs and hormonal methods
Requiring clients to take HIV tests
May refuse service to unmarried clients Prioritize older clients
Do not explain all methods or side effects
Likely to promote abstinence

to unmarried youth

- Workload Negative
- attitudes Social
- norms

Social norms Misinformation Negative attitudes



Willing to change



## **KEY FACTORS TO CONSIDER:**

Four critical factors to consider when using segmentation analysis in global public health programs:

- <u>Utility</u>: the effectiveness of the segmentation analysis approach vs no segmentation or standard segmentation based solely on demographics.
- <u>Ethics</u>: the potential unintended consequences or moral decision points that arise through segmentation analysis or application of its findings.
- <u>Scale</u>: the balance between nuance and generalizability.
- <u>Sequencing</u>: of segmentation activities relative to other intervention design activities such as design research, ideation etc.

## **Case Study: Breakthrough RESEARCH**

Psychographic Segmentation at Scale: Constructing Measures for Cross Country Application

Leanne Dougherty Population Council

# Background

- Understanding psychographic characteristics such as attitudes, self-efficacy, and social norms, and measuring their relative contribution to behavioral uptake through audience segmentation is essential in designing and monitoring effective family planning (FP) programming.
- Despite their importance, **few psychographic indicators are routinely captured** outside awareness of contraception in large scale surveys.
- We aim to show how collecting psychographic measures in large scale surveys in low contraceptive prevalence settings can generate behavioral insights that lead to improved social and behavior change (SBC) programming.

## **Methods**

**Study Objective:** Develop reproductive health audience profiles integrating both **sociodemographic** (e.g., age, education, wealth) and **behavioral determinants** to inform SBC approaches tailored to audience subgroups.

- Cross-sectional household survey with married women aged 15–49 (N=2,709) in Maradi and Zinder regions of Niger in RISE II program intervention and comparison sites, April–May 2021.
- Latent class analysis used to identify audience subgroups based on patterns of responses across study participants in survey data.
- Segmentation approach allows us to move beyond focusing on one characteristic at a time (e.g. age) and instead **finds relationships within the data** to create audience profiles **using multiple characteristics** at once.
- Audience **subgroups** used to create **personas** to provide important insights for SBC programs.

## **Behavioral determinants**









- Has heard of at least 3 different FP methods
- Acceptable for a couple to use FP methods such as condoms, the pill or injectables to delay or avoid pregnancy
- Members of this community agree that a woman should use FP methods
- Know where to go to get FP methods



 Feel comfortable discussing FP methods with my partner

# **Segmentation insights**

#### **Developing Personas Based on Latent Class Audience Profiles**



#### Aida (29% of sample)

- Poorer, less educated Nigerien woman.
- Low levels of knowledge about FP methods.
- Less likely to believes it is acceptable to use FP methods.
- Weak self-efficacy and low levels of partner communication.



#### Bintou (7% of sample)

- Wealthier, educated Nigerien woman.
- Believes it is acceptable to use
   FP methods and she knows
   where to obtain FP methods.
- Less likely to believe women in her community agree it is ok for women to use FP methods.



#### Fatou (51% of sample)

- Older, less educated Nigerien woman.
- Believes it is acceptable to use FP methods and she knows where to obtain FP methods.
- Strong levels of partner communication about FP methods.



#### Laila (21% of sample)

- Young, educated Nigerien woman.
- Believes it is acceptable to use FP methods and she knows where to obtain FP methods.
- Believes women in her community believe it is ok for women to use FP methods.

## **Implications for scalability**

- Previous FP segmentation analyses using large scale surveys have primarily relied on socio-demographic characteristics from the *Demographic and Health Surveys* and have not incorporated psychographic measures.
- Psychographic measures can create more nuanced profiles that can be used for more tailored, message specific SBC programming.
- More effort is needed to develop psychographic measures through qualitative research that can be incorporated into large scale multi-country surveys.
- Programs also need tools that facilitate application of segmentation data.

# **Case Study: YUVAA**

Designing Segmentation Studies that Reflect Project Realities

Sakina Zaidi Camber Collective

### What will the segmentation be used for?



Yuvaa (Youth Voices for Agency and Access) combines <u>innovative</u> <u>communication</u> & <u>social entrepreneurship</u> to shift social norms & improve access to contraceptive choices for young couples in 10 districts of Bihar and Maharashtra.

## YUVAA segmentation was intended to help answer 3 Qs:

### WHO:

Which couples should we target?

## HOW:

Which messages/ messengers should we deploy to shift couples' beliefs?

## WHAT:

What bundled products should we sell to couples?

## It would touch all aspects of intervention design...



# SO segmentation had to be designed to balance key considerations

Complex enough to identify meaningful sub populations Simple enough to be used for desired interventions

# Critical segmentation design choices made for YUVAA included:

BROAD SURVEY Qs	TRANSPORT SYMBOLS	CO-ED SEGMENTS
(Vs. Deep on Attitudes)	(Vs. Detailed Profiles)	(Vs. Single Gender)

# Key learning: For segmentation insights to be useful, segmentation design should take into account:

- Intended interventions/ users
- Available resources
- Context specific factors



# **Case Study: CyberRwanda**

Combining human-centered design with segmentation to design scalable yet tailored interventions

**Nicole Ippoliti, Technical Director** YLabs Introduction

#### CyberRwanda Overview

- 1. CyberRwanda has 3 main parts
  - Stories
  - Learn
  - Shop
- 2. CyberRwanda is optimized for tablets and phones, to be used in schools and personal devices
- 3. It's a web and native app, designed with input from >1000 youth.



### HCD + Segmentation To guide adaptive implementation and new feature design we have combined quantitative data of 5,778 youth with qualitative data of 109 youth to inform qualitative segmentation and 2023 scale up strategy.

### Midline Quantitative Analysis (n=5778)

Where do you most frequently access the following?	Own device	Borrowed device	At Youth Center	At School	NO access	Refuse to answer
Computer, Laptop, Tablet	0.9%	8.7%	0.6%	61.0%	28.6%	0.2%
Internet	6.6%	22.4%	0.3%	26.9%	43.8%	0.2%
Feature phone	26.8%	49.6%	0.2%	0.4%	22.9%	0.1%
Smart Phone	7.6%	36.2%	0.2%	0.5%	55.3%	0.2%

- Half of youth do not own a smartphone, but use a borrowed feature phone.
- Youth most often access computers and tablets **through school** and do not otherwise have internet access.

#### Location: Urban

#### **The Anxious Avoider**

#### Vibe

- In school, 16, and has access to a shared feature phone.
- Uses Cyber in school on tablets
- Has sex sporadically. Doesn't want to be the "kind of girl who carries condoms", but wants to know how to use them and advocate for them.
- Knew a little about EC, recently learned from CyberRwanda how to use and access EC, in a discreet and affordable way
- Worried about becoming pregnant and having her life go off course
- Uses Cyber during moments of crises



#### Using the User Journey

STEP ONE Awareness & Priming STEP TWO Need Identification & Selection STEP THREE Ordering

STEP FOUR Product/Provider Access

#### STEP FIVE Service Experience & Counselling

- How do they first become aware of CyberRwanda?

- What opportunities or obstacles impact their awareness of Cyber? -How do they determine Cyber is trusted? What increases trust?

What needs is it specifically fulfilling for them?

-What opportunities or obstacles impact their desire and ability to place an order on Cyber? -What opportunities or obstacles impact seeking a provider affiliated with the Cyber network? -What impacts their ability to receive a youth-friendly service from the provider and gain the information they need to support appropriate use of the product?



#### Anxious Avoider: Optimizing the User Journey for Cyber Scale

STEP TWO STEP FOUR Awareness & Need Identification Ordering Product/Provider Service Experience & Selection & Counselling Priming Access -Increase tablets per -Develop USSD to -Expand network of -Partner with - Maintain school school and integrate support product providers to include government officials Cyber into SMART model placement via health posts to leverage our classrooms feature phones provider training to Advertise Cyber on -Work with support social media ads via -Increase immediate -Develop implementing, youth-friendly Facebook as that can value and legitimacy marketing material private sector, and training for health be accessed through of CR through that has the USSD government partners post workers testimonials from feature phones code for ordering to ensure availability trusted officials of product choice at disseminated via health posts social media

#### Key Takeaways

Rapid qualitative segmentation plus demographic data can provide a practical way to guide design and scale-up strategy, especially when time and funds do not permit quantitative segmentation



#### Key Takeaways

Segmentation + focused prototyping helped ensure that prototypes of new design features were meeting distinct user needs. It helped prioritisation of design features and support equity in decision-making on scale-up.



#### **Key Takeaways**

# Advantages of a rapid qualitative segmentation are:

- Cost-effectiveness
- More rapid timeframe
- Accessible approach to guide design and understand user motivations
- Can be repeated as program scales/evolves

#### **Disadvantages:**

• Less understanding of % representation of audience





**THANK YOU!** 















