

Designing
Segment-Targeted
Interventions for
Improving COVID 19
Vaccine Uptake

Psycho-behavioral
Segmentation Cote d'Ivoire
April 2023

Content

1. About Segmentation
2. Objectives and Methodology
3. Segmentation Frameworks
4. Segment Profiles
5. Using Segmentation



About Segmentation



Segmentation Origins and Purpose

Segmentation involves clustering individuals by shared characteristics

First developed in private sector for three key purposes:

1. **Prioritization** – niche, ease of engagement
2. **Customization** – higher engagement, better subjective experiences and market expansion
3. **Targeting** – efficiency in distribution and supply



DINK (Double/Dual Income, No Kids)

Both partners in a household earn an income and have no children. They tend to exhibit discretionary expenditure on luxury goods and entertainment, as well as dining out.



GLAM (Greying, Leisured and Moneyed)

Retired rich older people. They tend to exhibit higher spending on recreation, travel, and entertainment.



(American) Preppy

Well-educated, wealthy, upper-class young people. Often, graduates of expensive schools. They can be distinguished by a style of dress.



SITKOM (Single Income, Two Kids, Oppressive Mortgage)

They have very little discretionary income to spend and struggle to make ends meet.



YUPPY or YUPPIE (Young, Upwardly-Mobile Professional)

Well-educated and career-minded. They are ambitious and affluent. They also spend their money freely.

Activating Demand

Latent Demand

In contrast to the traditional demand generation approach which is heavy touch, a **behavioral psychology**-driven approach posits that **demand isn't 'generated', but exists in the form of needs, preferences and tendencies of individuals**, which can be converted into actual demand, given the right context and cues. We call this **latent demand**.

Self-Selected Attention

When the **design** of products, services and communications is **aligned to the behavioral drivers and latent demand** of the target population, they are **intrinsically driven** to engage with the product/service, without any external pushes or influences. This outcome is known as 'self-selected attention'.

Latent Demand

Assumed Demand for Vaccine

[X] is a dangerous disease,...

Vaccine can protect me from [X].....

Without serious side-effects.

Latent Demand for Vaccine

I want to follow the vaccination norm in my community

I am safe but I want to protect my vulnerable family members

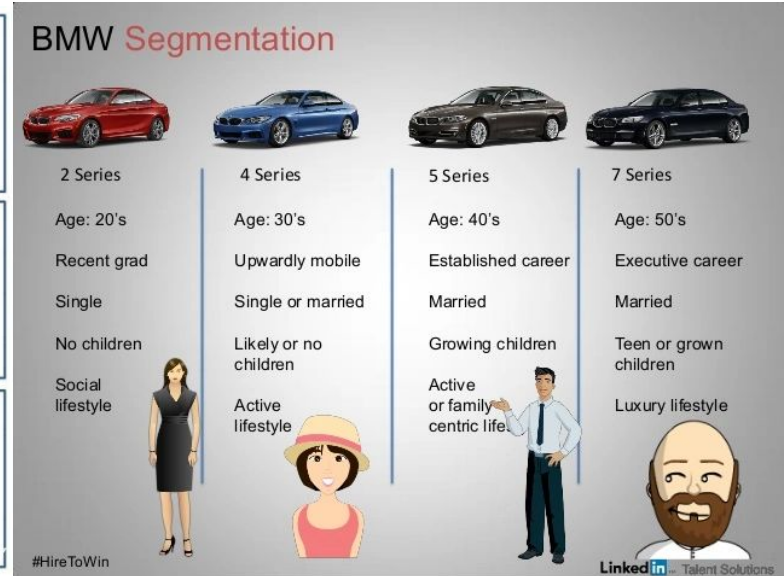
Free vaccine must be low quality, I will go to a private clinic and get [Y] brand

I trust [Z] and they told me to get vaccinated

Latent demand is often **non-conscious and inexplicit**, therefore it has to be **inferred and decoded**

Self-Selected Attention

 <p>Mini Seg. A (10%)</p> <ul style="list-style-type: none"> Hyundai i10 VW up! Suzuki Alto 	 <p>Supermini Seg. B (26%)</p> <ul style="list-style-type: none"> Ford Fiesta Opel Corsa VW Polo 	 <p>Lower medium Seg. C (31%)</p> <ul style="list-style-type: none"> Ford Focus VW Golf Opel Astra
 <p>Upper medium Seg. D (10%)</p> <ul style="list-style-type: none"> BMW 3 Series Opel Insignia Audi A4 	 <p>Executive Seg. E (3%)</p> <ul style="list-style-type: none"> BMW 5 Series Audi A6 Mercedes-Benz E-Class 	 <p>Luxury Seg. F (0.2%)</p> <ul style="list-style-type: none"> BMW 7 Series Jaguar XJ Mercedes-Benz S-Class
 <p>Specialist sports Seg. G (1%)</p> <ul style="list-style-type: none"> VW Scirocco Audi TT Mercedes-Benz SLK 	 <p>Dual purpose Seg. H (18%)</p> <ul style="list-style-type: none"> Ford Kuga Kia Sportage Range Rover Evoque 	 <p>MPV Seg. I (1%)</p> <ul style="list-style-type: none"> Citroen C4 Picasso Ford C-Max Opel Zafira



Diversity and variability of latent demand necessitates **multiple, differentiated solutions** for self-selected attention

Unique Benefits in Development Sector

When used in activating latent demand for public health and development programs, many of the benefits of this approach in private sector, like **higher engagement and efficiency**, translate well to the sector. Others, like prioritization, do not align with the needs of the sector.

Beyond its purpose in private sector, segmentation provides some **unique benefits in the development sector**.

1. **More inclusive and equitable outcomes**
2. **Reduced externalities and collateral impact**
3. **Reduced resource and time requirements**
4. **Managing complexity**
5. **Universalization**

Objectives and Methodology



Overall Project Objective

Identify	Assess	Strategize	Co-develop	Support
<p>Identify the conscious and non-conscious drivers of hesitancy or aversion towards COVID-19 vaccines and barriers to vaccine confidence and uptake.</p>	<p>Assess the prevalence and clustering of the drivers and barriers in different segments of the population, profiling those segments for effective and actionable solution-targeting.</p>	<p>Strategize on effective levers of behavior change to boost confidence in an willingness to receive COVID vaccines for each segment.</p>	<p>Co-develop segment-targeted solution concepts with governments, implementing partners and local stakeholders supporting vaccine demand and uptake.</p>	<p>Build guidance materials and tools to support implementers and public health authorities to comprehensively understand and use the segment profiles, solutions strategy, and to help them effectively adapt and deploy localized interventions to address the barriers.</p>

Project Process

Psycho-behavioral segmentation enables us to identify the most vulnerable individuals, who they are, how they vary across key dimensions in order to better address their needs and mitigate risks, allowing for more actionable and relevant interventions and solutions.



Qualitative Research Planning

- Secondary research review
- Stakeholder immersion
- Hypothesis building
- Research tools
- IRB



Research Execution

- Moderator training
- Qualitative formative research



Analysis and Synthesis

- Transcripts analysis
- Sensemaking
- Data synthesis to inform quant survey instrument



Quantitative Research Planning

- Quantitative survey instrument
- Quantitative sampling design
- In-country localization
- IRB amendment
- Coding survey into platform - survey, data checks, GPS, audio



Pretest/Pilot

- Elite team training
- Pre-test
- Feedback and iteration
- Elite team trains enumerators
- Pilot with enumerators
- Feedback and iteration



Main Field Work

- Field work execution
- Ongoing quality checks for data quality audit, audio audit and physical back checks
- Daily feedback to enumerators



Data Analysis

- Preparing final data set
- Cluster modelling

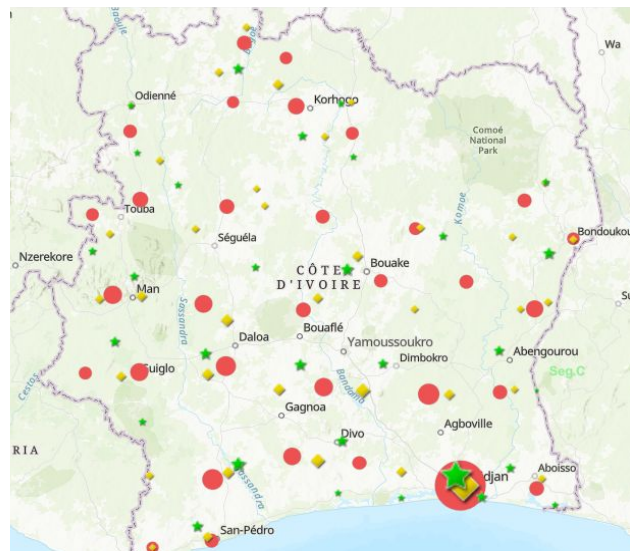


Data Synthesis

- Variable level analysis
- Journey sense making
- Barrier mapping
- Segmentation Description



- The target sample size in the **qualitative research** was 40 participants across various geographic and demographic criteria
- The target sample size in the **quantitative research** was specifically 2500 adult (18+) respondents in Côte d'Ivoire.
- For the quantitative survey, the main sample was drawn from a probability-based stratified random cluster design. The sampling frame was a listing of micro-areas that provide comprehensive coverage of the entire country.
- Each micro-area served as a primary sampling unit (PSU). 250 PSUs will be randomly selected with probability proportional to size (PPS) within urban/rural strata. Within each PSU, rapid household listings will be conducted.
- Each selected PSU to permit random sampling of 10 households within each PSU.



Psycho-Behavioral Approach - Stability, Scalability and Predictive Value

Typical KAP Surveys

- Based on self-reports of individuals' attitudes, beliefs, preferences and intentions
- Self-reports **don't capture non-conscious tendencies**, therefore insufficient for latent demand
- Attitudes and preferences are **unstable and context dependent**, therefore not predictive of real-world behavior
- Gives us the current preferences but **not the strategies to change them**

Psycho-Behavioral Survey

- **Deconstruct** decision-making, intent formation and preference construction
- Capture the **components and processes**
- Build a **psycho-behavioral model** to not only understand current preferences, but also **predict preferences in other contexts**
 - Future scenarios
 - Other geographies
 - Response to programmatic interventions

Quantitative Survey Design Overview



Screener

- Respondent age
- COVID beliefs
- Vaccination status



COVID Risk Appraisal

- Risk perceptions
- Testing experiences
- Sickness experiences
- Personal COVID impacts
- Disease comparison



COVID Vaccine Experiences

- When does received
- Vaccine intentions
- Vaccine experiences
- Vaccine safety & efficacy perceptions
- Vaccine emotions
- Needle fear



Other Enablers & Barriers

- Trust in authorities
- Virus & vaccine myths & beliefs
- Decision autonomy
- Inertia & procrastination
- Vaccine benefits
- Process awareness
- Constraints & resources
- Sources of information



General Health Status & Access

- Overall health
- Doctor influence
- COVID symptoms
- Care seeking
- Access to care



Knowledge Quiz / Coping Actions

- Actions to protect against COVID
- Frequency of actions vs. 12 months ago



Socio-demographics

- Household type
- Occupation
- Gender
- Education
- Religion

Sampling - Probability-based Stratified Random Cluster Design

1. Randomized selection of primary sampling unit (PSU) with probability proportional to size within urban/rural strata
2. Random sampling of 10 households within each PSU
3. Random selection of adult household member to interview

Quality Control

- Screening and in-person training of moderators, including live pilots in the field
- Standardized surveys and tablet-assisted interviewing
- Audits - data quality flags, audio backchecks, physical backchecks

Segmentation Modelling -

Semi-Supervised AI/ML-Driven Iterative Exploratory Approach

Qual Insights

Journey framework with enablers & barriers

Factor Analyses

Latent factors identified in quant data

Regression Analyses

Factors identified as sig. associated with vaccine uptake

Segmentation Analyses

Competing Models
Factors which have significant variation & produce differentiated segments

These segmentation variables were not “pre-determined”* The iterative analytic process and competing models identified them as existing in the data to use in a final model

Core Variables Used to Segment Across Countries

General variables

- Trust in government, health system
- Economic hardship
- Health system engagement

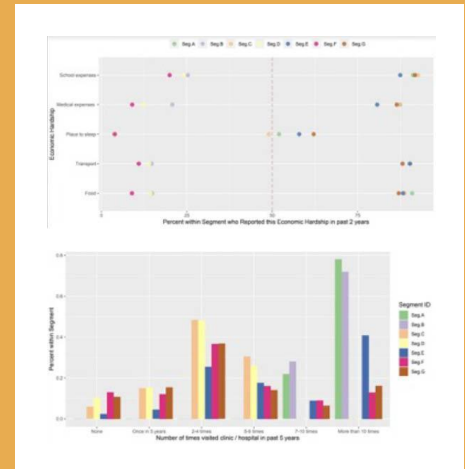
COVID specific variables

- COVID vaccinations rates for zero dose, one dose, 2 doses and booster shots
- COVID perceptions
- Risk appraisals
- COVID vaccine perceptions

* Predictive modeling using cluster segmentation is an iterative exploratory approach vs. a hypothesis-testing approach to identifying and building actionable predictive models

Variables Used to Profile Segments

All variables in quant survey which show differentiation between segments, including outcome indicators



Segmentation Frameworks

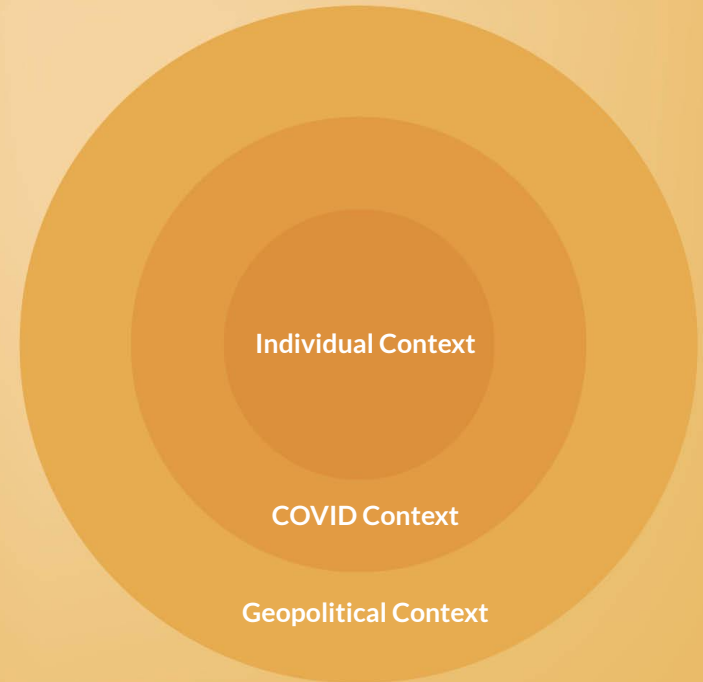


Context Impacts the Decision Journey to COVID-19 Vaccine Uptake

The individual decision making journey exists within the larger dynamic context, which has a large impact on the cognitive appraisal of vaccine and decision and behavior for uptake.







The context impacting the COVID-19 vaccination uptake decision include:

- **The larger geopolitical context:** international relations and perceptions, government stability, hierarchical structure
- **The dynamic COVID context:** COVID rates, COVID hospitalization and death rates, reinstatement of mask mandates, vaccine mandates
- **The individual context,** as COVID is more than a disease context, but includes large lockdowns/restrictions and disruption to economic and social dimensions as well, that has a larger impact on the subsequent appraisals
 - The information and misinformation
 - Influencer landscape
 - Socio-Economic
 - Priors-trust in government and health systems, health system access



Journey to COVID Vaccine Uptake Framework

As individual navigate through the decision stages, evaluation that leads to unfavourable assessment of COVID-19 vaccine can deter them off the positive pathway and lead them to **drop off** the decision stage.

Internalization of COVID-19 Risk	Vaccine enters consideration set	Perceived need for vaccine	Acceptance of vaccine	Getting 1st vaccine jab	Complete COVID-19/boosters vaccine
 <p>COVID-19 Disease Appraisal What do I feel about the COVID-19 disease?</p>	 <p>Seeking Mitigation Strategies How can I cope with the COVID-19 risk?</p>	 <p>COVID-19 Vaccine Appraisal How do I feel about the COVID-19 Vaccine?</p>	 <p>Coping with Vaccine Risk How can I cope with vaccine risk?</p>	 <p>Vaccination Uptake How can I get this vaccine?</p>	 <p>Vaccination Adherence Should I get the second dose?</p>
<p>Negligible COVID-19 risk Vaccine information and decision avoidance</p>	<p>Confidence in current mitigation measures Vaccine decision avoidance</p>	<p>Unfavorable vaccine appraisal and favorable status quo appraisal Selective engagement with information</p>	<p>Unfavorable vaccine and favorable status quo appraisal Procrastination and reappraisal</p>	<p>Ability/access gaps Inaction and rationalization</p>	<p>Lack of coping expectation discrepancy or poor intent Second dose avoidance</p>



Moderate risk perception for disease uncertainty	High Trust in government and healthcare workers				
High life disruption from COVID	High health seeking behaviour	High Reward For Covid Vaccine	Key influencers pushing vaccination		Intent for second dose
At risk status creates high risk from COVID	Engage In CAB and have a perceived need for vaccine	Adult Vaccine Mental Model	High Social Proof for vaccination	Claimed easy access to vaccination and process awareness	Low Side Effect
COVID-19 DISEASE APPRAISAL	COPING WITH COVID	COVID-19 VACCINE APPRAISAL	COPING WITH VACCINE RISK	VACCINE UPTAKE	VACCINE ADHERENCE
Inadequate Covid Risk Perception	High COVID appropriate behaviours, No need for the vaccine	High COVID Vaccine Risk	Hot State Hesitancy / Uncertainty	Perceived Low Access	Lack Of Coping With Side Effects
Covid conspiracy endorsement	Distrust in the government and health officials as sources of information	Low Vaccine Reward Perception			
	Low Health Seeking/Engagement with the health system	Low urgency for vaccine			

Country Context and Segments

Côte d'Ivoire

Geopolitical Context

- Mid-Low trust in their government
- Post-colonial and conflict context
- Lower information seeking, motivated information search to justify low relevance

COVID Context

- Low relevance of COVID due to low overall caseload and severe infection compared to african countries and the world
- Risk perception for COVID comes from vivid experiences from France rather than in-country

COVID Vaccination Context

- Mid stage of the vaccination campaign, Covid single dose vaccination rate of 40%
- With low relevance of the vaccine, uptake is driven by concerted vaccination campaign and camps
- Low understanding of the difference between vaccine efficacy and effectiveness
- Widespread belief that vaccine is not safe for sickly, pregnant, breastfeeding mothers and children

SEGMENT NAME	SEGMENT SIZE	ZERO DOSE	1 DOSE	2+ DOSE
The Hopeful	33%	46%	21%	33%
The Complacent	35%	52%	18%	30%
The Distrustful	32%	61%	16%	23%

- We see 1 high uptake, 1 moderate uptake and 1 low uptake segment
- Given the lower relevance of the disease and the vaccine, the uptake is driven through concerted vaccination campaign creating 3 segments



SEGMENT NAME AND POPULATION SIZE		
The Hopeful 33%	The Complacent 35%	The Distrustful 32%
<p>The segment has a slight skew to older adults, with a high relative probability of some health issues/condition. COVID created a large disruption to their life economically. Vaccine relevance is driven through adult vaccine mental model, health seeking behavior, and trust in government and the health system and seeing it as a way to be safer and get back to normal.</p>	<p>This segment is a relatively younger cohort age 18-35. They believe that COVID poses a risk, but not for them. They perceive low risk to self for COVID and have low experience of economic hardship, mental, social disruption from COVID, leading to lower vaccine reward perception and less urgency to take the vaccine. Therefore they seem to procrastinate and delay.</p>	<p>This segment has the lowest overall uptake of the vaccine. This segment believes that COVID poses no risk and endorses conspiracy myths of COVID being a sham, a mere common flu. They have low health care system engagement, and low health seeking behaviors which further increases their distance from the healthcare system.</p>
ZERO DOSAGE		
46%	52%	61%

Understanding Segment Profiles

Segment
Characterized by
Emotional Driver

Segment size - each
individual in one segment
at a point of time

Outcome Profile

The Complacent

35%

ZERO DOSE

1 DOSE

2+ DOSE

52%

18%

30%

Descriptive
Variables

This segment is a relatively younger cohort age 18-35. They are higher educated and have more access to smartphones.

Psycho-behavioral
Profile

Moderate COVID vaccine uptake driven by

They believe that COVID poses a risk, but not for them. They follow CABs and believe it is sufficient to keep them safe. While their trust in the healthcare system and government makes them view the vaccine as safe and efficacious, there is some fear around uncertainty of sides effects. Their low perceived risk to self, low experience of economic hardship, mental, social disruption from COVID, leads to lower vaccine reward perception and less urgency to take the vaccine. Therefore they seem to procrastinate and delay.



High trust in government and healthcare experts



Health system access is present and engagement, but mid level interaction due to younger age and healthier



Low level of economic hardship during COVID

Strategy for
targeting and
self-selection

Design Strategy

Targeted: Communicate vaccination for family protection 'don't bring COVID home'
Self-Selection: Frame vaccination as community protection and as a routine immunization
Influencers: Family, Employers, Religious leaders

Individual Context

COVID-19 DISEASE
APPRAISAL

COPING WITH COVID

COVID-19 VACCINE
APPRAISAL

COPING WITH VACCINE
RISK

VACCINE UPTAKE

VACCINE ADHERENCE

Decision journey
pathway and drop-off
point

Example of Segment-Targeted Strategy

TOUCHPOINTS & INFLUENCERS

- Family
- Employers
- Healthcare interactions

TARGETED COMMUNICATION

[This segment is especially distrustful and there is not a direct targeting message for this group.

We would recommend that you try to identify and leverage people in your community who share a common identity who can be an advocate for vaccines and directly engage with this segment]

SELF SELECTED ATTENTION CAMPAIGNS

Framing:

Community protection / Community behavior

Illustrative Message:

The vaccine is another way to take care of my community. We are in this together. This is your decision.

Illustrative Creative:

Young and middle age men together in a community setting

SERVICE DELIVERY INTERVENTION

Use the rumor tracking tool to understand the prevalent misinformation and design interventions for limiting the supply and debunking

Indirect targeting by building capacity of vaccinated population to have conversations with strong ties

Detailed Segment Profiles





The Hopeful

33%

ZERO DOSE

1 DOSE

2+ DOSE

46%

21%

33%

This segment is skewed to older adults, with dependants at home.



High trust in doctors & government



Suffered severe health issues & have very high engagement with the health system



Suffered from severe economic hardships during COVID

High COVID vaccine uptake driven by

The segment has moderate risk perception for COVID, which poses a further threat as they are older and have health issues. COVID created a large disruption to their life economically. Vaccine relevance is driven through adult vaccine mental model, health seeking behavior, and trust in government and the health system and seeing it as a way to be safer and get back to normal. They are driven by authority. They are afraid of the vaccine side effects, but key influencers, like doctors, help them cope

Design Strategy

Targeted: Health Care Provider to address the perceived contraindication to existing conditions or current medication.

Self-Selection: Highlight safety, efficacy and relief of economic hardship framing
Trusted Influencers: Health care providers, Government, Religious leaders

COVID-19 DISEASE
APPRAISAL

COPING WITH COVID

COVID-19 VACCINE
APPRAISAL

COPING WITH VACCINE
RISK

VACCINE UPTAKE

VACCINE ADHERENCE



TOUCHPOINTS & INFLUENCERS

- Leverage high engagement with healthcare system
- Trust in government, healthcare providers, Religious leaders

TARGETED COMMUNICATION

Locate:

HCP use the typing tool to location the users in the Hopeful segment

Communication script:

[If already aware of a pre-existing condition, reference it here and use 'you'] It is a good idea to consult with your health care provider about the vaccine, especially when someone has a health condition like XX. Someone with a condition like this may have heard about and are worried that the vaccine will interfere with their treatments or make their condition worse. It is almost more important for these people to take the COVID vaccine.

Think of this vaccine as a way to take better care of yourself, as an extension of all the other things you are doing already!

SELF SELECTED ATTENTION CAMPAIGNS

Framing:

Safety, efficacy, routine immunization, relief of economic hardship

Illustrative Message:

It is safe. It works. And it can help you get back

Illustrative Creative:

Group of people (family, community) standing together in their community smiling. Could be showing bandaids on arms

SERVICE DELIVERY INTERVENTION

Protocol for doctors to inquire about COVID vaccination status and proactively provide a recommendation during other health visits

Signage in health facilities - COVID vaccine is available here. Talk to your doctor now!



The Complacent

35%

ZERO DOSE

52%

1 DOSE

18%

2+ DOSE

30%

This segment is a relatively younger cohort age 18-35. They are higher educated and have more access to smartphones.



High trust in government and healthcare experts



Health system access is present and engagement, but mid level interaction due to younger age and healthier



Low level of economic hardship during COVID

Moderate COVID vaccine uptake driven by

They believe that COVID poses a risk, but not for them. They follow CABs and believe it is sufficient to keep them safe. While their trust in the healthcare system and government makes them view the vaccine as safe and efficacious, there is some fear around uncertainty of sides effects. Their low perceived risk to self, low experience of economic hardship, mental, social disruption from COVID, leads to lower vaccine reward perception and less urgency to take the vaccine. Therefore they seem to procrastinate and delay.

Design Strategy

Targeted: Communicate vaccination for family protection 'don't bring COVID home'
Self-Selection: Frame vaccination as community protection and as a routine immunization
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COVID-19 DISEASE
APPRAISAL

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COVID-19 VACCINE
APPRAISAL

COPING WITH VACCINE
RISK

VACCINE UPTAKE

VACCINE ADHERENCE



TOUCHPOINTS & INFLUENCERS

- Government
- Doctors and health experts
- Religious leaders
- Family
- Employers
- Information sources: TV, Radio and Social Media

TARGETED COMMUNICATION

Locate:

Use community health workers or employers to use the typing tool to locate the complacent segment

Communication script:

The COVID vaccine is another great way to take care of your family. The last thing you want to do is to accidentally bring COVID into your home.

SELF SELECTED ATTENTION CAMPAIGNS

Framing:

Community protection / Community behavior

Illustrative Message:

The vaccine is another way to take care of my community. We are in this together.

Illustrative Creative:

Younger adults with older adults together in a community setting

SERVICE DELIVERY INTERVENTION

Target at market places, workplaces, universities through 'protector' framing

Use travel related touchpoints to prompt vaccination for 'easier and safer' travel



The Distrustful

32%

ZERO DOSE

61%

1 DOSE

16%

2+ DOSE

23%

This segment has the lowest overall uptake of the vaccine with employment largely from agricultural, manual skilled and unskilled labor. Compared to other segments, there seems to have a lower education as well.



Low trust in govt, health system, community leaders, religion leaders and friends



Low interaction and engagement with the health system



High economic hardships during COVID

Low COVID vaccine uptake driven by

This segment believes that COVID poses no risk and endorses conspiracy myths of COVID being a sham, a mere common flu. They are distrustful of the healthsystem, health care workers and the government, as well as not trusting religious, community leaders or friends as sources of COVID information. COVID vaccine myth endorsements rationalize their actions, and they engage in selective information seeking that confirms these. They have low health care system engagement, and low health seeking behaviors which further increases their distance from the healthcare system. Vaccine relevance is seen only for non-health rewards.

Design Strategy

Targeted: Indirect targeting by building capacity of vaccinated population to have conversations with strong ties
 Self-Selection: Introduced as a Routine Immunization for community benefit. Need to reinforce decision autonomy
 Influencers: Family

COVID-19 DISEASE APPRAISAL

COPING WITH COVID

COVID-19 VACCINE APPRAISAL

COPING WITH VACCINE RISK

VACCINE UPTAKE

VACCINE ADHERENCE



TOUCHPOINTS & INFLUENCERS

- Family
- Employers
- Healthcare interactions

TARGETED COMMUNICATION

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SELF SELECTED ATTENTION CAMPAIGNS

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Young and middle age men together in a community setting

SERVICE DELIVERY INTERVENTION

Use the rumor tracking tool to understand the prevalent misinformation and design interventions for limiting the supply and debunking

Indirect targeting by building capacity of vaccinated population to have conversations with strong ties

Using Segmentation

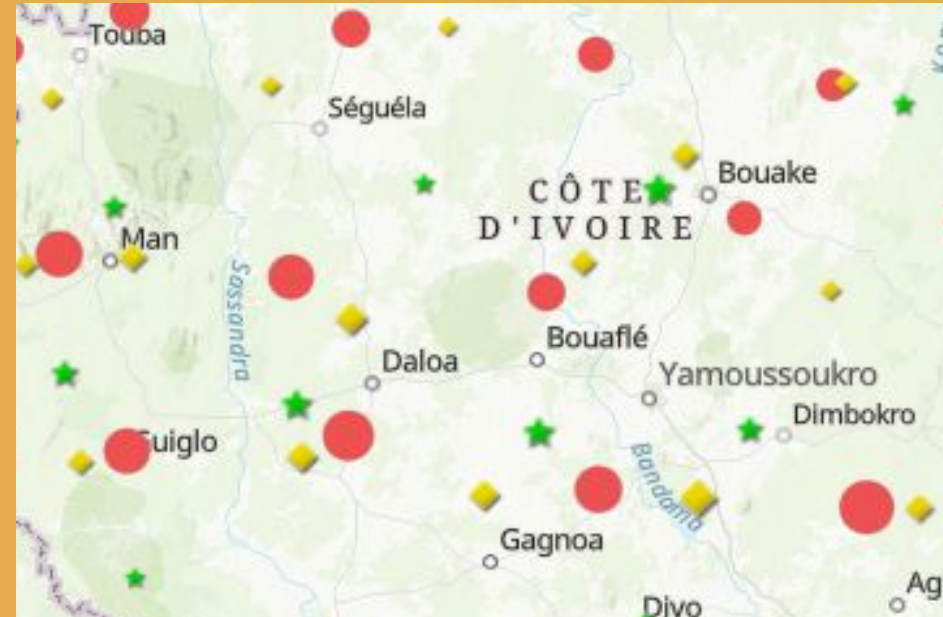


How to Use Segmentation – Customizing and Targeting

Targeting Clusters and Individuals

Descriptive **demographic, geospatial and behavioral variables** associated with the segments can be used to target clusters with a dominant segment profile. Segment-specific information channels and influencers can be used for targeted communication.

Descriptive variables and psycho-graphic methods are used to create simple **segment typing tools** that can be used at point of service delivery to identify an individual's segment profile based on their responses and tailor delivery based on the profile. The typing tool can also be used to conduct **mini-surveys** to build segment distribution at hyperlocal level.

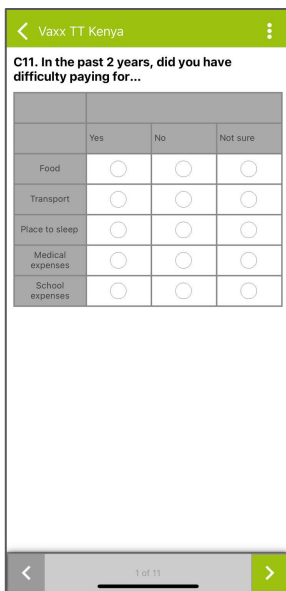


How to Use Segmentation – Customizing and Targeting

TYPING TOOL Short, simple **questionnaire** and response-based **classification tree** to identify the segment profile of individuals

Q1 Economic hardship:

In the last 2 years, Did you have difficulty paying for food, shelter, healthcare, education, transport?



← Vaxx TT Kenya

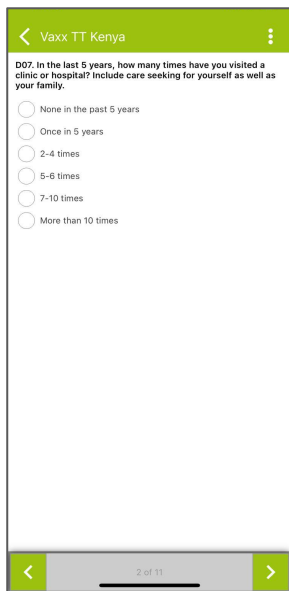
C11. In the past 2 years, did you have difficulty paying for...

	Yes	No	Not sure
Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Place to sleep	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1 of 11

Q2 Health system engagement:

In the last 5 years how many times have you visited a clinic or doctor?



← Vaxx TT Kenya

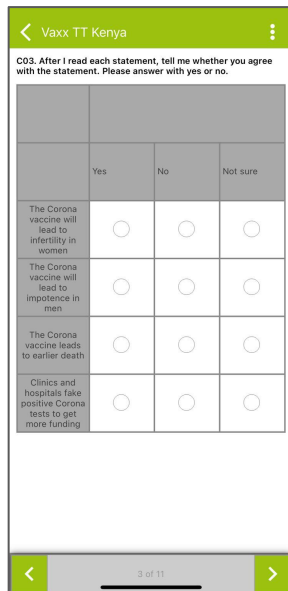
D07. In the last 5 years, how many times have you visited a clinic or hospital? Include care seeking for yourself as well as your family.

- None in the past 5 years
- Once in 5 years
- 2-4 times
- 5-6 times
- 7-10 times
- More than 10 times

2 of 11

Q3 COVID myth endorsement:

Choose the statements about COVID you believe to be true.



← Vaxx TT Kenya

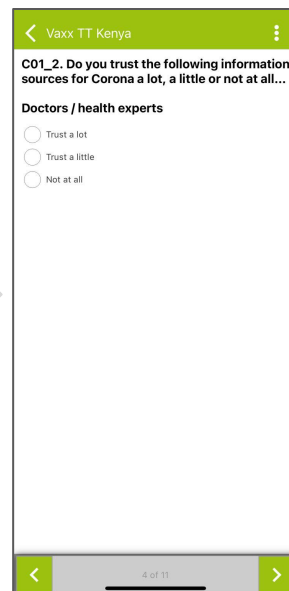
C03. After I read each statement, tell me whether you agree with the statement. Please answer with yes or no.

	Yes	No	Not sure
The Corona vaccine will lead to infertility in women	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Corona vaccine will lead to impotence in men	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Corona vaccine leads to earlier death	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinics and hospitals fake positive Corona tests to get more funding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3 of 11

Q4 Institutional trust:

Do you trust government and doctors as sources of information for COVID?



← Vaxx TT Kenya

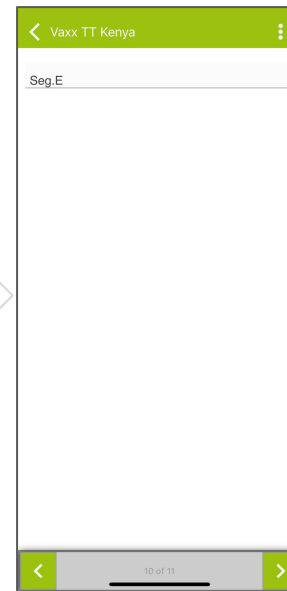
C01_2. Do you trust the following information sources for Corona a lot, a little or not at all...

Doctors / health experts

- Trust a lot
- Trust a little
- Not at all

4 of 11

Segmentation Assigned



← Vaxx TT Kenya

Seg.E

10 of 11

How to Use Segmentation – Example of Customized Communication at Point of Service Delivery

Typing Tool Script

“Hello, I’d like to take a few minutes of your time to learn more about you so that I can provide you with some information about the COVID-19 vaccine that could be relevant for you.

To begin, The past few years have been difficult for a lot of us with COVID. Could you tell me a little bit about your experience over the last two years? **Did you have any difficulty paying for your basic needs?**

There is a lot of information about COVID out in public could you let me know **which of the following statements about COVID you agree with?** *[read through the four statements]*“

Thanks for sharing, **could you share how many times you have visited a doctor or clinic within the last five years?**

Thank you. Finally, We have received a lot of information about COVID from many sources. **Now if you could think about government and doctors as sources of information for COVID, do you trust them a little, a lot or not at all?**

Segment: Hopeful

Customized Communication

“Thank you again for your time and answering my questions. I’d like to talk to you about the COVID vaccine. *[If already aware of a pre-existing condition, reference it here and use ‘you’]* It is a good idea to consult with your health care provider about the vaccine, especially when someone has a health condition like XX or XX.

Someone with a condition like this may have heard about and are worried that the vaccine will interfere with their treatments or make their condition worse. But actually, it is almost *more* important for you to take the COVID vaccine.

Side effects can be a big concern for people when they are trying to decide whether to take the COVID vaccine or not. You don’t need to worry and just take these side effects by *[simple coping mechanisms ie pain reliever, extra rest]*. *Think of this vaccine as a way to take better care of yourself, as an extension of all the other things you are doing already!*

Do you have any questions about the vaccine?



How to Use Segmentation – Self-Selected Attention

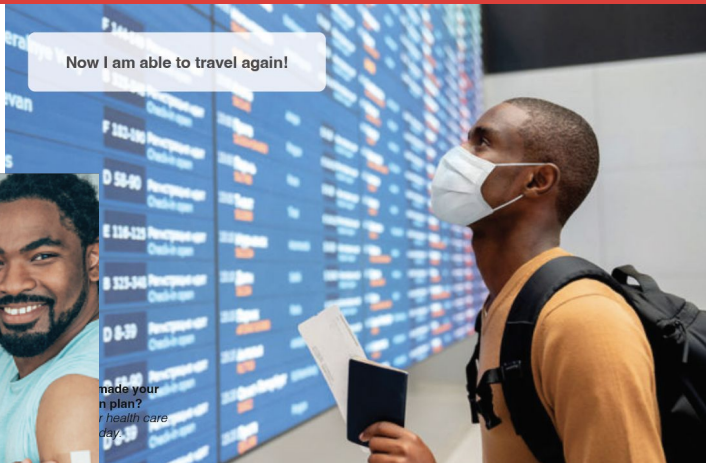
TARGET	SEGMENTS	MESSAGING	IMAGE
Safety, efficacy, relief of economic hardship	The Hopeful	It is safe. It works. And it can help you get back	Group of people (family, community) standing together in their community smiling. Could be showing bandaids on arms
Community protection / Community behavior	The Complacent, The Distrustful	The vaccine is another way to take care of my community. We are in this together.	Younger adults with older adults together in a community setting
Safety for those with medical conditions	<i>Additional</i>	I was worried my condition would not allow me to take the vaccine. Now I know that I need the vaccine protection the most.	Older adult and/or someone with experienced medical condition getting the jab
Vaccination rewards - control, travel, economic stability	<i>Additional</i>	Now I am able to travel again.	Younger adults showing vaccination card in travel location
Vaccination as a family behavior	<i>Additional</i>	We take care of each other because we are a family. We also get vaccinated together	Multi-generational family together

How to Use Segmentation - Self-Selected Attention



The Hopeful

The Doubtful



The Anxious

The Relieved

The Indifferent
The Skeptic
The Distrustful

How to Use Segmentation - Service Delivery Design

Where and how to deliver services and incentives

At health facilities

- Integrate with routine health services
- Leverage provider interactions

In public spaces

- Travel-related touchpoints
- Educational and professional spaces
- Community spaces
- Recreational spaces
- Champions and advocates

Mandates and incentives

- Travel mandates
- Workplace mandates
- Economic incentives



Prioritization Factors	High Uptake Potential Segments The Hopeful	Moderate Uptake Potential Segments The Complacent	Low Uptake Potential Segments The Distrustful
Impact	Moderate impact as they are higher uptake segments	High impact as they are moderate uptake and the largest segment size	High impact as they are the lowest uptake segment
Behavioral Barrier Type	Relatively easier barrier While this is a high uptake segment, there is a need to push uptake to resolve the hot state hesitancy and drive adherence for all. As vaccines are relevant, this is relatively easier barrier to overcome.	Moderately hard barrier While the vaccine is considered safe by the moderate uptake segment, there is need to drive risk internalization and urgency for all. There is a need to reframe vaccine (reward framing) to drive urgency, this is a moderately hard barrier to overcome.	Hard barriers For the low uptake segment it is critical to tackle the barriers of distrust, low risk perception and vaccine irrelevance . This requires a relevance reframe for the vaccine and therefore hard barriers to overcome.
Perceived Access Barrier	Moderate Awareness of and access to the vaccine. Low awareness of SMS/online registration	Moderate Awareness of and access to the vaccine. Low awareness of SMS/online registration	High Awareness of the vaccine facility but perceived distance and difficulty to access vaccine
Implication on Other Programs	Moderate implications Given the hot state hesitancy, might create a new decision point, for otherwise defaulted health decision and behaviors like RI	Moderate implications Given the smaller safety issue with vaccine, might create a new decision point, for otherwise defaulted health decision and behaviors like RI	High implications The COVID vaccine has reinforced the distrust, misinformed conspiracy theories and distance from the health system which might have an impact on other programs as well
Health System Reach	Easier to reach Already have engagement with the health system and higher trust in government	Moderately hard Lower in engagement in the health system, but trust in government and the health system	Harder to reach Low engagement in the health system distrust with government, health system, community leaders

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