FINANCIAL PROTECTION AND IMPROVED ACCESS TO HEALTH CARE:
PEER-TO-PEER LEARNING WORKSHOP
FINDING SOLUTIONS TO COMMON CHALLENGES
FEBRUARY 15-19, 2016
ACCRA, GHANA

Day 1, Session VII.
Behavior Change: The good news

Coffee May Protect the Liver
By NICHOLAS BAKALAR  OCTOBER 20, 2014  8:17 PM  •  16 Comments

A Glass Of Wine A Day May Help Control Type 2 Diabetes
OCTOBER 14, 2015  5:01 AM ET

What is the bad news?
Behavior Change: 
Old Dogs and New Tricks

Financial Protection and Improved Access to Health Care: Peer-to-Peer 
Learning Workshop
Finding Solutions to Common Challenges

Abdo Yazbeck
World Bank

Accra, February 15, 2016
Outline

Four Approaches to Behavior Change
  – Economic Theory
  – Ecological Approach
  – Learning from Marketing
  – New Behavioral Economics
Health Sector Reform Framework

**THE HEALTH SYSTEM**
- Financing
- Payment
- Organization
- Regulation
- Behavior

**Intermediate Performance Measures**
- Efficiency
- Quality
- Access

**TARGET POPULATION**
- Health Status
- Customer Satisfaction
- Risk Protection

**Control Knobs**
- Behavior
Economic Theory

Assumption of Rationality of People

– Prices and incentives matter
  • Transaction cost theory
  • Understanding real costs
  • Provider payment methods
  • Taxation tools

– Information matters (?)
  • Mixed evidence
  • Labeling failures
Ecological Approach

- Our health-related behavior is influenced by:
  - friends
  - peer group
  - family members
  - community
  - role models
  - the media
  - health personnel
  - co-workers
  - health policies & other policies
  - research on health

- They influence each other

- We also influence them.
Learning from Marketing

• Uses mass media to sell *subsidized* health products (insecticide-treated bednets, condoms, the Pill, ORS)

• Always begins with consumer research

• Four P’s— attractive *product*, affordable *price*, convenient *placement* & *promotion*
Behavioral Economics

Irrational behavior
asymmetric paternalism
path of least resistance
Convenience Manipulation
defaults matter
Before Behavioral Economics

• Traditional economics is not well equipped to deal with problems of self-destructive behavior; assumes that people
  – know what’s best for themselves
  – are able to act on that understanding
(although they might focus too much on the present)

→ focus on **information** and **incentives** as main tool of policy
Behavioral economics: allows for mistakes. People often...

- don’t know what’s best for themselves
- do know, but can’t - or don’t – do it
  → motivates intervention (much as one intervenes in diet of children)

- Some people object to interfering in individual choice
  → inspires new approach to policy: ‘asymmetric paternalism’
    • policies that improve well-being without limiting freedom of choice by “nudging”
Organ Donors - % of population
Convenience manipulation plays on:

- Default bias: defaults matter – e.g., organ donations, withheld savings, opt in/out HIV tests.

People tend to take “path of least resistance” even when better options are available.
Changing the path of least resistance in food choice


Study tests relative efficacy of two types of interventions on fast-food choices:
– Provision of dietary Information
– Convenience of Healthy Options
Study Design

• Subway customers offered a free “Meal Deal” for filling out a short survey

• 2x2x3 Design:
  – Calorie Recommendation (Present vs. Absent)
  – Calorie Information (Present vs. Absent)
  – Convenience (Low-Calorie, Mixed or High-Calorie Featured Menu)
**Results: Information**

- No main effects on calories ordered

- However, significant calorie information x on-diet interaction
Providing calorie information increased accuracy of non-dieters, but decreased accuracy of dieters.
Manipulated convenience via “Express Menu” on first page, with full menu available on subsequent page

Low Calorie  vs.  Mixed  vs.  High Calorie

<table>
<thead>
<tr>
<th>Low Calorie</th>
<th>Mixed</th>
<th>High Calorie</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turkey Breast</td>
<td>Tuna</td>
<td>Meatball Marinara</td>
</tr>
<tr>
<td>Ham</td>
<td></td>
<td>Italian B.M.T.</td>
</tr>
<tr>
<td>Roast Beef</td>
<td>Turkey Breast</td>
<td>Chicken Bacon Ranch</td>
</tr>
<tr>
<td>Veggie Delite</td>
<td>Veggie Patty</td>
<td></td>
</tr>
<tr>
<td>Oven Roast Chicken</td>
<td>Oven Roast Chicken</td>
<td></td>
</tr>
</tbody>
</table>
Results: Convenience

![Bar graph showing mean sandwich calories for Low-Calorie, Mixed, and High-Calorie featured menus. The graph indicates that the High-Calorie menu has the highest mean sandwich calories, followed by the Mixed menu, and the Low-Calorie menu has the lowest mean sandwich calories.](image)
• Choose the right default ("do nothing" option)
• Ensure low effort
• Simplify messages, break down complex goals into simple, easy actions (checklists)

• Attract attention
• Use rewards, sanctions, lotteries

• Show that most people do it
• Use the power of networks – support, peer-to-peer
• Encourage commitment to others

• Prompt people when they are most likely to be receptive
• Focus on immediate costs & benefits
• Help people plan their response to barriers

Source: Behavioral Insights Team, UK
Risking Your Health
Causes, Consequences, and Interventions to Prevent Risky Behaviors

Damien de Walque, Editor

https://openknowledge.worldbank.org/handle/10986/16305