EVIDENCE BASED CASE STUDY OF DIGITAL D2C PLATFORM

Data-based decision making in elimination of Lymphatic Filariasis from the state of UP

1. Background:

Directorate of medical health executed D2C campaign called "Rakshak" (meaning savior), from 10th February 2023 to 2nd March 2023, in 18 high prone LF district with the support of UP-TSU to increase the reach and engagement with target audiences to eliminate Lymphatic Filariasis from the state. UP-TSU closely worked with health department, PCI and WHO in campaign designing and execution. The primary objective of Rakshak Campaign was to raise awareness among both rural and urban communities, dispel myths and misconceptions, and identify reasons for non-adherence to MDA/IDA medicines. In addition to that, the campaign aimed to enhance the skills of ASHA workers to improve community mobilization and counselling efforts.

2. Designing of D2C LF campaign based on target population segmentation:

A D2C (Direct to Consumer) digital activity involves a systematic approach that begins with the procurement of database. This database serves as the foundation for effective segmentation and identification of target groups based on the criteria of digital literacy and perception to digitally disseminated messages through various channels. With a clear understanding of the segmented groups, the campaign is designed to maximize reach and engagement. It takes into account the varying levels of digital literacy within each target group, catering to both the technologically proficient and those at the base of the mobile phone user pyramid. Digital mobile phone users opt for digital platforms such as WhatsApp for receiving messages, whereas those at the base of the pyramid, who have limited digital literacy, may prefer simpler communication methods such as IVR (Interactive Voice Response) or SMS. To ensure optimal effectiveness, Behaviour Change Communication (BCC) materials are disseminated with careful consideration to avoid message repetition or overlap within the target audience to prevent message redundancy and enhance receptivity. This comprehensive strategy accounts for the varying needs and preferences of the target groups, ultimately resulting in a more effective and impactful digital campaign.

For execution of D2C Lymphatic Filariasis (LF) campaign, mobile number data of beneficiaries were procured from various database sources such as COVID Portal, Panchyati Raj Department and Self Help Groups (SHG), which was crucial in campaign planning. This data served as the pillar to campaign's strategic planning and effective execution of D2C activity towards elimination of lymphatic filariasis from the state. The detailed and scientific analysis of the procured data was instrumental in designing individual flows and campaigns algorithm for each segment of the target audience. The objective behind creating separate algorithms for each segment of target audience was to execute a high impact SBCC activity that delivers to all the health needs of each individual. This objective was achieved by designing a campaign based on providing the right message, to the right beneficiary, at the right time, through the right communication channel.

2.1 Target Audience wise coverage:

Target Groups	Total number	Communication channels
General Population	76,24,222	IVR and WhatsApp
Self Help Group (SHG)	81,284	IVR
Panchayat (Local Self Government) Heads/secretaries	62,365	IVR and WhatsApp
School Principal	55,134	WhatsApp
ASHA	34, 814	WhatsApp

2.2 Barrier identification of MDA/IDA compliance

Barrier Identification
1. Motivational Barriers 1.1 Fear of side effects of medicines 1.2 Lack of Felt Need: There are no signs or symptoms so there is no need for the medicine
2. Cognitive Barrier 2.1 Lack of Knowledge and Awareness (Disease and its risk factors, MDA/IDA as effective prevention strategy).
3. Social/environmental Barriers 3.1 Unavailability of beneficiary during home visit of ASHA/health worker 3.2 ASHA / health worker did not visit with medicines

2.3 Designing of campaign matrix based on analysis of target groups data:

The campaign flow for the target audience aimed at dissemination of the information at the right frequency to the target audience, so that there is no repetition of the messages. The data was also instrumental in designing the messaging content for the target audience based on their level of digital literacy, both for base of the mobile phone user pyramid as well as digitally literate users. Following is the campaign matrix that further explains the messaging themes that were formulated for reaching out to each target group:

Campaign Plan- IVR, WhatsApp and SMS

Date	Channel	Message Theme	Target Audience
10 Feb	IVR	• Introduction about the Rakshak Campaign. • Awareness about LF and MDA/IDA. • Addressing barriers to MDA/IDA	General Population, SHG
	WhatsApp		Panchayat, Principals
		• Capacity building of ASHAs	ASHA
	SMS	• Introduction about the Rakshak Campaign. • Awareness about LF and MDA/IDA.	General Population
12 Feb	IVR	Reminder about the ongoing campaign How to consume MDA/IDA medicine	General Population, SHG
	WhatsApp		Principal
13 Feb	IVR	Information regarding MDA/IDA medicine availability at ASHA's place and nearby public health facility.	General Population, SHG
	WhatsApp		Principal
14 Feb	IVR	Reminder and nudge broadcast message focused on risk for children	General Population, SHG
	WhatsApp		Panchayat, Principals
15, 18, 22, 25 Feb	IVR	Reminder/nudge broadcast message, focusing risk of disability	General Population, SHG
	WhatsApp		Principal
27, 28 Feb and 1 March	IVR	Reminder/nudge message for left-out people	General Population, SHG
	WhatsApp		Principal
2 March	IVR	Confirmation/ follow-up and addressing of barriers Obtaining consent to connect for the next round	General Population, SHG
	WhatsApp		Principal

3. Execution of D2C LF campaign plan through various channels based on barrier identification and target population:

Direct to Consumer (D2C) platform played a pivotal role in the Lymphatic Filariasis (LF) elimination campaign. Direct to Consumer (D2C) platform was effectively utilized to disseminate information based on the preferences of beneficiaries, utilizing channels such as IVR, SMS, WhatsApp and Chabot in response to their specific queries, needs, and preferences. By harnessing the capabilities of these diverse communication channels, the D2C platform expanded its outreach and engagement. Notably, the pull communication feature of the D2C platform emerged as a key enabler, allowing beneficiaries to proactively initiate interactions by typing "LF" or reaching through a simple missed call, thereby facilitating seamless and direct pull communication. The D2C platform not only enabled beneficiaries with convenient access to campaign information according to their convenience but also fostered active participation in the campaign through their choice of channels. The D2C campaign adopted a comprehensive approach to effectively involve the beneficiaries by synergizing Interactive Voice Response (IVR), Short Message Service (SMS), and WhatsApp. The Rakshak campaign harnessed the full potential of the D2C platform channels to extend its impact to engage the target audience, contributing to the success of the Direct-to-Consumer (D2C) Lymphatic Filariasis (LF) campaign.

4. Understanding D2C:

Digital Direct-to-Consumer (D2C) communication platform is an innovative digital BCC approach that is aimed to deliver the 'Right Message' at the 'Right Time' to the 'Right Person' through the 'Right Channel'. D2C platform has the capacity to launch integrated, multi-channel, multi-directional, data-driven, targeted, digital BCC campaigns in a rapid and cost-effective manner for both at the base of the mobile phone user pyramid as well as digitally literate users. With an exclusive functionality of pull approach, D2C will encourage health service seekers to initiate conversation from their end, based on their needs at their preferred time, through their preferred channel (IVR, Inbound call, Outbound call, SMS, WhatsApp, e-mail, social media, push notification etc.) to connect with the ongoing health campaigns and most appropriate level of health system according to their query, requirement and demand.

Issues	Current Communication Challenges	D2C Communication Opportunities
Engagement	Most strategies are focused on push communications	Push and pull strategy depending on channel
Content	Targeted and segmented communication not possible	Data-driven, personalized communication by SES or health status or need
Channel Strategy	Point solution communication	Multi-channel, multi-directional channel that can be automated and executed in real-time
Reach	Limited reach through mass, outdoor and IPC	Increased reach and engagement with gatekeepers/men
Beneficiary Feedback	Feedback on communication or services limited to ad hoc, one-way feedback mechanisms	Continuous, two-way feedback mechanisms with real-time results
Monitoring	Limited capabilities for continuous monitoring of reach and engagement	Ability to track reach and engagement continuously and pivot communication based on data
Resources	Cost effectiveness varies across channels	Ability to increase per person cost-efficiencies vis. a vis. Engagement. Reduces the workload of ASHAs enabling them to focus their attention more towards marginalized sections.
Gender	Lack of gender sensitive communication	Provides an opportunity to engage men for collaborative decision making
Empowerment	Cultural boundaries/ fear of stigma restricts women's full participation and response in receiving or seeking information on sensitive topics	Anonymity and the freedom to choose time at will for interaction with the communication source makes women more at ease to access the messages, ask questions and respond with concerns or feedback.

5. Findings of Lymphatic Filariasis D2C Campaign:

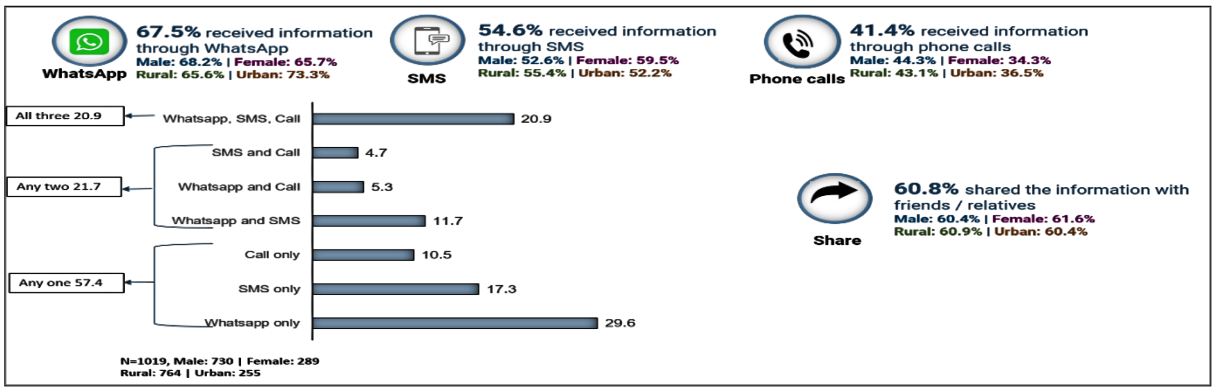
Project Concern International (PCI) conducted a post campaign evaluation survey to understand the impact of state-wide Lymphatic Filariasis D2C campaign. The PCI evaluation clearly showed three significant improvements in: (a) drug uptake rate in areas with low consumption of the LF medicine, (b) reducing the myths and misconceptions related to immunization and (c) Directly Observed Treatment (DOT) rate among the target population.

Following are the evidence-based parameters that established the success of the LF campaign:

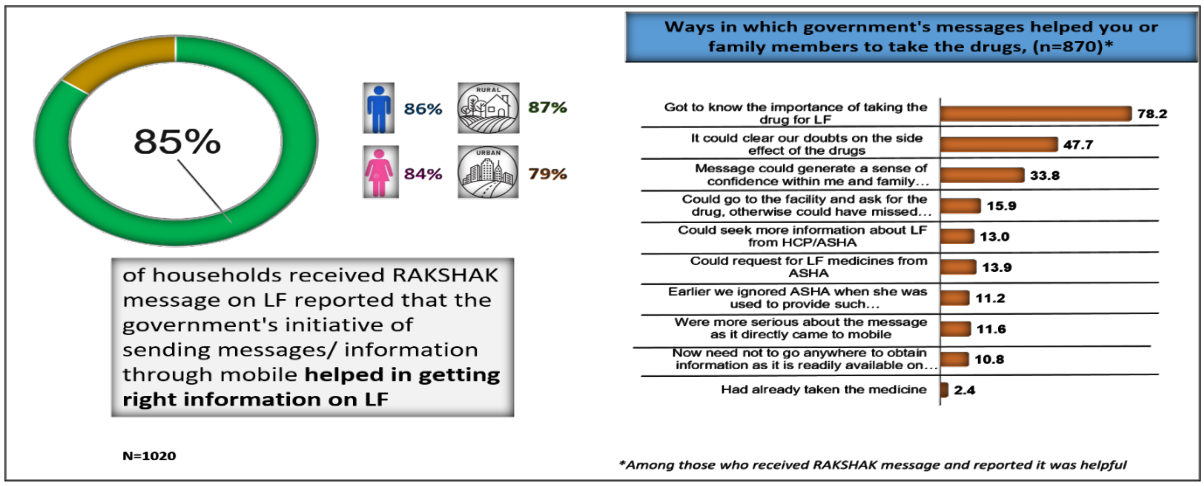
- 85% of the total households, that received the Rakshak messages, reported that the government's initiative of sending messages/information through mobile helped in getting right information on LF.
- 86% of the total male population, that received the Rakshak messages, reported it to be helpful.
- 84% of the total female population, that received the Rakshak messages, reported it to be helpful.
- 87% of the total rural population, that received the Rakshak messages, reported it to be helpful.
- 79% of the total urban population, that received the Rakshak messages, reported it to be helpful.
- 60.8% of total individuals who received the Rakshak message, shared the information with their friends and relatives.

77% of the respondents want to receive health messages through digital mode in the future as well; rural and urban both population want to receive LF messages on their mobile through D2C.

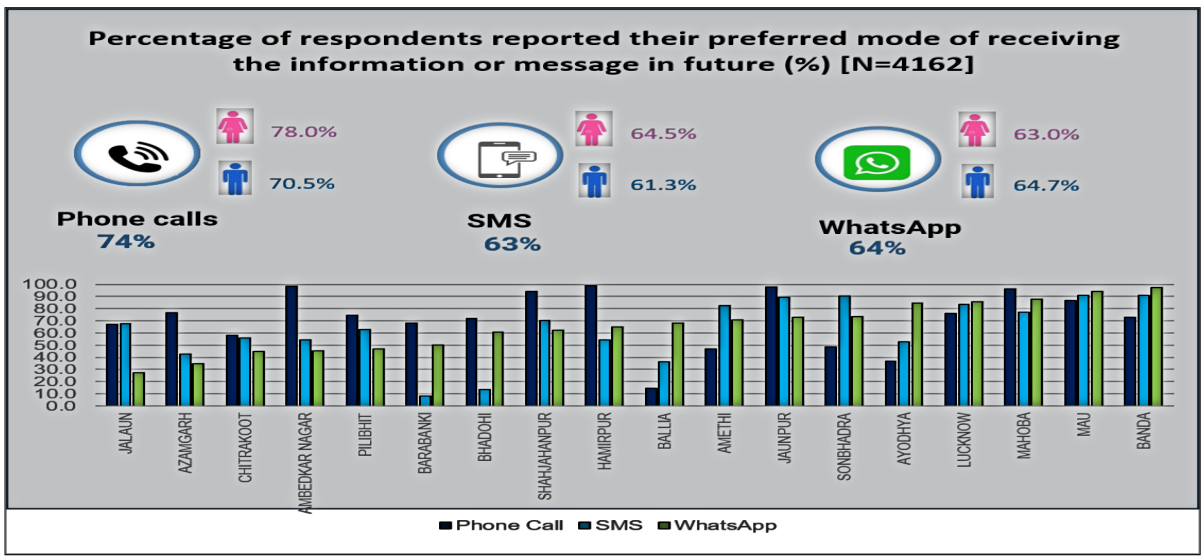
5.1 Designing of campaign matrix based on analysis of target groups data:



5.2 Response regarding benefit of government messages to take drugs



5.3 Response regarding Mode of information to receive messages in the future



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