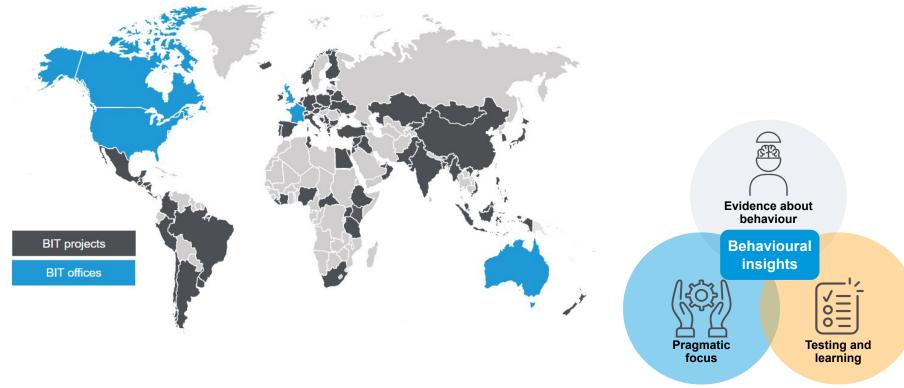
# Fighting COVID-19 and GBV in partnership with innovation units in Bangladesh

Dilhan Perera, Senior Research Advisor January 2022



#### A bit about BIT (the Behavioural Insights Team)



## Building BI capacity in governments with funding from the Global Innovation Fund

- **Our vision:** To spread our BI project methodology around the world to make public policies and services more effective and human-centric.
- What we did: In 5 years we worked with 12 partners to launch 20 behavioural insights projects in Bangladesh, Guatemala and Indonesia.
- The approach: Running projects jointly, so partners could learn-by-doing. We also ran workshops
  and additional targeted training.

Long-term ambition: For our partners to continue applying BI without our assistance



#### Our BI project methodology: **TESTS**



## Nudging bystanders to fight sexual harassment on public transport

Our work with the Social Innovation Lab, BRAC

THE BEHAVIOURAL INSIGHTS TEAM

#### Target > Explore > Solution > Trial > Scale Women often do not feel safe using public transport

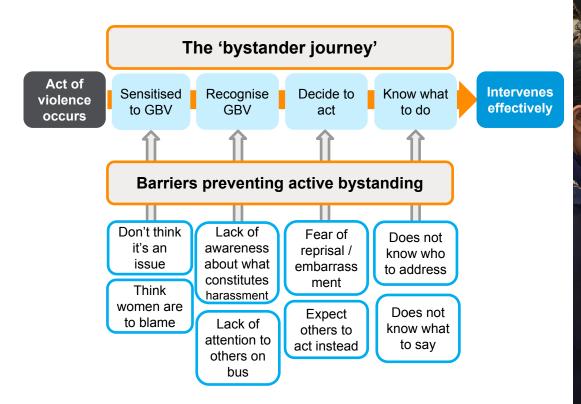
According to a 2018 study by BRAC University:

- 94% of women travelling on public transport in Bangladesh have experienced sexual harassment while commuting
- 81% said they kept silent during the experience

When we interviewed passengers at bus stops, many reported that they would intervene if they witnessed someone being harassed, but very few had actually done so



## Understanding barriers to active bystanding



#### Exploratory fieldwork suggested that:

- Few men said they had seen harassment
- Some said they wouldn't know how to intervene appropriately
  - Others said they would fear for their own safety
  - Passengers were uncertain about whether they could rely on drivers for support

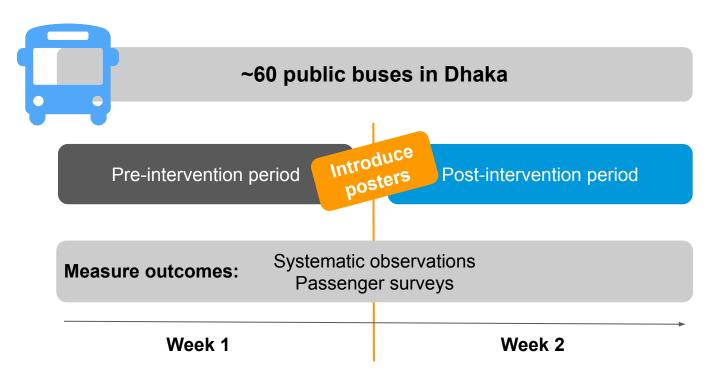
#### The solution: bright yellow posters placed inside buses



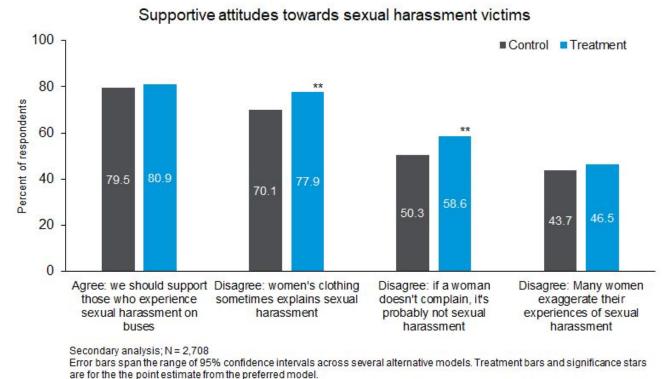
**Easy:** provides three simple steps to intervene safely and effectively

takes place, rather than beforehand

## Measuring harassment and evaluating impact of posters was challenging

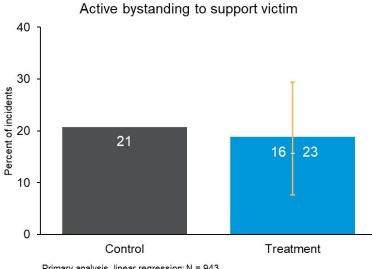


#### We found a change in passenger attitudes...



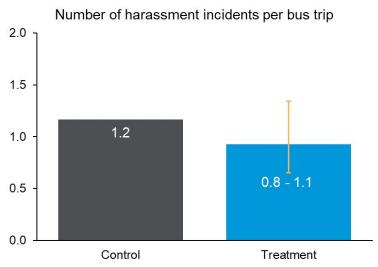
\*\* p < 0.01, \* p < 0.05, + p < 0.1

#### ... but no clear impact on bystander behaviour



Primary analysis, linear regression; N = 943

The treatment bar is labelled with the range of point estimates across models, while the bar height is determined by the median effect across models that control for enumerator experience effects. Error bars span the range of 95% confidence intervals across models



Secondary analysis, negative binominal regression; N = 774 Error bars span the range of 95% confidence intervals from several alternative models. The treatment bar is labelled with the range of point estimates across models, while the bar height is determined by the median effect across models that control for enumerator experience effects

## This approach should continue to be tested given scalability and potential benefits

#### The project demonstrated that:

- It can be easier to change attitudes than behaviour: Well-designed posters can have positive effects on passenger attitudes, but a change in attitudes might not be enough to change bystander behaviour.
- We may need to address additional barriers to active bystanding: To encourage more bystander intervention in similar contexts, we might need to address additional barriers, including uncertainty about what constitutes sexual harassment and how other bystanders would react
- Rigorous research in this area is feasible, and worth doing!

### Tackling social stigma during COVID-19

Our work with A2i, Government of Bangladesh

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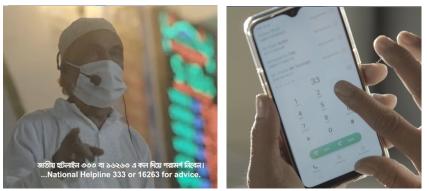
#### The challenge: Addressing stigma during COVID-19

- a2i identified social stigma as a byproduct of COVID-19 that had potentially severe consequences for those suspected of having the disease
- Potential targets included reducing stigmatising beliefs and discouraging stigmatising behaviour
- **'Explore' work:** Rapid literature review and exploratory interviews with doctors
- Following explore work, we decided to focus on failure to seek medical care due to fear of stigma
- a2i had the foresight of repurposing a national government helpline ('333') to provide telemedicine during the pandemic

 $\rightarrow$  Target behaviour: calling 333 to discreetly seek medical care after developing COVID-19 symptoms

## The solution: a2i, Zanala and BIT develop an edutainment video to encourage the use of the helpline





#### The video incorporated several BI principles:

It was relatively short (just over 6 minutes) but still developed a storyline

A clear call to action ('call 333'), which was introduced early and repeated several times

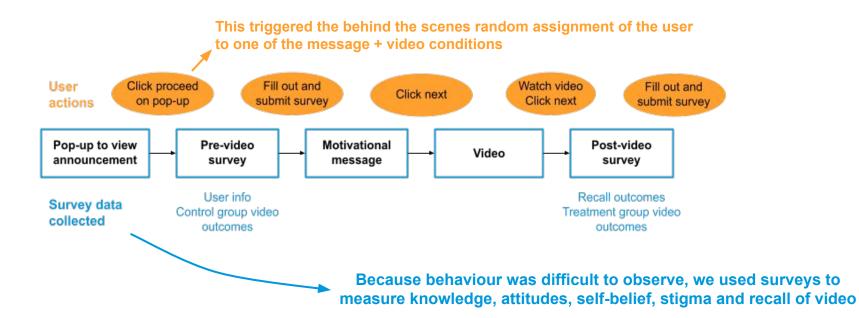
A respected messenger - in this case an Imam

A demonstration of how to call the helpline and what happens afterwards

Modelling of how to interact safely with symptomatic individuals

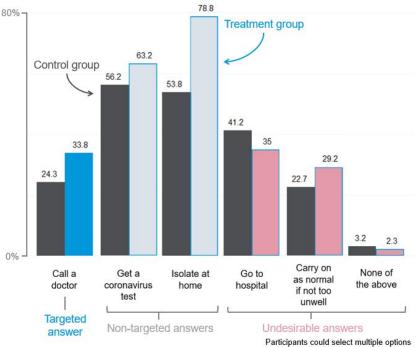
#### Testing the video: Running an online RCT

We worked with a2i's educational innovation team to set up an experiment on Muktopaath, Bangladesh's national e-learning platform

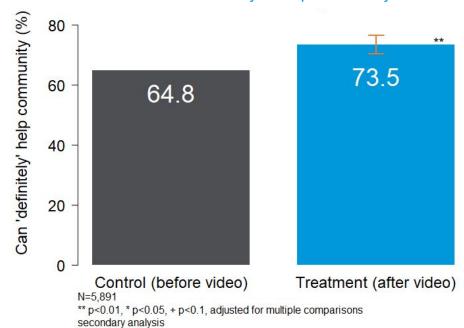


## Those who had just been shown the video were more likely to advise 'calling a doctor' and 'isolating at home'

What is the most important advice you would provide to someone with Covid symptoms?



#### The video seemed to substantially improve participants' self-belief in their ability to help their community fight Covid



Self-belief in ability to help community

## We suggested using edutainment videos more widely and conducting additional testing

#### **Recommendation 1**



#### Distribute the video more widely...

...if the content remains appropriate for the current state of the pandemic

#### **Recommendation 2**



#### Consider producing more edutainment videos...

...to address other behavioural elements of the Covid response

#### **Recommendation 3**

Conduct additional testing... ...to better understand how to increase viewership and make edutainment videos more effective



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