NEWRISTICS-UCHICAGO
Behavioral Science Competition

IMPROVING VACCINATION RATES

Winning Team Recommendations

Presented by:
Kenzi Bustamante, Ella Marrero, Stuti Mittal, Eric Snyder

Ella Marrero

I am a psychology major and statistics minor, I previously interned at the behavioral science consulting firm, Behavioralize, and I am interested in combining behavioral science principles with data analytics to help create meaningful change for individuals.

Stuti Mittal

I am Stuti Mittal, a third-year undergraduate majoring in Economics and Psychology and minoring in Gender and Sexuality Studies. I have previously worked as a Sales Research Intern at IBM and am currently working as a Media and Campaigns Intern at Cognizant. On campus, I am a consultant/project leader for The Mark, a pro-bono marketing consulting student organisation; the captain of a nationally competitive dance team called Chicago Raas; and an active member of UChicago's Behavioral Science Student Association.

Eric Snyder

Major:
Economics & Religious Studies (Class of '24)

Student Groups:
UC Behavioral Economics Association, Veteran Scholar League

Other Associations:
Veterans of Foreign Wars, American Legion, Veteran Yoga Project, Blue Star Families, UC Office for Military-Affiliated Communities.

Interests:
Golf, Mountaineering, Scuba Diving, Middle Eastern studies, Yoga.

Kenzi Bustamante

Major:
Biology (Specialization in Global Health) Class 2024

Student Groups:
Vice President of Phoenix House (2020-2021), MakeNew - Gracepoint Church, Red Cross, and UNICEF

Previous Experience:
None related to behavioral science. This was my first time doing anything related to behavioral science - loved it!

Interests:
Running, swimming, travel, and music.

Background

AVOID	ENCOURAGE

Focus on communal benefit
- People have been shown to prioritize personal interests over global ones that would cost them personally. [1]

Scare tactics
- Fears about COVID-19 could 'spread' to a fear of the vaccine. [2]
- Using fear in ambiguous situations is more likely to promote mistrust. [1]

Information-based approaches
- Facts are ineffective at changing behavior based in biases or morals. [3]

Focus on personal benefits
- Positive social interactions promote cooperation better than social punishment. [4]

Ease/reducing friction
- Making health behaviors easy increases the likelihood people will comply [1]

Normalizing COVID-19 vaccination
- Group norms and social desirability are strong motivators for individual behavior change. [5]
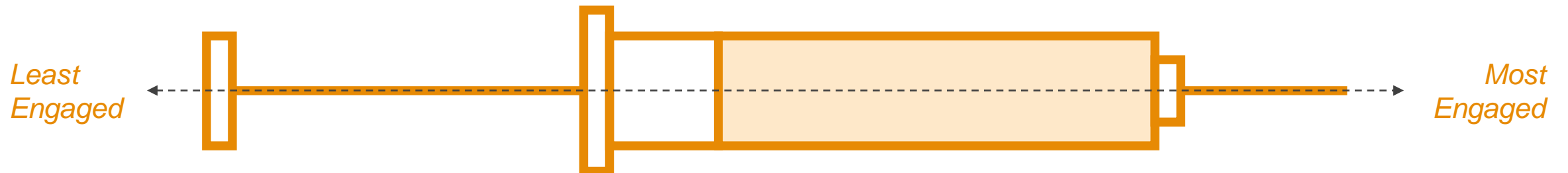
Background

4 PROPOSED STRATEGIES

| Training Apps | Events-Based Campaigns | Dating Apps | Social Media |

Least Engaged ← - → Most Engaged

Transit apps

Target Population:
Wage Laborers; Commuters[1]

Current Issues:
Don't know where to get vaccine

Difficult taking time off

Cancelled appts/wrong vaccine

Method: UI Design
Getting to the vaccine

Hotkeys on transit apps

Sync maps with rideshare apps

Empirical Support:

- **Easy**
  Highly visible (Google Maps has over 150 million unique monthly users).[2] Simplifies the process and reduces friction by reducing click-throughs

- **Timely**
  Reduces Intention-Action Gap

- **Reduces Cognitive Burden**
  Vaccination becomes first choice. Categorizes "vaccination" and makes distribution easier

Follow-Up Metrics:
Measure click-through rates of hotkeys versus standard search results.

Events based campaigns

Target Population:

Middle class, 21 - 26 yrs

Current Issues:

Healthy, unafraid of COVID-19

Getting the vaccine is a hassle

Fear of vaccine side effects

Method: Ad Campaigns

Making the decision to get the shot

Positive reframing of vaccination as gateway to pre-pandemic 'cool' lifestyle

Campaigns: billboards, ads on Eventbrite, AirBnB, Trivago, airline apps, YouTube

Empirical Support:

- **Attractive:** Rosy Retrospection
  Memories of social events are now less available so cons undermined

- **Social:** Anticipated Regret
  Fear of missing out with high visibility on social media will motivate behaviour change

- **Timely:** Leveraging Present Bias
  Emphasis on short term costs and benefits will help overcome both hesitancy and lethargy

Follow-Up Metrics:

New vaccination appointments surrounding Lolla + announcement measured via click-through-rate

Dating apps

Target Population:
Middle class, 18 - 29 yrs[1]

Current Issues:
Healthy, unafraid of COVID-19, lack of urgency.
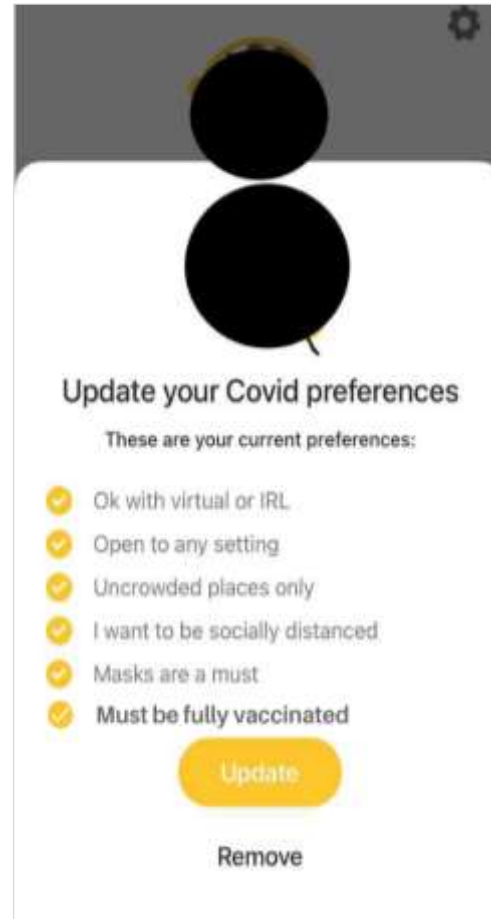
Method: Dating App Filters
Make the decision + Spreading the word

Vaccination status option

Vaccinated profile filter

Default filter to "vaccinated only"

Update your Covid preferences

These are your current preferences:
- ✓ Ok with virtual or IRL
- ✓ Open to any setting
- ✓ Uncrowded places only
- ✓ I want to be socially distanced
- ✓ Masks are a must
- ✓ **Must be fully vaccinated**

Update

Remove

Empirical Support:

- **Power of Defaults**
  Setting the default to 'vaccinated only' signals social norms

- **Self-image**
  Makes desirability directly linked to vaccination status.

- **Loss Aversion**
  Prospect of losing potential matches

- **Past Success: Grindr**
  Option to filter by HIV/AIDs status has lead to lower HIV rates; increased PrEP[2]

Follow-Up Metrics:
See how new vaccination filter options affects user-base. Unvaccinated sub-group?

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Social media

Target Population:
Wide range from ages 10-50

Current Issues:
Hesitance about getting vaccine

Not yet normalized

Method: TikTok & Snapchat
Spreading the word

Commission TikTok influencers

Run ads through official TikTok account

Options in Snapchat to rep
vaccine brand

Add same map features to SnapMap

Empirical Support:
- **Viral**
  Message can reach large populations in an extremely quick manner
- **Social Norms**
  Bringing social norms into the virtual environment
- **Echo Chambers + Repeated Exposure**
  Hyper-specialized algorithm will continue to expose mildly hesitant populations

Follow-Up Metrics:
Measure engagement among these added features (views on TikTok and outfit changes on Snapchat)

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(3) Kelly, M. P., & Barker, M. (2016). Why is changing health-related behaviour so difficult?. Public health, 136, 109–116. https://doi.org/10.1016/j.puhe.2016.03.030

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