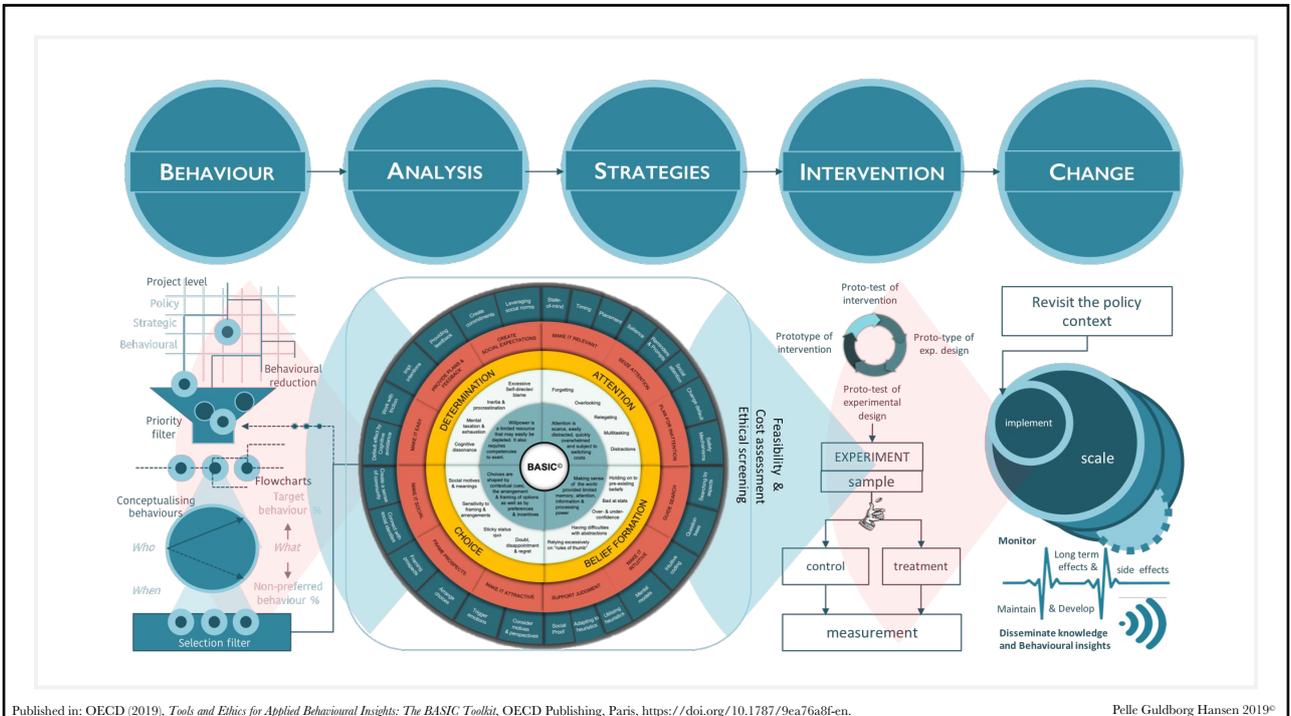




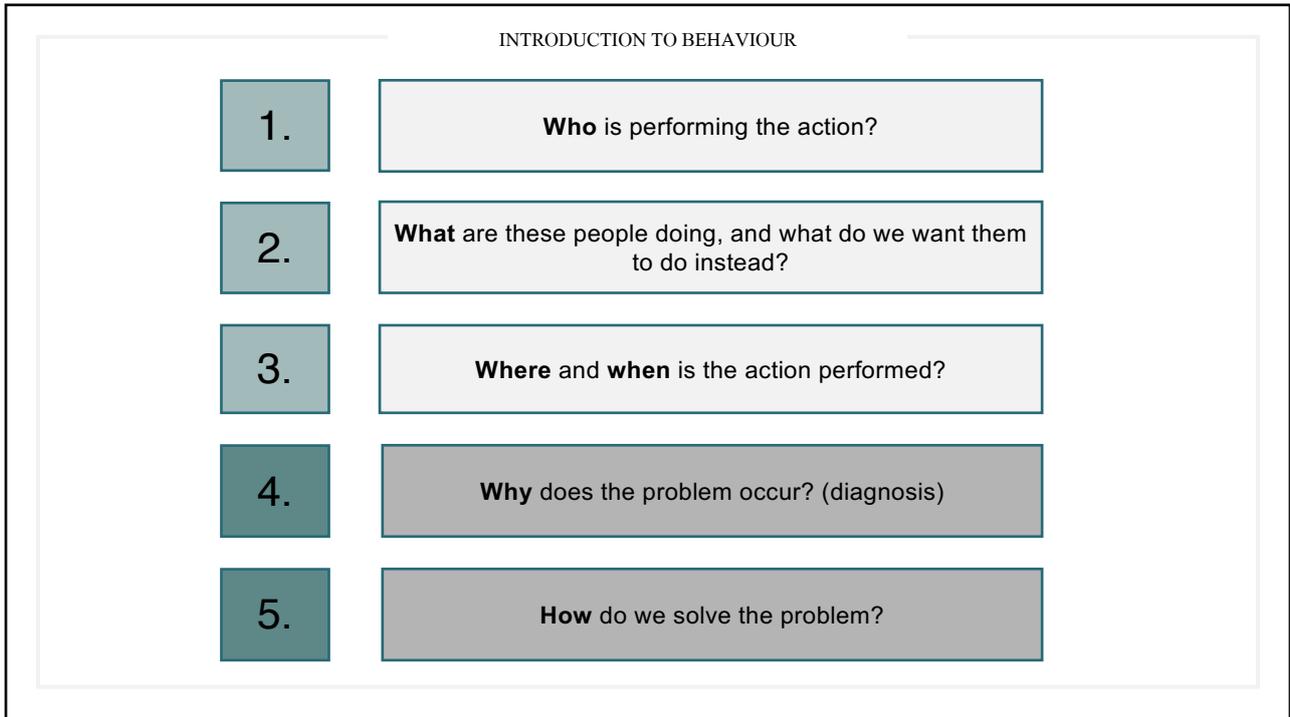
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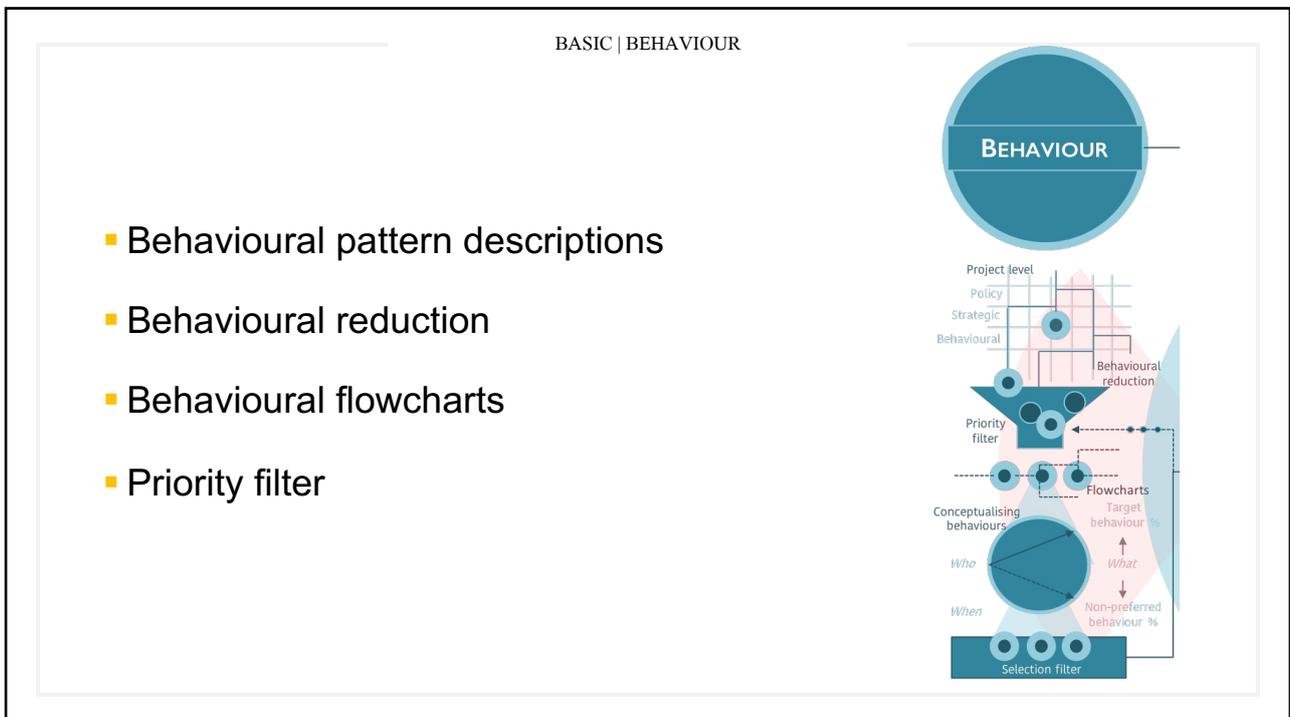
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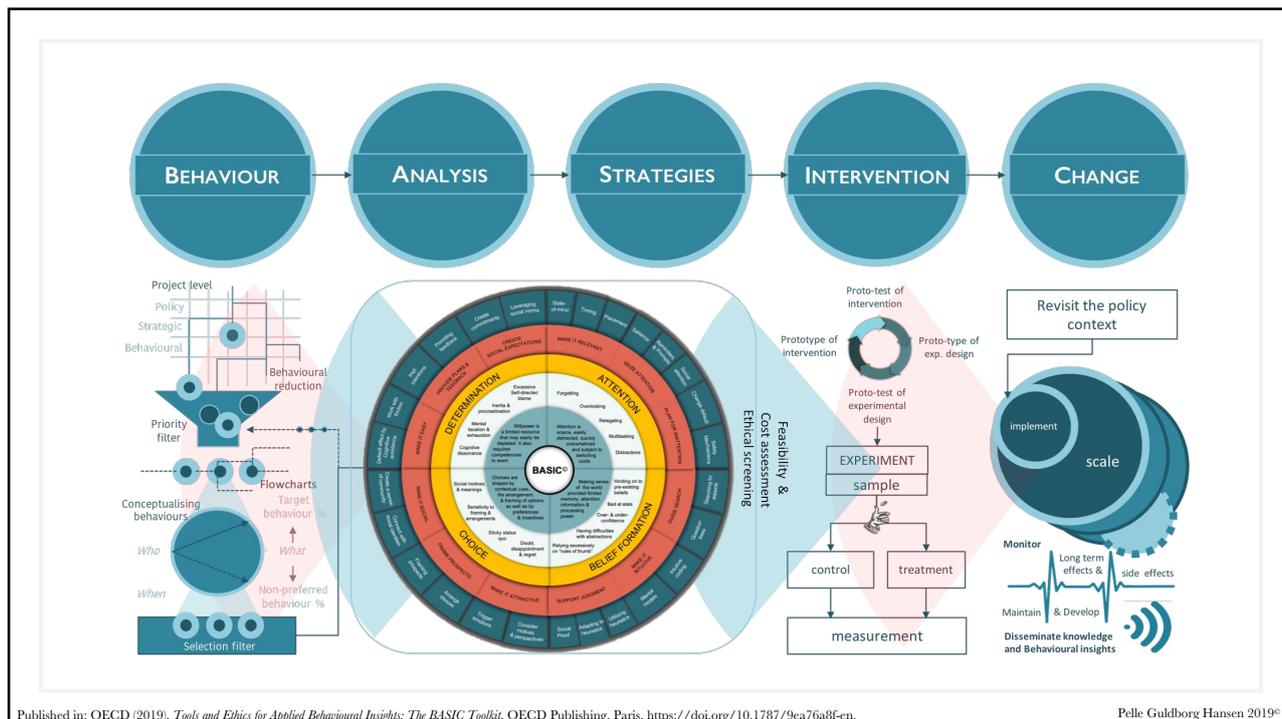
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Behavioural pattern description

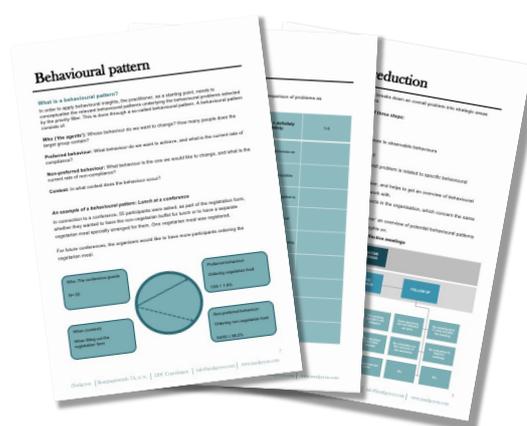
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BEHAVIOURAL PATTERN DESCRIPTION

A behavioural pattern cannot be directly observed.

Thus, *identifying* a pattern is a constructive act, in which a model of the mind connects empirical observations – that is, it is “a theoretical conceptualisation”.

In order to apply Behavioural Insights, then, the practitioner, as a starting point, needs to conceptualise the relevant behavioural patterns underlying the behavioural problems from the behavioural reduction.



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BEHAVIOURAL PATTERN DESCRIPTION

Who:

Preferred behaviour

Where/When:

Non-preferred behaviour

9

BEHAVIOURAL PATTERN DESCRIPTION

EXAMPLE OF A BEHAVIOURAL PATTERN DESCRIPTION

In connection to a conference, 55 participants were asked, as part of the registration form, whether they wanted to have the non-vegetarian buffet for lunch or to have a separate vegetarian meal specially arranged for them. One vegetarian meal was registered.

For future conferences, the organisers would like to have more participants ordering the vegetarian meal.

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BEHAVIOURAL PATTERN DESCRIPTION

Who:
The conference participants
N = 55

Where/When:
When registering via the registration form prior to the conference

Preferred behaviour
Choosing the vegetarian lunch
1.8%

Non-preferred behaviour
Choosing the non-vegetarian lunch
98.2%

11

BEHAVIOURAL PATTERN DESCRIPTION

EXERCISE

CASE: HAND HYGIENE AT HOSPITALS

Hospital-acquired-infections (HAI's) are a costly affair to patients and society as a whole. Acquiring a hospital infection creates additional suffering for the patient and it may at worst lead to death. Improving hand hygiene behaviour in hospitals is among the most promising ways of preventing such HAI's.

At a hospital in Denmark, they are looking into using behavioural insights to increase the number of visitors using hand sanitizer, and they decide to use the entrance to the hospital for a pilot study. After an initial observational study of the current setting at the entrance, they found out that of the 1,000 in total observed visitors, only 200 use the hand sanitizer, while 800 did not.

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BEHAVIOURAL PATTERN DESCRIPTION

Who:

N =

Where/When:

Preferred behaviour

% =

Non-preferred behaviour

% =

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BEHAVIOURAL PATTERN DESCRIPTION

EXERCISE

Gender	Direction	Escalator	Stairs
F	D	1	
M	U	1	
F	D	1	
F	U	1	
F	D	1	
F	D		1
F	D		1
F	D	1	
M	U	1	
M	U	1	
F	D	1	
F	D		1
M	U	1	
F	U	1	
F	U		1
F	U	1	
F	U		1
M	D	1	
M	D		1
M	D		1
M	U	1	
F	D		1
F	U	1	
F	D	1	
F	U	1	
F	U	1	
F	D	1	
M	U	1	
M	U	1	
M	U		1
M	D	1	
F	U		1
F	U	1	
M	U	1	
M	D		1
F	U	1	
F	U	1	
F	D		1
M	D	1	
F	U	1	
F	U		1

Exercise: Stairs vs escalators

A group of students wants to nudge people to take the stairs rather than the escalator when faced with the choice in public places.

They get clearance to look at 2 minutes of recording from a CCTV surveillance featuring 40 travellers at a central train station.

What behavioural patterns could they construct?

Please note, that you do not have to count and calculate anything in this exercise. Instead, focus on: “Who”, “When/Where”, “Preferred behaviour” and “Non-preferred behaviour”.

(F = female, M = male, D = down, U = up, E = Escalator, S = Stairs)

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BEHAVIOURAL PATTERN DESCRIPTION

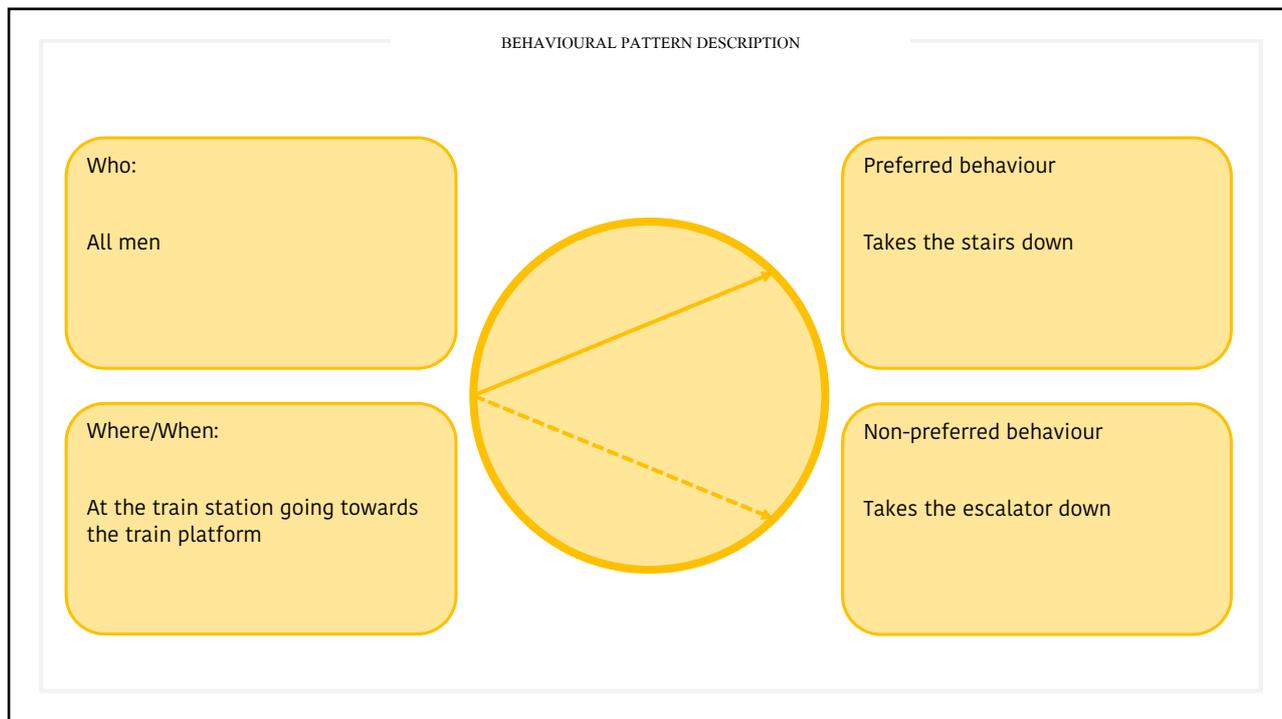
Who:

Preferred behaviour

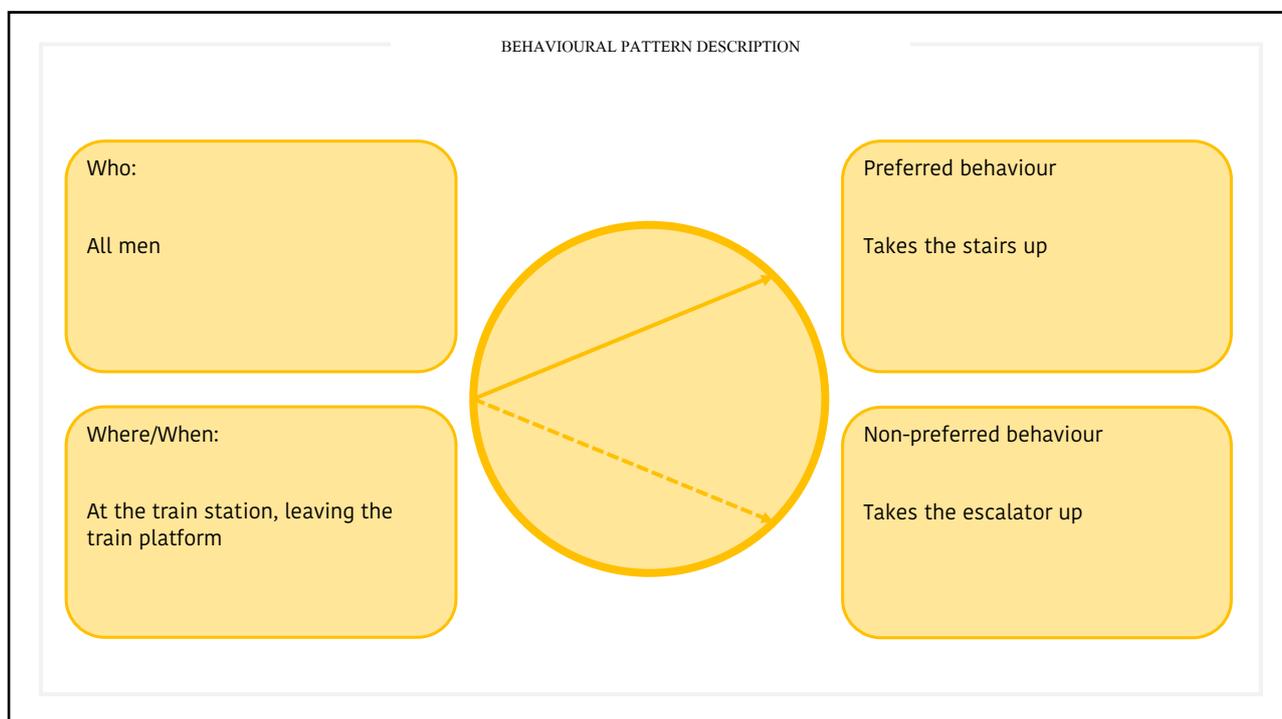
Where/When:

Non-preferred behaviour

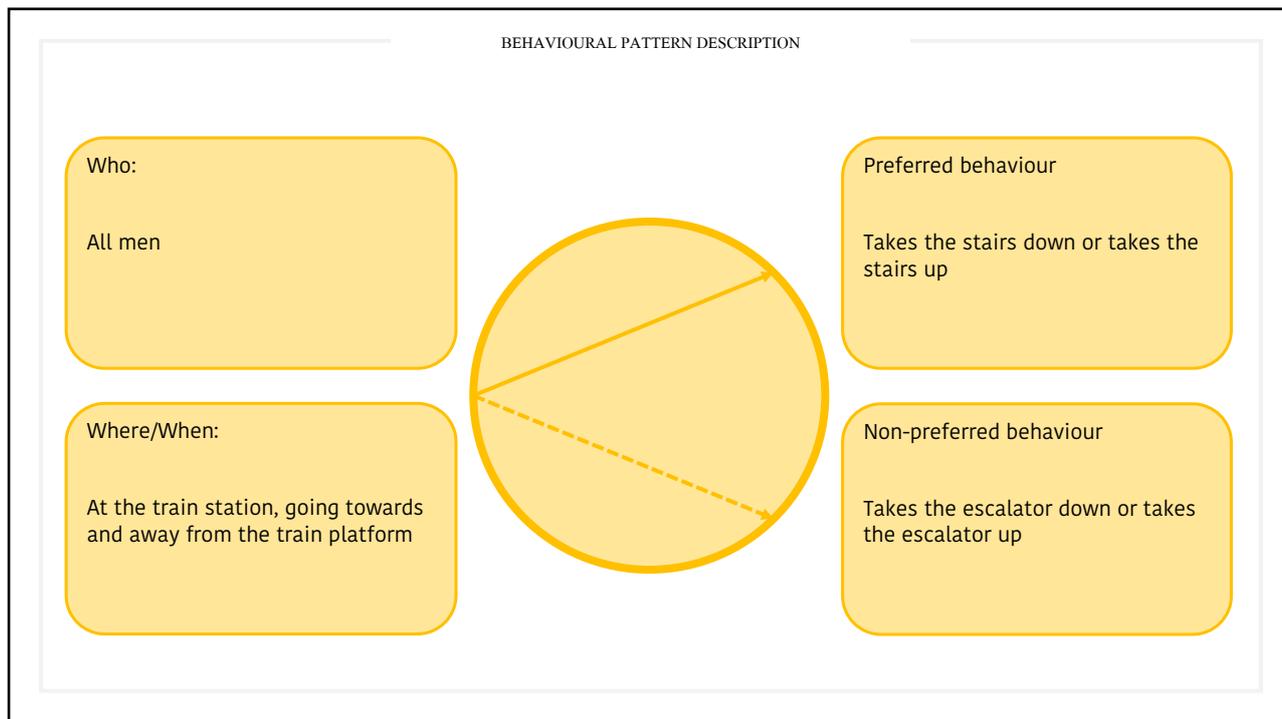
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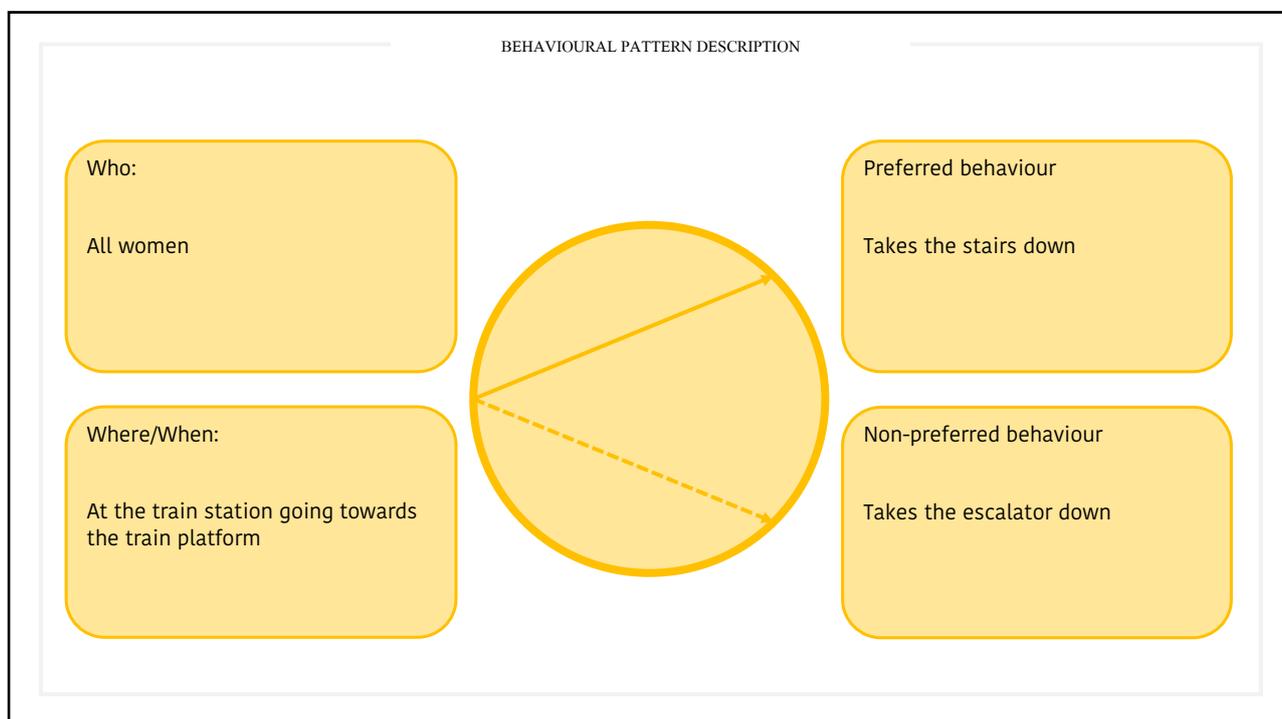
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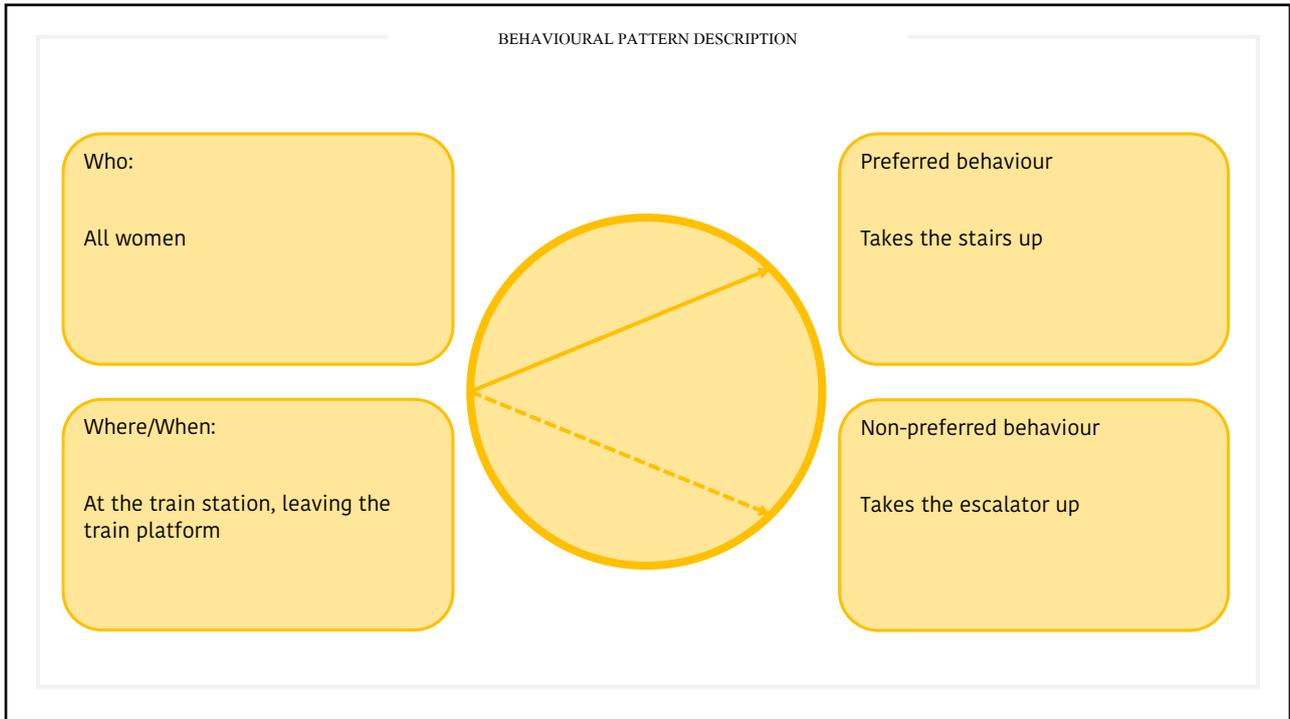
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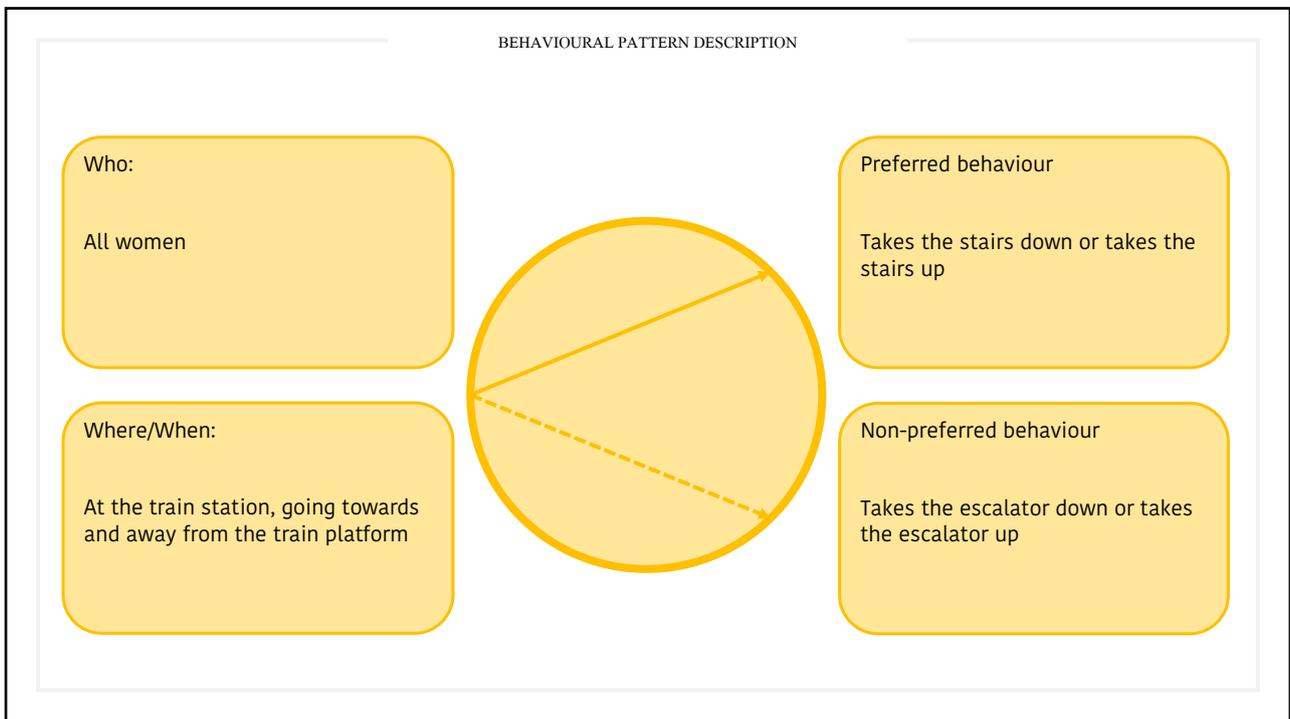
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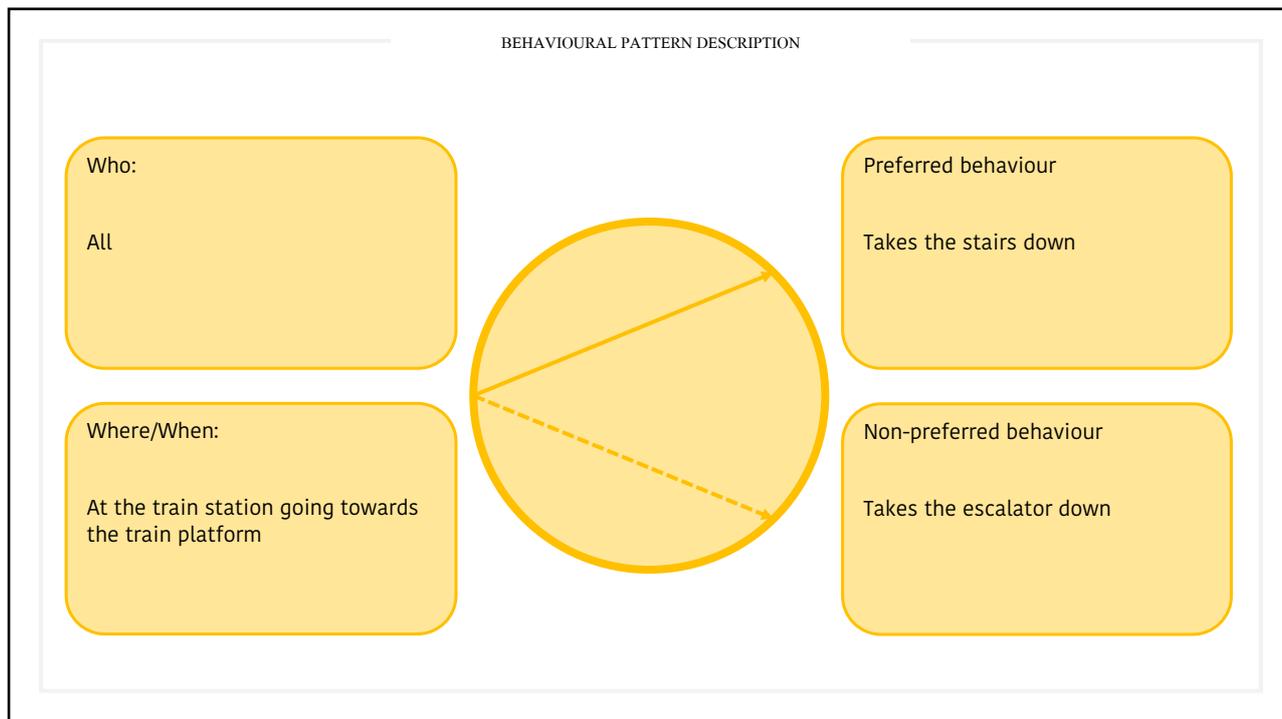
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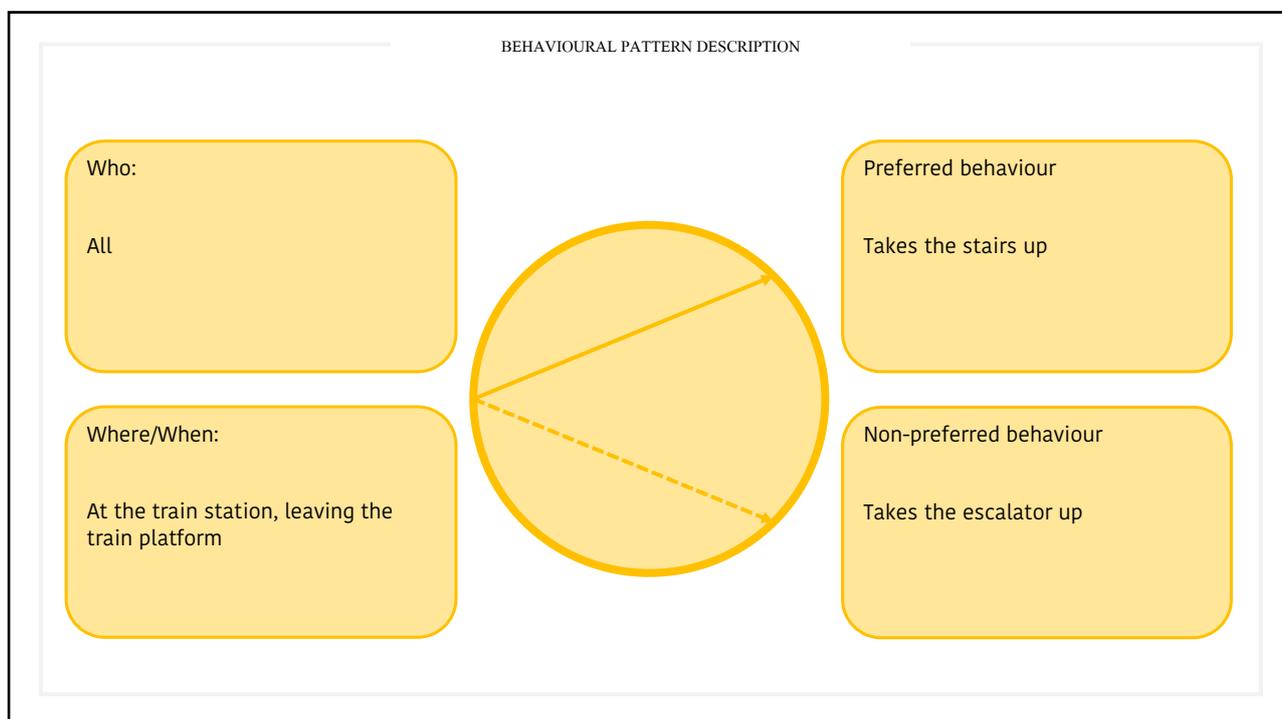
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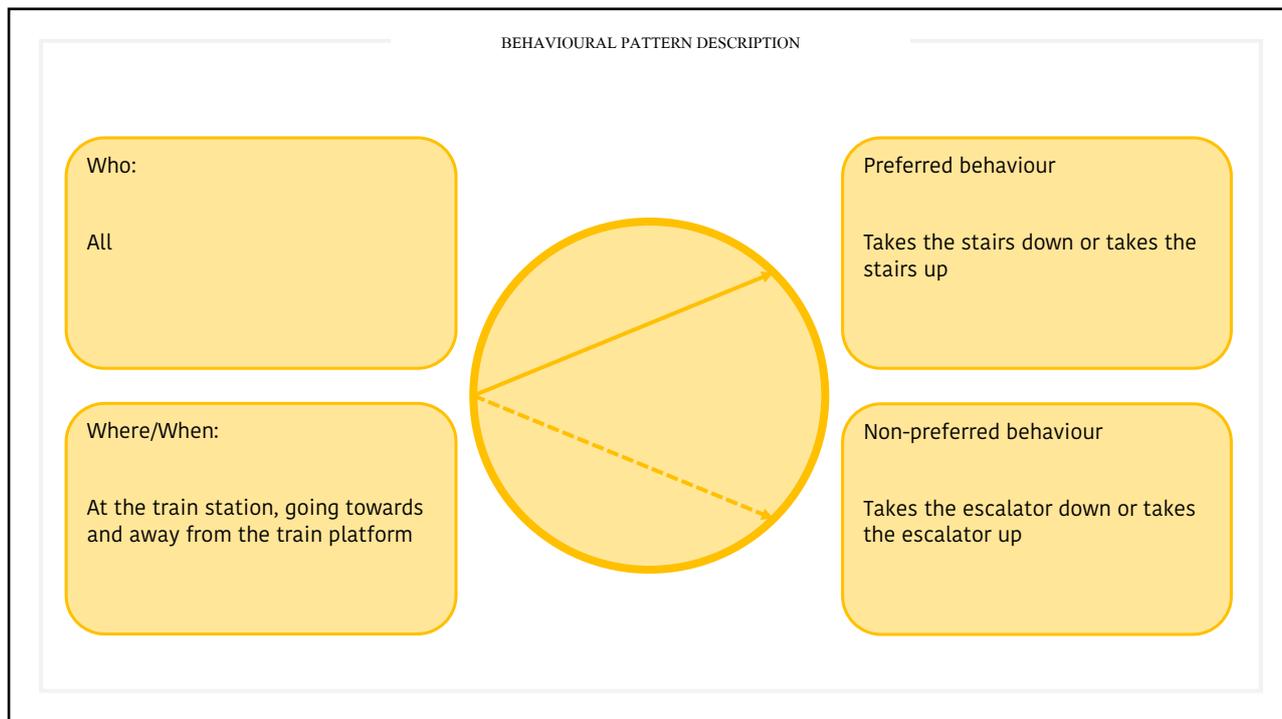
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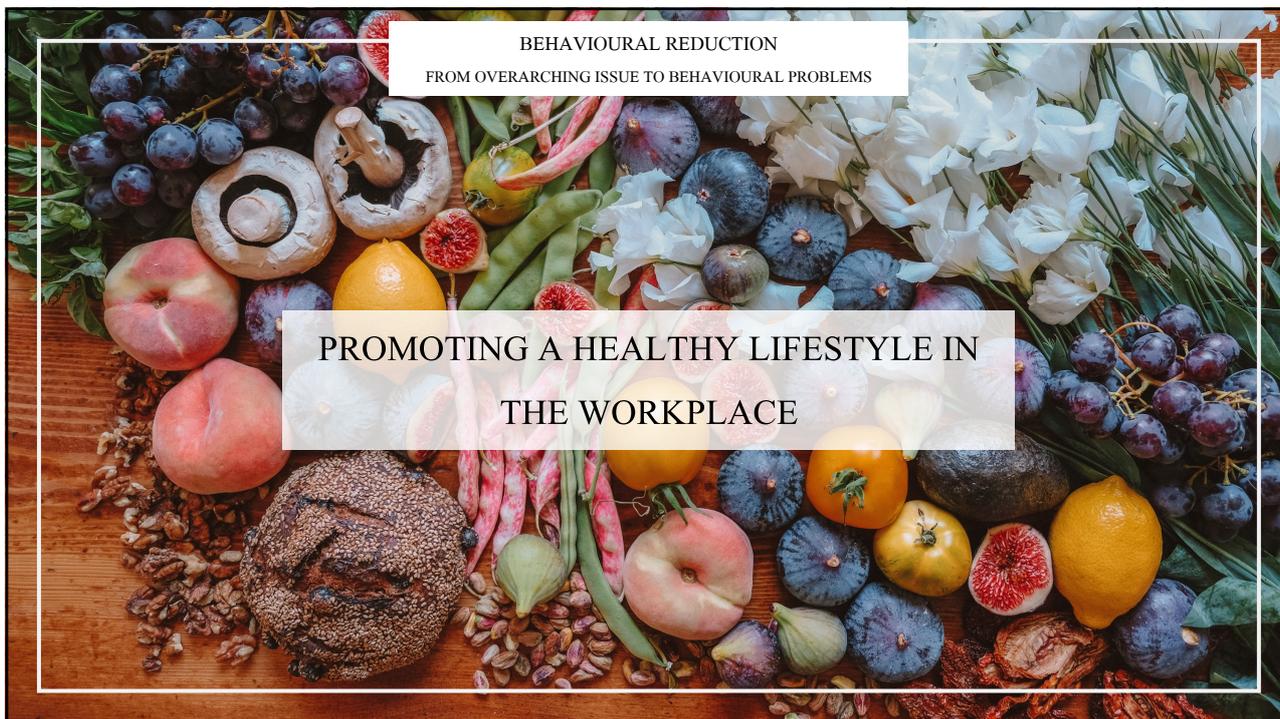


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Behavioural reduction

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BEHAVIOURAL REDUCTION
FROM OVERARCHING ISSUE TO BEHAVIOURAL PROBLEMS

A 'behavioural reduction' is a tool that helps the practitioner reduce an overarching problem, to strategic areas, and further into behavioural problems.

Step 1

Identify the overarching issue

Step 2

Break it into strategic areas

Step 3

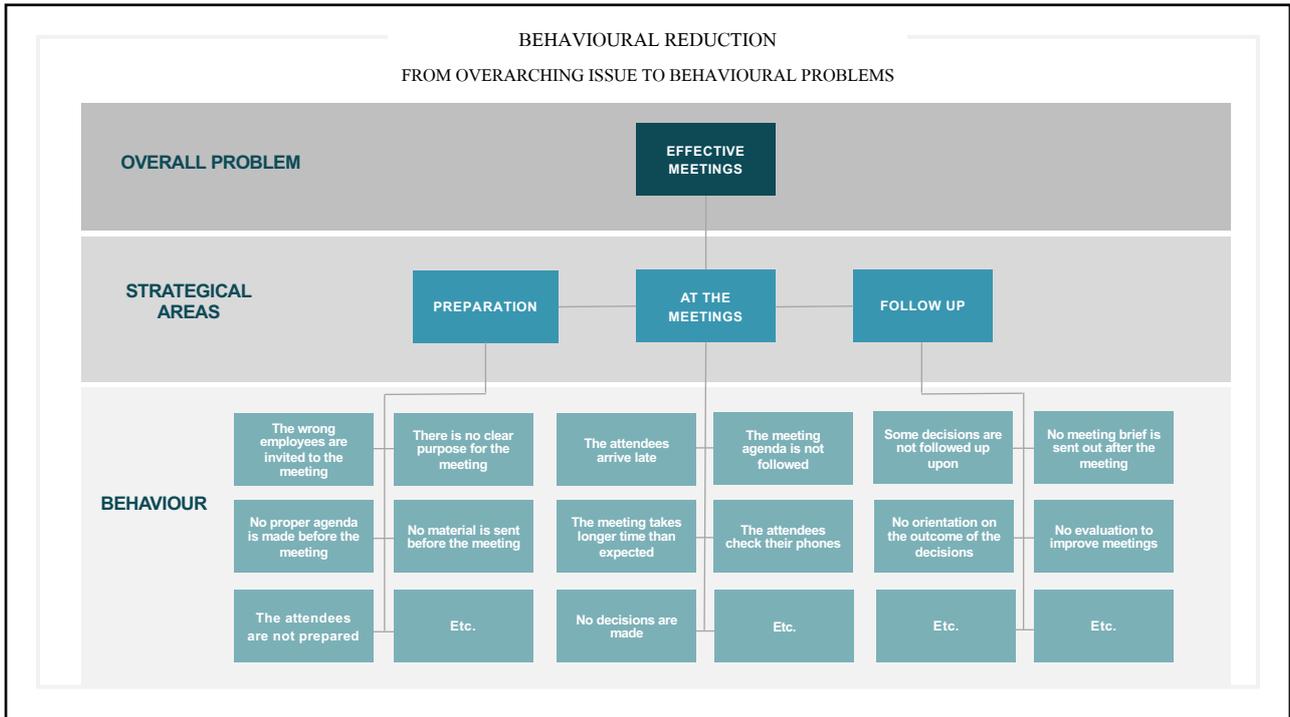
Break strategic areas into (behavioural) problems

Why a behavioural reduction?

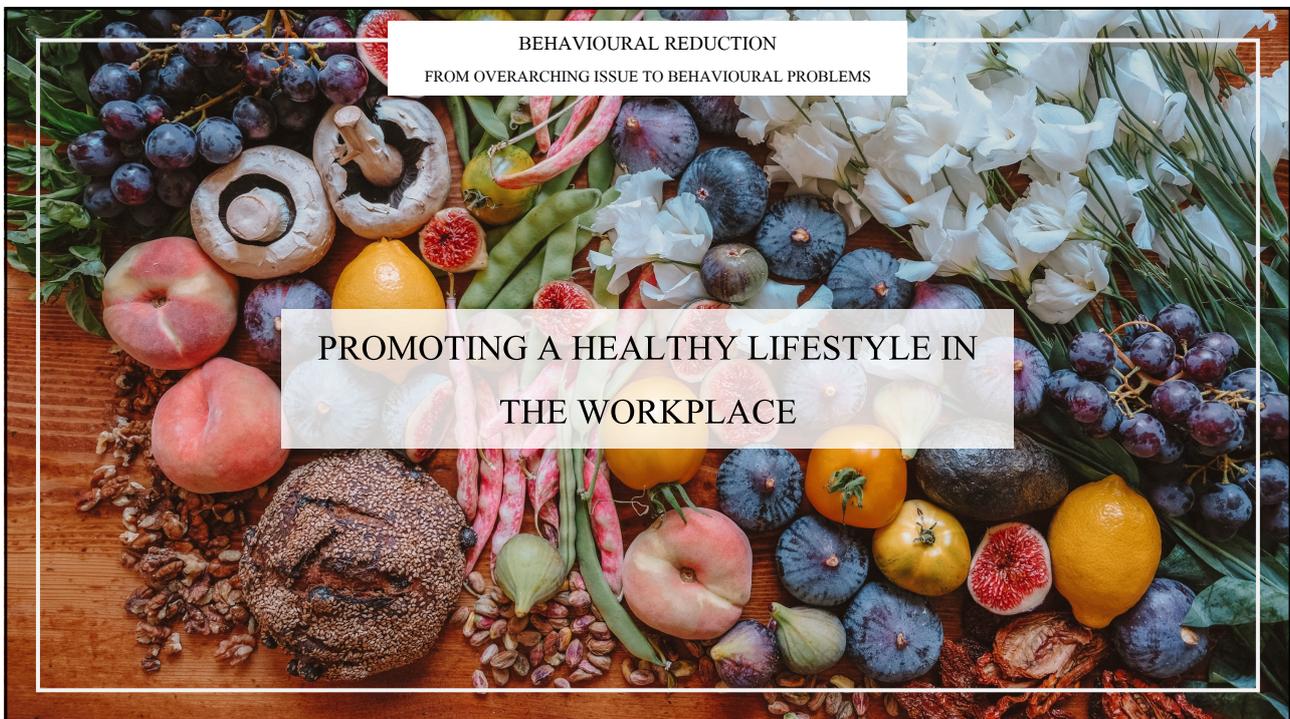
1. It makes it visible how 'big issues' depend on concrete behaviours.
2. Acts as a tool for identifying former and current projects in the organisation, which addresses the similar issues.
3. It gives the practitioner an overview of the full range of (behavioural) problems that she or he potentially can work with.
4. It makes it easier to discuss (1-3) in teams

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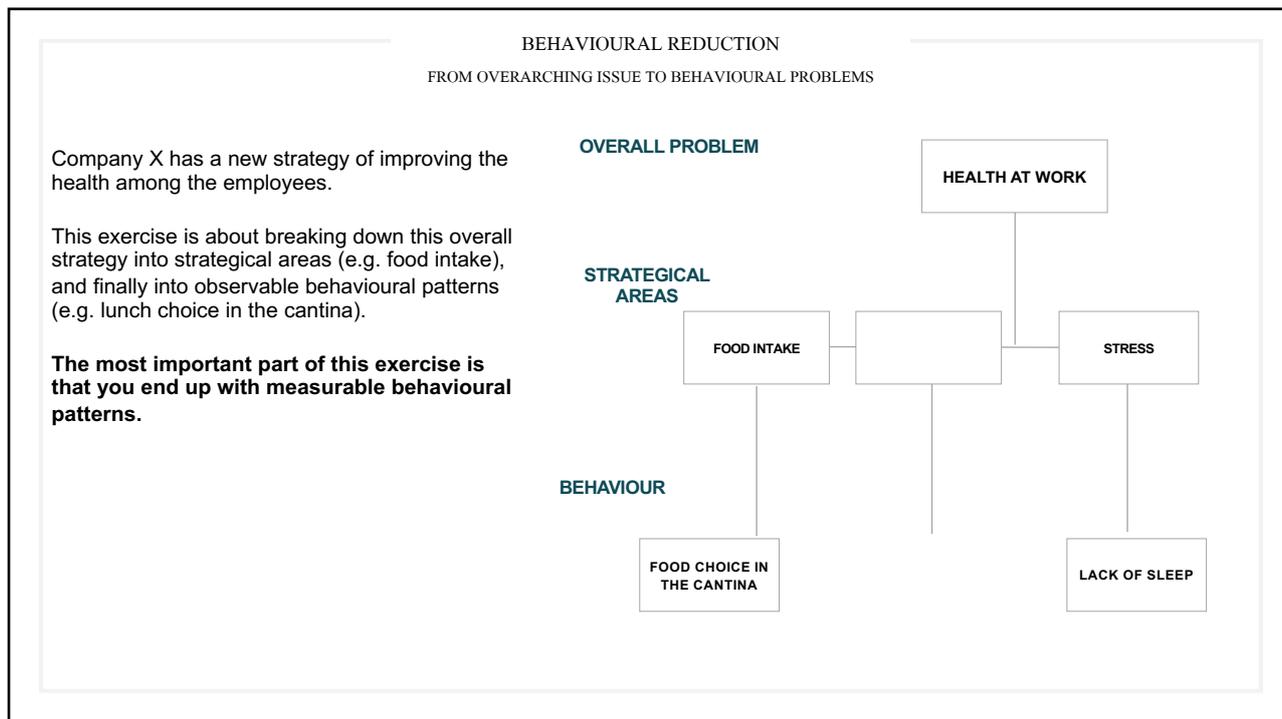
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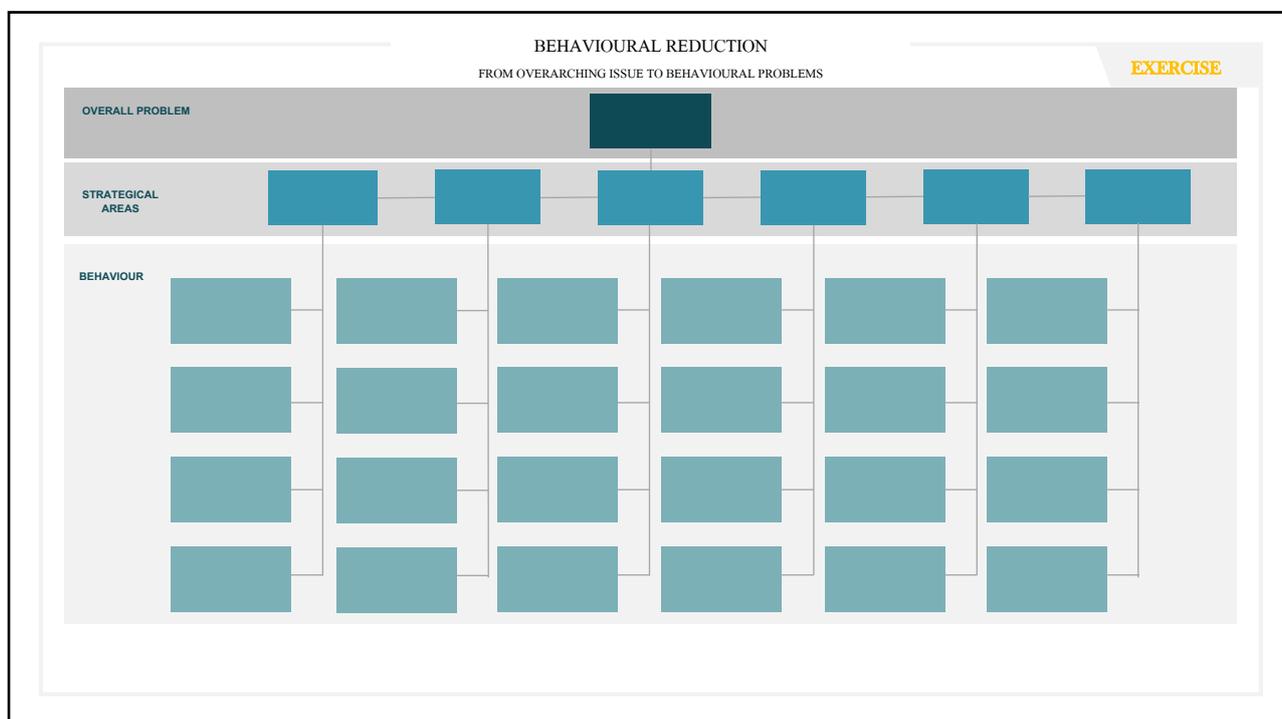
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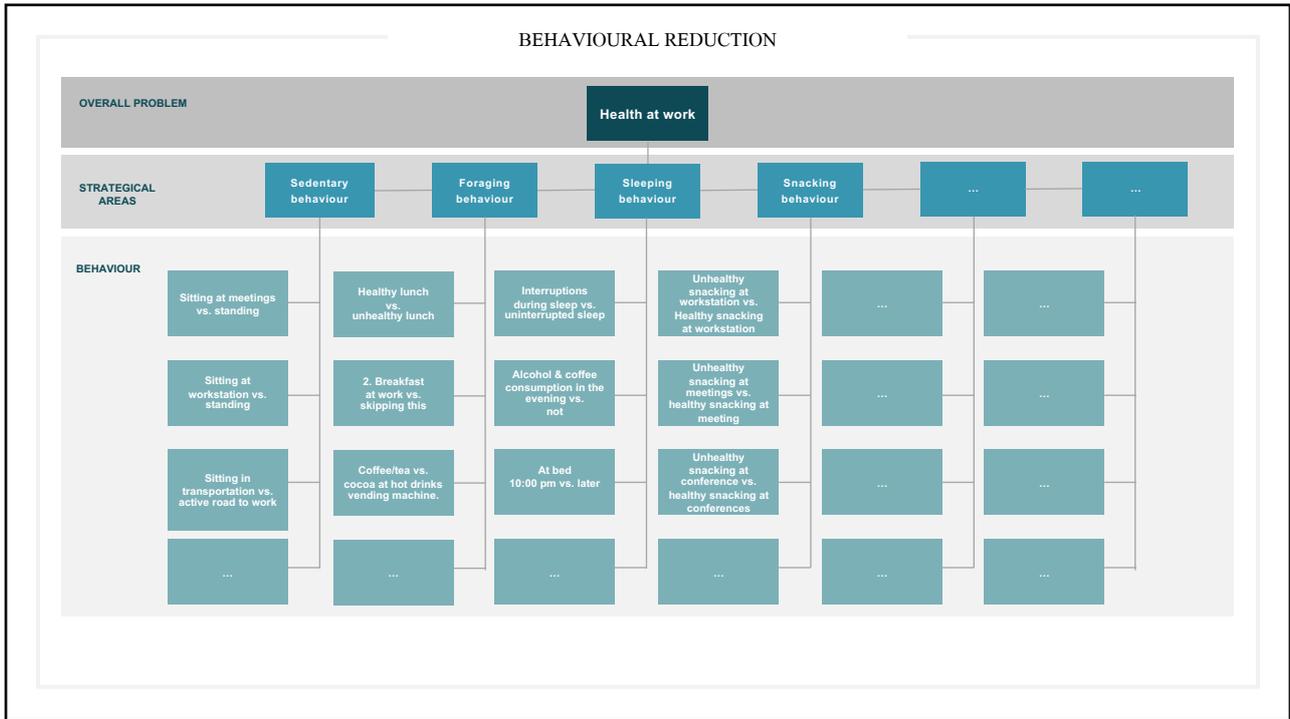
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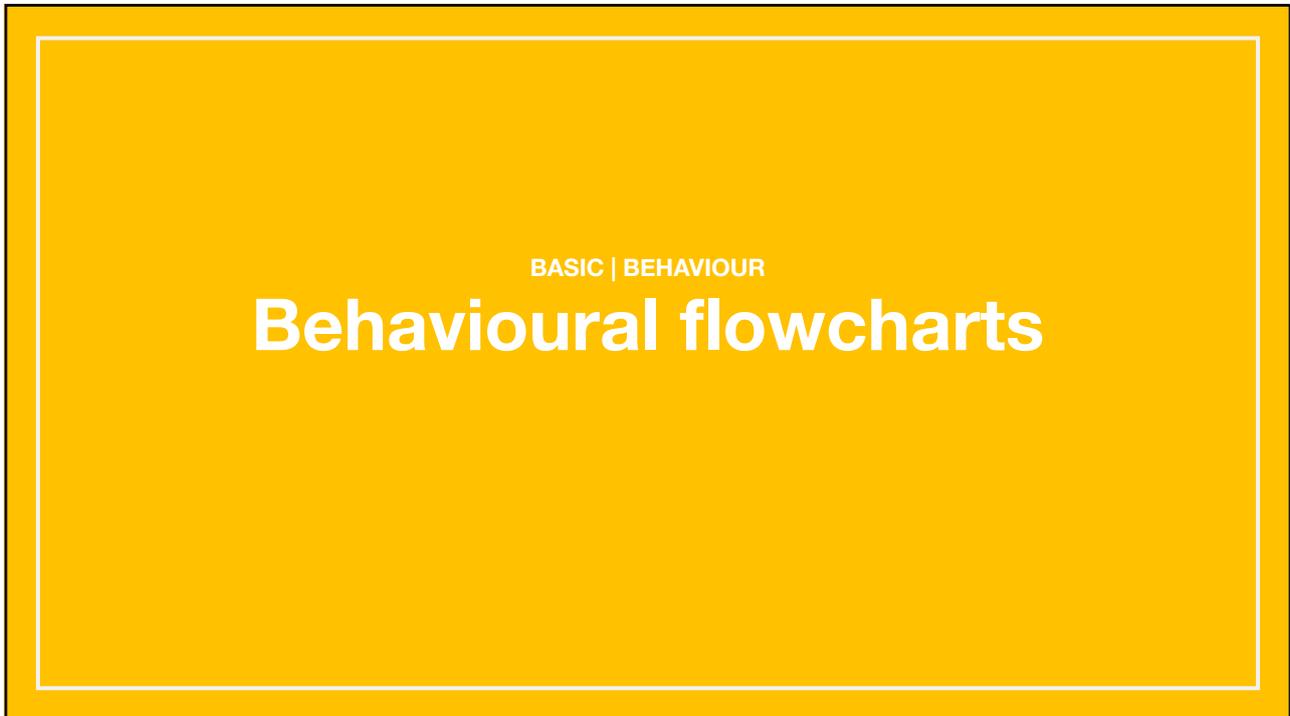
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BEHAVIOURAL FLOWCHARTS

What is a Behavioural flowchart?

- A behavioural flowchart shows in details how the steps in a process fit together.
- This is done by breaking down a process into the individual activities and illustrated by the relationship that occur between these, as well as the flow of the process.
- A behavioural flowchart is a flowchart that provides a detailed description of how a process actually unfolds, as well as including behavioural data in order to make a quantitative analysis.

Why should we use a behavioural flowchart?

- The simplicity of a behavioral flowchart makes it useful for creating a common understanding and a sharing of processes in teams.
- Can be used to identify choice architectures and decision points that are central to the efficiency and stability of a process.

```

graph TD
    Start([START]) --> Alarm[ALARM RINGS]
    Delay([DELAY]) --> Alarm
    Alarm --> Ready{READY TO GET UP?}
    Ready -- NO --> Snooze[HIT THE SNOOZE BUTTON]
    Snooze --> Delay
    Ready -- YES --> TurnOff[TURN OF THE ALARM]
    TurnOff --> ClimbOut[CLIMB OUT OF BED]
    ClimbOut --> End([END])
    
```

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BEHAVIOURAL FLOWCHARTS

Flowcharts are drawn using arrows and shapes of various kinds.

-  • A process step which represents an activity (denoted as a rectangular box).
-  • A decision which represents a decision point (denoted as a diamond).
-  • The start and the end of a process (denoted as ovals).
-  • Arrows that connect the symbols and show process flow.
-  • Delays that represents a time period.

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BEHAVIOURAL FLOWCHARTS



1. Draw up a flowchart

2. Identify loose ends

3. Look for missing decision points

4. Identify crucial decision point

Every month *Healthcare Hospital* (HH) has 100 new healthcare employees who start working at the hospital across all departments, including medical students. According to hospital policy, all new employees must participate in an introduction seminar at the end of their first month.

The introductory course is held each month, and new employees are invited via their hospital email. At least one week prior to the seminar, participants need to register which department they are located at and their level of experience.

Each month 80 employees accept the invitation to join the seminar, however, only 50% of the employees show up on the day.

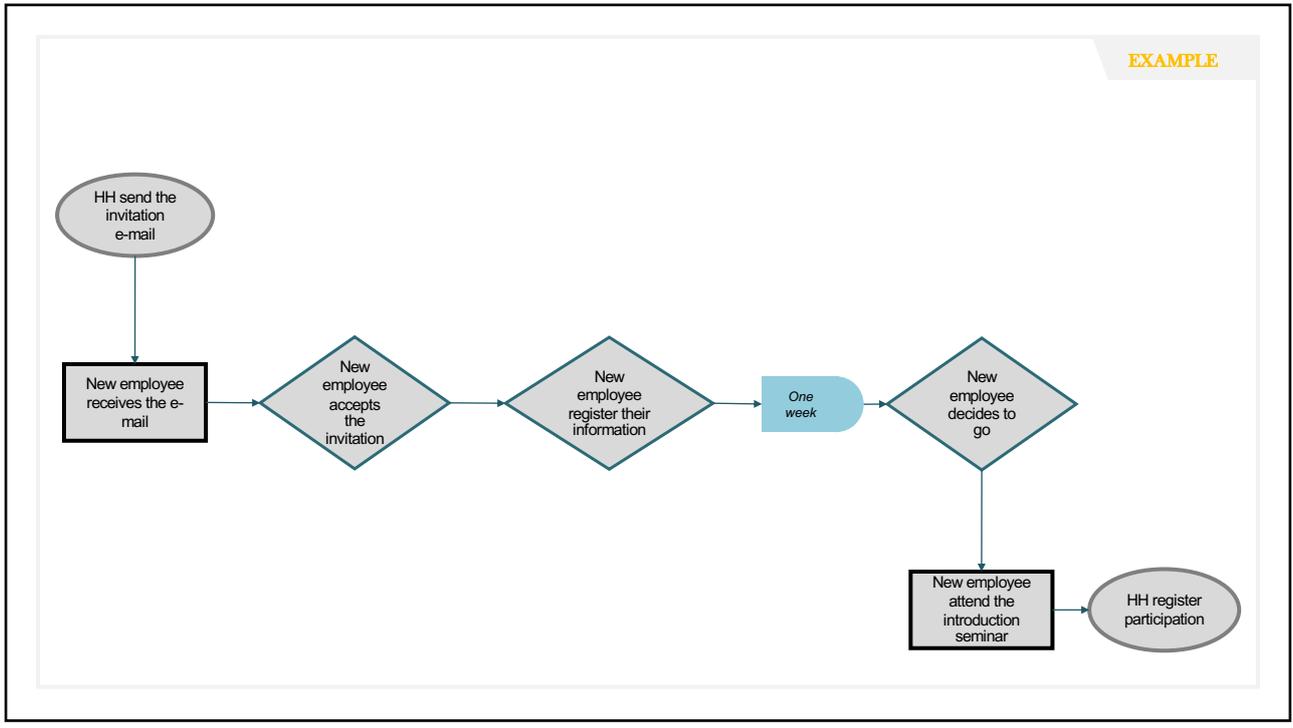
Also, the hospital finds that only about 15 of the attending participants have registered their information, leading to less productive introductory seminars.

This has been an issue for a long time, and the hospital tried different measures to make more people comply with the hospital policy by participating. Now they wish to use behavioural insights to create a more inspirational e-mail invitation, in hope of an effect. However, using behavioural insights, a more profitable approach is to locate what in the process between invitation and attendance goes wrong.

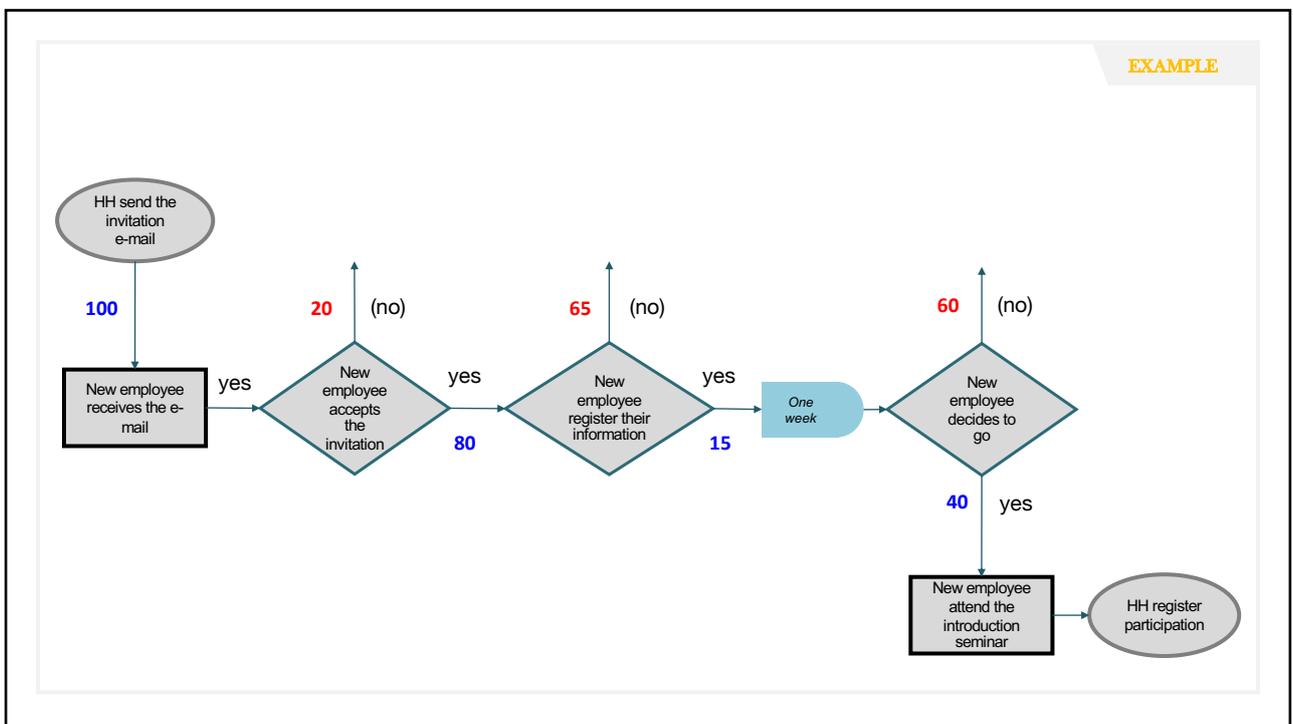
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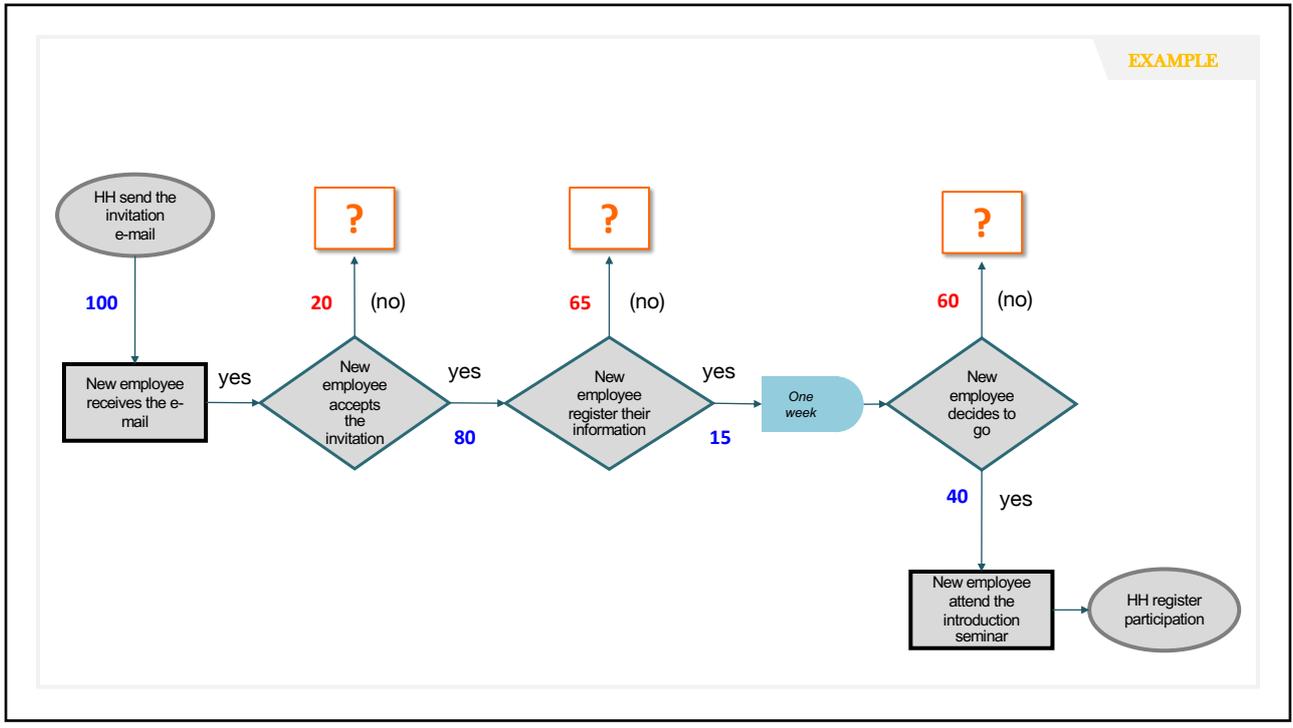
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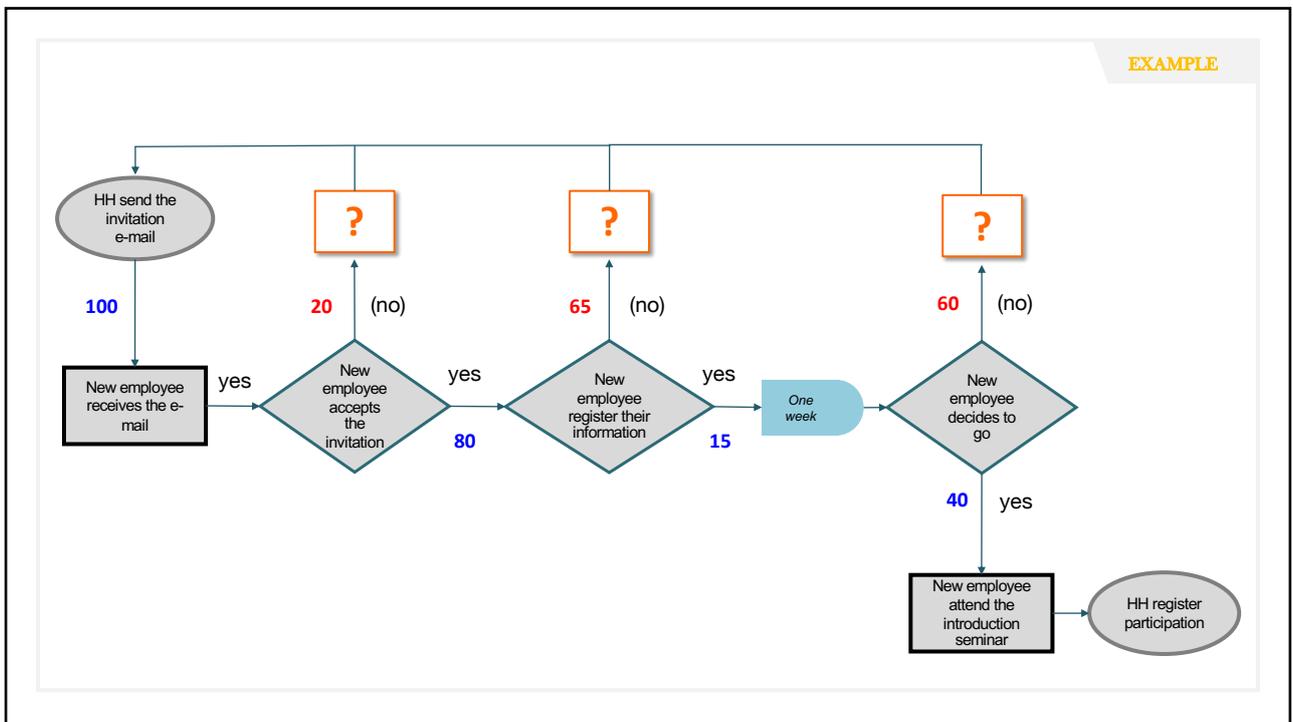
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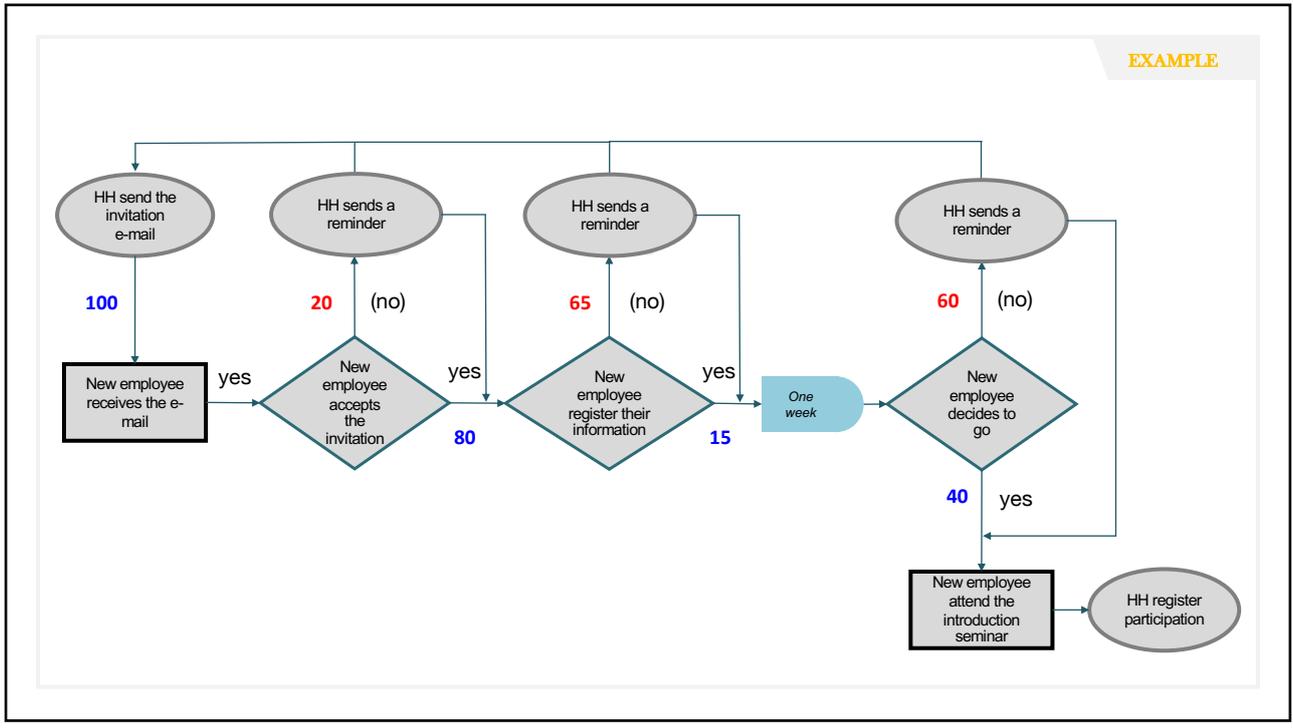
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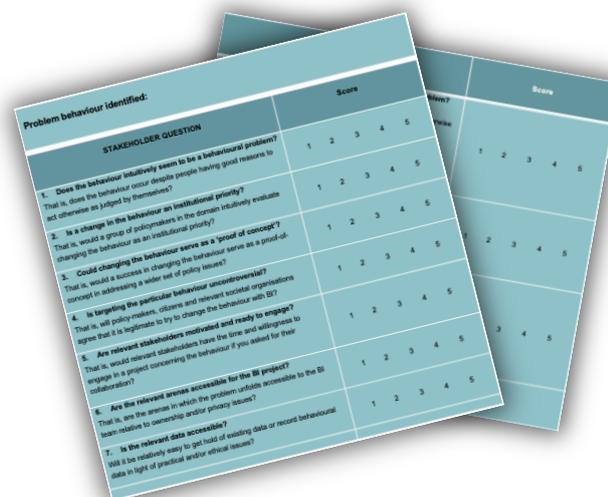
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Priority filter

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THE PRIORITY FILTER

The priority filter is made to ensure the selection of the problems from the behavioural reduction that have the best potential to form the basis of a project based on Behavioral Insights.

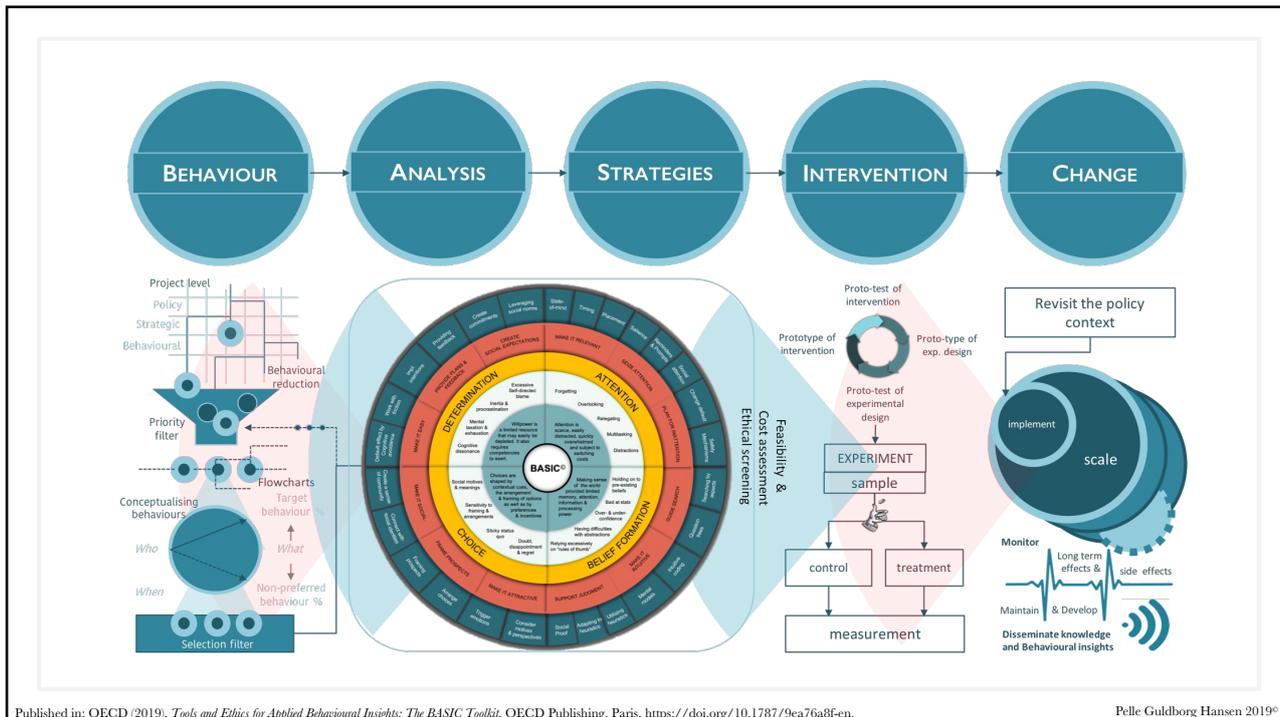


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THE PRIORITY FILTER

Problem behaviour identified:		BI Team questions	Score
STAKEHOLDER QUESTION	Score		
1. Does the behaviour intuitively seem to be a behavioural problem? That is, does the behaviour occur despite people having good reasons to act otherwise as judged by themselves?	1 2 3 4 5	8. Does the behaviour theoretically seem a behavioural problem? That is, is the behaviour a likely result of psychological limitations, heuristics and habits despite people having good reasons to act otherwise as judged by themselves?	1 2 3 4 5
2. Is a change in the behaviour an institutional priority? That is, would a group of policymakers in the domain intuitively evaluate changing the behaviour as an institutional priority?	1 2 3 4 5	9. Are the reasons for a change in behaviour well documented? That is, is the evidence that supports question (1 and 8) produced by methodologies compatible with the psychological theories underpinning BI?	1 2 3 4 5
3. Could changing the behaviour serve as a 'proof of concept'? That is, would a success in changing the behaviour serve as a proof-of-concept in addressing a wider set of policy issues?	1 2 3 4 5	10. Have similar problems been addressed with Behavioural Insights? That is, can you identify studies or projects where BI have been applied to a similar problem?	1 2 3 4 5
4. Is targeting the particular behaviour uncontroversial? That is, will policy-makers, citizens and relevant societal organisations agree that it is legitimate to try to change the behaviour with BI?	1 2 3 4 5	FINAL SCORE:	
5. Are relevant stakeholders motivated and ready to engage? That is, would relevant stakeholders have the time and willingness to engage in a project concerning the behaviour if you asked for their collaboration?	1 2 3 4 5		
6. Are the relevant arenas accessible for the BI project? That is, are the arenas in which the problem unfolds accessible to the BI team relative to ownership and/or privacy issues?	1 2 3 4 5		
7. Is the relevant data accessible? Will it be relatively easy to get hold of existing data or record behavioural data in light of practical and/or ethical issues?	1 2 3 4 5		

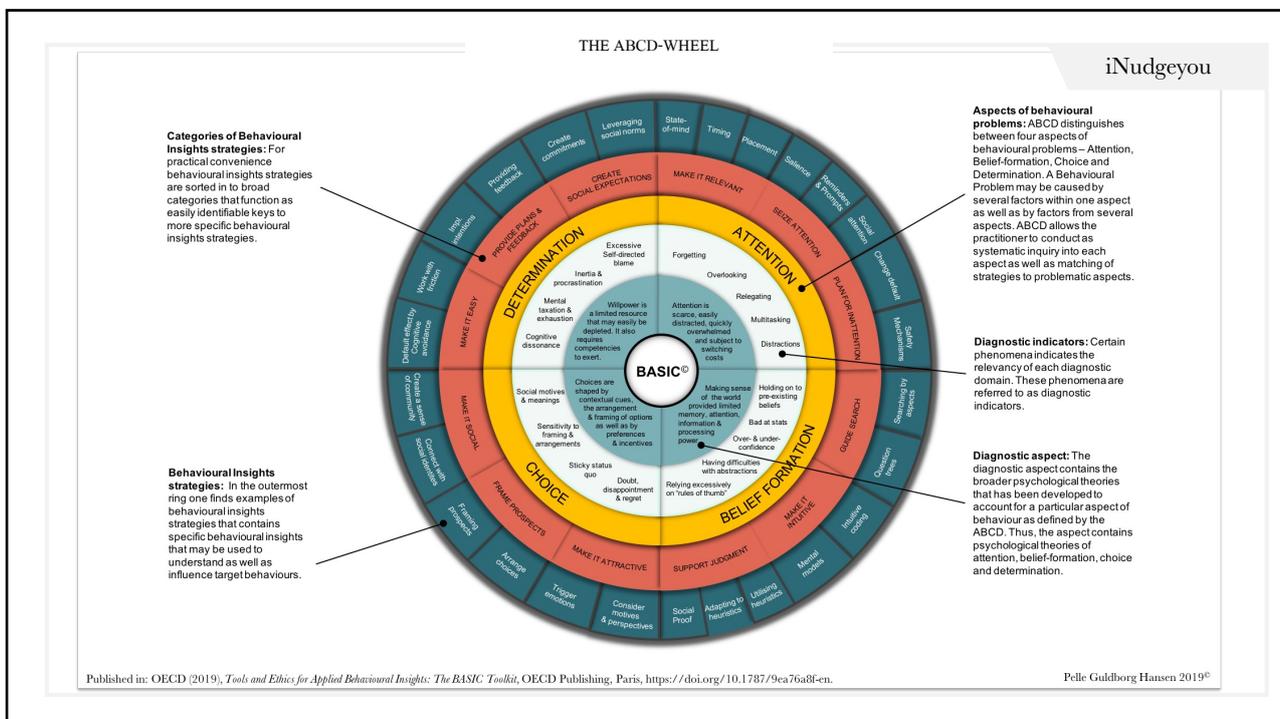
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