Imagine a solution that is:
- self replicating/sells itself
- sticky/users get retained
- compelling to tell about
- easy to share
- low budget
Examples:
Uber, WhatsApp, Pinterest, Dropbox, LinkedIn

Persuasive and pervasive by design
Layers of UI/UX

UI/UX

Core solution

Social science

Understanding the social fabrics that bind people and influence their decisions in society

Behavioural science

Understanding cognitive biases and principles and using them to influence decisions

Neuroscience

Understanding neurotransmitters and hormones, and how they can be triggered or suppressed to influence desired decisions

Bedrock of data and evidence

Digital credit solution
Remittances. Purposely targeting male users with the aim of helping them overcome the mental barriers that prevent them from asking for help from their social circles.

This interface consists of:
1. A nudge: to ask for help
2. Social proof: evidence of other people who asked and received help.
3. Testimonials: from real people.
4. Call to action: to go ahead and ask for the help; and to share with their social circle

Trigger cortisol and oxytocin
“By constantly validating hypotheses before investing in hard-development, the growth team is able to make the product team more assertive, consequently enabling them to invest their resources more wisely due to the certainty of expected results. We could either assume a better investment or a cost reduction, which will vary based on where the growth team is actually focused.”

Pedro Clivati

Growth methodologies including “Product-Led Growth” which represent a shift from traditional ways of doing business, to more efficient, faster ways of design, development and scaling, literally on a shoestring.
The journey would start with data
The biggest value that I derived from FinAccess is that it allows for deep segmentation and analysis of data, a critical factor in building knowledge.
The deep dives can be applied in many sectors:

- Education
- Agric-value chains
- Trade value chains
- Remittances
- Jua Kali
- Construction
- Informal workers
- MSMEs
- Healthcare
**Knowledge Management Cognitive Pyramid**

- **Wisdom**
- **Shared Understanding**
- **Knowledge**
- **Information**
- **Data**

- **Focus:**
  - Create
  - Organize
  - Apply
  - Transfer

- **Focus:**
  - Collect
  - Process
  - Disseminate
  - Store
  - Display
  - Protect

- **MVP = Minimum Viable Product**
- **MMP = Minimum Marketable Product**

**Insights & interpretations**
- Qualitative survey
- Human centred design

**Decision Risk**
- Know Why
- Know How
- Know What
Most value is derived from FinAccess when it is part of a collective. "Like an instrument and player in an orchestra."
The Problem

3 out of 10 Kenyans delay or forego care due to their inability to pay for medical services at time of need – even pre-COVID-19.
The Project Team – Phase 1

In addition to the PharmAccess project team, an independent Digital Financial Services Consultant in Kenya was hired to help better understand the Kenyan credit market, the project target segment (lower-middle income Kenyans), their financial barriers and potential opportunities to introduce a health credit product. FSD Kenya provided in-kind support to this project by allowing one of their data analysts to conduct quantitative analysis in their rich FinAccess dataset.
TRANSFORMATION

DATA

INFORMATION

KNOWLEDGE

WISDOM
We identified 15 different segments within the Kenyan population. Each segment has varied challenges and needs.

<table>
<thead>
<tr>
<th>Segment</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>I</th>
<th>J</th>
<th>K</th>
<th>L</th>
<th>M</th>
<th>N</th>
<th>O</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. in population</td>
<td>431,243</td>
<td>980,357</td>
<td>319,383</td>
<td>173,480</td>
<td>283,557</td>
<td>150,549</td>
<td>173,847</td>
<td>257,396</td>
<td>388,732</td>
<td>134,553</td>
<td>467,993</td>
<td>1,394,713</td>
<td>2,442,014</td>
<td>967,911</td>
<td>2,024,621</td>
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<tr>
<td>Sex</td>
<td>F</td>
<td>F</td>
<td>M</td>
<td>F</td>
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<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>F</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
</tr>
<tr>
<td>Location</td>
<td>U</td>
<td>R</td>
<td>U</td>
<td>U</td>
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<td>U</td>
<td>U</td>
<td>U</td>
<td>U</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
</tr>
<tr>
<td>Income level</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2</td>
<td>Q3</td>
<td>Q4</td>
<td>Q2/Q3/Q4</td>
<td>Q2/Q3/Q4</td>
<td>Q2/Q3/Q4</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
<td>Q2/Q3</td>
</tr>
<tr>
<td>Source of income</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
<td>Employed</td>
<td>Business/self-employed or farmer or casual</td>
<td>All but excluding 'employed'</td>
<td>All but excluding 'employed'</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>Single and/or widowed</td>
<td>NSI</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>Married</td>
<td>NSI</td>
<td>NSI</td>
<td>NSI</td>
</tr>
<tr>
<td>Dependents</td>
<td>With children</td>
<td>With children</td>
<td>With children</td>
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<td>With children</td>
<td>With children</td>
<td>NO children</td>
<td>With children</td>
<td>With children</td>
<td>NSI</td>
</tr>
</tbody>
</table>

F = Female, M = male, U = Urban, R = Rural, NSI = Not significant indicator, Q = quintile

Main segment Indicates which characteristic differs from the main segment

Base: Population of Kenyans 16+ years = 27m
We analyzed all 15 segments on relevant financial and health variables.
Personas created from FinAccess raw segmentation for further quantitative deep dives as well as in-depth qualitative research.
Some examples of information derived from FinAccess data for the 5 identified persona’s.

**Experienced a health shock as the largest shock in the past 1 year**
*Source: FinAccess 2019 raw dataset*

- 69%
- 43%
- 62%
- 47%
- 64%
Some examples of information derived from FinAccess data for the 5 identified persona's
Some examples of information derived from FinAccess data for the 5 identified personas.

**Household budgeting priority: Nationwide**

*Source: FinAccess 2019 raw dataset*

- Education for self or family: 36%
- Putting food on the table: 29%
- Improving business, farm or career: 16%
- Health: 13%
- Buying land/building or improving house: 5%
- Buying assets (TV, fridge, livestock): 1%
Some examples of information derived from FinAccess data for the 5 identified persona’s

**Went without treatment or necessary treatment in the past 12 months**

*Source: FinAccess 2019 raw dataset*

- 45%
- 33%
- 47%
- 31%
- 38%
Some examples of information derived from FinAccess data for the 5 identified persona's.

Financial tools used to manage minor health shocks in the past 12 months
Source: FinAccess 2019 raw dataset

- Borrow formally
- Borrow informally
- Save formally
- Save informally
- Selling assets
- Cut expenses
- Claim insurance
- Secret hiding place
Some examples of information derived from FinAccess data for the 5 identified persona’s.
Some examples of knowledge gained on the target persona’s:

- Men’s reluctance to tap into their social networks
- Insurance is a hard sell
- Competing financial needs
- Women, men, and chamas
- The church is a social network for help
- Credit is used to address health shocks
Men’s reluctance to tap into their social networks

“There’s a way of borrowing from friends”

Interestingly, when a major health shock occurs, this reluctance is overridden by their need to get liquidity and like the women, men also largely fall back on their social networks.
Men’s reluctance to tap into their social networks

“No [I don’t save]. When you keep money aside [purposely for healthcare] that is when these misfortunes befall you”

Competing financial needs, the lack of proper understanding of insurance, product design and administrative challenges, and religious and superstitious influences are some of the factors affecting the non-uptake of insurance.
“...the doctor still felt that I should report back to him [after consultation]. I have not been able to because I must be here. The kids have to eat, and I keep postponing the appointment...”

Meagre financial resources within the family means that choices have to be made in deciding what to spend on, borrow for and put aside.
Exploring the puzzle

Women, men and chamas

(On the issue of privacy) “With money, there is no secret.”

Women are already well organised around chamas. Men do need some nudging.
“They [the church members] do give some financial assistance. ...and there are others who just come to pray for you”

The church not only provides spiritual nourishment but it is also a place for social mobilization and support.
“When I was sick, I borrowed KShs.8,000 from [a digital credit product], KShs.2,000 from my cousin and KShs.500 from my salary.”

Taking credit for treatment is embedded as a social norm, and is sometimes taken in the expectation that the social network will respond to clear the debt or supplement the financial help.
Connecting and using the gained knowledge for the next step in the product development cycle: prototyping with potential target users (currently ongoing).
Q & A