



The Next Frontier of Healthcare

Key Highlights

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Meet our speakers



Kelly Peters, MBA
CEO & Co-Founder of BEworks



Prof. Dan Ariely, PhD
Co-Founder of BEworks



Dr. Ada Le, PhD
Vice President of BEworks



John Breen
Executive Director of
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Dr. Julie O'Brien, PhD
Director of Behavioral
Science at WW



Dr. Reena Pande, MD
Chief Medical Officer, AbleTo



Kelly Peters on the opportunities to improve digital health apps. Is more data always better?

- More data can be helpful but what we really need is a framework for presenting data in a way that is (1) easy to understand, (2) significant to the end user, and (3) valuable to them in terms of providing actionable insights and direction for which (4) feedback is timely and appropriate.
- Considering the **psychological journey map of a product or service is critical for awareness, adoption, adherence, and long-term engagement**. Lasting behavioral change requires careful attention paid to each of these psychological touch points and applying appropriate levers or interventions to all of them.
- We have many available tools to improve the success of behavioral change, both in terms of our understanding of human psychology and in possessing the power and presence of digital health technology to track important metrics, interpret data, and reinforce meaningful action taken in response to it.
- **No one intervention will tackle all problems in digital health care**. We must use our psychological frameworks and identify behavioral barriers, then apply tested and effective interventions to each of these touch points to ensure we catch as many individuals (with their unique psychologies and preferences) and nudge them towards optimizing their health and wellbeing.
- **Behavioral Science allows us to tailor digital health technologies to meet not only our physical but also our psychological needs, needs which continue to play an important role in the quality and quantity of life we hope to live.**

So, where do we go from here, Kelly?

- The wearables market is large and growing, making claims about improving health and changing behavior. However, studies show that **half of users stop using wearables after 6 months and sustained behavioral change is often not achieved.**
- Oftentimes, wearables and mobile applications offer data to their users in the form of step counts or heart rate. Data is a good starting point but save a select few individuals, more raw data is not what most people need to successfully change their behavior.
- Data interpretation and improved salience of information provides badly needed context for the end user about their metrics. Furthermore, there is a need for timely feedback on actionable changes undertaken by the end user to effectively advance behavioral modification and ultimately improve health outcomes.
- To conclude, the data generated in the process of quantifying the self can be useful if paired with behavioral science nudges that truly use the data as one of the tools in the process of behavior change and not the only tool. Feedback mechanisms, actionability, perceptions of control, and many other psychological factors are ultimately driving the end-users' decisions to use the devices or not. Knowing what these are and what to do about them is key to the long-term success of these digital health tools.



Ada Lê on how the sector can improve digital health tools using behavioral science:

- Just because a shiny new technology is available doesn't mean patients will dispense with their old habits to wholeheartedly accept these new behaviors and devices.
- We must recognize that **we are boundedly rational, which means we don't have unlimited mental capacity to dissect every decision we make. We rely on mental-shortcuts that allow us to make speedy judgments but that are prone to biases like over-valuing the present rather than our future selves.**
- These barriers also impact the adoption of new digital technologies, both physical and psychological. If we want to improve the impact of digital tech in the health care space, we must consider the psychological impediments to adoption and adherence.
- To improve adoption and adherence to health and wellness apps, **we need to address feature fatigue, data overload, salience of data, and low self-efficacy among other barriers.**
- **Ask yourselves whether the tools you have built account for limits in people's motivation and will-power.** If not, that's another area to focus on for product longevity and behavior change impact.



Julie O'Brien, on designing for the multifaceted needs of users:

- It is important to build services and programs that address short-term and long-term challenges to adherence, meeting individuals where they are at in their journey
- We need to ensure that our programs and services help catch people when they are vulnerable to making suboptimal choices.
- A supportive environment that **features different levers for change at different touch points helps ensure we catch as many individuals navigating this journey as we can, and not rely on one blanket solution for all.**
- More data is useful to scientists, data analysts and designers but not necessarily to the end user. This is where the **innovative, multidisciplinary team comes together to identify the end user's needs and provide a product or service** that meets them where they are at to help them advance and steer the course



Reena Pande on the missing pieces required for health platforms to truly help users:

- Patients face many challenges regarding behavioral change. This is especially true for those with ongoing psychological and physical illness, who are known to rely on biases and heuristics more when under such stress.
- As digitization becomes a more normal part of our lives, it is important that we know how to navigate **the digital health landscape and make available the social, physical and technical tools we need to succeed.**
- **Healthcare has become increasingly depersonalized.** It is important to recognize that a key issue within the navigation of digitized healthcare is the lack of social support.
- **Guides and mentors will form a critical and necessary bridge between the social and the digital aspects of health.** Their role should not be understated.
- We lean a lot on the person to make the change, then on tech to provide support and feedback, but we also need social support to maintain the change especially when dealing with mental and physical health issues can be so difficult.



Dan Ariely on whether numerical data is always the best type of feedback:

- Shapa is a scale with no numerical weight display. Why? Experiments showed us that **gains in weight were perceived as more painful than losses in weight**, but weight fluctuates for a variety of reasons throughout the month.
- The **correlation between action and weight change is slow and inconsistent, all of this creates confusion and a lack of motivation**. Think about whether your health data always has a positive upward (or downward) trajectory, or does it fluctuate sometimes randomly in-between?
- Furthermore, a lack of change (no weight gain) is not appreciated, so **no news should be good news but we don't perceive it like this**. Though we do not appreciate this, **sometimes seeing no change is actually a good thing and we must recognize where this is true and celebrate it**.
- Shapa assessed trends and gives qualitative data/feedback and when compared to a physical scale, reduced weight over time
- Receiving raw data can be discouraging if we don't know how to interpret it.
- Multiple, personalized interventions can help ensure that digitized health care **helps individuals avoid acute events** that may topple their current or projected standing in their health.
- Our current choice architecture caters to many of our physical needs to reduce material lack and burden but we have yet to maximize our environment and make more available and accessible the tools we need to meet our psychological leanings and needs.



About BEworks

Our goal when we launched BEworks over a decade ago was the same as it is today: to serve as pioneers in the field of behavioral science. Carefully applied, this discipline can unlock consumer's needs, motivate teams with purpose, and empower leaders to drive with aspiration. Founded by the field's leading experts, CEO Kelly Peters and Professors Dan Ariely and Nina Mazar, the firm distinguishes itself with its rigorous commitment to evidence-based insights and cutting-edge scientific methods.

Today, BEworks has the world's largest team of experts in behavioral science. All our practitioners are accomplished researchers, hold advanced graduate degrees, and have extensive experience in applying BE to complex strategic, marketing, operational, and policy challenges. Our global consultancy, training academy, and research institute are headquartered in Toronto, Canada and supports firms and government agencies throughout North America, LATAM, EU, and Japan.





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challenge?**

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see how we can help.**

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