
A HUMAN LENS ON THE LIVES OF

INFORMAL WORKERS



+



It's easier than you think to hide in plain sight. To be everywhere and nowhere. To become so ingrained in the fabric of a city, an economy, a world, that you are both integral to a place, and on its fringes.

The informal workforce often falls into this “in between” – the woman selling mangoes on the side of the road; the domestic worker sweeping the drive with a quiet focus; the young man picking through yesterday's garbage in the pre-dawn darkness, a clank of a can the only indicator of his presence.

While the lives of informal workers may differ depending on country, culture and profession, the ambitions and desires of these individuals are universal. →



DANGER

CH OUT

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A HUMAN LENS ON THE LIVES OF INFORMAL WORKERS

The stories and perspectives contained in this work are divided into three design lenses. Together, they can help us understand how to design for informal workers in meaningful, targeted and empowering ways.

ILO's Informal Employment Definition

All remunerative work that is not recognized, regulated, or protected by existing legal or regulatory frameworks and non-remunerative work undertaken in an income-producing enterprise. Unlike formal employment, informal jobs are not subject to national labor legislation, income taxation, social protection, or certain benefits (advance notice of dismissal, severance pay, paid annual or sick leave, maternity leave, retirement/pension, etc.)

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The purpose of this work is to help you determine:

**Not who
(specifically)
to reach, or
what (exactly)
to make,**

But...

How to frame health interventions designed for the informal work force.



About This Book

This book is a glimpse into the lives of urban informal workers, as part of a human-centered design exercise conducted by IDEO.org, with support from The Rockefeller Foundation.[◇]

Informal workers (IWs) are as varied, unique, and individually complicated as workers in the formal economy. This book allows us to dive into that complexity – and then pull up to see how we might effect change on a macro scale.

Think of it as a peek into the lives and motivations of informal workers: an exploration of the constraints that often dictate choices around IW health and wellness. Ultimately, this book is intended to illuminate opportunities for design.

[◇] Countries Visited
 Nairobi, Kenya;
 Durban, South
 Africa; Bangkok,
 Thailand;
 and Manila,
 Philippines.



THE OPTIMIZER
EARLY ADOPTER



THE INFLUENCER
NATURAL LEADER



THE CAREGIVER
NURTURING INSTINCTS



THE HOPPER
ENTHUSIASTIC NETWORKER



THE SURVIVOR
LONELY WARRIOR

BEHAVIORS

Engaging People in Powerful Ways

This section places a behavioral lens on the major players within the informal worker ecosystem. Behavior Segments are lenses through which people view the world, regardless of age, gender and location. They inform problem solving, define a person's role within a community and illuminate opportunities for design.

Whether someone is optimizing their situation, influencing those around them, acting as a caregiver in the community, hopping from job to job, or simply surviving day-to-day, these mindsets help us better understand not just the mechanics of a person's life, but their approach to how they live it.

→ Archetypes are typical characters created to represent patterns of human behavior. The archetypes used in this book were created to represent the behaviors found to be most relevant to the scope of this work.

→ By tapping into existing mindsets and behaviors, or empowering those who already play an important role in a community, we can better design for an entire ecosystem.

THE OPTIMIZER

EARLY ADOPTER



Optimizers have changed their circumstance and had good results. They lead by example, demonstrating real-world success in the realm of work, finance, or even health.





"I USED TO WORK AS A CARETAKER FOR THE ELDERLY [IN THE FORMAL SECTOR]. THIS JOB IS MUCH BETTER THAN WHEN I HAD A BOSS."

GRACE, FRUIT VENDOR, NAIROBI

Grace's mango stand in the Kangemi slum of Nairobi is abuzz with activity – a young man packs boxes of mangoes, reinforcing the cardboard with twine; Grace receives payment from a customer, reaching in her pocket to make change; neighbors and fellow workers walk by and raise a hand to Grace, a well established vendor in the market. Throughout our conversation, Grace intermittently pulls out her phone and answers calls related to her booming business.

Grace's proactivity towards her business typifies her Optimizer mindset. Grace has had a variety of jobs in both the formal and informal sector, but now she runs her own fruit stand in Nairobi, selling mangos wholesale. She employs two other informal workers who help her pack and sell the fruit. Her stand has a turnover of Ksh45,000 per day (approximately \$500), and Grace says that this job, while informal, is much better than other formal jobs she's had. In fact, she prefers it.

While Grace has never taken an explicit leadership role in her community, her proactivity and devotion to optimizing her situation – through work, finance, and health – makes her a symbol of success. Grace's financial stability also allows Grace to think long-term about her life and to take small risks without jeopardizing her ability to support her business and family.

Grace's proactivity is evident in her participation in a chama (lending group) with other vendors. The chama was formed with the goal of purchasing a plot of rural land where they could all retire; however, Grace and her fellow members also adapted the rules of their chama to require health insurance of all members.* After getting an insurance card, Grace demonstrated the importance of insurance coverage to her brother: first by testing it out herself, then by paying for his insurance card before until he was able to afford it on his own.

Grace's experimental mindset positions her as an early adopter of new solutions who can model behavior for others in her community.

*FOR THE FULL STORY, GO TO PAGE XX →

**VARIOUS VOICES
ON THE OPTIMIZER MINDEST**



"I'm like a butterfly. I have freedom and can go anywhere without being in one place.... my job is unpredictable, but at least it's mine."

JURAIRAT, TOWEL VENDOR, BANGKOK



"It's very hard work, running your own business. But I'm in control of it."

MADLAMINI, TRADITIONAL
HEALER, DURBAN



"I apprenticed for 8 months. After that I learned plumbing and welding. From those jobs I saved up money and started purchasing tools. People are apprenticing under me now."

JOHN, CONTRACTOR, NAIROBI

THE OPTIMIZER

DESIGN APPLICATION

Qualities

- > Have changed their circumstance (often transitioning from the formal to the informal sector) and had good results
- > Utilize tools and information channels to proactively make their lives, work, or health better
- > Lead by example by validating different behaviors within their community through their desire to improve their own situation
- > Are involved in groups and organizations (such as chamas) but are likely not stepping into a leadership role because they are so focused on their work

Leverage

- > Their proactivity and willingness to try new things – potentially by targeting Optimizers for the 'beta run' of new services and designs
- > Their success stories, to create more visibility and pride among informal workers who choose this kind of work and make healthy choices
- > To demonstrate new behaviors through action, rather than active leadership

Find them

- > Excelling or inspiring people in one particular area (work, finance, health, etc.)
- > Part of groups (such as lending groups, worker unions, etc.) but likely not leading them
- > Serving as an example to the community through their actions

THE INFLUENCER

NATURAL LEADER



Influencers want to effect change in their communities and often go out of their way to provide guidance – whether in a recognized position or through grassroots influence.





"I AM NOT A BOSS-LEADER BUT AN ORGANIZER... I RECRUIT PEOPLE [FOR WORK] FROM THIS AREA BECAUSE I GREW UP HERE. IF SOMEONE LOST HIS JOB HE CAN COME ASK ME FOR HELP."

SAYUN, CONSTRUCTION WORKER & ORGANIZER, BANGKOK

Sayun is perched on a park bench in a narrow alley of Bangkok's Klong Toey slum. At first glance, it might seem that he is here by mere chance, but over the course of a few hours it becomes apparent that he is actually hosting a loose form of "office hours." He has a chat with the woman who cooks chicken just down the lane, oversees the handiwork of a man who is repairing a VCR that he will later re-sell, and has a word for everyone who walks down the street. In the afternoon, when the workers in his crew return from a morning at the shipyard he will pull a stack of bills from his pocket and distribute their payment – in equal parts – for the morning's work, which he organized as the leader of a grassroots worker union.

Sayun influences his community in more ways than one. First, he heads one of the worker groups that exist in Klong Toey. He is responsible for finding group jobs at the shipyard, selecting the workers, organizing transportation to the site and handling payment with the employer. There are a number of these worker groups within the neighborhood, and while they have their own members, Sayun explains that there is fluidity among the groups: if one organizer needs additional men, he can find them through another group. Workers are also welcome to pursue other odd jobs. "It's a brotherhood," Sayun explains, "It works better this way, being equals. We all get the job done together and finish earlier."

Sayun is in his element – he truly enjoys being a pillar of support in the neighborhood, but he is adamant about the characteristics that make a good organizer. The word "leader" implies a hierarchy that he doesn't believe in. Within the world of the unions, an organizer is elevated to the position both by being a stellar worker and becoming trusted by the employer, and by proving

to the other men that he will honestly handle the money and allocate the work. "It's mutual interest," he says. His group even decided to allocate funds from their work to pay for insurance.*

As a natural leader and someone who has lived in the community his whole life, Sayun enjoys going to different neighborhoods and staying connected to the people that live there. But Sayun also knows the line of when to lead and when to leave people alone. "Sometimes [giving advice] brings conflict," he explains. "If you give someone advice about his wife, he might think you are sleeping with her, and blood will be drawn." His nuanced understanding of the neighborhood dynamics, enthusiasm for organizing, and outgoing personality makes him a powerful influencer in his neighborhood.

Sayun brings a community mindset to the way that he solves problems, understands the specific dynamics of the neighborhood, and has an authentic desire to lead.

*FOR THE FULL HEALTH STORY, GO TO PAGE XX →

**VARIOUS VOICES
ON THE INFLUENCER MINDEST**



"If you want to learn how to play (snooker), you need to learn from someone who can not just talk about it, but DO it too. The same is true of people I listen to for advice."

**GROUP OF MEN PLAYING
SNOOKER, BANGKOK**



"You have to have discipline and a steady attitude to get people to trust you. You must live what you say."

LABOR UNION LEADER, MANILA



"Raquel is able to get others to join things. People look up to her in the community. She also has more time to do these things."

CORA, MANILA

THE INFLUENCER

DESIGN APPLICATION

Qualities

- > Want to effect change in their communities
- > Seek out leadership positions in both large and small ways
- > Have the space (or are able to make space) in their lives for leadership
- > Have shared experience with those they are leading (e.g. they are from the same neighborhood, or they have the same health condition)
- > Will likely have positions of influence in the community due to their innate leadership skills.

Leverage

- > Their ability to galvanize a group (through a recognized leadership role within the community)
- > The influence they have on individuals (through one-on-one guidance or conversation)

Find them

- > Through existing groups (unions, chammas, churches)
- > By identifying the trusted voices within a community
- > Through their desire to pass on knowledge about health conditions they have experienced

THE CAREGIVER

NURTURING INSTINCTS



Caregivers go out of their way to help others,
exhibit empathy for those around them, and
are known within their communities
for warmth and wisdom.





"I FIRST STARTED HELPING ADOPTIVE PARENTS UNDERSTAND HOW TO CARE FOR THEIR CHILDREN. I DID THIS FOR SOME TIME. THEN A WOMAN IN THE COMMUNITY SAW MY WORK IN THE NEIGHBORHOOD AND ASKED ME TO BE A CARETAKER FOR PEOPLE SICK WITH AIDS AND TB."

MARIA

We sit on the floor of Maria's home in the Inanda Township outside of Durban as she tells us her story: a story imbued with hardship as well as hope, tinged with Maria's own optimism and the occasional burst of laughter. As she talks, Maria props her bandaged foot up on a chair – the vestige of a badly infected cut that has taken Maria away from her job as a recycler in downtown Durban for more than four months. Maria's three grandchildren Aphiwe, Maukela and Shplele, sit with us, drawing pictures and pulling out their report cards proudly, as Maria looks on.

Maria began taking care of her grandchildren seven years ago, after their mother (Maria's daughter) died suddenly. At this point, Maria restructured her life and became a recycler in order to support her family. The flexibility of the job helps her juggle work and family. This devotion to her grandchildren is only part of Maria's story, but one that characterizes her mindset as a Caregiver, nonetheless.

Before adopting her grandchildren Maria held various informal caretaking roles in her community. Originally, Maria worked as a volunteer with adoptive families, providing the new parents with advice for how to engage the children into their families. When a woman in the community noticed the work Maria was doing, she offered Maria a position as a "caretaker" in her community – providing support for those who were struggling with AIDS and TB. Although this position was unpaid, Maria took a health seminar to learn about drug treatments, and bought a book about proper wound cleaning and care so she could better serve people. She would help the patients dress their wounds and adhere to their drug treatment for their illnesses.

Maria's desire to nurture those around her extends beyond her living community; it also impacts her relationships to her coworkers, Africa and Guidanni. Together, the three workers collect recycling for the Workshop, a mall in downtown Durban—each takes ownership of a particular section of the mall. Their relationship is supportive, rather than competitive. "My coworkers are like family to me," Maria says, looking across the room at Guidanni. "We support each other." When Maria was unable to come into work because of the cut on her leg, Africa covered her recycling territory (so she won't lose claim over it) and has even been coming out to the Township to bring her food as well as her share of the money.*

Despite her hardship, Maria emits a spirit of optimism, approachability, and humility. The experience of caregiving is a spectrum: sometimes Maria is giving, sometimes receiving. However, regardless of her state, Maria's mindset remains one that is focused on caring for others – whether those people are her family, community members or co-workers.

*FOR THE FULL STORY, GO TO PAGE XX →

**VARIOUS VOICES
ON THE CAREGIVER MINDEST**



"I've seen a lot of how the Burmese [immigrants] are being treated. I always wanted to help others."

BEE, DOMESTIC WORKER. BANGKOK



"Yesterday a teenage boy asked me for a condom. I don't tell him what to do, so he knows he can come to me. Building trust requires being friends."

KANOKWAN, HOME-BASED WORKER. BANGKOK



"I want to take care of kids who don't have parents and help them build skills. This is what I plan to do in the future."

JOHN, CONSTRUCTION WORKER. NAIROBI

THE CAREGIVER

DESIGN APPLICATION

Qualities

- > Go out of their way to help others outside of their families
- > Have extreme empathy and emotional connections
- > Noticed in the community for warmth and wisdom
- > People feel comfortable sharing and asking them for advice

Leverage

- > Their bright spirit to uplift others
- > Their ability to provide advice or health training
- > Their mindset to be an eye on the street that acts as a bridge to the formal system

Find them

- > Doing grassroots volunteer work in the community
- > In community centers

THE HOPPER

ENTHUSIASTIC NETWORKER



Hoppers see their current work or life situation as a jumping off point to the next step, so they often have many jobs, know people in different circles, and can act as natural pollinators of new ideas.





"I COMPLETED 2 YEARS OF COLLEGE BUT THEY WERE HOLDING MY ACADEMIC RECORD BECAUSE I COULDN'T PAY. I AM GOING BACK TO COLLEGE IN THE FALL. I HOPE. RECYCLING IS JUST WHAT I DO RIGHT NOW. I WANT TO STUDY SOCIAL WORK."

GUIDANNI, WASTE PICKER, DURBAN

The fog and damp hug the sleeping Durban streets when 20-year-old Guidanni climbs out of his cot to begin recycling. The work is dirty and physically grueling, but Guidanni remains optimistic with the certainty that this is just a jumping off point to a better, more stable life. As we pack, sort, and bundle the cardboard, Guidanni talks of philosophy, possibility, and the poetry readings that he attends every Thursday – his only day off work. Despite his limited income, Guidanni is squarely oriented towards the future, and he is open to any work opportunities that will get him there.

Guidanni went to a good high school in the Limpopo province of South Africa, and had completed 2 years of college when his mother died of kidney failure. She had been feeling unwell for a long time but continued to see traditional healers until it was too late for a medical intervention. Her death meant that Guidanni was unable to pay for his school expenses – he dropped out, and his transcripts were being held until he could pay his bill and have them released.

At this point, Guidanni boarded a bus to Durban where he began searching for any work he could get. These jobs included helping out people with odd jobs, translating for foreigners, and often waste picking. Guidanni described how proud he was of the bundle he had collected on his first day as a waste picker. He placed the bundle on the scale, only to realize realize, with a sinking feeling, how little it actually weighed. He didn't know the techniques of waste picking, had no support network, and was also vulnerable to having his goods stolen on the street. Although he doesn't drink

or do drugs, Guidanni describes waste picking as a type of work that attracts "the wrong kinds of characters. Drinking and drugs are common."

Finally, after joining a worker union program organized by a local nonprofit, AeT, Guidanni was introduced to Africa and Maria who have a consistent waste picking gig. Africa invited Guidanni to live on a cot in the back of the warehouse, so he could save extra money. With Africa's guidance he also learned the tricks of the trade: how to know the good plastic from the bad and how to appropriately bundle the cardboard. Although his recycling work is consistent, Guidanni remains open to other kinds of work and seeks out experiences and contacts that might help him reach the next phase of his life. He ultimately dreams of returning to school and studying social work.

As someone who hops between jobs and networks with an open mind, Guidanni could be a natural pollinator of new ideas within his community.

**VARIOUS VOICES
ON THE HOPPER MINDEST**



"I worked many jobs to be able to finally start my own business."

CARLOS, DRIVER. NAIROBI



"We are potato sellers until we find the way to grow our business...the hardest part is finding how to move forward."

PETER, POTATO SELLER. NAIROBI



"I'm taking evening classes so I can boost my grades to get to university."

WILSON, TEA SELLER. NAIROBI

THE HOPPER

DESIGN APPLICATION

Qualities

- > Have an exploratory mindset
- > Can be looking for the next move or working towards a larger goal
- > Tend to be young and idealistic which means they have fewer responsibilities besides themselves
- > See their current job as temporary or a stepping stone
- > Might have more than one job and diverse connections outside of work

Leverage

- > Their ability to pollinate new ideas among diverse groups
- > Their willingness to 'beta test' new programs or initiatives as long as they receive compensation or valuable work experience

Find them

- > Looking for work or new opportunities
- > Doing odd jobs
- > Learning from others
- > Seeking direction or education

THE SURVIVOR

LONELY WARRIOR



Survivors live day to day with limited bandwidth to think about longer-term concerns. They can often feel alone or marginalized in society, but have a resilient spirit—doing what they can to provide for themselves and their families. In many resource-constrained communities, the survivor can represent a vast majority of people.





"YESTERDAY I ATE BREAKFAST BECAUSE I MADE MONEY THE DAY BEFORE. IF I DON'T MAKE MONEY, I DON'T EAT BREAKFAST. I JUST WALK TO WORK."

CHARLES, CAR WASHER, NAIROBI

Charles invites us into a small wooden lean-to next to the car wash where he works in Nairobi. The red dirt below is spotted with puddles and strewn with buckets, which men use to haul water from a well that is shared with a neighboring field. Although the car wash is occupied by other washers, Charles explains to us that if he misses a day of work, they will take his customer and he will have to start from scratch. Today's outcome, he explains, will dictate what he is able to do tomorrow.

Although Charles has a wife and daughter in Kericho, Charles came to Nairobi alone and lives a life that is largely isolated. The car wash, which Charles helped start, now has 20 members with plans to set up a joint bank account to buy a power washer. Still, Charles knows that if he doesn't come in to work,



"I SEE PEOPLE I KNOW IN THE MARKET BUT I DON'T SPEAK UP OR SAY HELLO. I KNOW THEM, BUT I DON'T TALK TO THEM."

SAI, STREET VENDOR, BANGKOK

nobody will cover for him, and he has no one to lend him money. When he became sick with TB, Charles' wife came to care for him.* But now that he is well again, he is living alone, walking to work, and largely focused on his day-to-day survival.

Sai, an undocumented Laotian worker living in Bangkok and supporting his family, doesn't believe that he has the ability to do any other work besides selling grilled corn in the Klong Toey Market. Each day, Sai will stay in the market from 6am-9pm, until he has sold all of the food on his stand, in order to make enough to support his family.

Because he has experienced various forms of harassment, been imprisoned and deported, Sai has an individualist perspective on the world, and doesn't trust others to help him.



"I LOST MY AMBITION ALREADY. I JUST WANT SIMPLE THINGS: TO PAY FOR FOOD AND [MY CHILDREN'S] SCHOOL."

REGAN, PEDICAB DRIVER, MANILA

Regan once had a desire to make his life better, but became addicted to drugs to the point that he decided to sell his pedicab in order to support his habit – something that impacted his ability to make money for his family. When he decided to come clean, Regan's mother cared for him in her home. He has finally returned to work (now renting a pedicab), but he simply wants to focus on surviving.

This mindset of short-term survival impacts the ways that Survivors make decisions and can create a sense of distrust. Survivors present a vulnerable group that other behavior segments can positively influence through action and behavior. Survivors represent the majority of many resource-constrained communities.

*FOR THE FULL STORY, GO TO PAGE XX →

**VARIOUS VOICES
ON THE SURVIVOR MINDEST**



"You must pull yourself up
by your own socks."

ROSEMARY, CRAFTSPERSON. NAIROBI



"We are squatting here [in
this informal settlement].
We are aware that at any
point we can be evicted."

ANTHONY, PEDICAB DRIVER. MANILA



"My husband is a construction
worker...it's not regular [consistent]
work. If he doesn't find work for
two days he will roam around
looking for other jobs."

MARIA THERESA, GARLIC PEELER.
MANILA



"Being informal is difficult due
to budgeting. [We make] small
small small money. You're
always spending it each day."

SILUS, CRAFTSPERSON. NAIROBI

THE SURVIVOR

DESIGN APPLICATION

Qualities

- > Providing for their families is the primary focus
- > Mindset is day-to-day with little bandwidth beyond that
- > Can feel alone or marginalized
- > Have a survivalist spirit to keep going, but not necessarily to change

Leverage

- > Their resiliency, creativity and resourcefulness by promoting and celebrating it
- > Their devotion to family to as a lever to encourage positive health practices

Find them

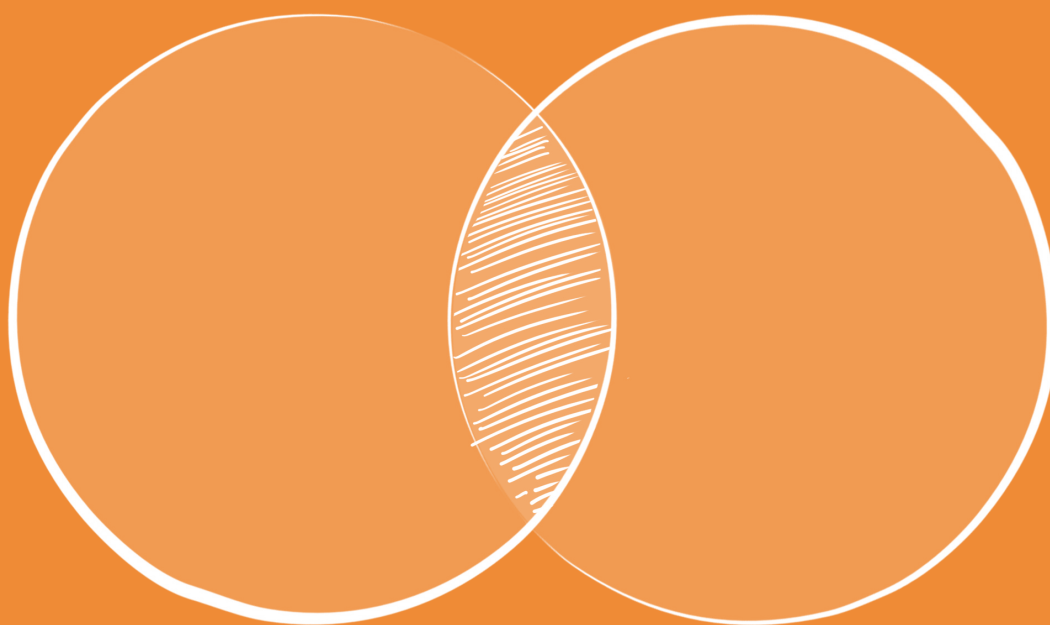
- > Engaging in peer-to-peer storytelling
- > This group can be suspicious of outsiders because they've been wronged. For this reason, it is most powerful to connect with them via peers or influencers within the community











CONNECTION POINTS

DESIGNING FOR PARTICULAR
INFORMATION FLOWS.

DESIRES

REACHING PEOPLE WHEN THEY ARE
RECEPTIVE TO NEW IDEAS.

Highlighting Vehicles for Design.

Informal workers have complicated networks: they can be hyper-disaggregated (e.g. an immigrant community), hyper-connected (e.g. a group of construction workers living on-site), or somewhere in between (e.g. vendors sleeping on cots next to their stalls with little connection to their hometown community). At the same time, informal workers everywhere have a common set of desires that inspire proactive behavior.

By mapping the overlaps between connection points and desires, we begin to build a nuanced understanding of informal worker networks. These lenses help us leverage existing behaviors and build an understanding of how we might design in culturally appropriate ways.

CONNECTION POINTS

DESIGNING FOR PARTICULAR INFORMATION FLOWS.

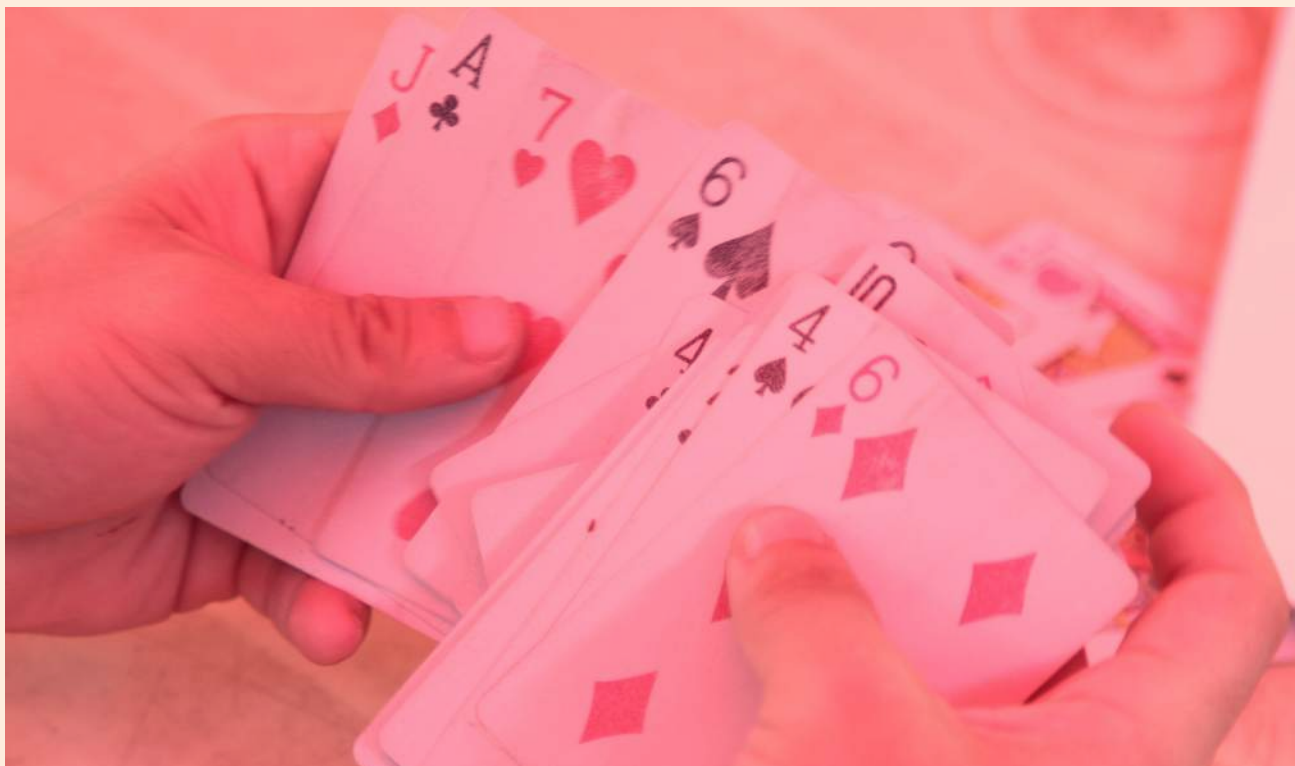


CAN BE LEVERAGED TO:

- > Create high-impact messaging or services by designing for existing information flows.
- > Provide individuals within the community (such as a caregiver or influencer) with specific locations in which to place their energy.
- > Find ways to spread information through the natural links that already exist within communities.

DESIRES

REACHING PEOPLE WHEN THEY ARE RECEPTIVE TO NEW IDEAS.



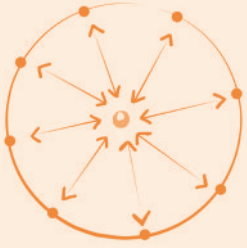
CAN BE LEVERAGED TO:

- > Design a strong health component into activities that people already care about or seek out.
- > Insert a health focus into moments when people are open and receptive to new ideas.
- > Create health messages that are culturally and contextually appropriate.
- > Build on existing relationships to enable deeper health conversations.

→ This section is not exhaustive of all connection points or desires. Rather, it illuminates unusual or interesting focuses to inspire design. Digital or mobile design solutions might exist outside of the bounds of a physical expression.

CONNECTION POINTS: DESIGNING FOR PARTICULAR INFORMATION FLOWS

LINCHPIN



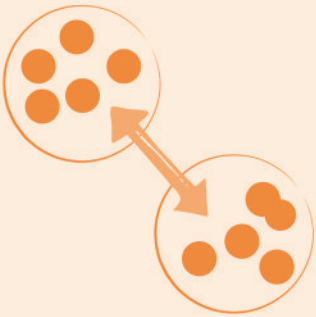
Jurairat has been selling towels in the Klong Toey market for the past 30 years. Her workday begins at 1 am when she parks her cart in the middle of the market, preparing for the 3am rush. Jurairat is a central figure in the market because every vendor needs to purchase two things each day – towels and ice.

This small towel cart is the epicenter of the market, where hundreds of vendors go every morning, and repeatedly throughout the day.

UNIQUE CHARACTERISTICS

- > Connects with many people in a community multiple times each day as part of natural work patterns or habits.
- > Centralized location where everyone knows where to find the person/good/service.

SYMBIOTIC RELATIONSHIP



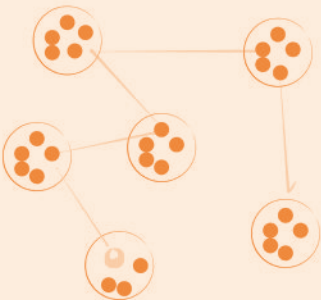
Guidanni and Africa live together inside of a warehouse in one of the biggest malls in Durban, where they also work as recyclers. Outside, street performers travel for two hours to stand outside the mall and play music for tourists. The waste pickers store the performers' valuable instruments overnight, while the performers collect stray recycling items during the day, and bring it to Guidanni and Africa each evening.

Complementary resources and needs have created a symbiotic relationship between two very different workforces.

UNIQUE CHARACTERISTICS

- > Created through the existence of complementary resources and needs.
- > Similar work hours and/or geographic location.
- > Usually built on a personal connection (due to the trust involved).

MOBILE UNITS



Every day, Robert roams from neighborhood to neighborhood in Bangkok, selling ice cream from the pushcart that he rents from a centralized ice cream factory. Although he has no set location, he follows a similar path through a series of neighborhoods each day.

While Robert doesn't have deep relationships with the people he encounters, he is a familiar face in the neighborhoods he frequents, and he makes the rounds every day as part of his job.

UNIQUE CHARACTERISTICS

- > A mobile unit that follows a similar pattern or path each day.
- > Not a central character in a community, but seen as a familiar face.

REPLICATED GATHERING PLACES



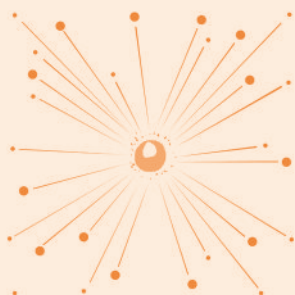
In Nairobi, salons are everywhere – on every block, in high-income areas and low, on stools set up on the street corner outside a shop. The ubiquity of hair salons is a powerful driver of engagement. George, a salonist in Nairobi often chats as he braids hair (which can take hours, depending on the complexity of the style), although he admits that it's usually light chit-chat rather than deep conversation.

Replicated gathering places such as hair salons provide a familiar set of behaviors or expectations, even if you engage in a different salon owned by a different person on the other side of town.

UNIQUE CHARACTERISTICS

- > Familiar within a culture, even if they exist in many communities.
- > Attract high traffic and have turnover throughout the day, perhaps attracting different demographics during different times of the day (as in a gaming center which attracts kids during the day and teens/young adults late at night).

MAGNET

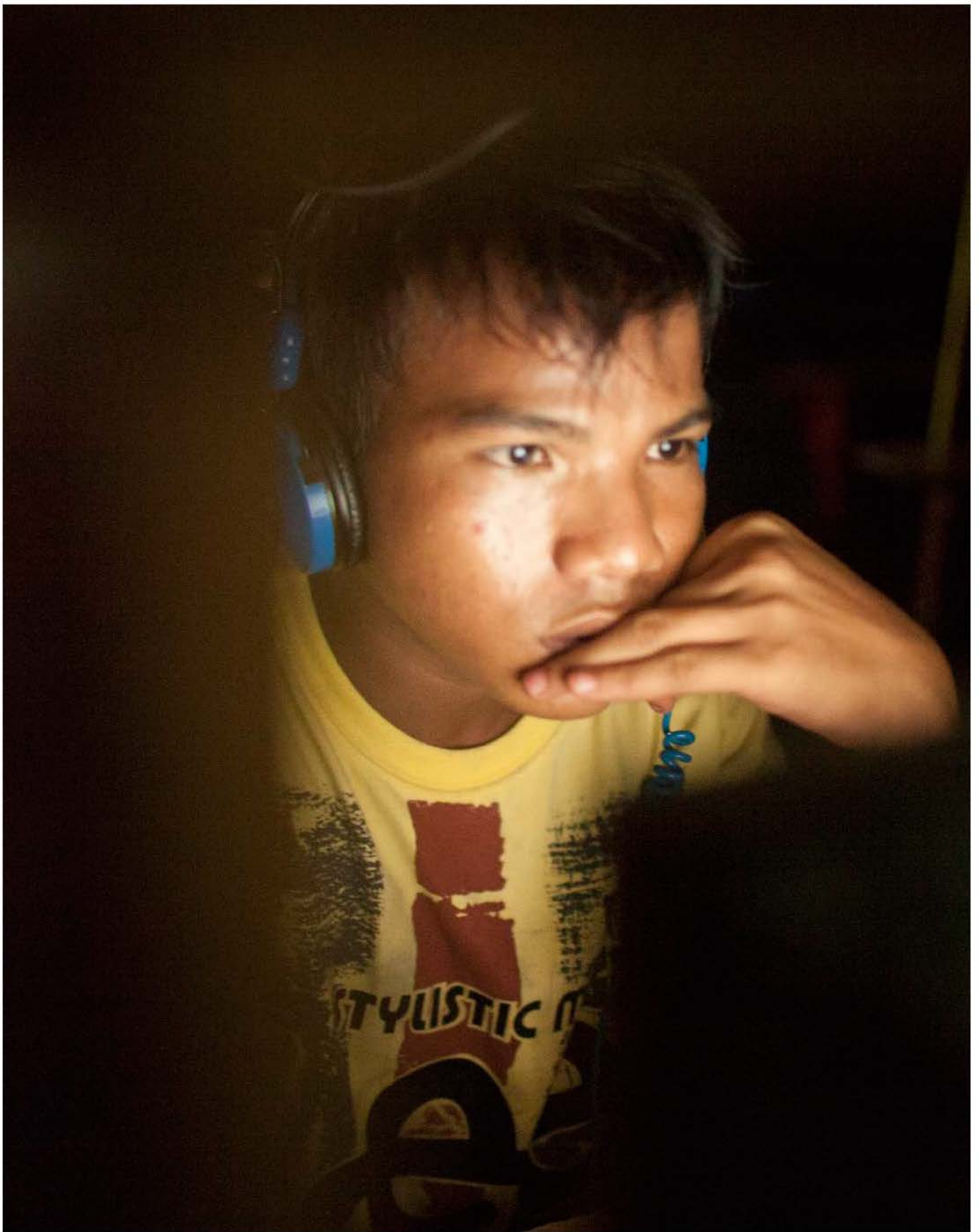


Quiapo church in Manila is a massive magnet for people who live near and far. Every Sunday, the church attracts thousands of people who come for mass, but even on a normal day, the church is bustling with traffic. In fact, a robust market has cropped up around the church, which sells religious paraphernalia (such as devotional candles and statues) as well as staples of daily life (such as vegetables and clothing).

The Quiapo church attracts individuals from near and far for a finite period of time before releasing them back to the communities from which they came.

UNIQUE CHARACTERISTICS

- > Massive influx of people on a relatively consistent or predictable basis.
- > A central gathering place that has many different uses .
- > Unique enough to bring together people from different parts of the city or community.
- > Attracts people from remote communities that would be otherwise difficult to access.



DESIRES

REACHING PEOPLE WHEN THEY ARE RECEPTIVE TO NEW IDEAS.



ENTERTAINMENT

"WHEN WE HAVE ANY EXTRA MONEY
WE GO TO SING KARAOKE AT NIGHT."

DANTE & EDUARDO

STREET SWEEPERS. MANILA



GAMING CENTERS

Marlon, a young man who sells vegetables in Manila's Quiapo market, frequently plays computer games at the nearby gaming center. Marlon is not alone in this common practice. "We have kids as young as 3 during the day, but at night it's all about the teenagers like me," says Ryan, the boy who works there. Some young people come to the center to play solo or group video games, while other come to check Facebook and do their homework.

LOCAL STREET GAMES



Moto taxi drivers pass the time between customers by playing a friendly game of checkers on the side of the road. Often these games are already built directly into park benches and many people bring bottle caps to use as game pieces: right side up for one color, upside down for the other.

SPORTS ACROSS GEOGRAPHIES



Different communities from different countries don't mix with each other once they arrive in Thailand. Their language is different, their history is different, but more importantly, their culture is different. These cultural differences include their interest in different kinds of sports. While the Burmese construction workers play kickball, the Cambodian camps are setting up their nets for a friendly game of Volleyball.

MAKEUP & SHOPPING



In a construction camp in Bangkok, where the workers live on-site, the women workers do three things religiously every evening: they buy produce at the market, head to the local flea market to shop for makeup and clothes, and return to camp for a group shower. With a large cloth wrapped around their bodies, women gather around the water source and bathe together as they talk about their day and share intimate secrets before getting dressed and cooking the food they purchased earlier that day.

DESIRES
ENTERTAINMENT

How might we access people through entertainment?



HEALTH-FOCUSED COMPUTER GAME

A new computer game that leverages the fact that people come to gaming centers largely to engage individually with the computer. The game could pair a player with another online player, or even a health professional. The Hopper could spread the word about the game by visiting gaming centers and teaching others how to use the game.

Desire: Entertainment

Connection Point: Replicated Gathering Places

Behavior Segment: Hopper



KICKBALL CAREGIVER

Introduce an Influencer or Caregiver into an existing entertainment ritual, such as a nightly kickball game. By building trust over time, this individual can become a support network that introduces health information or advice after developing close relationships

Desire: Entertainment

Connection Point: Magnet

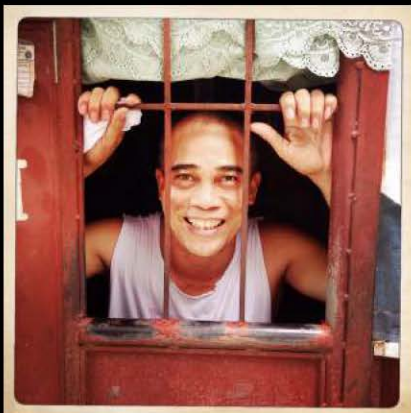
Behavior Segment: Caregiver or Influencer

**DESIGN
CONSIDERATIONS**

- Entertainment interventions should not require too much depth or seriousness.
- Design for socially acceptable activities because people will be seen doing this in public, and possibly in front of friends.
- Opportunity to introduce content that someone can engage with later when they are alone. Adapt high level concepts to the local culture.









DESIRES

REACHING PEOPLE WHEN THEY ARE RECEPTIVE TO NEW IDEAS.



WORK

"ONCE YOU HAVE A JOB, YOU'RE ALWAYS
TRYING TO FIND A BETTER JOB."

TING

MOTO TAXI DRIVER, BANGKOK

DESIRES

WORK

USING BROKERS



Undocumented Burmese and Laotian immigrants often use brokers to find work in Thailand. Brokers are usually word-of-mouth within a community, and operate both in the home country and in the destination countries for additional work placement. While brokers often operate under the table, their availability and visibility within immigrant communities (at home and abroad) represents an effective form of design.

REAL ESTATE & DOMESTIC WORK



Pen works as a domestic worker, but her jobs usually come through a property management agency that provides domestic work contacts to new residents. This agency has the phone numbers of various domestic workers, and when a new client comes in they provide Pen (or another worker) with the job, at no charge.

STREET VENDOR DELIVERY ORDERS



Kaew, a street vendor in Bangkok, received a cell phone as a gift from her daughter. Although she didn't want the phone initially, Kaew's business doubled when she began using her phone to receive lunchtime orders from her customers. When she receives a phone order, she makes the meal at her food cart, packages it up and then hails a taxi to deliver it.



BURMESE COMMUNITY PHONE TREE

When Bee moved from Myanmar to work at a clothing factory in Thailand, she didn't know anybody. However, as Bee fostered friendships with other Burmese factory workers, she gained access to a complex phone tree that the Burmese community has formed to support one another. Each time Bee changed jobs and locations over the years, she plugged into this phone tree: receiving a referral from a Burmese friend, making contact, and being informed of job openings or opportunities. This process helped Bee escape from bad factory conditions, bad bosses, and finally get a job as a nanny to a family that respects her and allows her the freedom to pursue her interests and better improve her education.

How might we reach people when they are seeking work?



JOB MATCHING SERVICE

A new service that leverages existing networks (e.g. a phone tree or a broker) in order to help match people with jobs that are curated to their skills and assets. This tool could be used to find more of the same opportunity, expand into new opportunity areas, or build new symbiotic relationships (e.g. matching a woman who washes laundry with a moto taxi driver to create a laundry delivery service). The conversation about new opportunities could tie together work and work safety – by informing workers about common work-related injuries as well as prevention techniques. The design applications could also adapt to fit the mindsets of different behavior segments (e.g. Survivor, Optimizer, or Hopper).

Desire: Work

Connection Point: Symbiotic Relationships

Behavior Segment: Survivor, Optimizer, Hopper

DESIGN CONSIDERATIONS

→ People can engage with these initiatives differently based on their behavioral segmentation.

Survivor

Might only be interested in a one-day job that fits the bill or choose to not try anything they haven't done before.

Hopper

Might be interested in something that has a promise for growth in the future and may be more likely to try new things.

Optimizer

Might respond to interventions that help them expand their client base.

→ Finding new jobs is a common activity that many informal workers do on a daily basis – so repeat use is likely.

→ Providing vehicles for workers to find different or better work allows them the freedom to escape unhealthy work environments without impacting their financial well-being.



*A Note On Mobile

THE WAYS WE SAW PEOPLE ENGAGING WITH THEIR PHONES WAS
LARGELY TIED TO A DESIRE FOR EITHER WORK OR ENTERTAINMENT,
DEPENDING ON A PERSON'S AGE AND MOTIVATIONS.

PHONES + WORK



"My husband has a phone. I never use it."

MYRNA, MANILA

"There's no time to play games [on my phone]. The phone is only for business."

CECELIA, NAIROBI

Many families share a phone and the person who has most use of it for business holds onto it.



"I pay every time I use the phone. Before using it, I think 'why?'"

THONG DI, BANGKOK

Obtaining a cell phone has become increasingly more affordable. However, because the cost of using the phone can still be high, many people are only willing to use it as long as it benefits their business.

"My phone is not so nice. I'm saving up to buy a better one."

BENJAMIN, DURBAN

"My girlfriend bought me this phone so I can be like other people."

THONG DI, BANGKOK

The phone is a status symbol. If any intervention includes the new design of a product, the aesthetic is important and can be a driver or a repellant when it comes to adoption.

PHONES + ENTERTAINMENT



"Many [Burmese immigrants] who don't have phones sneak and use their bosses' home phones, or use a payphone."

BEE, BANGKOK

Not everyone has access to a personal cell phone – however receiving a phone number means you use a home phone or pay phone to reach out to someone and connect.

"My phone has internet but I don't know how to use it. My kids use it."

ANN, NAIROBI

Gaming centers and cell phone use is higher among younger demographics.

"When I see something that is different from what it looks like in Laos, I take a picture of it."

SAI, BANGKOK

Photos can be used to commemorate different moments or experiences.



"When I didn't have a phone, I was so lonely. I didn't speak the same language as anyone that I worked with then."

MOE MOE EI, BANGKOK

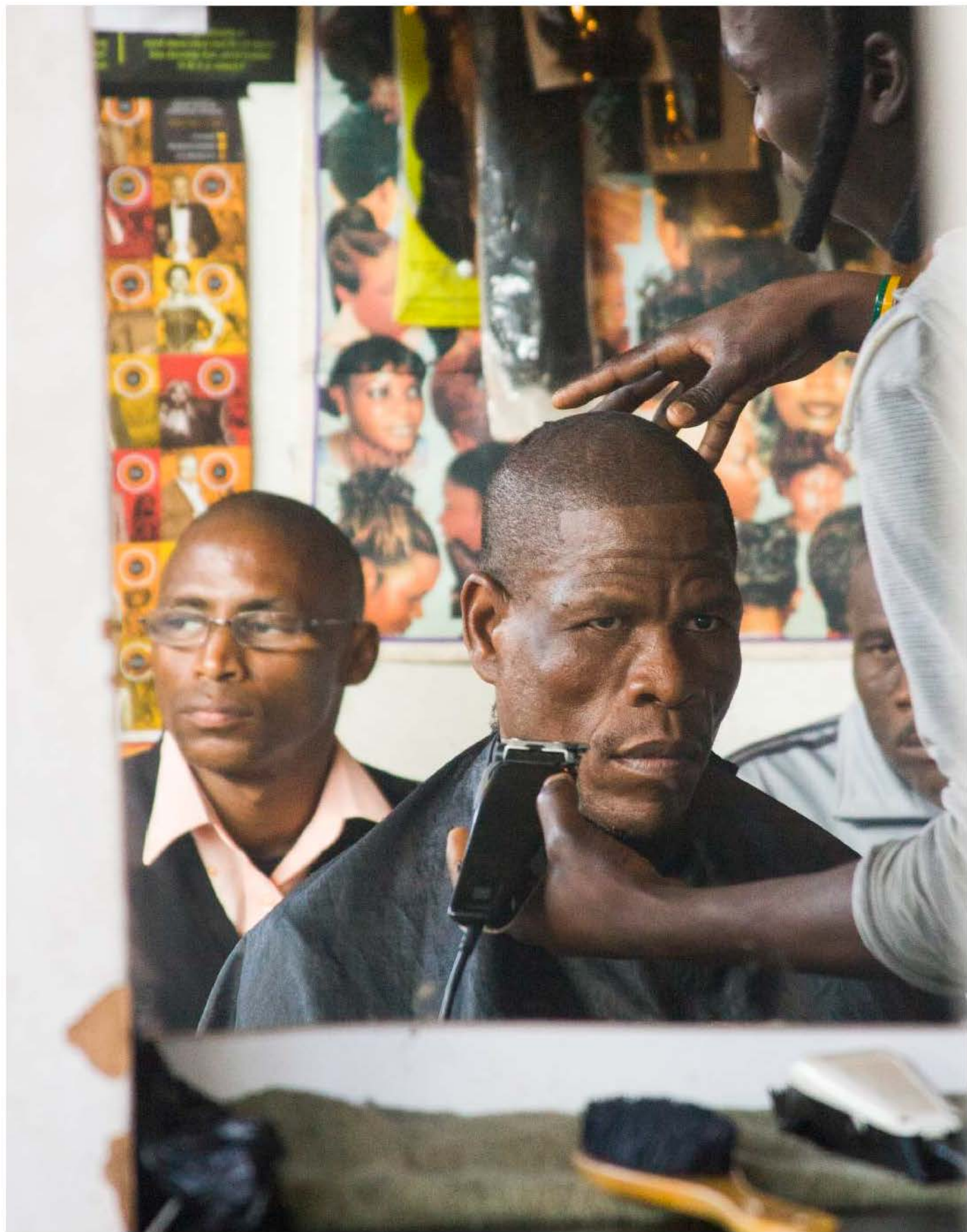
"We use Facebook and Line a lot. That's how a lot of us stay in touch."

CHO, BANGKOK

"I use my phone to talk on Skype and Viber. I often talk to people I don't know from around the world – just to chat about life and work."

BEE, BANGKOK

For those who are far from home, a phone can be a lifeline for connection and release.



DESIRES

REACHING PEOPLE WHEN THEY ARE RECEPTIVE TO NEW IDEAS.



FINANCIAL OPPORTUNITY

"WHEN WE NEED MONEY IT IS MUCH BETTER TO
PAWN OUR REFRIGERATOR TO THE NEIGHBOR
INSTEAD OF TAKING IT TO THE PAWN SHOP.
THIS WAY WE ARE ABLE TO BUY IT BACK
WHEN WE CAN AFFORD IT ONCE AGAIN."

WOMEN'S GROUP
MANILA



THREE-KEY COSCA

Lending groups can be stressful or seem risky if you aren't certain that you can trust the other members of the group. A lending group in Manila worked around this stigma by creating a system that doesn't allow any one person to run away with the money – a box that has three locks. One member keeps the box, while three separate members each keep a key. The Cosca is used for loans and savings, but members only have to contribute money when they have it. The group also has a 'social fund' that is used as an emergency fund for a member in need.

DESIRES
FINANCIAL OPPORTUNITY

LENDING GROUPS FOR KIDS



The community with the 3-Key Cosca also has created lending groups for children, which teaches financial planning behavior early in life. The children's Cosca is supervised by one adult, but the children largely take the reins on the financial decisions they make with their weekly allowances. They take out loans for things like school projects and Christmas presents.

LENDING GROUP



Ann, a shopkeeper in Nairobi, explained that people in her community are a part of multiple chamas (lending groups) – the more money you have, the more you diversify. Ann is in three chamas herself, each focused on saving for a different purpose: one for work, one through her church, and one to save up to buy dinnerware.

LOAN SHARK BUSINESS



The go-to business loan option in the Philippines are the loan sharks, known locally as "Bombays." These loan sharks charge a 20% interest and their non-payment consequences are harsh, but sometimes it is the only option. Despite their high interest rates, loan sharks are quite effective at servicing their customers: they are mobile and come to the places of business of the people they loan to; they collect money every day at the same time; they carry a ledger of what is owed, so the loan recipient doesn't need to worry about it; and they are quite visible within the community, so they are an obvious choice when someone finds themselves in need of a quick loan.

PAWNING GOODS TO NEIGHBORS



A group of women in Manila explained that if they really need money, they will pawn their electronics (like a refrigerator) to a neighbor. Unlike a pawn shop (which might only accept jewelry and not electronics), that neighbor is more likely to allow them to buy it back later. Still, it comes at a price. "Everyone charges interest," Mercy says. "Even your friends."

DESIRES
FINANCIAL OPPORTUNITY

How might we reach people when they desire financial opportunity?

CONNECTION POINTS & DESIRES



LOW-RISK LENDING GROUP

Enable financial opportunity among Survivors or Hoppers by designing an intervention that doesn't require liquid assets, such as a low-risk lending group that allows someone to invest their assets in a new business venture. This lending group can become a point of entry for later conversations about the importance of insurance or preventative health behavior at work.

Desire: Financial Opportunity

Connection Point: Magnet

Behavior Segment: Survivor, Hopper

HEALTH CHAMA

Support existing lending groups by creating design interventions that enable or encourage members to purchase insurance, such as a group discount, a type of insurance that is designed for group participation, or a person who visits the group and talks about financial planning for health.

Desire: Financial Stability

Connection Point: Magnet

Behavior Segment: Optimizer, Influencer

**DESIGN
CONSIDERATIONS**

→ Safety measures are important to the sustainability of the lending groups. Theft and lack of accountability can cause people to lose faith quickly.

Survivors may be the best candidates for asset-based lending groups.

Optimizers may be the best candidates for lending groups that include insurance, because they are interested in improving their situation and have enough 'buffer' to continually contribute financially.

→ Design interventions for financial opportunity can take the form of physical products designed to create safe lending systems.









DESIRES

REACHING PEOPLE WHEN THEY ARE RECEPTIVE TO NEW IDEAS.



GUIDANCE

"WHAT THE PASTOR SAYS, I TAKE TO HEART.
I CAME HERE STRAIGHT FROM MY NIGHT
SHIFT BECAUSE THIS IS MY FAMILY."

BIENVEN, SECURITY GUARD, DURBAN



MADLAMINI AS A GUIDE FOR HIV/AIDS

MaDlamini is a traditional healer and the leader of the traditional herb market at Warwick Junction, where she provides health advice as well as emotional support to her customers. MaDlamini is a firm believer in traditional medicine, but in certain situations she will act as a bridge to the hospital. "If I see the signs of HIV/AIDS I will act immediately and take this person to the hospital myself", she says. She recognizes that she can't personally help them, but that leading them to a hospital immediately can help save their life.

CONGOLESE CHURCH



In Durban, Congolese immigrants have created a strong community centered around the church. Each Sunday, people with a shared heritage and culture come together and garner advice from the minister. The church is conscious to individually welcome all new members, note down their contact information, and even ask for feedback on their services. These details help build a strongly rooted community, even among a group of people who are outside of their home culture.

FATHER RICARDO



The Quiapo church in Manila receives tens of thousands of visitors each weekend. In addition to religious support, the church provides access to a church-affiliated health clinic a few times each month. On the days that the clinic is open, people flock to find care. "Your sickness is connected to your spirit," says Father Ricardo. "When you feel guilty you make your sickness worse." The church never gives out "moneda" or cash, but they do provide aid for those with prescriptions they cannot afford. When people come to the church for help the church volunteers check to see if the prescription is accurate and then verify that the patient is, in fact, poor.

THE BARANGAY



The Barangay captains are the leaders of each neighborhood in Manila. They are the go-to politicians and have a connection to the neighborhood because they are elected from within the community. In the waterfront slum of Tondo, the Barangay captain pulls up a chair and sits behind a folding table on the main street every afternoon. This way he is always available to answer questions from anyone in the neighborhood and is visibly connected to the community.

PEER DIAGNOSIS & GUIDANCE



When Myrna had an asthma attack in the Quiapo market, she received advice from a local expert: another woman who suffers from asthma. The woman diagnosed Myrna's condition, and then used her own prescription to buy an inhaler for Myrna, who couldn't afford to go to the doctor. Myrna now passes along the diagnosis to others she sees who also presumably suffer from asthma. While she doesn't have a prescription, she shows people to buy an inhaler like hers, because it is the best one.

How might we reach people when they are seeking guidance?



HEALTH ADVICE RADIO SHOW

Create an intervention where people with health questions or advice can anonymously submit questions and tips. These submissions can then be read, sifted and answered by a health professional and broadcast publicly as a radio show or printed for wide distribution. To draw a large audience the show should be hosted by someone people admire, like a celebrity or adored public figure. This person answers common questions, debunks myths, and celebrates what people are doing right. This could be collected and delivered at replicated gathering places, such as salons.

Desire: Guidance

Connection Point: Replicated Gathering Places

Behavior segment: Caretaker

ENDORSED CARETAKER

Pair a local caretaker or nurse with trusted individuals in a neighborhood (such as a priest, barangay leader or godfather), and introduce the caretaker to the community through this strong endorsement.

Desire: Guidance

Connection Point: Magnet

Behavior segment: Caretaker, Influencer

DESIGN CONSIDERATIONS

- Build on the existing philosophies and natural behaviors of local leaders.
- There is a difference between immediate trust and trust built over time. Immediate trust often comes from those who share a culture, or have been endorsed by someone trusted. Even those with credentials might need to prove trust over time.
- There is not one right "go to" person all the time. Different pieces of advice call for different sources.



*A Note On Men

DESIRES, CONNECTION POINTS AND DESIGN CONSIDERATIONS FOR MEN



INSIGHT:

**FOR MEN ESPECIALLY,
TRUST REQUIRES MULTIPLE
INTERACTIONS OVER TIME.**

It's no surprise that men take longer to open up to one another and are hesitant to ask someone an intimate question. Building relationships over time and not leading with 'health' is an important consideration. While many men we spoke to said they would be willing to talk about health, they only wanted to do so with people they knew or trusted.

STORIES:

THE GODFATHERS OF PEDICAB DRIVERS

A group of pedicab drivers in a Manila slum admitted that the only person they seek advice from is the godfather of their children. Not only is this man respected in society, but he acts as a guide – providing advice about marriage and fatherhood, supplying job opportunities when he can, and sometimes encouraging a man to lay off drinking, smoking or other vices that are bad for health and finances.

MORNING INSPIRATION ON THE DOCK

A tight group of men in Manila meet every morning at sunrise for coffee. They have been doing it for many years and women know not to interrupt them. "Strength comes from struggle and making ends meet," said Benjamin. "We are proud survivors – that is what gives us the courage to keep going on. My friends help me believe in what could come next."



INSIGHT:

MEN ARE JUDGED FOR THEIR VICES, SO ASKING FOR HELP WITH HEALTH ISSUES THAT COULD BE CAUSED BY VICES IS UNCOMMON.

The perception around vices can be disabling for men in thinking about health and attributing their conditions to bad behavior. At the same time, these vices are part of the social fabric of their lives.



INSIGHT:

ENTERTAINMENT OFTEN BUILDS DEEP ENGAGEMENT AND UNEXPECTED BONDS FOR MEN.

Snooker, gambling, gaming, and sports (to name just a few) have the power to spark a conversation between men who might otherwise have nothing in common. Respect can quickly be built through activity that would be difficult to create through conversation alone.

STORIES:

"Sometimes when you have money you use it for a drink with your friends. It helps you relax."

CHARLES, NAIROBI

"Women are better with money because men might spend it on vices."

RACHEL, MANILA

"We are ashamed to ask for advice [from our godfathers] when we know we are sick because of our vices."

PHILIP, MANILA

"Everyday we gamble. Sometimes no food only gambling."

CARMELLO, MANILA

"If a man doesn't drink he might not be part of any social circle."

WAN CHAI, BANGKOK



STORIES:

SNOOKER CLUBS

Every Sunday, Pete, Gel, Steph, Ting and Poin Corn Chai spend the day at the snooker club in the Ratchathewi neighborhood of Bangkok. Although the men span in age from early 20s to late 50s and hold different jobs, they have built a camaraderie through the weekly ritual of chatting and playing snook. The men are also quite supportive of one another: some drink, some don't; some are married and others hope to marry soon. Even though only a handful of people can play snook at one time, the others watch, comment, and spend time in the club nonetheless. "We've been coming here for years, says Pete. "We can say anything here—no one judges."



INSIGHT:

TRUST IS OFTEN CRITICAL FOR MEN WHO WORK TOGETHER.

Dangerous and physically taxing group jobs can form tight bonds between men who work together because a colleague's behavior can be critical to a man's safety. Men who work together often continue their friendship by drinking or playing sports together after work.

STORIES:

FISHERMEN FIXING NETS

A group of Thai fishermen working on a boat often bond while fixing nets and talking. They are willing to talk about 'guy stuff' when they are on the boat and nobody can overhear their conversation. This closeness stems from the fact that they need to have each others' back on the boat, or it can become quite dangerous. Something as simple as going to the bathroom on the boat requires another man's help, because there is no toilet on board and there is danger of falling off.

"It's a brotherhood. It works better this way, being equals. We all get the job done together and finish earlier."

SAYUN, BANGKOK

"You get to trust a person by working side-by-side with them. Seeing how hard they work and knowing that they are feeding their families."

BENJAMIN, MANILA



INSIGHT:

MEN EARN THE MONEY. WOMEN BUDGET IT.

Financial planning for many men is not top of mind: they help provide money and their wives budget it for the family. However, men often make decision around large purchases and business investments.

STORIES:

BUDGETING

In a group discussion, five men playing snooker admitted that while they make money, they immediately hand it over to their wives for budgeting... while also hiding a small amount that they might use for vices. "Thai women are smart," they said. "They are good with money. Wherever we hide it, they find it!"

"School fees and food are what women pay for. Investing in the business is something a man and wife do together or just him on his own."

MAUREEN, NAIROBI



INSIGHT:

PROVIDING FOR THE FAMILY NOW TAKES PRECEDENCE OVER HEALTH RISKS IN THE FUTURE.

While both men and women engage in physically taxing jobs as part of the informal workforce, jobs such as construction work or pedicab driving are largely held by men. These men place importance on providing money in the moment, rather than on what health issues might arise further down the line.



INSIGHT:

NOT KNOWING MIGHT BE EASIER.

If you can't treat it, knowing that something is wrong with you serves no purpose. This was the perspective of many men we spoke to who chose not to seek guidance about their health because they felt disempowered to do anything about it once they knew.

STORIES:

PROVIDING FOR THE FAMILY

A group of male pedicab drivers proudly talk about how they place a high value on their family – it is the one thing they are most proud of in the world.

"You work hard everyday and do whatever you have to so your children can have a better life," says Abe.

"We tell them to stay in school, not to hang around with the wrong people, to make as much of their life as possible while we can still support them."

SAFETY AT WORK

"Even though there are women construction workers, men can make more money because you are paid by how much you can lift. They get 700 baht for heavy lifting."

NATE NADA, BANGKOK

"You have to take whatever job you can to feed your family. Even if you know it's going to be bad for your body – the consequences of not doing it are worse."

GEL, MANILA

STORIES:

NOT SEEKING GUIDANCE FOR WHAT YOU CAN'T CHANGE

Thong Di admits that he doesn't always seek health advice and guidance because it will create more things for him and his family to worry about. "If I know what's wrong with me, I need to do something about it," he says. "I like to keep my life simple. Sometimes I don't want to know."

"By nature of the work we do, we might know when it's become destructive [for our bodies]"

SAYUN, BANGKOK

"A man starts caring about his health in his 60s because their body needs help. We become weak."

ROBERTO, MANILA

"Even if I knew what was wrong with me, I couldn't do anything about it."

JAMES, NAIROBI

How might we create a *safe space* for men to acknowledge their health issues?

How might we build *trusting relationships* into health interventions?

How might we leverage *entertainment* as a foundation for health conversation with different groups of men?

How might we better connect *occupational safety* with family well-being?

How might we amplify *tangible* solutions or actions to take after the *diagnosis phase*?









Information

Knowing what services are available within a health system, how to utilize them, and how to connect to nontraditional sources of knowledge and care.



Resilience

Having the knowledge, tools and safety net to prepare for health in terms of insurance, financial savings, work support, and ancillary health costs.



Access

Having the perception that you are able to receive care, regardless of financial, legal, or cultural barriers.



Quality of Care

Experiencing real or perceived difficulties that are related to the way that the healthcare system runs.

NEEDS TO ADDRESS

Narrowing the focus for design.

The stories in this section illuminate the needs we observed across geographies. By understanding the questions that people have about their health, the perceptions (both real and constructed) that made a person feel powerless to seek care, and the resourceful ways that people took action to change their situation, we can begin to create a clearer picture of design interventions that can be built or scaled to meet these needs.

In our research, the presence or absence of four common factors had a notable impact on a person's resilience when faced with a health catastrophe. These needs expose different opportunities to focus designs on pressing health issues informal workers face.

→ Note: All of the stories in this section represent people's perceptions about health care and access. Respecting these perspectives and shifting them when necessary, is an important early step in behavior change.

CONTEXT MATTERS

While we initially approached the research with the assumption of comparing Asian contexts to African ones, a different way of viewing the locations emerged: countries that shared similar political, economic, and systemic landscapes produced more overlaps in the health vulnerabilities and perceptions than their geographic location alone. ♦

♦ Systemic realities impact health-seeking behavior. Knowing this helps us understand what elements to consider when designing for countries not included in this specific exploration.

More proactive health-seeking behavior:^o



More reactive health-seeking behavior:



^o Except for Undocumented Workers
This group displayed reactive health seeking behaviors





Koi, now a domestic worker, used to be a street vendor who grilled and sold chicken. When Koi began to lose weight rapidly she sensed something was wrong. She visited multiple government hospitals and doctors before receiving a diagnosis of lung cancer. The doctor said she acquired the disease from her occupation, which required her to continually breathe charcoal fumes.

Information Gap

Not fully understanding the severity of the dangers.

"I HAVE TO ADMIT I DIDN'T ALWAYS WEAR THE MASK. IT WAS HARD TO TALK WITH THE CUSTOMERS. I DIDN'T REALIZE I COULD GET A SICKNESS LIKE THIS."

Before receiving the diagnosis, Koi believed that wearing a protective mask over her mouth was a good idea because she saw other people doing it. However, she struggled to consistently wear the mask because it inhibited her ability to speak with customers. She did not realize the severity of the dangers. After recovering from the cancer, Koi has become something of an activist for preventative health: she talks to friends and other street vendors about the dangers of inhaling the fumes from grilled products, and tells her own story.

Resilience

A health catastrophe that impacts the entire family.

"WE SAT DOWN AS A FAMILY AND DECIDED I SHOULD TRY TO GET BETTER BECAUSE MY CHILDREN DIDN'T WANT TO GROW UP WITHOUT ME."

After Koi received her diagnosis, she and her family scrambled to figure out a solution. Her son who was in the 9th grade at the time decided to quit school and become an air conditioner repair technician to help with expenses. Koi felt terrible that her son had to give up his education in order to provide for the family while she was out of work. However, it was their only option to pay for the expensive treatment, which fell outside of the 30 baht plan health coverage.



Sai, an undocumented worker from Laos, has been suffering from worsening kidney stones for months. Although he visited a series of private doctors who suggested surgery, Sai is paralyzed by the fear of getting treatment because he believes he will be deported or arrested if he steps foot inside a public hospital. In addition to his fear of the hospital, Sai doesn't have anyone to cover his food stand during the recovery period, so he has decided not to treat the malady.

Information Gap

Not understanding the health care options available to undocumented immigrants.

"I'M DOING EVERYTHING I CAN RIGHT NOW. DRINKING BOTTLED WATER IS ABOUT IT."

When he learned that well water might be causing his illness, Sai began drinking bottled water in his house. Besides this information, Sai has little knowledge of how he can better care for himself or seek treatment as an undocumented immigrant, without endangering himself or his family.

Resilience

Fearing the recovery time more than the surgery itself.

"I KNOW I NEED SURGERY BUT IF I DON'T WORK MY FAMILY DOESN'T EAT. HOW CAN I POSSIBLY TAKE TIME OFF WORK?"

In all other aspects of his life, Sai is a planner: he plans weeks in advance when he visits the zoo, and has a plan for how to reconnect with his wife if he is deported or arrested. However, Sai has no plan in place for how he might pay for a surgery—let alone pay for the days of work he would miss while recovering. Because of his marginalized position in society, Sai doesn't believe there is anyone who can cover for him in a time of need.

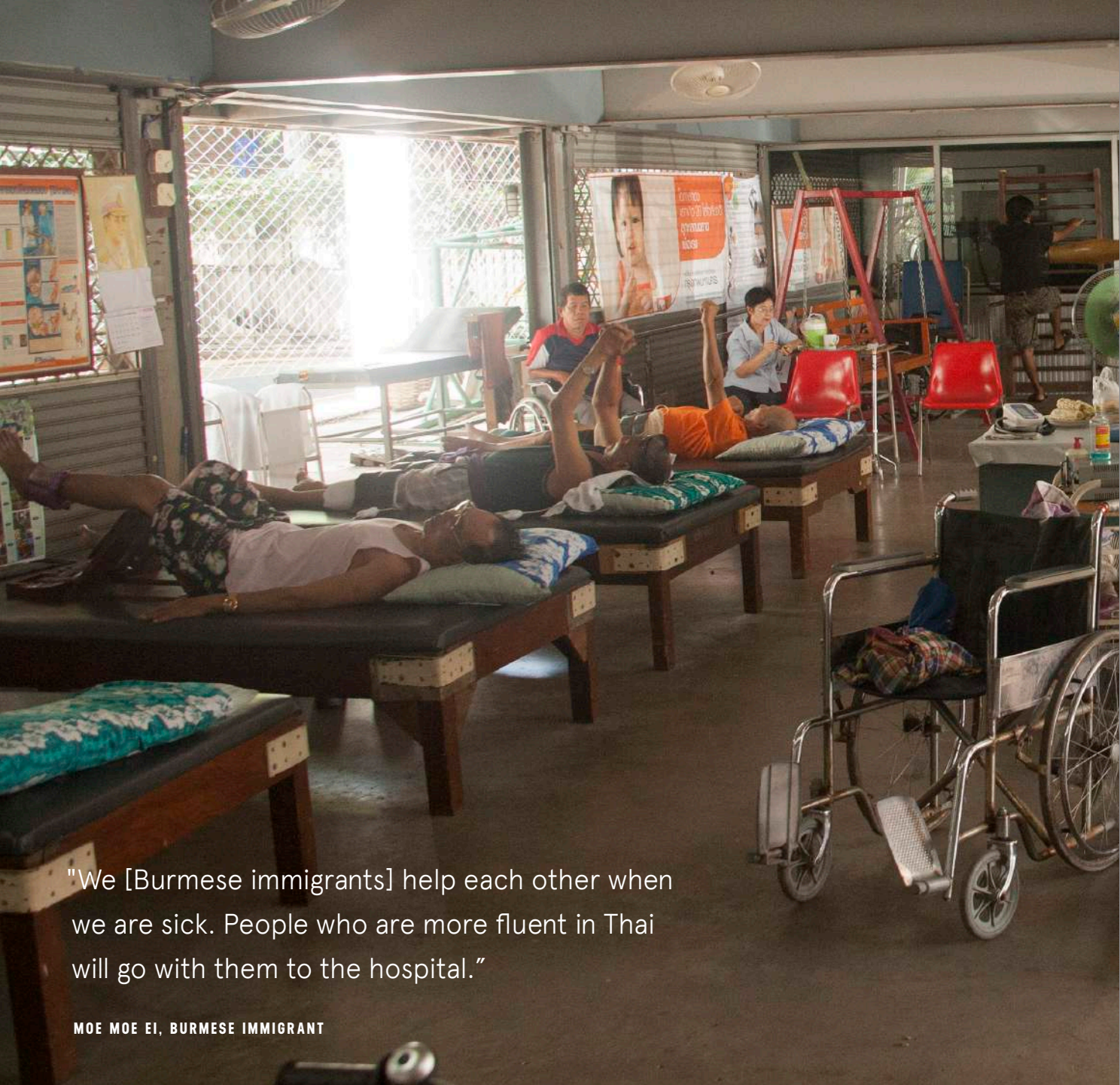
Access Gap

Being afraid of seeking treatment, for fear of arrest.

"IF I'M NOT IN A LOT OF PAIN I WON'T GO [TO THE HOSPITAL]. I'M AFRAID OF POLICEMEN. AND I KNOW THAT NURSES DON'T CARE FOR IMMIGRANTS."

Sai has experienced extortion, harassment, imprisonment and deportation due to his status as an undocumented worker. These experiences have made Sai deeply suspicious of public systems in Bangkok, particularly the hospitals, where identification is required to seek treatment. Despite the free healthcare system in Thailand, Sai's undocumented status makes it impossible for him to seek treatment unless it's a dire emergency.





"We [Burmese immigrants] help each other when we are sick. People who are more fluent in Thai will go with them to the hospital."

MOE MOE EI, BURMESE IMMIGRANT

"I took my friend to five different hospitals [for a large cut on the hand]. The first three rejected her because she doesn't have a card. The fourth was private and too expensive. The fifth biggest hospital was public and took her but had the longest queue. We started searching at midnight, ended up at the fifth hospital by 5am and finally she was treated by 1pm."

WUT, UNDOCUMENTED WORKER, BANGKOK

"Families have to take out loans to visit sick relatives. We need to buy food and pay for a place to stay [while we care for them]."

KAEW, THAI CITIZEN



"We have to accept that doctors won't treat people on the 30 baht policy the same [as those who pay more]. This is a fact of life."

SUNTHORN, THAI CITIZEN

"In an emergency, I only trust taxis to get to the hospital. Foundations or ambulances would just take too long."

WATSAMON, THAI CITIZEN



Maria injured her ankle when she cut it on a door working as a waste picker. The cut quickly became infected, but she continued to work while treating it through home-based remedies such as a salt water soak and a visit to the chemist. As the wound worsened, Maria visited a clinic and a public hospital. When the public hospital told Maria that she might have to have her foot amputated, she turned to traditional healing. After visiting a traditional healer, a local NGO helped Maria get an appointment with a private physician, who diagnosed high blood pressure and said that Maria’s foot wouldn’t need to be amputated. Maria is currently housebound recovering before returning to work – but she was able to keep her foot.

Information Gap

Understanding the cause of work-related ailments.

"THERE WAS A WOMAN WHO WANTED TO STEAL MY BUSINESS AS A WASTE PICKER. SO WHEN [MODERN MEDICINE] DIDN'T WORK, I THOUGHT MAYBE SHE HAD PUT A SPELL ON ME. THAT'S WHEN I TRIED TRADITIONAL HEALING."

Maria initially sought treatment from modern medicine, but when her wound didn’t heal, she attributed the health issue to a curse. A woman in her community had a good experience with a local traditional healer, so Maria decided to try it. When she ultimately got medical treatment and her leg wasn’t amputated, Maria attributed the change to traditional healing.

Resilience

Having both social and financial support in the event of an emergency.

"MY COWORKERS ARE LIKE MY FAMILY. AFRICA HAS BEEN COVERING MY RECYCLING AREA AND BRINGING ME MONEY SO I DON'T LOSE MY JOB WHILE I RECOVER."

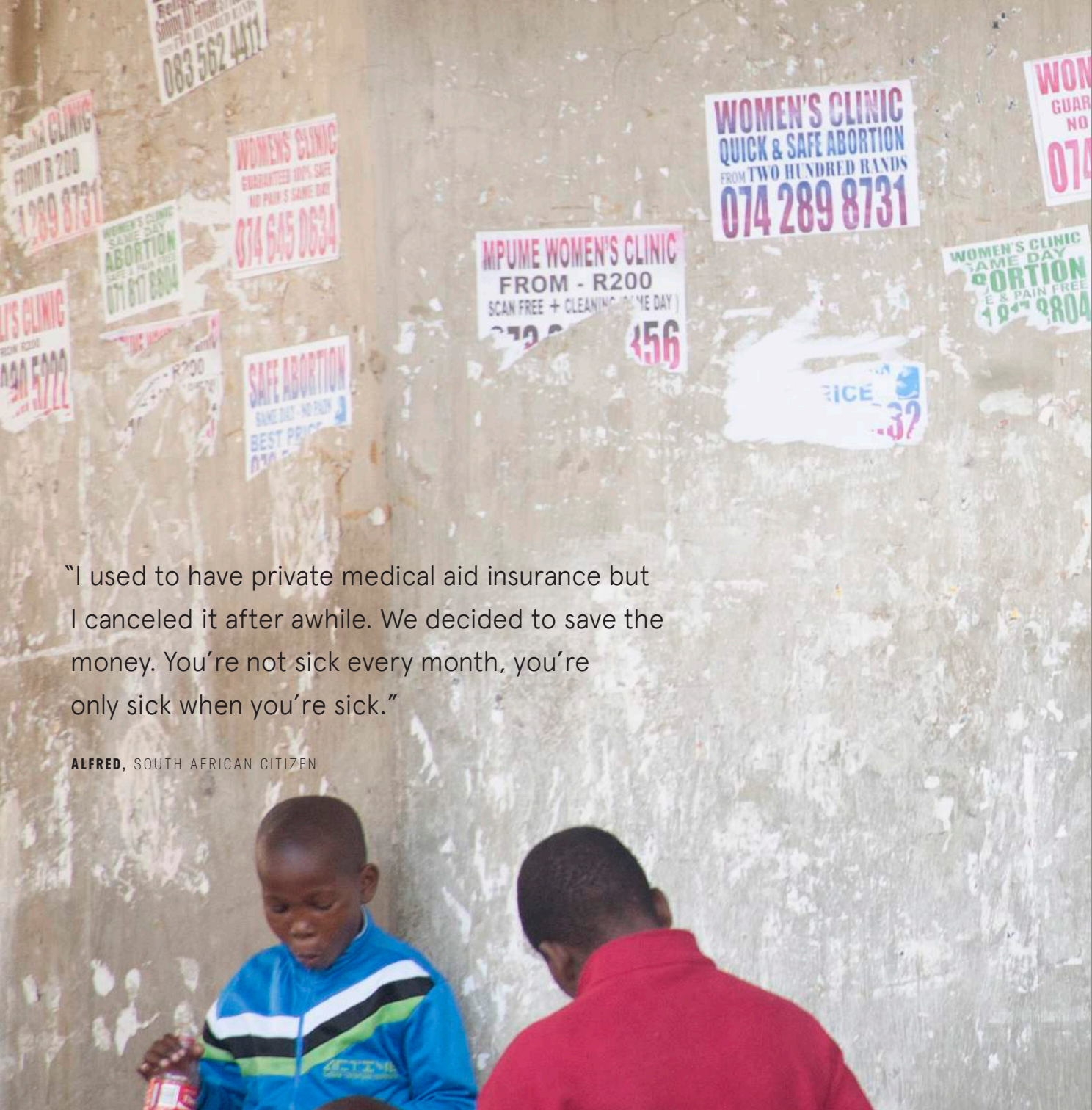
Maria has strong bonds with her coworkers Africa and Guidanni who are covering her recycling areas while she rests her foot for a few months. This support has saved Maria’s job, and allowed her to still collect her wages. Although she didn’t make a plan for this emergency situation, Maria’s support network stepped up to help her in a time of need.

Quality of Care Gap

Receiving proper treatment once you do seek care.

"THE DOCTORS AT THE HOSPITAL DIDN'T EVEN WANT TO CLEAN THE WOUND OR REPLACE THE BANDAGE ON MY FOOT. THEY JUST SAID IT WAS BEST TO AMPUTATE."

Although Maria was quite proactive with her injury (visiting a private clinic and a public hospital) she didn’t receive the quality of care necessary to discover that amputation was not required. Despite her practical efforts, her injury still resulted in being out of work for months



"I used to have private medical aid insurance but I canceled it after awhile. We decided to save the money. You're not sick every month, you're only sick when you're sick."

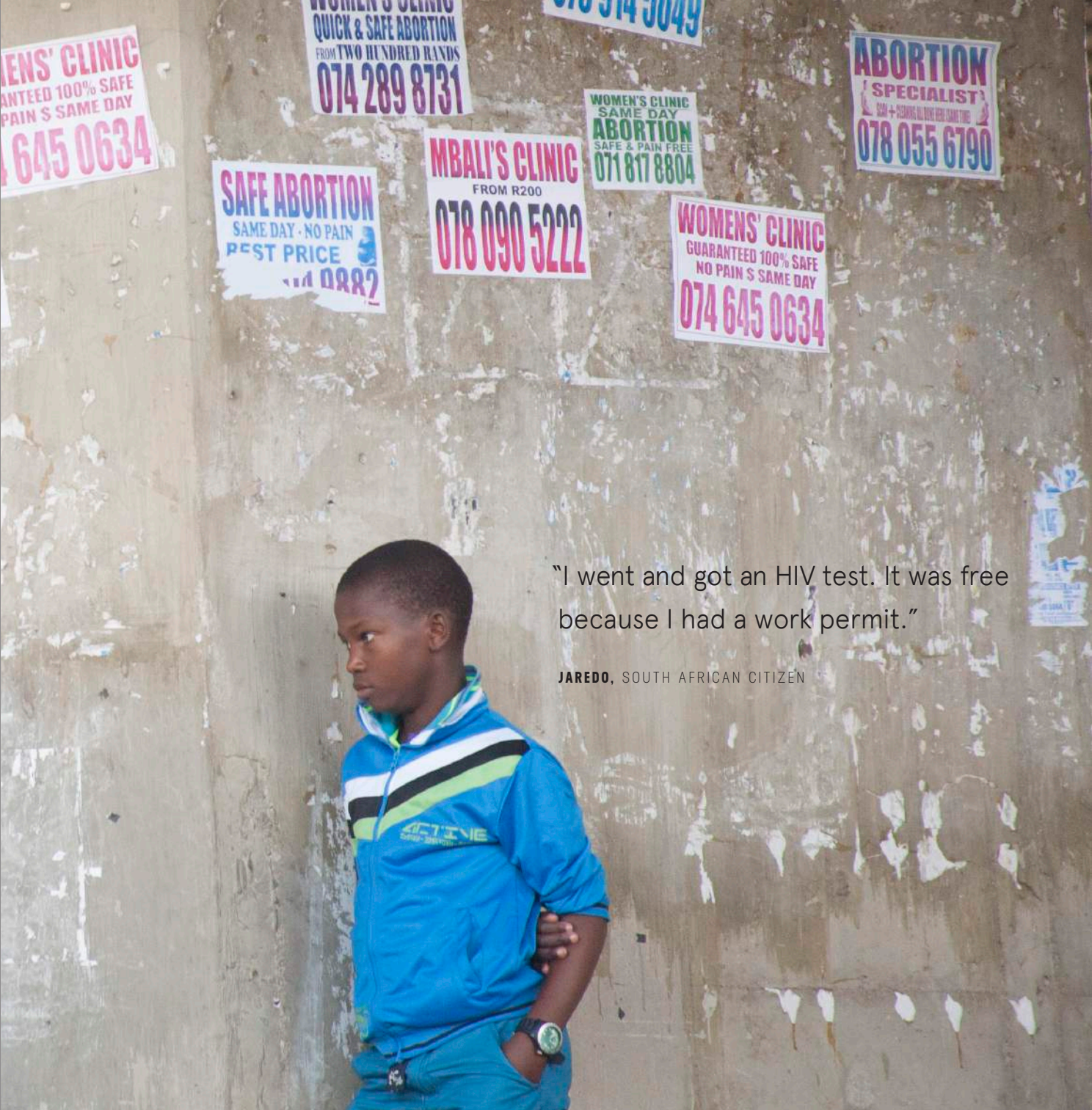
ALFRED, SOUTH AFRICAN CITIZEN

"When I went to the hospital for a toothache it was free! I was so surprised that it didn't cost me money."

MERIAM, SOUTH AFRICAN CITIZEN

"Most people know what's wrong with them because they've already had treatment for it. They just have trouble taking care of themselves, most of this is related to poverty. They can't take the medicine three times a day on an empty stomach."

AFROMED, AMBULANCE SERVICE



"I went and got an HIV test. It was free because I had a work permit."

JAREDO, SOUTH AFRICAN CITIZEN

"If I was South African, [my boss] would have registered me as his worker after 3 months. Instead I worked for free, and after seven years he fired me and threw me in jail."

WEMBO, CONGOLESE IMMIGRANT

"Last time I was really bad the doctor gave me a tablet and a shot. He just gave me the medicine but didn't elaborate on my condition. But I didn't ask - I don't know why."

MKHULVSI, SOUTH AFRICAN CITIZEN





Charles knew that he was feeling unwell when he began self-medicating for malaria. In fact, Charles had tuberculosis, but because his symptoms matched some of those of malaria, it took him months to discover that he was taking medication for the wrong illness. It wasn't until he was unable to work that Charles made it to the public hospital and sought treatment – where the blood work showed his true ailment. He then engaged in seven months of pills and medication to treat his TB because it had progressed so far.

Information Gap

Self-diagnosing for the wrong illness until the symptoms become disabling.

"I THOUGHT I HAD MALARIA SO I TOOK MEDICATION FROM THE SHOP FOR 6 MONTHS. WHEN I WAS SO WEAK I COULDN'T GET OUT OF BED AND GO TO WORK I WENT TO THE DOCTOR AND FOUND OUT IT WAS TB."

Charles' information gap came by way of self-diagnosis. Because he had exposure to the symptoms of malaria, he immediately assumed that his symptoms were attributed to that – rather than seeking proper diagnosis for TB. Ultimately, this caused Charles to spend money on the wrong medication while his symptoms worsened to the point that he was gravely ill.

Information Gap

Fearing corruption at the most basic level – the Chemist.

"I WENT TO THE SHOP [FOR MEDICATION] BECAUSE THEY LIST THE PRICES. THE CHEMIST CAN CHARGE WHATEVER HE WANTS."

When Charles did decide to seek medication, he purchased antimalarials from a local shop rather than a chemist. He knew that in a shop, all of the drugs have listed prices, whereas the chemists in Nairobi can shift their drug prices depending on how you look. Because of his strict resource constraints, Charles needed to get his drugs from a place that had the prices listed.

Resilience

Having nobody to cover his work in the event of his illness, and no financial plan for how to pay.

"IF I MISSED A DAY OF WORK. SOMEONE AT THE CARWASH WOULD TAKE MY CUSTOMERS."

As a car washer, Charles' income is contingent on showing up at his stand every day. Although the same men work at the car wash, Charles has no one to cover him if he wanted to go to the doctor, and fears that his customers would be taken from him. Because of Charles' survivor mentality, he had no money saved.



"We call going to the doctor the 'last minute'. If you see someone going from our community you have to respect them because it means they are about to die."

SILAS, THERESA, SIMON, KENYAN CITIZENS

"I had heard about [the NHIF card] but didn't take it seriously. I thought it was only for white collar jobs. So many of us don't know."

MAUREEN, KENYAN CITIZEN

"We are thinking about getting a kid. But not saving for it - never thought about saving for them. Here people have kids. You don't save or plan for it."

MERCY AND MONICA, KENYAN CITIZENS



"I teach people how to identify counterfeit drugs by showing customers how to scratch the packaging."

SAMUEL, CHEMIST

"My insurance is God. I'm covered better this way. Putting energy into the health insurance means I'll be bringing these problems onto myself."

ANN, KENYAN CITIZEN

"The only time you get service is if you are dying. Other than that no one will pay attention to you."

JOSPAT, STELLA, KENYAN CITIZENS



When Benita became ill with an ulcer, she and her husband Roger waited to seek treatment because they were not properly informed about their options and assumed health care was financially inaccessible. By the time the illness progressed to a fatal point, their lack of information and preparedness made seeking treatment seem impossible.

Information Gap

Not knowing what services are available.

"A WOMAN BROUGHT THE ORANGE CARD HERE FOR US YESTERDAY."

As Benita's illness progressed, the family did not seek out or receive additional information about their options – rather, they waited and assumed that they would be unable to pay. In fact, Manila has a sponsored health program for indigents, but Robert and Benita only realized this when someone from their community arranged the paperwork and brought them the card. At this point, Benita was beyond treatment.

Resilience

Feeling overwhelmed by even the smallest cost.

"EVEN IF THE CARE WAS FREE AT THE HOSPITAL HOW WILL WE PAY TO GET THERE? HOW WILL WE AFFORD THE MEDICINES?"

Because Robert was required to retire at the age of 60 and Benita was unable to work due to her condition, the family's sense of financial instability was amplified by Benita's illness. Beyond the cost of treatment itself, even smaller costs – such as getting to the hospital or paying for medicine – were disabling.

Access Gap

Receiving help only at the last possible moment.

"SHE TOLD ME SHE WAS FEELING ILL AND SO WE JUST KEPT WAITING FOR HER TO GET BETTER"

Robert and Benita's neighbors did fundraising in order to gather enough money to help transport Benita to the hospital. However, this aid came too late – when Benita had been bed-bound and unable to eat for two weeks, on the brink of death.



"I got the health card from a politician. I have to pay the premium but I don't know where to pay it."

DESTINY, FILIPINO CITIZEN

"When I saw the man having an asthma attack I told him to go get the same inhaler I have. I also suffer from the condition and I know it's the best one. Later, he came back and thanked me."

MYRNA, FILIPINO CITIZEN

"People won't give money until a person is really really sick. It's an issue of trust. When it comes to money it's really hard to trust people."

MEN'S PEDICAB GROUP, FILIPINO CITIZENS



"Going to the health center is completely pointless. You can't get any medicines there."

CARMELLO, ROGER, GRACE, FILIPINO CITIZENS

"The neighbors sent a spiritual healer to us so I took the herbs. Even if I don't believe in it, it's the only real choice I have."

NANDINI, FILIPINO CITIZEN

"Even if a child is sick for two weeks, food comes first before the hospital."

JOY, BETH, CARMEN AND EDITA, FILIPINO CITIZENS

What if Koi had received a health briefing about the dangers of charcoal fumes (and how to protect herself) when she first rented her chicken cart?

What if Sai had access to an anonymous mobile health clinic that was a safe zone for undocumented workers?

What if Maria had been informed about the dangers of tetanus and was able to communicate that to her doctors?

What if Charles had received a meal with his doctor check-up to remove the pressure of making money that day?

What if Roger and Benita had known about the orange card because a caregiver in their community walked them through the process when Roger first retired?

INTERVENTION OPPORTUNITIES

RESILIENCE

FINANCIAL PLANNING

- > Financial planning in order to buy insurance or afford hospital co-pays

ANCILLARY SUPPORT & COSTS

- > Transportation: Getting to the hospital
- > Food: Having enough food to take medicine
- > Work Support: Ensuring that you won't lose your job or customers if you have to visit the doctor
- > Family Support: Finding food and lodging for your family if you fall ill and they come to care for you

INFORMATION

UNDERSTANDING YOUR OPTIONS

- > Knowing what your options are either as citizen or an undocumented immigrant (this includes insurance, payment, and legal options)

UNDERSTANDING ILLNESS

- > Knowing the proper symptoms for diseases
- > Understanding the benefits of caring for your health and/or purchasing insurance (where relevant)
- > Interventions to help prevent continual self-diagnosis

AVOIDING CORRUPTION

- > Methods and tools to better identify what care providers or medications are officially certified and effective
- > How to identify counterfeit drugs

HELPING TO REMOVE LANGUAGE BARRIERS (IF NECESSARY)

- > The ability to speak the local language and communicate symptoms and health needs. (This includes language barriers, differing dialects and literacy)

→ Resilience and Information interventions initiate change from a behavioral, rather than systemic approach. For this reason, when designing to empower the informal worker, they present the most immediate and compelling opportunities for impact.

While Quality of Care and Access are important needs to address, they require more systems-level design (changes to the health system, politics, etc.) that is beyond the scope of this research.

ACCESS

PERCEPTIONS OF ACCESS (FOR CITIZENS)

- > For citizens, legal access to a system is not an issue. However, quality of care perceptions, a lack of information, or financial limitations can create the perception of a lack of access

SAFE ACCESS (FOR UNDOCUMENTED IMMIGRANTS)

- > Interventions that allow undocumented immigrants to receive care anonymously or without legal risks or fear of arrest/deportation

QUALITY OF CARE

NEGATIVE PERCEPTIONS

- > Shift inaccurate or negative perceptions to encourage individuals to seek care sooner

TREATMENT, SUPPLIES & KNOWLEDGE

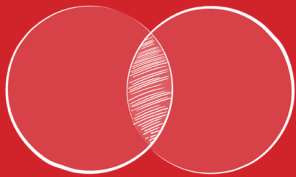
- > Design interventions to improve quality of care, such as wait times, drug supply, doctor training, etc.



BEHAVIORS

Engaging People in Powerful Ways

Helps us answer the question: Who might we empower and target for design?



CONNECTION POINTS & DESIRES

Highlighting Vehicles for Design (+ Focus On Men)

Helps us answer the question: How might we seed and spread the idea in a culturally appropriate way?



NEEDS TO ADDRESS

Narrowing The Focus for Design

Helps us answer the question: What intervention is most relevant and pressing?

ONWARD

Imagining The Future

The previous three sections provide us with tools to understand the informal worker behavior segments, their connection points and desires, and the most pressing health needs they face. As we look forward to design interventions focusing on the informal workforce and health, we can use these different lenses to sift and stress-test our designs.

In addition, we can gain inspiration from examples of interventions that exist in the world, which have evolved to fit needs. This final section includes the stories of health interventions we observed in the field, as well as analogous examples that use some of the design principles in unexpected ways.



GRACE'S CHAMA, NAIROBI

Lending Group + Health Insurance

While the initial motivation for joining a chama was financial stability, Grace and her fellow chama members had what she describes as a 'snake bite moment' when they were forced to see the importance of planning for health catastrophes. A woman in the chama fell ill, was hospitalized, and ultimately died – leaving the chama members with the responsibility of paying her hospital bills and the costs of transporting the body back to the woman's home town. In reaction to this situation, the chama changed its rules to require an insurance card of all its members. Grace took this responsibility a step further by buying an insurance card for her brother when he was unemployed, knowing that his hospital bill would be her financial responsibility. Once he got a job, her brother started taking on the insurance fee himself.

Desire: Financial Opportunity

Connection Point: Magnet

Behavior Segment: Optimizer

Need: Resilience



SAYUN'S WORKER GROUP, BANGKOK

Worker Union + Health Insurance

Although not all worker groups operate the same way, Sayun's worker union group decided to purchase private health insurance cards because they don't trust the care that they will receive under the 30 baht plan. Whenever he pays out the wages for a given job, Sayun sets aside a small amount of money that is then put towards private health insurance for all 30 men in his union. In addition, if a man gets injured on the job, Sayun will split the wages for one extra worker (for example, a job for 20 men would be split 21 ways) so that the worker can receive money while he is recuperating. Sayun also owns a truck that he uses to take members of the community to the hospital, in the event of an emergency.

Desire: Work

Behavior Segment: Influencer

Need: Resilience



AFROMED, DURBAN

Caretaking Within A Community

Afromed is a grassroots self-operating business, initially designed to provide medical access to Durban townships that ambulances considered too dangerous to serve. Afromed has filled a need by building an emergency care unit that specifically services those communities. Now, when medical dispatchers receive emergency calls from some of these dangerous or marginalized communities, they forward the calls to Afromed. In addition, Afromed has begun hosting health seminars about how to respond to common emergency situations (such as a cut or a woman going into labor) so that citizens on the ground are equipped to help until Afromed arrives. These seminars are marketed at existing community events, such as political rallies, so they reach someone in a receptive mindset. Additionally, the Afromed employees return to a community multiple times, in order to build relationships and trust.

Desire: Guidance

Connection Point: Mobile Unit

Behavior Segment: Caregiver

Need: Access



FACTORY GROUP LEADER, BANGKOK

Putting Insurance Into Perspective

A group of foreign factory workers in Bangkok bought health insurance coverage their first year in Thailand, after an organization promoted its benefits. At the end of the year, the workers demanded their money back because "nothing had happened in that year." The leader of the group explained the importance of the insurance by putting it into perspective for them: he compared how much they spent every year on police bribes compared to how much they were spending on health coverage. This helped everyone shift their perspective towards the cost, and all the workers purchased insurance for the following year.

Behavior Segment: Influencer

Need: Information



KLONG TOEY HEALTH CENTER, BANGKOK

Community Health Center

In the Klong Toey slum in Bangkok, a health center for rehabilitation and elderly care sits in the center of the neighborhood, right next to the loudspeaker where all community announcements are made. The health center, which is funded by the Red Cross, was begun by a single doctor who went door-to-door assessing the health needs of the community. When he decided that the elderly were a particularly vulnerable population (due to their need for rehabilitative care and their difficulty getting to the hospital due to limited mobility), he decided to focus on building a rehabilitative clinic. First, he went through the local leaders to get support, then he began by finding individual patients to treat and establishing himself visibly in the community. Now, patients come on their own because they have heard about the clinic from their peers. Additionally, the clinic hosts health info sessions that enable people to identify their ailments earlier and seek treatment.

Desire: Guidance

Connection Point: Magnet

Behavior Segment: Caregiver

Need: Access



FAR INTERVENTION FOR UNDOCUMENTED IMMIGRANTS

Supporting Undocumented Workers

Foundation for [AIDS Rights \(FAR\)](#), is a Thai NGO with a focus on defending the rights of undocumented workers who have AIDS. As part of their mission, FAR sends volunteers into construction camps and factories to inform migrant workers about their legal rights and host health seminars. These volunteers are selected based on shared heritage (for example, a Burmese volunteer will go into a Burmese migrant labor camp) and they build trust over time by sharing a language and culture with the worker communities. After making contact and providing information, the volunteers also give out their phone numbers. Although it is rare for someone to ask a question at a public health seminar, it is quite common for the volunteers to receive follow up calls and questions from curious individuals (during a private or discrete moment).

Desire: Guidance

Connection Point: Mobile Unit

Behavior Segment: Caretaker

Need: Information & Access

IDE BOLLYWOOD FILM



Using Entertainment for Behavior Change

In order to spread the word about treadle pumps and drip irrigation, International Development Exercises (IDE) created a Bollywood movie about a poor farmer whose family prospers after investing in a pump. IDE screened the film by using a mobile media unit that traveled to different villages all over rural Bangladesh. Well over two and a half million treadle pumps have been purchased by poor farmers and used to increase their net annual income by more than \$250 million a year.

<http://bit.ly/1wo1Qtn>

UNILEVER LIFEBOUY SOAP



Creating a Memorable Experience to Spread a Message

This campaign (by Khushiyan Ki Doli) focused on teaching children handwashing and hygiene through fun and interactivity. Using a black light box, the children took a look at the germs on their hands after washing them with water only. Then they washed their hands using Lifebuoy soap and looked at the difference under the light. Part of the strategy was to reach children through school, with the hope that a child will go home and influence the behaviour of his or her whole family. The campaign also targeted teachers with the mission of handwashing and devised different goals teachers and students could commit to around handwashing hygiene.

<http://slidesha.re/1mbi9ZV>

LIVING GOODS



Pairing Cosmetic Products with Health-Related Products

Through an "Avon Lady" business model, the microfranchise Living Goods sells cosmetics, household goods, and life-saving health products door to door in rural Africa. Women who join Living Goods essentially become their village health professional after completing a two-week training course in basic health care. This includes preventive measures, and also how to diagnose and cure the most common diseases: malaria, childhood pneumonia, and diarrhea. The secret to the Living Goods model is selling things like body lotion or laundry detergent because these products keep their business sustainable and act as 'gateway' products for customers who might become interested in the health products like de-worming pills.

www.livinggoods.org · <http://nyti.ms/XcEFWn>

Grameen Foundation Community Knowledge Worker



Knowledge Delivery Via Influencers and Technology

The Grameen Community Knowledge Worker (CKW) initiative was launched in Uganda in 2009. Today it serves more than 176,000 farmers in remote developing-world communities through a network of more than 1,000 peer advisors. The initiative combines mobile technology and a network of local advisors drawn from the communities they serve to help smallholder farmers get accurate, timely information to improve their businesses and livelihoods. These CKW's—farmers themselves—are respected in their communities and chosen by their peers. Using smartphone applications, they give their fellow farmers information about weather and marketing prices and advice about caring for their crops and animals, eliminating pests and treating diseases. The CKWs continue to encourage their peers through the ongoing use of the applications.

<http://bit.ly/1euyL4M>



GRASSROOTS SOCCER

Reaching Youth Through Role Models and a Love of The Game

Grassroot Soccer uses the power of soccer to educate, inspire, and mobilize communities to stop the spread of HIV. The organization empowers local community role models (professional soccer players, youth sport coaches, teachers, peer educators, etc.) with the tools to educate youth in their communities about HIV and AIDS.

www.grassrootsoccer.org



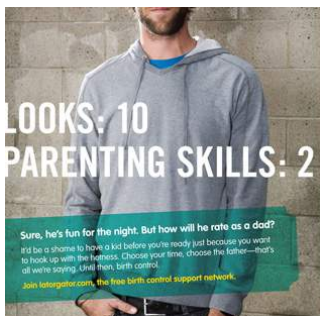
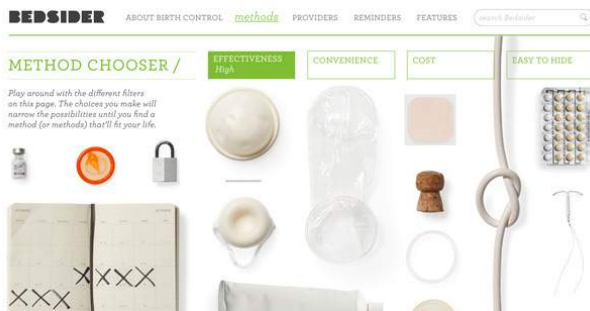
TOSTAN

Creating Space for Discussion and Deep Engagement

Using a coordinated outreach approach called organized diffusion, Tostan helps to maximize the spread of knowledge through Community Empowerment Program (CEP) participants. Each participant in a Tostan class “adopts” a friend, neighbor, or family member and shares with them new knowledge learned during the class. Awareness-raising activities are held to inform the entire community about program themes, such as protecting human rights or improving parental practices. Inter-village meetings are also organized to provide an opportunity for representatives from many neighboring communities to share their experiences and discuss solutions to common problems.

Class sessions and content are broadcasted through regular community and regional radio programs as well, allowing important information to reach broad audiences. These broadcasts bring concepts such as human rights, health and hygiene, and community empowerment to the airwaves in Senegal and Mali, generating conversations on these issues across the countries.

<http://bit.ly/1u2vpig>



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BOGOTA TRAFFIC MIMES



Creating Behavior Change Through Play

Antanas Mockus, the former mayor of Bogota, Colombia hired 400 mimes to tame the city's unruly traffic. The mimes ridiculed bad behavior and handed out thumbs-up/thumbs-down cards to help people shame bad drivers. In addition, he had the city paint a star on the pavement where every pedestrian had been killed in a car accident. Traffic fatalities dropped by more than half.

<http://bit.ly/Xwrsbx>

PBR CAMPAIGN



Loyalty Through Tastemakers And Events

In 2000, PBR started reshaping its image. Instead of trying to sell more beer by targeting a new audience the company embraced their image as a "hipster brand" and began to better connect with the people loyal to their product. They did not launch an overt ad campaign but instead placed their product at events and activities like kickball tournaments, bike courier races, art openings and dodgeball matches that were frequented by their target audience. The result was a 200% spike in sales between 2004-2013.

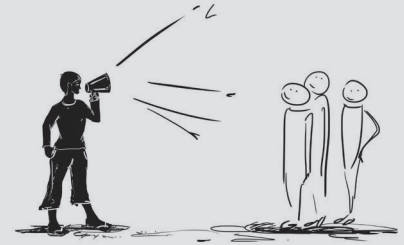
<http://huff.to/1jxsDeb>

Remembering the stories, faces, dreams, and challenges of the individuals who make up the informal workforce is the first step in creating more human-centered designs – designs that meet informal workers where they are, empower those who wish to play a role and use culturally relevant interventions. Let's leverage the energy, desires and proactivity that already exists among these individuals, who innovate as a part of their daily existence.





Executive Summary



BEHAVIORS

Engaging People in Powerful Ways.

Who might we empower and target for design?

THE OPTIMIZER

EARLY ADOPTER

Optimizers have changed their circumstance and had good results. They lead by example, demonstrating real-world success in the realm of work, finance, or even health.

Qualities

- > Have changed their circumstance (often transitioning from the formal to the informal sector) and had good results
- > Utilize tools and information channels to proactively make their lives, work, or health better
- > Lead by example by validating different behaviors within their community through their desire to improve their own situation

Leverage

- > Their proactivity and willingness to try new things – potentially by targeting Optimizers for the ‘beta run’ of new services and design
- > Their success stories, to create more visibility and pride among informal workers who choose this kind of work and make healthy choices
- > To demonstrate new behaviors through action, rather than active leadership

Find them

- > Excelling or inspiring people in one particular area (work, finance, health, etc.)
- > Part of groups (such as lending groups, worker unions, etc.) but likely not leading them
- > Serving as an example to the community through their actions

THE INFLUENCER

NATURAL LEADER

Influencers want to effect change in their communities and often go out of their way to provide guidance – whether in a recognized position or through grassroots influence.

Qualities

- > Want to effect change in their communities
- > Seek out leadership positions in both large and small ways
- > Have the space (or are able to make space) in their lives for leadership
- > Have shared experience with those they are leading (e.g. they are from the same neighborhood, or they have the same health condition)

Leverage

- > Their ability to galvanize a group (through a recognized leadership role within the community)
- > The influence they have on individual (through one-on-one guidance or conversation)

Find them

- > Through existing groups (unions, chammas, churches)
- > By identifying the trusted voices within a community
- > Through their desire to pass on knowledge about health conditions they have experienced



THE CAREGIVER

NURTURING INSTINCTS

Caregivers go out of their way to help others, exhibit empathy for those around them, and are known within their communities for warmth and wisdom.

Qualities

- > Go out of their way to help others outside of their families
- > Have extreme empathy and emotional connections
- > Noticed in the community for warmth and wisdom
- > People feel comfortable sharing and asking them for advice

Leverage

- > Their bright spirit to uplift others
- > Their ability to provide advice or health training
- > Their mindset to be an eye on the street that acts as a bridge to the formal system

Find them

- > Doing grassroots volunteer work in the community
- > In community centers



THE HOPPER

ENTHUSIASTIC NETWORKER

Hoppers see their current work or life situation as a jumping off point to the next step, so they often have many jobs, know people in different circles, and can act as natural pollinators of new ideas.

Qualities

- > Have an exploratory mindset
- > Can be looking for the next move or working towards a larger goal
- > Tend to be young and idealistic which means they have fewer responsibilities besides themselves
- > See their current job as temporary or a stepping stone
- > Might have more than one job and diverse connections outside of work

Leverage

- > Their ability to pollinate new ideas among diverse groups
- > Their willingness to 'beta test' new programs or initiatives as long as they receive compensation or valuable work experience

Find them

- > Looking for work or new opportunities
- > Doing odd jobs
- > Learning from others
- > Seeking direction or education



THE SURVIVOR

LONELY WARRIOR

Survivors live day to day with limited bandwidth to think about longer-term concerns. They can often feel alone or marginalized in society, but have a resilient spirit—doing what they can to provide for themselves and their families. In many resource-constrained communities, the survivor can represent a vast majority of people.

Qualities

- > Providing for their families is the primary focus
- > Mindset is day-to-day with little bandwidth beyond that
- > Can feel alone or marginalized
- > Have a survivalist spirit to keep going, but not necessarily to change

Leverage

- > Their resiliency, creativity and resourcefulness by promoting and celebrating it
- > Their devotion to family to encourage health practices

Find them

- > Engaging in peer-to-peer storytelling ◇

◇ This group can be suspicious of outsiders because they've been wronged. For this reason, it is most powerful to connect with them via peers or influencers within the community

CONNECTION POINTS & DESIRES

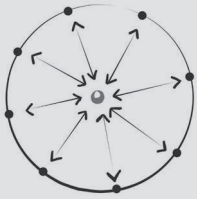
Highlighting Vehicles For Design.

How might we seed and spread the idea in a culturally relevant way?

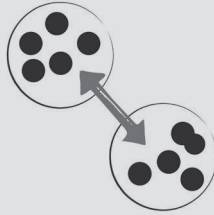
CONNECTION POINTS CAN BE LEVERAGED TO:

- > Create high-impact messaging or services by designing for existing information flows.
- > Provide individuals within the community (such as a caregiver or influencer) with specific locations in which to place their energy.
- > Find ways to spread information through the natural links that already exist within communities.

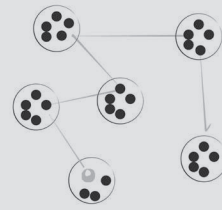
TYPES OF CONNECTION POINTS:

**LINCHPIN****Unique Characteristics**

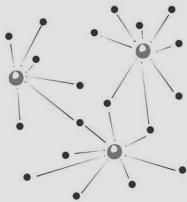
- > Connects with many people in a community multiple times each day as part of natural work patterns or habits.
- > Centralized location where everyone knows where to find the person/good/service.

**SYMBIOTIC RELATIONSHIPS****Unique Characteristics**

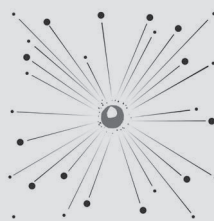
- > Created through the existence of complementary resources and needs.
- > Similar work hours and/or geographic location.
- > Usually built on a personal connection (due to the trust involved).

**MOBILE UNITS****Unique Characteristics**

- > A mobile unit that follows a similar pattern or path each day.
- > Not a central character in a community, but seen as a familiar face.

**REPLICATED GATHERING PLACES****Unique Characteristics**

- > Familiar within a culture, even if they exist in many communities.
- > Attract high traffic and have turnover throughout the day, perhaps attracting different demographics during different times of the day (as in a gaming center which attracts kids during the day and teens/young adults late at night).

**MAGNET****Unique Characteristics**

- > Massive influx of people on a relatively consistent or predictable basis.
- > A central gathering place that has many different uses.
- > Unique enough to bring together people from different parts of the city or community.
- > Attracts people from remote communities that would be otherwise difficult to access.

CONNECTION POINTS & DESIRES

Highlighting Vehicles For Design.

How might we seed and spread the idea in a culturally relevant way?

DESIRES CAN BE LEVERAGED TO:

- > Customize health messages that are culturally and contextually appropriate.
- > Build on existing relationships to enable deeper health conversations.
- > Insert a health focus into moments when people are open and receptive to new ideas.
- > Design into activities that people already care about or seek out.

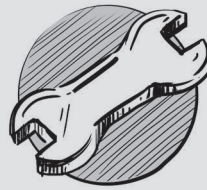
TYPES OF DESIRES:



ENTERTAINMENT

Design Considerations:

- > Entertainment interventions should not require too much depth or seriousness.
- > Design for socially acceptable activities because people will be seen doing this in public, and possibly in front of friends.
- > Opportunity to introduce content that someone can engage with later when they are alone.
- > Adapt high level concepts to the local culture.



WORK

Design Considerations:

- > People can engage with these initiatives differently based on their behavioral segmentation.
 - Survivor - Might only be interested in a one-day job that fits the bill or choose to not try anything they haven't done before.
 - Hopper - Might be interested in something that has a promise for growth in the future and may be more likely to try new things.
 - Optimizer - Might respond to interventions that help them expand their client base.
- > Finding new jobs is a common activity that many informal workers do on a daily basis – so repeat use is likely.
- > Providing vehicles for workers to find different or better work allows them the freedom to escape unhealthy work environments without impacting their financial well-being.



FINANCIAL OPPORTUNITY

Design Considerations:

- > Safety measures are important to the sustainability of the lending groups. Theft and lack of accountability can cause people to lose faith quickly.
 - Survivors may be the best candidates for asset-based lending groups.
 - Optimizers may be the best candidates for lending groups that include insurance, because they are interested in improving their situation and have enough 'buffer' to continually contribute financially.
- > Design interventions for financial opportunity can take the form of physical products designed to create safe lending systems.



GUIDANCE

Design Considerations:

- > Build on the existing philosophies and natural behaviors of local leaders.
- > There is a difference between immediate trust and trust built over time. Immediate trust often comes from those who share a culture, or have been endorsed by someone trusted. Even those with credentials might need to prove trust over time.
- > There is not one right “go to” person all the time. Different pieces of advice call for different sources.

CONNECTION POINTS & DESIRES

Highlighting Vehicles For Design.

How might we seed and spread the idea in a culturally relevant way?

DESIGNING FOR MEN

CONNECTION POINTS AND DESIRES

- > For men especially, trust requires multiple interactions over time.
- > Men are judged for their vices, so asking for help with health issues that could be caused by vices is uncommon.
- > Entertainment often builds deep engagement and quick camaraderie between men.
- > Trust is often critical for men who work together.
- > Men earn the money. Women budget it.

HEALTH CONSIDERATIONS

- > Providing for the family now takes precedence over health risks in the future.
- > Not knowing might be easier.

TURNING INSIGHTS INTO ACTIONABLE DESIGN OPPORTUNITIES FOR MEN.

How might we build *trusting* relationships into health interventions?

How might we create a *safe space* for men to acknowledge their health issues?

How might we leverage *entertainment* as a foundation for health conversation with different groups of men?

How might we better connect *occupational* safety with family well-being?

How might we amplify *tangible* solutions or actions to take after the diagnosis phase?

NEEDS TO ADDRESS

Narrowing The Focus For Design.

What intervention is most relevant and pressing?

In our research, the presence or absence of four common factors had a notable impact on a person's resilience when faced with a health catastrophe. These needs expose different opportunities to focus our designs on the content area that presents the most pressing need among informal workers.



RESILIENCE

FINANCIAL PLANNING

- > Financial planning in order to buy insurance or afford hospital co-pays

ANCILLARY SUPPORT & COSTS

- > Transportation: Getting to the hospital
- > Food: Having enough food to take medicine
- > Work Support: Ensuring that you won't lose your job or customers if you have to visit the doctor
- > Family Support: Finding food and lodging for your family if you fall ill and they come to care for you



INFORMATION

UNDERSTANDING YOUR OPTIONS

- > Knowing what your options are either as citizen or an undocumented immigrant (this includes insurance, payment, and legal options)

UNDERSTANDING ILLNESS

- > Knowing the proper symptoms for diseases
- > Understanding the benefits of caring for your health and/or purchasing insurance (where relevant)
- > Interventions to help prevent continual self-diagnosis

AVOIDING CORRUPTION

- > Methods and tools to better identify what care providers or medications are officially certified and effective
- > How to identify counterfeit drugs

HELPING TO REMOVE LANGUAGE BARRIERS (IF NECESSARY)

- > The ability to speak the local language and communicate symptoms and health needs. (This includes language barriers, differing dialects and literacy)



ACCESS

PERCEPTIONS OF ACCESS (FOR CITIZENS)

- > For citizens, legal access to a system is not an issue. However, quality of care perceptions, a lack of information, or financial limitations can create the perception of a lack of access.

SAFE ACCESS (FOR UNDOCUMENTED IMMIGRANTS)

- > Interventions that allow undocumented immigrants to receive care anonymously or without legal risks or fear of arrest/deportation



QUALITY OF CARE:

NEGATIVE PERCEPTIONS

- > Shift inaccurate negative perceptions to encourage individuals to seek care sooner

TREATMENT, SUPPLIES & KNOWLEDGE

- > Design interventions to improve quality of care, such as wait times, drug supply, doctor training, etc.

GRASSROOTS INSPIRATION

EXAMPLES & ANALOGOUS INSPIRATION

Imagining the Future.



GRACE'S CHAMA, NAIROBI

Lending Group + Health Insurance



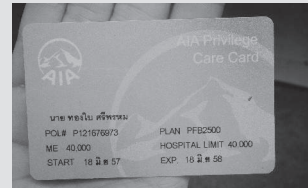
AFROMED, DURBAN

Caretaking Within a Community



SAYUN'S WORKER GROUP, BANGKOK

Worker Union + Health Insurance



WORKER GROUP LEADER, BANGKOK

Putting Insurance Into Perspective

NGO INTERVENTIONS



KLONG TOEY HEALTH CENTER, BANGKOK

Community Health Center



FAR INTERVENTION FOR UNDOCUMENTED IMMIGRANTS

Supporting Undocumented Workers

INSPIRATION



IDE BOLLYWOOD FILM

Using Entertainment for
Behavior Change



UNILEVER LIFEBOUY SOAP

Creating a Memorable Experience
to Spread a Message



LIVING GOODS

Pairing Cosmetic Products
with Health Related
Products



GRASSROOTS SOCCER

Reaching Youth Through Role
Models and a Love of The Game



**GRAMEEN FOUNDATION COMMUNITY
KNOWLEDGE WORKER**

Knowledge Delivery via
Influencers and Technology



TOSTAN

Creating Space for Discussion and
Deep Engagement





