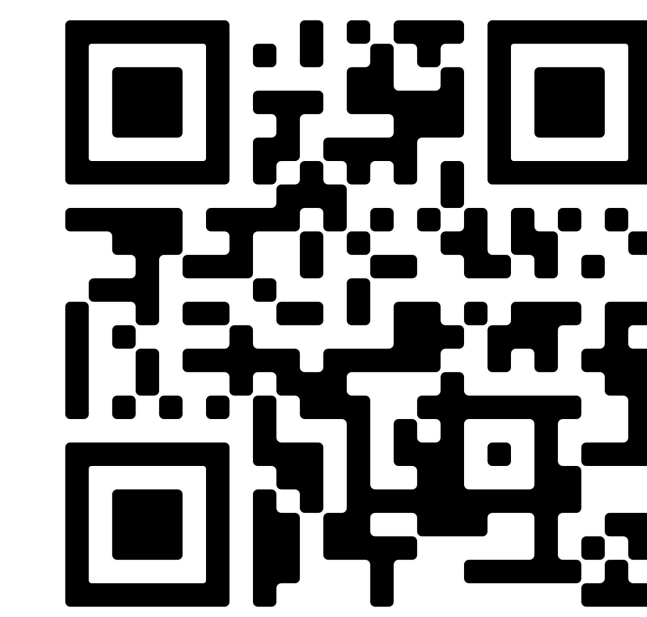




# Chatbots for Change Playbook

A practical guide and modular toolkit on how to create, grow, and sustain your chatbot for disaster medicine

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## PLAYBOOK OVERVIEW

### Background

Why did we create this?

The Covid-19 pandemic catapulted the use case chatbots for health forward, in particular with regards to the sharing of credible information, linkages to vaccination services, and more. The Playbook builds on that momentum and contains some of the most critical resources, tools and considerations required to successfully develop, implement, scale and sustain chatbots for social good, with a focus on health.

### Playbook + Disaster Medicine

The Playbook is relevant to the provision of disaster health care, preparedness, and recovery.

As people become more and more impacted by disasters, in particular those related to climate, and with the proliferation of AI and digital tools in every aspect of our lives, chatbots can help ensure that the people who have the hardest time accessing health care and information can do so - even in emergencies and in their aftermath.

### How To Use

- Highly modular – jump into whatever section speaks most to needs & interests but can also be used comprehensively.
- Interactive & practical – exercises and tools meant to convert knowledge into action.
- Concise best practices from each module summarize key points.
- Abundant real-life examples - with links to research and more information, existing materials.
- Evergreen, collaborative resource – Updated as new knowledge emerges and is open to inputs for users.

4 modules particularly relevant in analysis, planning, strategizing and design phases of chatbot project lifecycle.



### Analyze

THE PROBLEM, SCOPE THE SOLUTION

#### Market Sizing - Scorecard Exercises - Formative Research

- Could a chatbot intervention be the right solution to the problem you are trying to solve in your particular context?
- If so, who are you trying to reach with your chatbot intervention? What is your potential addressable market?
- Are some geographies/contexts better suited to these kinds of interventions?



### Define your Impact

MONITOR, EVALUATE AND LEARN

#### Theory of Change - M&E and Learning - Impact Indicators

- What is the theory of change behind the chatbot?
- What indicators will you need to assess the effectiveness, monitor levers for change and impact toward goals?
- How do you define scale and sustainability for the chatbot?



### Plan & Strategize

BUSINESS MODEL, MARKETING STRATEGY & PARTNERSHIPS

#### Business Model & Plan - Marketing Strategy - Partnerships

- What are the cost drivers and requisite resources to develop, implement, grow or scale the chatbot?
- Who could fund your chatbot at the various levels of growth/ scale?
- What will be the strategy to effectively and efficiently market to, acquire, and grow the number of chatbot users?
- What are the partner roles and types required to successfully develop, implement, scale and sustain chatbots for social good? What does each bring to the table - at each phase?



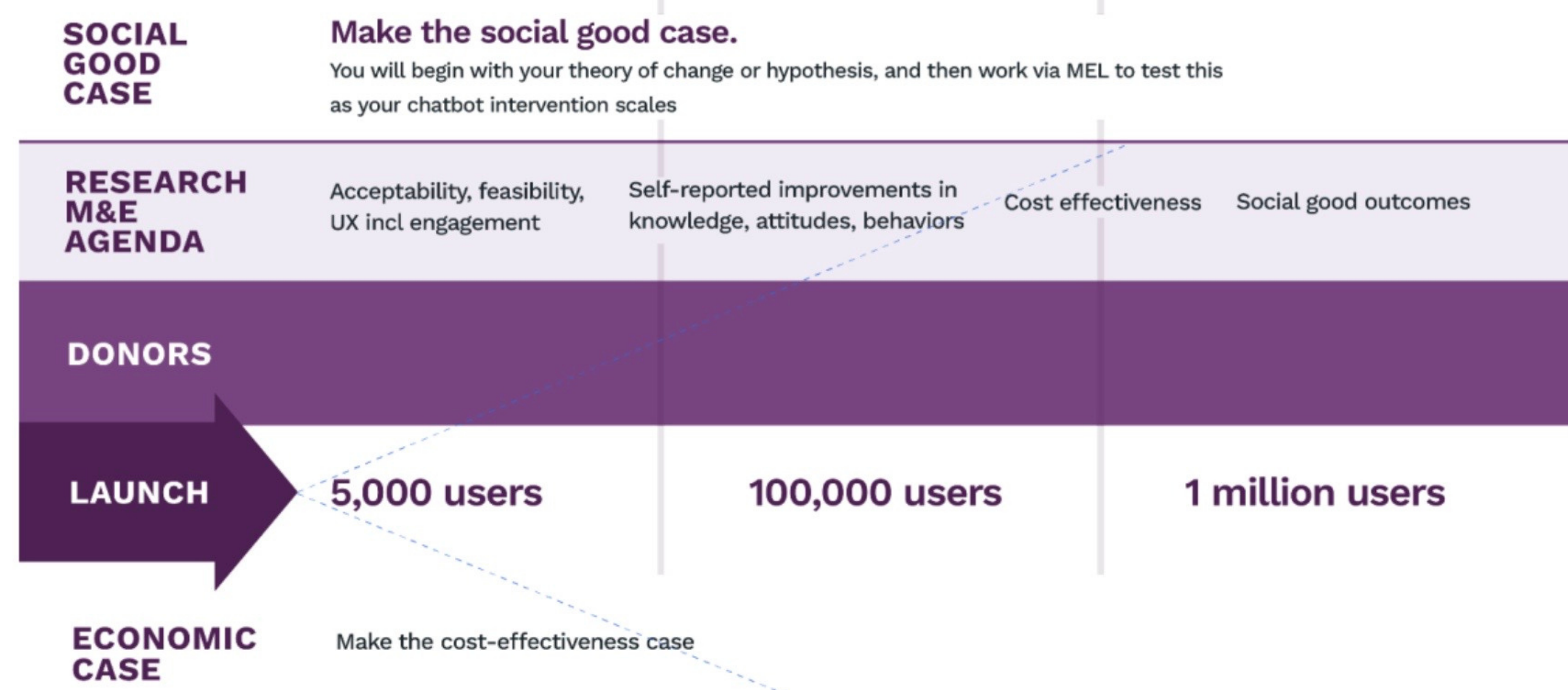
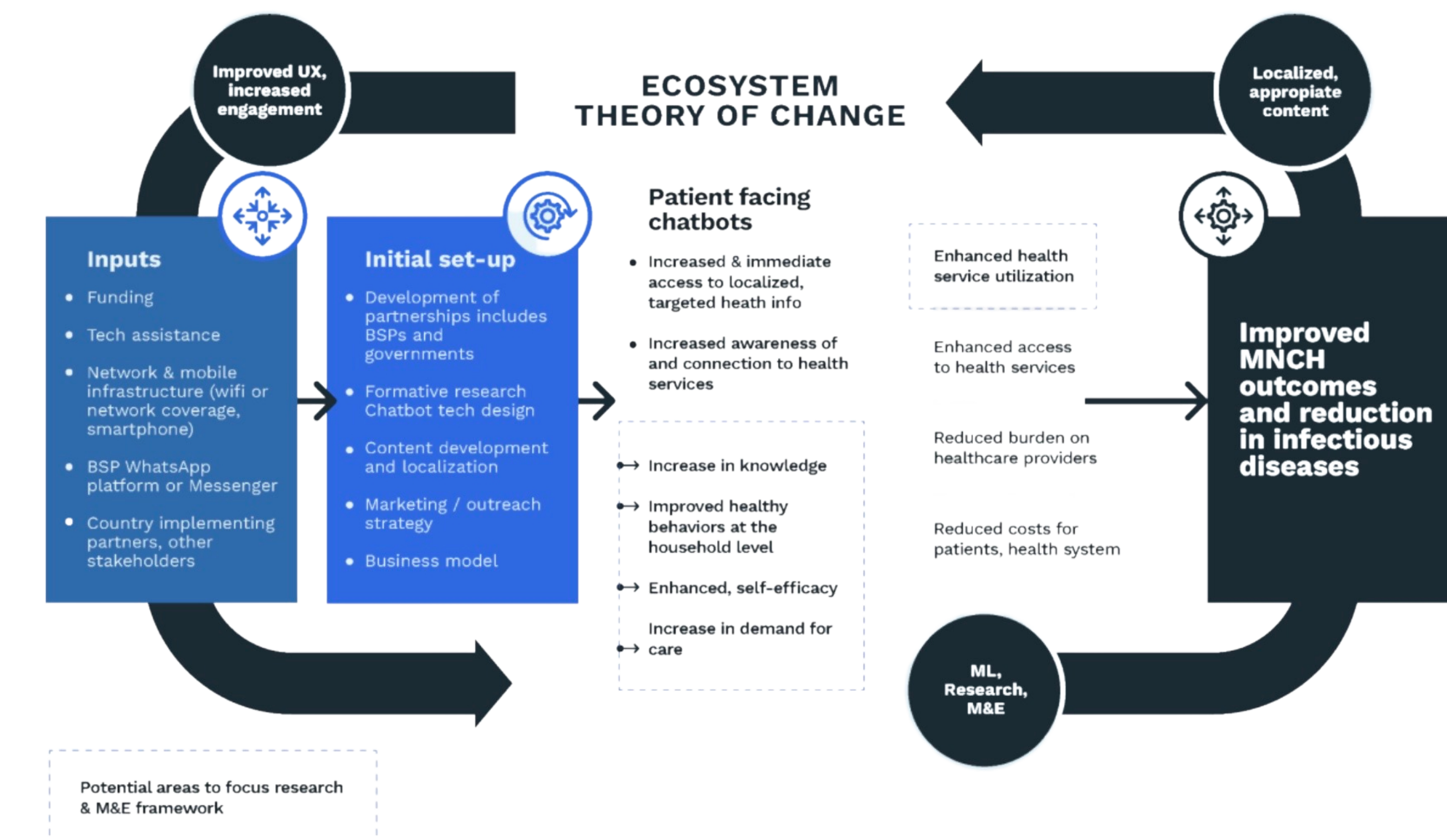
### Design, Develop & Demo

CONTENT & TECHNOLOGY

#### Content - Tech Considerations

- What content should be developed/ used for/by the chatbot, how can this be turned into or adapted into compelling messaging for your target users?
- How do you ensure your content is adapted to local contexts? Who should be involved in this process and review and approve the content?
- What type of chatbot makes sense for your social good use case?

## EXAMPLES OF PLAYBOOK EXERCISES



**BRAZIL**

| 1. Health (MNCH)                            | 2. Digital  | 3. Growth  |
|---|---|--|
| MMR 59                                      | % Individuals using internet 81%                                    | Digital Health Strategy - Active strategy 2020 - 2028                                  |
| Child Under 5 Mortality 15                  | Literacy Rate Adult Female 95%                                      | Domestic health expenditure PPP \$1,497  |
| % of women 4 ANC visits 93%                 | Cost entry-level internet enabled handset in LAC, & monthly GDP 10% | External health expenditure PPP \$2  |
| % Institutional deliveries 99%              | Gender gap for LAC region in mobile internet use 2%                 | Gov-supported digital health precedent? (yes/no) Yes                                   |
| % children reached with pentavalent vax 68% | % population in urban areas 87%                                     | Cost of WA messaging vs. SMS beyond 1 M messages per month .05 vs .06 USD, 17% cheaper |