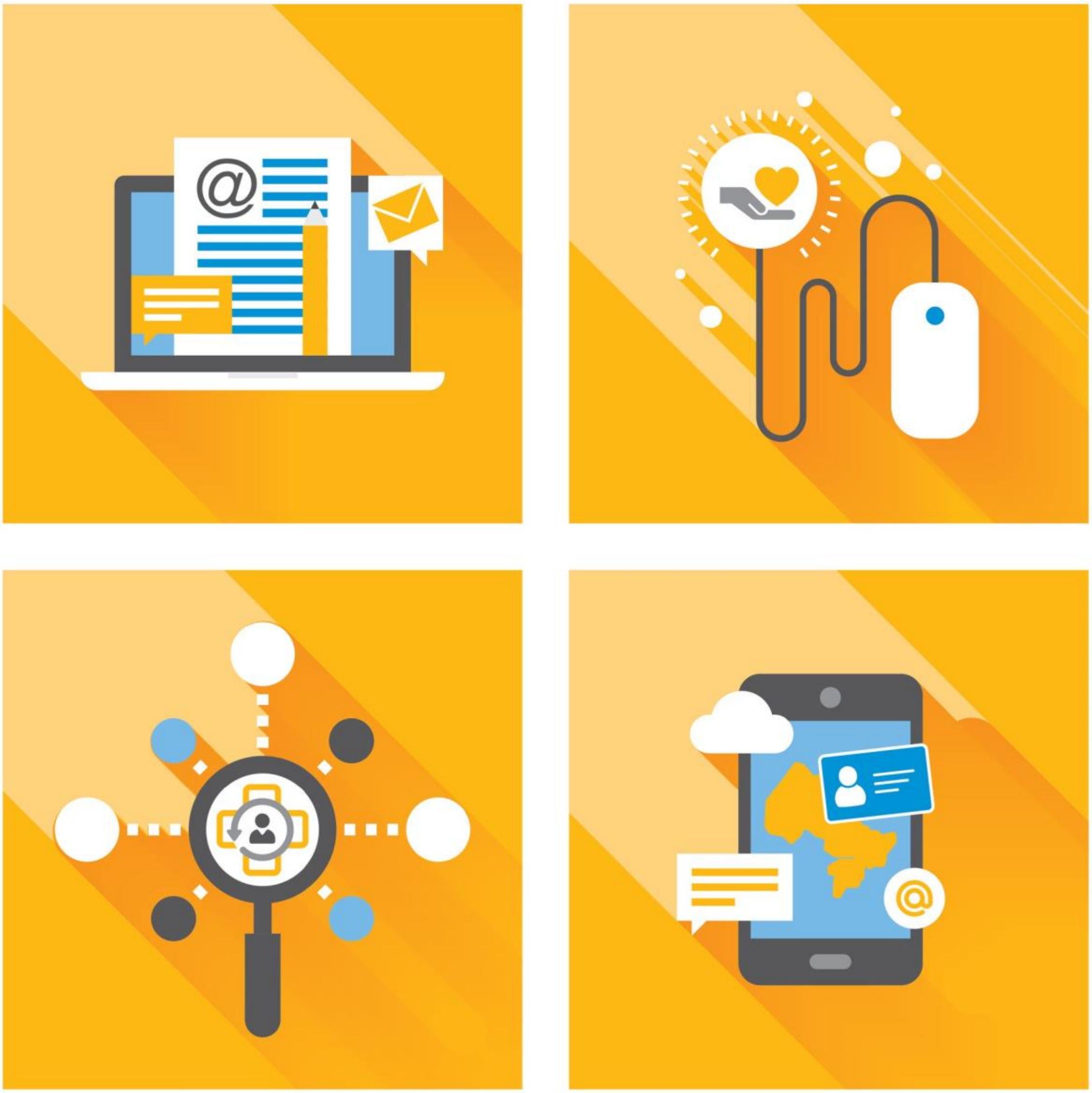

Behavioural Insights in Ontario

2020-2022 Update Report

Ontario

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Executive Summary

Since 2015, Behavioural Insights (BI) has become a well-established tool in Ontario's policy innovation toolkit. BI (also called behavioural science) helps us understand and respond to how people make and act on their decisions. This includes making sense of and working to remove the barriers that might stand in the way of people acting on a preferred decision, making the easy-right-now decision, or deciding not to act at all. By understanding how people make and act on decisions related to programs and services, BI contributes something unique to the human-centered approach to how government operates. With the creation of its Behavioural Insights Unit (BIU), Ontario has led the way in the Canadian public sector in applying this iterative scientific approach to increase the effectiveness of policies, programs and services through simple, low-cost changes.

Operating as an internal behavioural science consultancy, the Ontario BIU provides value for money by offering tailored services free-of-charge to ministry, municipal and broader public sector partners. Our success in applying BI is the collaborative approach we take to work across government program and service providers to understand the behavioural context, the experiences of people on all sides of a service, and to co-create and validate potential solutions in the field. This tried and tested approach enables the BIU to provide its best, evidence-based advice to inform partners' decision-making and better serve Ontarians with high-quality, human-centred programs and services.

To date, Ontario has delivered over 30 behavioural insights pilot projects and over 70 advisory services. In this report, we are proud to share results from seven collaborative pilot projects to promote digital service uptake, improve compliance rates, improve the health and safety of Ontarians, and increase uptake of important programs and services. To complement these pilot projects, which statistically evaluate and validate solutions among real users, this report also features four high-touch advisory projects where BI-informed advice is applied in instances where formally testing solutions is limited. Alongside these advisory services, the report also highlights some of the ways in which the BIU continued to support the province's COVID-19 pandemic response and strategies for return of service. While you can read more about the unit's work in past Update Reports (2018 and 2020), some of the most notable projects in this report include:

Project	Partners	Key Outcomes
Increasing Use of Electronic Payment (e-payment) Options Among Social Assistance Recipients	Ministry of Children, Community and Social Services (MCCSS)	During the trial phase of the project, receiving any BI communication nearly tripled clients' likelihood of switching from cheque to an e-payment option. The best-performing e-payment communication was scaled to 12,000 more clients currently receiving payment by cheque. Uptake of e-payment options increased from 0% at the time the scaling communications were sent, to 23.5% one month after receiving reminder communications.
Increasing Ontario Works Client Attendance at Local Tax Clinics	Toronto Employment and Social Services	Appointment booking and attendance rates at local tax clinics had a 38% relative increase among BI email recipients.
Increasing Socio-Demographic Data Collection Among OPS Employees	Treasury Board Secretariat (TBS)	Employees who received an email encouraging them to provide their socio-demographic data in WIN were up to 25% more likely to share their data than employees who received no email.

Alongside some of the BIU's recent scientific case-studies, this report also considers Ontario's strategic approach to staying on the leading edge of applied behavioural science. This has included the team's work to incorporate both new and innovative research approaches into our toolkit, such as qualitative methodologies and advanced data science techniques. These efforts broaden the array of research skills at our disposal, giving us new ways to apply BI to even more behavioural challenges, such as policy priorities related to equity, inclusion, and diversity in the workplace, and in the programs and services Ontario offers.

In the context of the COVID-19 pandemic, the BIU demonstrated how behavioural science can be used to address rapidly changing behavioural contexts with high-quality advice. As the province and world moves into a new sense of normalcy, the BIU will continue to demonstrate how BI can play a role in building and improving people-centred programs and services that meet Ontarians where they are.

Most Notable Accomplishments

10x

More likely to submit requests through online portal

1.7x

More likely to submit renewal requests on time

Increasing uptake of the digital portal for Exceptional Access Program (EAP) renewals

Tested multiple faxes to facilitate uptake of online portal for EAP renewals

25%

More likely to submit sociodemographic data

Ontario Public Service (OPS) employees sharing demographic data through the OPS HR portal

Contributing to the OPS Leadership Pledge of proactively identifying and addressing systemic employment barriers

38%

Increase in appointment bookings

Increasing Ontario Works Client Attendance at Local Tax Clinics

BI-informed emails coincided with closure of tax clinics in March 2020, so attendance could not be measured

Introduction

Applying BI in Ontario: 2023 and Beyond

Ontario is a trailblazer in the Canadian public sector's application of behavioural insights as an innovative policy tool. Many Canadian jurisdictions followed our lead, with BI teams now located in different provinces (British Columbia's Behavioural Insights Group, Nova Scotia's Outpost for Public Sector Innovation) and federal departments (Canada's Impact and Innovation Unit, the Office of the Chief Human Resources Officer at the Treasury Board of Canada Secretariat, Public Health Agency of Canada, and Employment and Social Development Canada).

BI is a great fit for addressing so-called "last mile" behavioural challenges across a wide range of policy, program, and service delivery areas. These types of challenges happen "downstream" in the policy cycle, for example, when a high-quality program or service already exists but clients or users do not act in the ways we expected in design. Practical examples include not signing up for a valuable program or benefit, issues complying honestly and on time, or not switching to a modern, digital service over an older in-person, phone or fax process. BI is used in these cases to understand and remove potential behavioural barriers or bottlenecks that might exist in the current process, and which keep people from taking the desired action.[1] In addressing "last mile" challenges we might ask things like: Is the enrolment form or booking process confusing? Are people receiving the right information at the right time in the user journey? Is the service provider asking clients to go online when a paper form is already in hand? Are the consequences of not acting or the benefits of choosing to take action unclear? These are the kinds of challenges where BI excels as a policy tool. In this report, you can learn more about how Ontario uses BI to tackle last mile policy challenges to promote the use of modern digital services, ensure compliance, improve the health and safety of Ontarians, and improve program and service uptake.

Interestingly, during the same time that behavioural science has become an increasingly common policy tool, practitioners across academia, the public sector

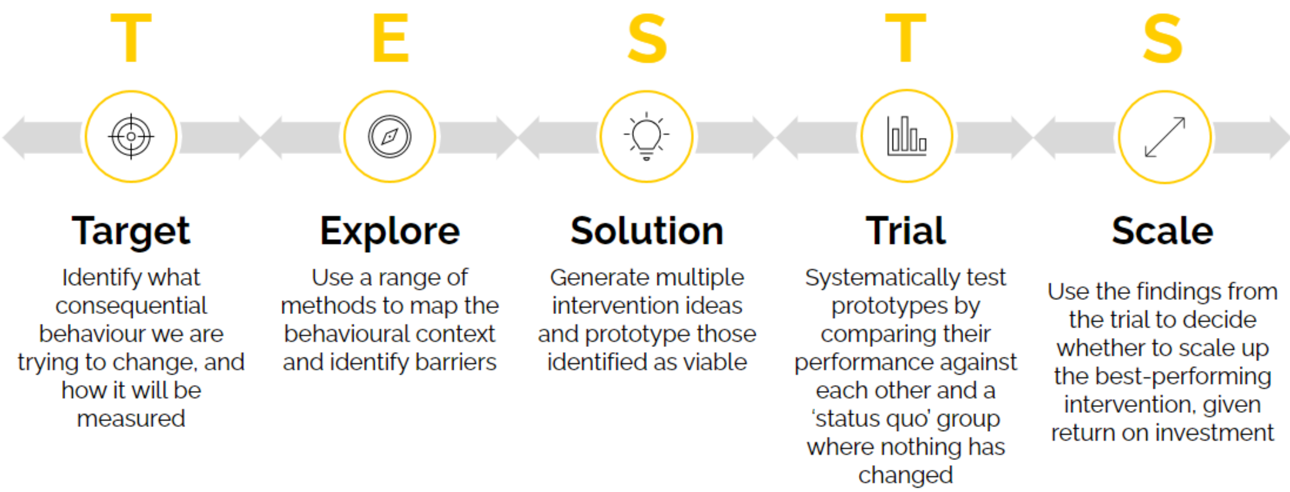
[1] Ontario uses BI to make it easier for people to act in alignment with their intentions, but this doesn't remove or hinder an individual's ability to choose differently. For instance, the BIU and partners might explore ways to make an online channel more appealing, but clients can still choose to opt for a paper or in-person application if that's their preference.

and private industry have begun to reflect on the current state of the discipline. Scientists within academia and in units like Ontario's are asking important questions about what's next for BI – and how we can respond. Can BI address system-wide challenges in addition to individual decision-making barriers? How can BI tweak its approach to reach people where a one-size-fits-all solution misses key decision drivers, or does not address barriers for specific sub-populations? What can we learn from our greatest successes in applying BI to "last mile" challenges to address behavioural barriers further "upstream" in the policy and delivery cycle? We believe these questions are important and will be a focus of our work going forward.

Ontario has already begun to address some of the key threads of these broader discussions about the future of BI, and how we can use this tool to create programs and services that meet people where they are.

Methodology

Ontario uses the iterative TESTS methodology[2] in applying behavioural science to the public sector. TESTS stands for Target, Explore, Solution, Trial and Scale. Other BI units around the world may use a different acronym[3] to describe their scientific approach, but the underlying methodology and tools are the same across the discipline.



[2] The TESTS methodology is adapted from the Behavioural Insights Team, UK (see: Datta and Mullainathan, 2014; Halpern, 2016).
[3] For example, British Columbia's Behavioural Insights Group uses their "RIDE Model for Behavioural Shift": Scope to define the problem and evaluate whether BI is the right tool to use (similar to Target), then Research (Explore), Innovate (Solution), Data (Trial), Evaluate (Trial reporting), followed by plans to Scale and/ or iterate.

In **Target** we begin by scoping the behavioural context. To determine if BI is the right or best tool for the proposed challenge we usually run a Behavioural Lensing workshop with the program or service partners. In this workshop, the BIU facilitates a guided discussion to identify all potential actors and behaviours to change in ministry partners' priority areas. After identifying many possible opportunities for behavioural change, we use our MIST (Measurable, Impactful, Sizeable and Touchpoints) filtering criteria, outlined below, to identify whether BI or another tool in Ontario's policy toolkit can add the most value:

- ☑ Measurable: Is the behaviour we want to change an observable, measurable action (rather than trying to shift an attitude or belief)? If so, is data about this behaviour already recorded (for example as administrative data) or could it be easily recorded?
- ☑ Impactful: Do we reasonably believe that if we were to shift this behaviour it would contribute to broader policy goals? Is there room to substantially increase or decrease the desired behaviour?
- ☑ Sizeable: Is the behaviour being done by a large enough target population (usually thousands) that will enable us to conduct high-quality statistical analysis to determine if our changes were effective?
- ☑ Touchpoints: Is there an existing or low-cost opportunity to deliver an intervention to the population whose behaviour we would like to shift to meet our policy goals? Examples of touchpoints might include an eligibility or fine notice (letter, email, SMS), an interaction with a customer service representative during the process, a website landing page or a form.

If the proposed opportunity checks all the boxes, we continue to Explore where we dive deeper into understanding the behavioural context.

What happens when it's not a MIST opportunity?
In special cases where projects might not fit all MIST criteria, but where BI-informed advice is thought likely to be impactful, the BIU may provide advisory services instead. In these cases, the BIU and ministry partners work together to explore and develop potential solutions but stop short of field testing (Target, Explore, Advice).
Read more about some of these cases in the **Selected Advisory Work** section.

In cases where projects are not quite a fit for our BI-informed advice, we refer ministry partners to OPS teams with relevant expertise, this includes but is not limited to service design and strategy at the Policy Innovation Hub, Lean and performance measurement and evaluation at the Treasury Board Secretariat's Centre of Excellence.

In **Explore**, the BIU applies a range of quantitative and qualitative methods to better understand the behavioural context and people involved in the experience, such as users, clients, and service providers. A key approach in this phase is to build a behavioural journey map to understand each granular step in the user journey from identifying and accessing the service to completing the desired behaviours. We work closely with our partners as the experts to dig into the potential (physical, environmental, social and psychological) barriers and bottlenecks that might affect people's decision-making and follow-through. We also use this journey map to identify potential touchpoints to leverage as part of a behaviourally-informed solution. After learning the space in detail, we review behavioural science literature to understand how other jurisdictions tackled similar challenges. These efforts comprise our exploratory research phase, where we build a picture of the user's experience or past patterns of behaviour related to the program or service.

New methodological perspectives and tools

Qualitative methodological approaches can be especially helpful during Explore to gather and rigorously analyze primary data collected from people who use and/or provide the program or service in question. For example, the BIU may work with ministry partners to conduct one-on-one semi-structured interviews, focus groups or questionnaires with key participants. The BIU may also analyze secondary data (such as existing client communications or comments in public web forums about the program or service) to more deeply understand the behavioural context.

Adding rigorous qualitative methods to the BIU's toolkit sheds light on important and unexpected nuances in the behavioural context. These methods fill the gaps in our knowledge by gathering and analyzing new data about our target population and their experiences.

Qualitative research insights enables us to better understand how people's past experiences, beliefs and attitudes can influence their motivation to act. Gaining users' perspectives first-hand can also highlight aspects of the behavioural context that we didn't expect from the literature or our pre-existing knowledge of the program or service. These findings frame potential solutions that better resonate with the lived experience of barriers or suggest behavioural solutions from the literature that might be more appropriate to the target population. In some cases, taking a deeper dive into the lived experience of users in a particular behavioural context may suggest that there are larger structural problems at play that small, low-cost tweaks to behavioural touchpoints may not be enough to change.

Quantitative analysis of historical data can also shed light on recent and past patterns of behaviour regarding a particular program or service. Using the open-source software R to analyze several years of existing administrative data allows the BIU and ministry partners to test early hypotheses about the intention-action gap, and to identify where behavioural opportunities might exist to run a pilot project.

Importantly, historical data analysis can also help us better understand the target population, for instance across socio-economic or immigration status, gender, age or other differences that might be important for how different individuals access, use or comply with the program or service. Gaining a line of sight into how these differences have mattered in the past give us insights into potential solutions. The BIU can work with our partners to develop approaches that might reach groups for whom one-size-fits all solutions are less effective or suggest alternative approaches we can test in the field.

Building on the broad understanding of the policy and behavioural context developed during Explore, the team co-creates a range of potential **Solutions** to test in the field during Trial phase of our pilot project. Looking to the behavioural science literature, the BIU and ministry partners may develop one or more behaviourally-informed solutions or interventions. These could include interventions like a behaviourally-informed notification letter or email (or even fax), rearranging steps in the process to increase the salience of the decision, or providing new or different feedback to front-line service providers to nudge their behaviours.

By leveraging some of the newer qualitative tools in the BIU's methodological toolkit, the BIU and ministry partners can also begin to conduct qualitative evaluation and/or validation of prototypes with a few potential users.[4] This

[4] Prototype validation is already a regular part of how the Ontario Digital Service practices service design. See Ontario's Service Design Playbook for more details.

approach may be especially useful in tackling some of the “stickier” or more sensitive policy challenges, for instance to address workplace employment equity, diversity, and inclusion.

The **Trial** phase of TESTS is when we test our proposed solutions in the field with members of the target population in the context of program or service delivery. Testing whether our solutions have the desired effect is at the heart of the BIU’s methodological approach – and where BI provides the most value. Since so much of human behaviour depends on the context in which we make our decisions, behavioural scientists know that what works in one jurisdiction might not necessarily work in another and could potentially even backfire! Testing on a smaller scale before implementing across the province allows the BIU and ministry partners to “try before we buy” by generating evidence that supports decision-making for made-in-Ontario solutions.

We learn what works and what doesn’t by validating our solutions using field experiments, such as randomized control trials (RCTs). If an RCT is not the right approach for a particular challenge, we might opt for another experimental approach that is a better fit. Examples include an online experiment, A/B Test (which can be a form of RCT), pre-/post-evaluation, or another quasi-experimental approach.

What is a Randomized Control Trial (RCT)?

In behavioural science, medicine, and other experimental fields, RCTs are considered the “gold standard” for experimentation because they provide the highest quality of quantitative evidence.

This is because we **randomly** assign people to two (or more) groups or “conditions” who will receive either our control (status quo or business-as-usual) solution or our BI-informed solution. In doing so, all else is held equal, allowing us to determine the causal effect of the intervention.

In other words, we can **control** for external influences (or “noise”) that could affect the target behaviour regarding our program or service, for instance, an unanticipated event, the weather or what’s trending on social media. Because we have randomized people across our conditions, everyone in all conditions has the same chance of being affected.

Collecting data about the outcomes for each group lets us compare performance easily and come up with a reliable conclusion about what worked best during the **Trial** or pilot project to validate our solutions.

The last phase of TESTS is where we report on our validated solutions from the Trial and provide our best advice to ministry partners. Our ministry partners use the evidence we generate to inform their decision making about whether to **Scale** the implementation of the best-performing solution across the entire target population.

Based on what we learn during the Trial phase, we might also recommend **iterating on the pilot project** to address additional behavioural barriers that might keep some people from acting on their intentions (the desired behaviour). For instance, in our 2018 report on applying BI in Ontario, a collaboration between the former Ministry of Health (MOH) and Long-Term Care, Trillium Gift of Life Network, the former Ministry of Government and Consumer Services and the University of Toronto's Centre for Behavioural Economics in Action at Rotman, increased organ donation consent rates in the province.[5] Even while celebrating the success of low-cost changes that increased organ and tissue donor registration by 143%, the project partners looked to additional identified opportunities for improvement. Iterating on our earlier project, you can read more about how small changes to communication with ServiceOntario customer service representatives were leveraged to meet the need for organ and tissue donation in our 2020 Update Report.

Summary of BIU Accomplishments

Since our 2020 Update Report on the application of BI in Ontario was published, the BIU completed eight pilot projects, with several more currently underway (four of which we are excited to introduce in this report). We also worked with ministry partners across government by providing high-touch BI Advisory Services, as well as assisted with Ontario's response to the COVID-19 pandemic.

As an innovative tool in Ontario's policy toolkit, BI can add more value in some areas over others. BI is the science of (individual) decision-making, and works best when we can identify and target a specific touchpoint in the user journey to

[5] Ministry structures have changed since then.

remove a barrier or make it easier for people to act in the way they intend.[6] In this report we showcase projects that demonstrate how BI can add value by closing intention-action gaps related to promoting the use of digital services, ensuring compliance, improving health and safety for Ontarians, and improving program uptake.

1.0 Completed Projects

1.1 Promoting Use of Digital Services

Increasing Uptake of the Digital Portal for Exceptional Access Program Renewals Ministry of Health (MOH)

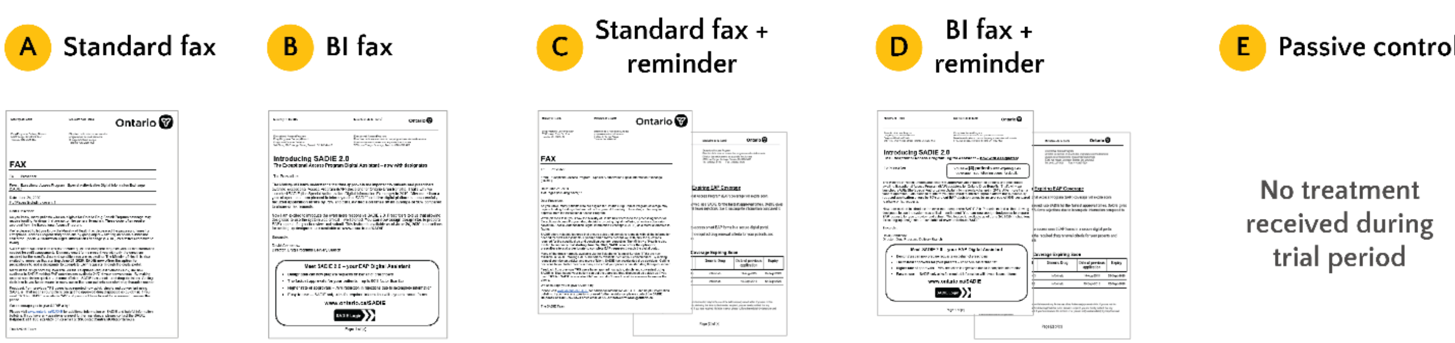
Target: The Exceptional Access Program (EAP) allows Ontario Drug Benefit (ODB) recipients to access drugs that are currently not covered under the ODB Formulary. Each year, approximately 90,000 EAP requests are submitted by prescribers (i.e., doctors or nurse practitioners) on behalf of their patients. Most of these submissions were sent to the ministry by fax, which would then be entered into systems by ministry staff. As part of ongoing modernization efforts, the MOH developed the Special Authorization Digital Information Exchange (SADIE) platform for EAP submissions. SADIE's dynamic platform was designed to streamline the submission process by providing prescribers with online information about clinical criteria for various drugs and indications, presenting questions specific to the drug requested, and highlighting required form fields to reduce the submission of forms missing necessary information. Despite the significant advantages SADIE offers to prescribers, in 2020, a year after its launch, just 4% of EAP submissions were made through SADIE. How could the BIU and MOH work together to improve SADIE adoption rates?

Explore: The project team identified several barriers that led prescribers to stick with the status quo process of faxing their EAP requests to the Ministry. Before connecting with the BIU, the Ministry identified a significant barrier centred on the division of labour within medical offices. Often, a prescriber's staff – not the prescriber themselves – would be the one to prepare the EAP request and, after the prescriber signed it, submit it to the Ministry. To address this barrier, the Ministry added a new "designate" role within SADIE to allow prescribers to

[6] BI is usually not the best or right tool for high-level policy challenges like developing policy frameworks or strategic documents, change management, awareness campaigns/ mass advertising, or end-to-end process improvements or systemic change.

authorize one or more users to prepare EAP requests on the prescriber's behalf. Exploratory research by the project team uncovered additional barriers, including the challenge of users needing to shift channels from the known fax to the new online submission process, without a clear value proposition of the benefits.

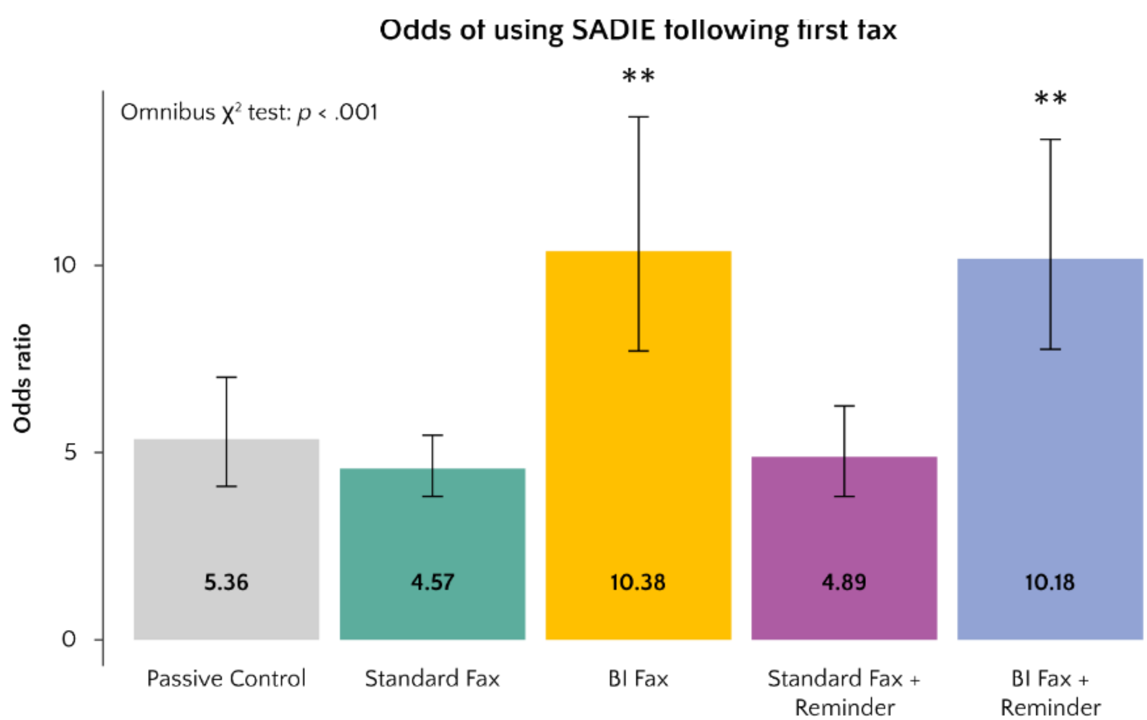
Solutions: The project team created behaviourally-informed faxes intended to increase the uptake of SADIE among EAP prescribers. Two different promotional faxes were created, with one using standard ministry formatting and language, and the second using behaviourally-informed language to promote the use of SADIE (versions A and B, respectively). The behaviourally-informed fax employed simplified language and salient formatting. The fax also used a value-proposition framing, leveraging the fresh start of the new designates feature and other improvements to frame the portal as SADIE 2.0. Two additional treatment conditions (versions C and D) used faxes A or B as a cover letter and added a personalized reminder about upcoming expiries of patients' EAP approvals on a second page (or pages). Prescribers in the passive control group E did not receive any faxes during the trial period. However, all prescribers in Ontario received a fax from the MOH about the new designates feature on June 24, 2020, resembling the BI-informed version B.

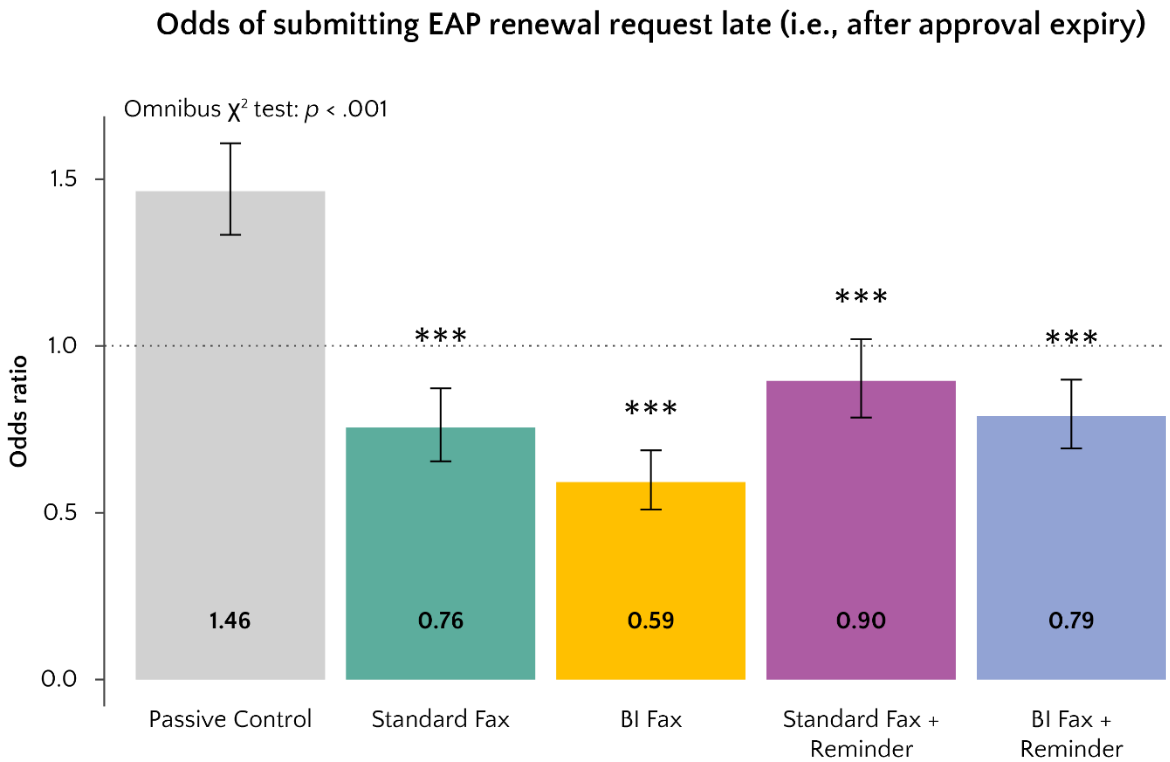


The four different fax treatments were tested in a randomized controlled trial with over 3,400 prescribers between July 2020 and December 2020. The sample of prescribers was limited to those who had patients with upcoming EAP expiries during the trial period – and may or may not be seeking renewal. This enabled the project team to test whether message timing was an important factor for SADIE adoption. The promotional fax treatments (A and B) were timed to reach the prescriber within 80 days of an upcoming expiry, whereas promotional plus reminder treatments (C and D) were timed to reach the prescriber within 40 days of the upcoming expiry.

Trial: The findings of the study showed that while the timing of the message did not have a significant influence on SADIE adoption, how key information was framed did. Behaviourally-informed faxes (versions B and D) had a statistically significant effect on SADIE uptake. EAP prescribers who received one or more behaviourally-informed faxes were over 10 times more likely to submit their renewal requests through SADIE than they were before the trial. This effect was up to 2.3 times stronger than the effect of standard faxes or the passive control.

Not only were the behaviourally-informed faxes effective at increasing the uptake of SADIE, but they also encouraged prescribers to submit their requests on time. Prescribers who received one or more behaviourally-informed faxes were 1.7 times more likely to submit their renewal requests on time than they were before. Compared to BI faxes alone, personalized expiry reminders did not increase the likelihood of timely renewal requests any further.





Scale: Since the completion of the trial, the Ministry has been exploring phasing out the use of faxes for EAP request submissions. The findings of this trial will be used to support this transition and may inform further efforts by the Ministry and partner ministries to increase the uptake of online services.

Increasing Use of E-payment Options Among Social Assistance Recipients
Ministry of Children, Community and Social Services (MCCSS)

Target: People receiving social assistance (SA clients) in Ontario can be paid in one of three ways.

(1) **Traditional cheques**, which are either mailed to the client's address or picked up in person at their social assistance office;
(2) **Direct bank deposit (DBD)**, where clients' monthly SA payments are transferred into their bank accounts (e-payment options); and
(3) **Reloadable Payment Card (RPC)**, where monthly SA payments are loaded directly onto a special debit card that clients can use to withdraw money from ATMs or pay electronically in stores or online (no bank account needed) (e-payment options).

E-payments improve program efficiency, protect vulnerable clients from potential postal service disruptions, and remove the need for clients to use costly cheque-cashing services.

As of May of 2020, more than 35,000 SA clients in Ontario were still receiving payments via cheque, representing nearly 7% of all clients receiving assistance. Local offices and case workers have been instructed to continually promote e-payment options to existing clients. The MCCSS collaborated with the BIU to test whether the addition of behaviourally-informed communications could increase e-payment adoption among SA clients receiving cheques.

Explore: In an expedited review of clients' SA payment experience that included inspecting existing communications and forms, and walking through the steps required to register for RPC / DBD, several barriers and areas of opportunity emerged. Loss and risk aversion, scarcity mindset, cognitive overload, present bias, lower literacy levels, learned helplessness and limited attention were all identified as potentially relevant cognitive and behavioural barriers.

Solution: To address the identified barriers, two different net-new behaviourally-informed communications were designed. Both communications emphasized the benefits of e-payment methods to make them more salient and provided simple instructions for switching that included an active offer of 1:1 help. Their design also included decision support and personalizing the sender to be a trusted, identifiable messenger (the client's caseworker). To test whether deciding between the two e-payment options (DBD and RPC) may have caused some clients to experience choice overload, one of the communications was streamlined to focus only on the RPC option, which even unbanked clients could use.

Sample

Direct Bank Deposit (DBD) Payment Option

<<Office_Name_1>>
<<Office_Name_2>>
<<Street_1>>
<<Street_2>>
<<City>>, ON <<Postal_Code>>
<<CWPhone_Number>> <<Toll_Free>>

<<Date>>

<<MEMBERNAME>>
<<C_Street_1>>
<<C_UnitNo>><<C_POBox>>
<<C_City>>, ON, <<C_PostalCode>>

—Or —

Direct Bank Deposit

Your <<Program>> benefits are now available in new ways!

Dear <<FIRST>>:

It's time to get your <<Program_Full>> (<<Program>>) Reloadable Payment Card or switch to Direct Bank Deposit to replace the hassle of collecting and cashing your <<Program>> cheques. **Please give me a call** when you get this letter and I can get you set up right away.

Ready to make the switch? Have questions?

Call **<<CWPhone_Number>>** and sign up for one of the two options below. No forms needed.

Now more than ever, I know getting your benefits safely and without delay is important. That's why <<Program_Full>> now pays benefits through a Reloadable Payment Card or by Direct Bank Deposit. No more picking up cheques from the <<Program>> office or waiting for the mail. Now your **benefits will be available to you the last day of every benefit month.**

Why are my benefits now by card or direct deposit?

- Avoid waiting for your cheque at the <<Program>> office or in the mail
- Use your debit card at shops, restaurants, & online
- Safer than carrying cash, your debit card is secure with a PIN number
- ATM — If you need cash, use your debit card at ATMs
- Fees — Avoid cheque-cashing fees at payday loan shops
- If you get benefits from more than one social assistance program, all benefits will be available on your Reloadable Payment Card or Direct Bank Deposit

Which payment option is best for you?

- For Direct Bank Deposit, you will need a bank account that allows withdrawals. Get the following information by calling your bank:

Institution Number	Branch Number	Account Number
_ _ _	_ _ _ _ _	_ _ _ _ _ _ _ _ _ _ _ _
3 digits	5 digits	7-12 digits

- If you do not have a bank account – and would not like to open one – you will need a Reloadable Payment Card instead.

I look forward to hearing from you,

<<CW>>
Caseworker, <<Program_Full>>
<<CWPhone_Number>>

Printer reference ID:<<id>>

Sample

Reloadable Payment Card (RBC) Payment Option

<<Office_Name_1>>
<<Office_Name_2>>
<<Street_1>>
<<Street_2>>
<<City>>, ON <<Postal_Code>>
<<CWPhone_Number>> <<Toll_Free>>

<<Date>>

<<MEMBERNAME>>
<<C_Street_1>>
<<C_UnitNo>><<C_POBox>>
<<C_City>>, ON, <<C_PostalCode>>

Your <<Program>> benefits are now available on a Reloadable Payment Card!

Dear <<FIRST>>:

It's time to get your <<Program_Full>> (<<Program>>) Reloadable Payment Card, a free debit card that replaces the hassle of collecting and cashing your <<Program>> cheques. **Please give me a call** when you get this letter and I can get you set up right away.

Ready to make the switch? Have questions?

Call **<<CWPhone_Number>>** and sign up today. No forms needed.

Now more than ever, I know getting your benefits safely and without delay is important. That's why <<Program_Full>> and the Royal Bank of Canada (RBC) are working together to give you your benefits on a Reloadable Payment Card. No more picking up cheques from the <<Program>> office or waiting for the mail. **Now your benefits will be available on your Reloadable Payment Card the last day of every benefit month.**

Why are my benefits now by Reloadable Payment Card?

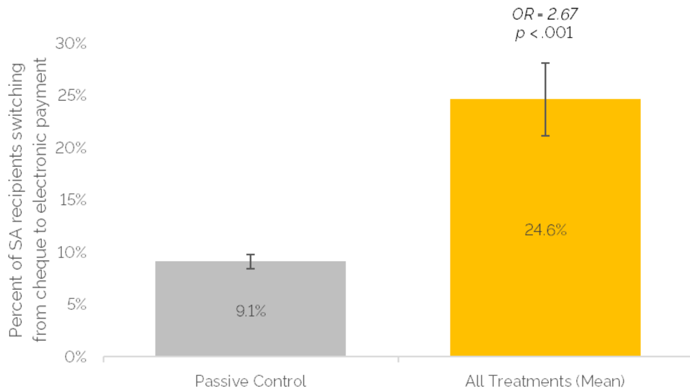
- Avoid waiting for your cheque at the <<Program>> office or in the mail
- Use your debit card at shops, restaurants, & online
- Safer than carrying cash, your debit card is secure with a PIN number
- ATM — If you need cash, use your debit card at ATMs
- Fees — Avoid cheque-cashing fees at payday loan shops
- If you get benefits from more than one social assistance program, all benefits will be available on your Reloadable Payment Card

I look forward to hearing from you,

<<CW>>
Caseworker, <<Program_Full>>
<<CWPhone_Number>>

Printer reference ID:<<id>>

Trial: A block-randomized controlled trial was conducted to compare over 12,000 clients assigned to receive one of the two BI communications either via email or letter to a passive control group that received no communications during the trial. Reminders were also sent to some clients in each BI condition. Data analysis revealed that receiving any BI communication nearly tripled clients' likelihood of switching from cheques (OR = 2.67, p <0.001) [7]. The BI communications are projected to more than double the number of people adopting e-payments when scaled, ensuring more SA clients can experience the enhanced security, safety and convenience of e-payments.



- Results on this graph were calculated using a binary logistic regression, controlling for SA program type, closed/active case status.
- OR refers to the odds ratio, a measure of how many more times likely a given outcome was for one group compared to another.
- Error bars represent 95% confidence intervals (CIs).

- Switch rates are **15.5 percentage points** higher among BI letter recipients (9.1% vs. 24.6%).
- This represents a **170% relative increase** and is statistically significant.

Scale: The BIU worked with MCCSS to scale the best-performing e-payment communication to 12,000 more clients receiving payment by cheque. While this scaling population included a new client group (clients with trustees) that was not part of the original trial, uptake of e-payment options increased from 0% at the time the scaling communications were sent, to 23.5% one month after receiving reminder communications.

1.2 Improving Program Uptake

Increasing COVID alert app Downloads (TBS, Cabinet Office (CAB), MOH; COVID-19 response)

Target: In response to the pandemic, many countries across the world, including Canada, adopted an anonymous exposure notification technology designed for

[7] OR refers to the odds ratio, a measure of how many more times likely a given outcome was for one group compared to another

iOS and Android mobile phones. Ontario was one of the first provinces to integrate this technology with its testing infrastructure, enabling app users to anonymously send and receive alerts between close contacts of someone who tested positive for COVID-19. Receiving an exposure notification could enable app users to take appropriate actions to self-isolate, monitor for symptoms and get tested, as appropriate. As the app can only detect contacts and share exposure alerts with other users, increasing adoption was set as a key objective for realizing the app's potential contribution to slowing the spread.

The app was launched first in Ontario on July 31, 2020. By the end of October 2020, only about 17% of Canadians in provinces where the app was available had downloaded it, and only some 5% of positive COVID-19 tests in Ontario had been reported through the app. The BIU partnered with communications teams in TBS, CAB, MOH to test whether behaviourally-informed social media messaging could increase the adoption and use of this app in Ontario.

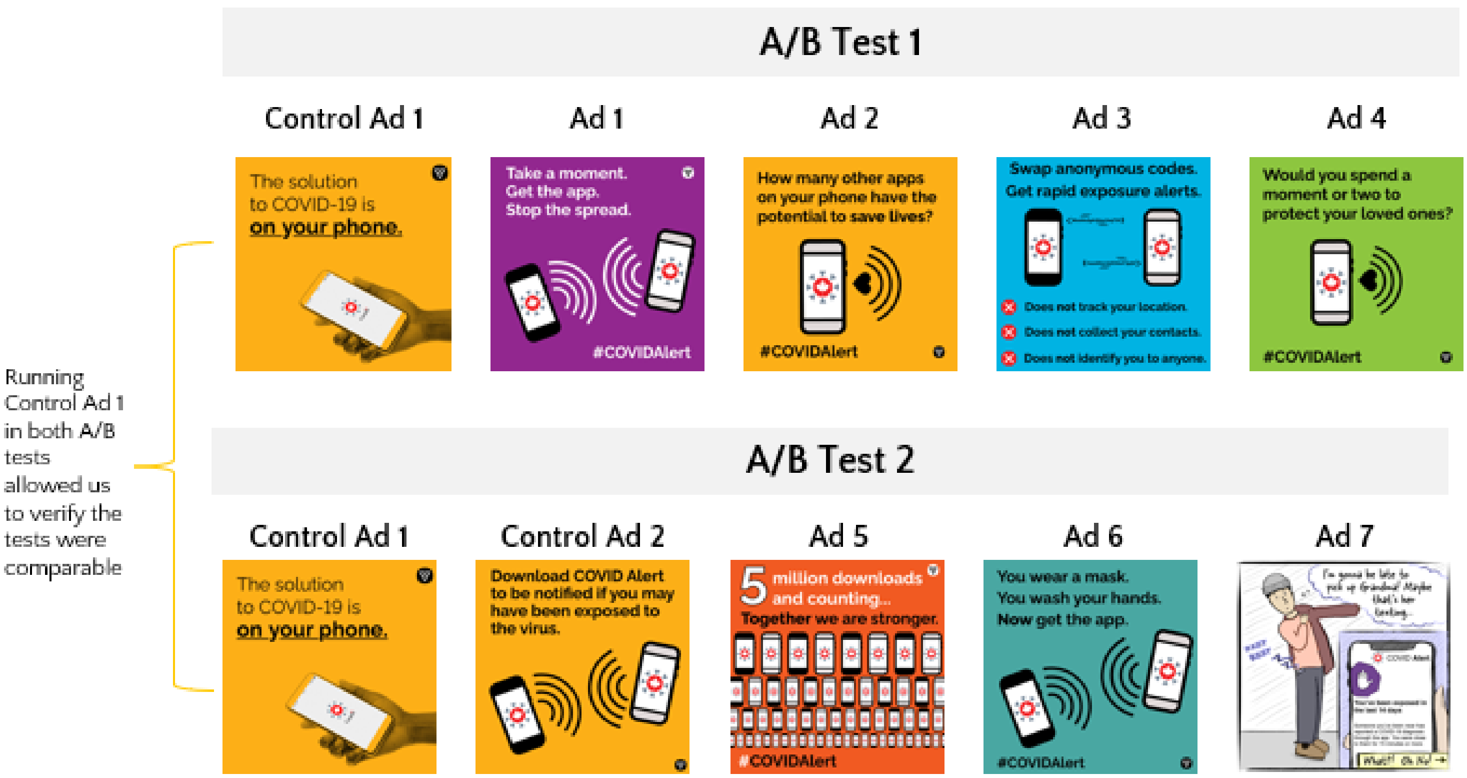
Explore: The BIU worked with Ontario Ministries and federal partners to better understand the existing behavioural journeys for Ontarians who sought to download the app, and for those who received a PCR test for COVID-19. The team found several potential barriers in the existing system that may keep people from a) downloading and using the COVID Alert app, and b) anonymously sharing their positive test result in the app to alert others of a potential exposure. These included awareness (e.g., of the app, of how to share a One Time Key (OTK) in the app), not understanding or believing that sharing one's positive test result in the app could slow the spread, bridging the intention-action gap (e.g., following through with uploading one's OTK in the app), and concerns about data privacy with the app.

Solution: Seven static-image ads were designed for social media platforms. Each ad made use of distinct hypotheses grounded in behavioural science theory applied to the barriers uncovered in the exploratory work:

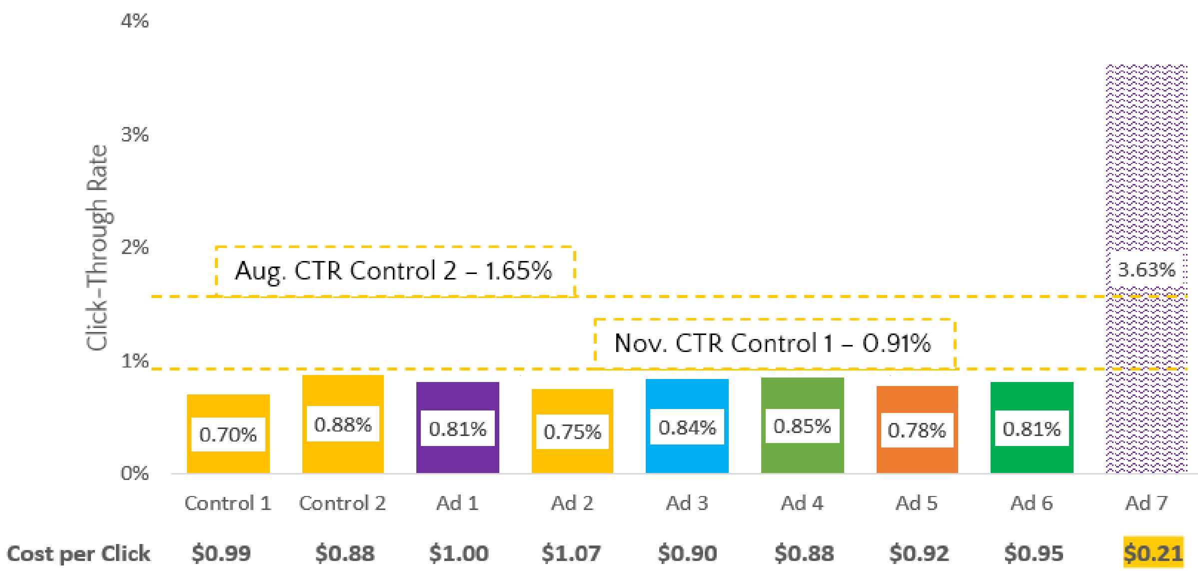
(1) Ad 1 focused on the ease and speed of getting the app.
(2) Ad 2 employed a contrast effect with other apps people have on their phones to enhance the sense of its relative value.
(3) Ad 3 attempted to counter privacy misconceptions about the app.
(4) Ad 4 encouraged people to think about the app's social value through its potential protective effects for loved ones.
(5) Ad 5 focused on a growing social norm of app adoption.

(6) Ad 6 strove to align app adoption as consistent with other widespread protective behaviours, namely mask wearing and hand washing.

(7) In contrast to the other six ads, Ad 7 consisted of multiple static images arranged on a carousel, through which social media users could swipe to reveal a graphic narrative. The graphic narrative told a short story of an app user who received an anonymous exposure alert, which helped him protect his loved ones, get tested, and then alert others. The hypothesized effect of the graphic narrative was to help clearly communicate the app's functionality, overcome optimism bias by making receiving an exposure alert easier to imagine, and attracting attention through using an uncommon ad format on social media platforms.



Trial: Due to platform restrictions limiting the number of ads that can be placed in a single A/B test, two A/B tests were run simultaneously. Both tests were run on Facebook and Instagram and displayed only to mobile phone users. To ensure that distributing the ads across two A/B tests did not confound results, one of the control ads was duplicated across both tests. The control ads were taken from ads that had been run by the Ontario government previously to promote app uptake. Over the course of one week, the ads in the two A/B tests were shown to 342,973 social media users. The tests revealed that Ad 7 was far more effective at encouraging social media users to visit the app store where they could download COVID Alert. Extrapolating from these findings, spending advertising money on Ad 7 was projected to increase app store visits by 157% compared to the same spend on control ads.



Scale: Since COVID Alert operated across Canada, and many similar apps were available in other countries, the results of this trial were shared with federal counterparts and the United Nations Innovation Network Behavioural Science working group.

Increasing Tax Filing by Ontarians with Low to Moderate Incomes
Toronto Employment & Social Services (TESS) and MCCSS

Target: The act of filing taxes provides major benefits to individuals with modest to low incomes by allowing them to access a wide array of federal and provincial tax benefits that can give a boost to their incomes. Tax filing is also often a requirement to qualify for other income-tested benefits delivered outside of the tax system. To increase tax filing rates, TESS offices have in the past provided their clients (and the general population) with access to free tax clinics that were hosted during income tax season. The BIU collaborated with TESS to assess whether behaviourally-informed email invitations could increase the number of eligible TESS clients who booked and attended tax clinic appointments.

Explore: TESS and the BIU created a behavioural map of the TESS client journey and uncovered several potential barriers to tax filing. Present bias could have been causing clients to overestimate the transaction costs associated with immediate filing relative to any financial benefits received in the future. Clients may also be influenced by the mistaken belief that tax filing is more likely to result in them owing money than in receiving refunds and benefits. Typically, TESS clients receive a broadcast email promoting TESS tax clinics, which provides specific information about the client's nearest TESS clinic. The team hypothesized that emails which framed information about tax clinics in a psychologically-motivating manner might increase interest in the service.

Solution: The project team designed a behaviourally-informed tax clinic invitation email, which was tested against the 'status quo' broadcast email in 2020. The behaviourally-informed email included a salient subject line ("Are you eligible for $1000s in extra benefits and tax refunds?"), a visually simple layout, clear instructions, and a social proof statement referencing the more than 5,000 people who accessed the tax clinics last year, including the average value of their refunds and benefits.

Sample

Need help filing your 2018 income tax return?

Even if you didn't earn any income, you could get money back or receive Ontario tax credits and benefits.

At no cost, you can get help with your tax return from trained volunteers.

You may be eligible if you have a modest or no income, a simple tax situation and your income last year was less than the following income levels:

1 Person $35,000
2 Person $45,000
3 Person $47,500
4 Person $50,000
5 Person $52,500
More than 5 $52,500 plus $2,500 for each additional person

Attwell Income Tax Preparation Clinic:
220 Attwell Dr., Unit 4
Clinics offered: March 1 to May 31, 2019

Monday to Friday
10 a.m. to 2:30 p.m.

To book an appointment, call (name) at 416-392-6408.

Sender: Toronto Employment and Social Services toemployss@toronto.ca>
Subject: Are you eligible for $1000s in extra benefits and tax refunds?

As an Ontario Works client, we want to make sure you receive *all* the benefits you're entitled to. Did you know that as an Ontario Works client, you could receive **hundreds or thousands of dollars** in additional benefits and refunds simply by filing your taxes?

Volunteers at our **free tax clinics** are here to help you file – it only takes about **45 minutes**. Trained volunteers will be at the <<location>> Employment and Social Services Office starting on **March 1st**.

Spots in our tax clinics fill up quickly—book your appointment today.
Call the <<location>> Employment and Social Services Office at

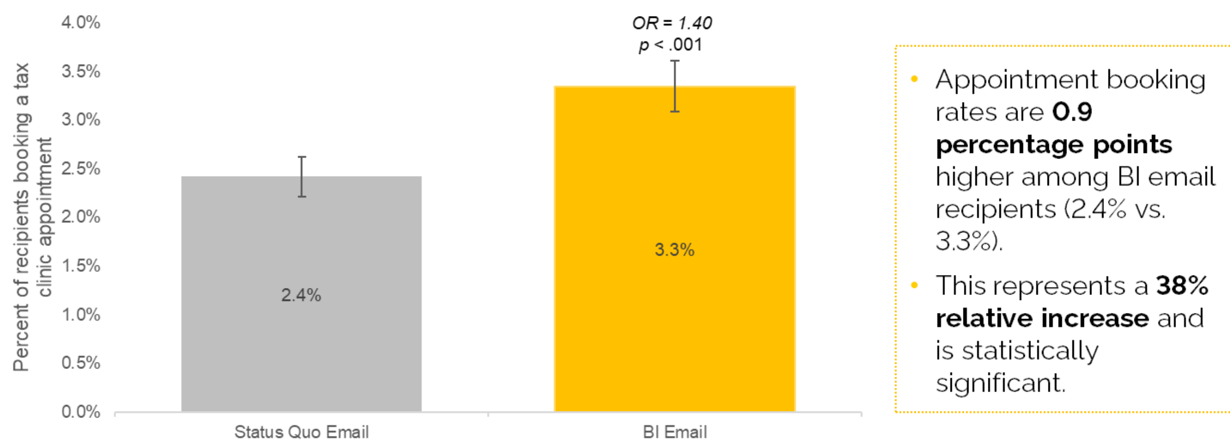
(416)<<office_number>>

Last year we helped over 5,000 people at our tax clinics receive on average $413 in tax refunds and $4,328 in benefits. We look forward to seeing you at a tax clinic this year!

Toronto Employment and Social Services

Trial: Over 41,000 TESS clients were sent one of the two email versions. Appointment booking rates and attendance rates were then tracked over the following weeks. Unfortunately, due to the COVID-19 pandemic, TESS tax clinics taking place after March 16, 2020 were cancelled as a result of public health measures, so many clients who booked appointments did not have the opportunity to attend them. Appointment booking rates were 0.9 percentage points higher among BI email recipients (2.4% vs. 3.3%). This represented a 38% relative increase, which is statistically significant.

Across people who booked appointments, the type of email received did not significantly affect appointment attendance rates, which were 57% for the status quo email recipients and 56% for the BI email recipients.



- Results displayed on this graph were calculated using a binary logistic regression.
- Error bars represent 95% confidence intervals (CIs).

Scale: The BIU projected that when scaled to the entire eligible TESS population, this email could lead to 1,359 appointments being booked for tax filing support, allowing TESS clients to access $3.6M of tax benefits and refunds (227 more appointments attended and $1.1M more in funds than could be expected if the status quo broadcast email was used). TESS adopted the behaviourally-informed email as their new broadcast version and has adopted this approach to successfully promote income tax clinics during subsequent tax seasons.

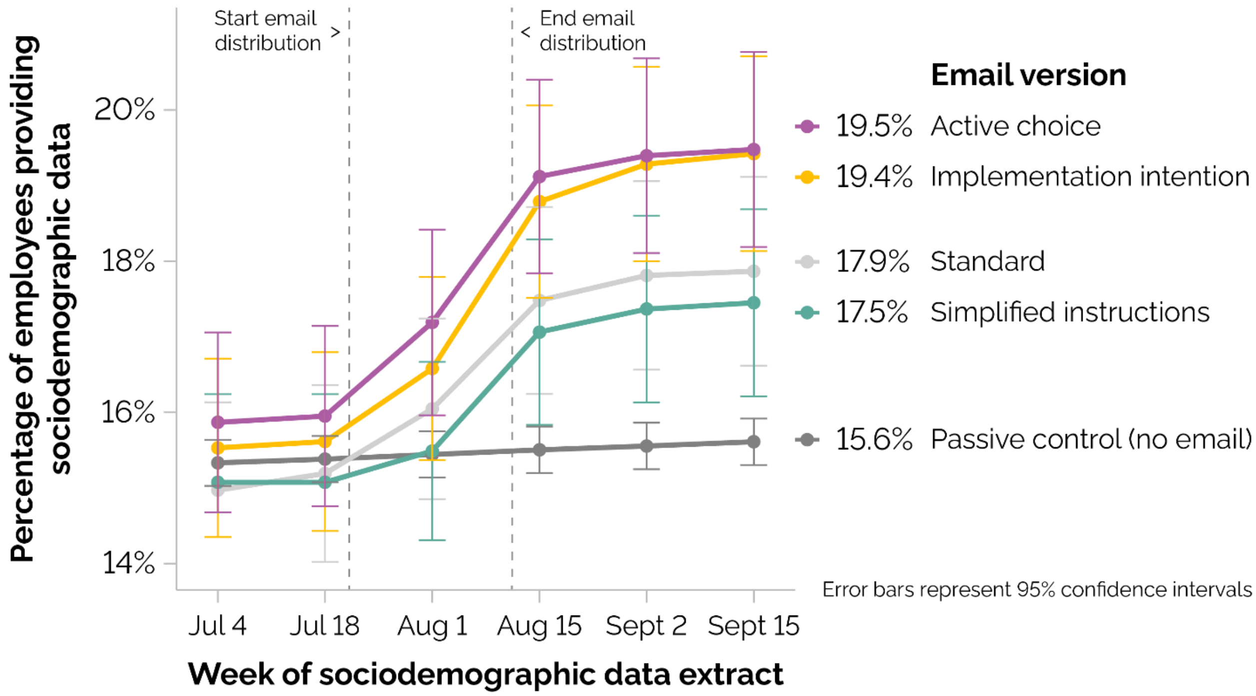
Increasing Socio-Demographic Data Collection Among OPS Employees
Treasury Board Secretariat (TBS)

Target: The Ontario Public Service (OPS) is committed to creating an inclusive, diverse, equitable, anti-racist and accessible workplace that is free from all forms of discrimination. The OPS Leadership Pledge (Commitment #4) commits the OPS to proactively identify and address systemic employment barriers with a focus on continuing to improve recruitment, promotion, and career development systems, as well as workplace culture. To facilitate these efforts, the OPS launched an organization-wide effort to collect socio-demographic data through the OPS Human Resources portal WIN to understand how different socio-demographic groups are represented in the workforce and progress through their careers. Analysis of this data will point to potential systemic employment barriers that some groups may be facing and is critical in understanding and evaluating efforts to address them. As part of the initial launch in the late fall of 2020, a behaviourally-informed communications approach was applied to encourage all OPS employees to voluntarily provide their socio-demographic data in WIN. Following a positive initial response from employees, the BIU re-engaged with the Inclusive Diversity Office (IDO) and Enterprise Workforce Analytics (EWA) at TBS to develop targeted, evidence-based strategies to further promote employees' participation in socio-demographic collection through the application of behavioural insights.

Explore: To better understand the context of socio-demographic data collection in the OPS and identify behavioural barriers that may keep employees from providing their socio-demographic data, IDO, EWA, and the BIU created a behavioural map that outlined the user journey. Based on this map, several behavioural barriers were identified, including a general lack of awareness, limited attention span, prospective memory failure, inertia, overvaluation of upfront costs in terms of time and effort, and the hassle of accessing and interacting with the HR platform WIN.

Solutions: Based on the insights from the Explore stage, the project team designed three BI-informed emails that used salient formatting, personalization, clear instructions, a reaffirmation of confidentiality, and a trusted messenger to encourage action. In addition to this base BI design, the *Simplified Instructions* email gave simple instructions on how to provide data, emphasizing in particular the low time commitment to address employees' overvaluation of upfront costs in terms of time and effort. The *Implementation Intention* email, in turn, tied the action of providing socio-demographic data to another, already familiar action employees would regularly have to complete in WIN, namely, to confirm their monthly attendance. This link between a new and a routine behaviour aimed to target prospective memory failure and reduce friction costs by encouraging employees to create a mental note, or implementation intention, that would remind them to enter their socio-demographic data the next time they access WIN to confirm their attendance. The *Active Choice* email prompted employees to make an active choice between two options in support of equity: (1) provide socio-demographic data, or (2) learn more about the socio-demographic data collection program. Aiming to target inertia, this email design decreased the salience of inaction as a potential option and created a greater sense of responsibility by nudging employees to reflect on their preferences. Complementing the three BI email designs, a fourth *Standard* email was designed based on the original communications that supported the launch of socio-demographic data collection in WIN. This design acted as a business-as-usual communication against which the BI emails could be compared.

Trial: A pre-registered randomized controlled trial was conducted to assess and compare the effectiveness of emails in encouraging OPS employees to provide their socio-demographic data. Across the OPS, 15,000 employees were randomly selected by EWA to receive one of the four email versions. The remaining ~55,000 employees served as a passive control group that received no email. To test the extent to which the timing of emails would impact participation in socio-demographic data collection, emails were sent out evenly across conditions over a 15-day trial period, starting approximately a week before the end of the month and ending approximately a week after the beginning of the following month. Data analysis revealed that employees who received an email encouraging them to provide their socio-demographic data in WIN were up to 25% more likely to share their data than employees who received no email. The exact content and timing of emails made no difference in employees' participation rates.



Scale: Building on the findings from the trial, the BIU is working with IDO and EWA on scaling emails across the OPS population to encourage employees to participate in socio-demographic data collection. The project team is also exploring additional measures that could draw employees' attention to socio-demographic data collection and reduce the friction costs of participation.

1.3 Ensuring Compliance

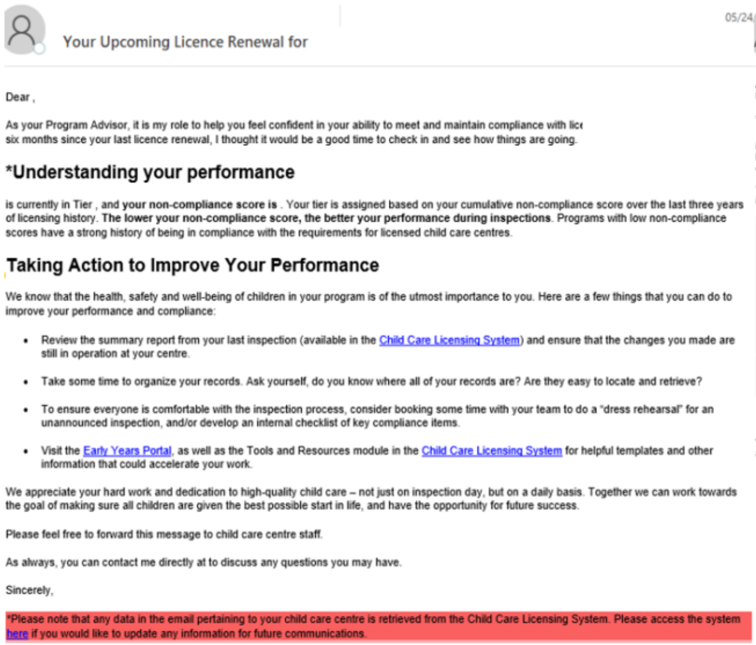
Increasing Health and Safety Compliance Amongst Child Care Centres Ministry of Education (EDU)

Target: Licensed child care programs in Ontario must meet and maintain specific provincial standards. These standards are in place to ensure the health, safety, and quality experiences of children. The BIU partnered with the EDU to try to increase compliance within child care centres, working under the assumption that increased compliance with Ontario regulations improves standards of child care in Ontario.

Explore: The EDU conducts annual unannounced inspections of child care centres, using a 426-item safety inspection checklist and ranks centres in one of three tiers indicative of their compliance with regulations. Data available when the project was launched indicated that approximately 95% of child care centres are noncompliant with at least one checklist item, and 44.4% of centres have a non-compliance with 15 or more items. While centres rate health, safety and experience of children as their top priority, semi-structured interviews with representatives from seven different care centre organizations revealed that child care centre staff may face barriers to increasing their compliance scores. Most representatives report feeling nervous on the day of the inspection and that the connection between their inspection score and tier placement is not clear. Centres also report that perceived difficulties in achieving Tier 1 placements (requiring a non-compliance score of 0.5 or less) can be demotivating. A behavioural map of the child care centre registration and inspection process also revealed that procrastination, present bias and an inability to accurately evaluate the performance of other comparable centres (lack of social benchmarks) might present further barriers to improving a centre's compliance scores.

Solution: The project team designed three different emails to prompt child care centres to engage in behaviours that would increase their compliance. The first email was a simple personalized reminder addressed to the child care centre licensee and operator. It included information on the tier system, advice on how to improve the centre's ranking and clear actions to take prior to the next inspection. The second email included all the information in the first, as well as a graph showing how the non-compliance score of the centre compares to the average and top 20% of centres in their region (social benchmarking). The third email included all the information in the second plus a link to an anonymous self-evaluation survey. The survey consisted of 10 questions reflecting the BIU's analysis of the most common non-compliance issues amongst child care centres.

Sample



05/24

Your Upcoming Licence Renewal for

Dear ,

As your Program Advisor, it is my role to help you feel confident in your ability to meet and maintain compliance with lic
six months since your last licence renewal, I thought it would be a good time to check in and see how things are going.

***Understanding your performance**

is currently in Tier , and **your non-compliance score is** . Your tier is assigned based on your cumulative non-compliance score over the last three years of licensing history. **The lower your non-compliance score, the better your performance during inspections**. Programs with low non-compliance scores have a strong history of being in compliance with the requirements for licensed child care centres.

Taking Action to Improve Your Performance

We know that the health, safety and well-being of children in your program is of the utmost importance to you. Here are a few things that you can do to improve your performance and compliance:

- Review the summary report from your last inspection (available in the Child Care Licensing System) and ensure that the changes you made are still in operation at your centre.
- Take some time to organize your records. Ask yourself, do you know where all of your records are? Are they easy to locate and retrieve?
- To ensure everyone is comfortable with the inspection process, consider booking some time with your team to do a "dress rehearsal" for an unannounced inspection, and/or develop an internal checklist of key compliance items.
- Visit the Early Years Portal, as well as the Tools and Resources module in the Child Care Licensing System for helpful templates and other information that could accelerate your work.

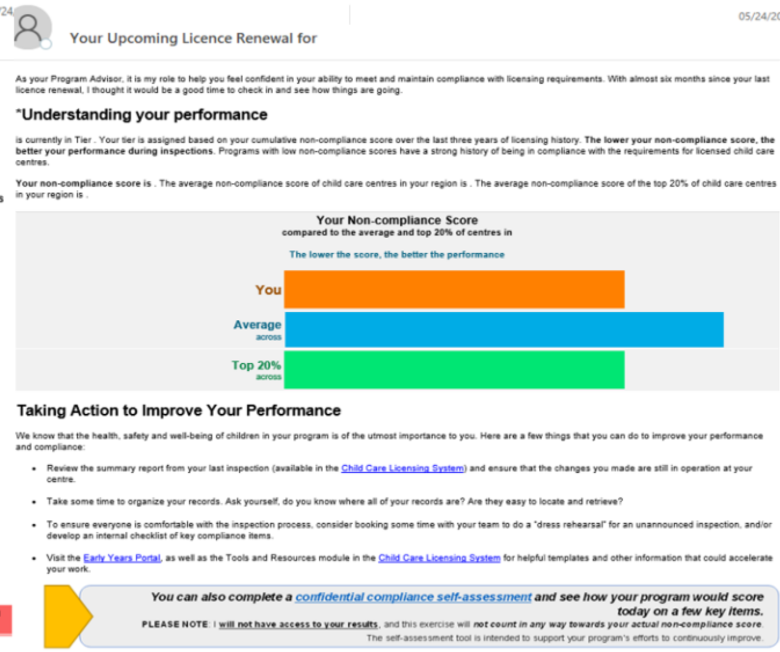
We appreciate your hard work and dedication to high-quality child care – not just on inspection day, but on a daily basis. Together we can work towards the goal of making sure all children are given the best possible start in life, and have the opportunity for future success.

Please feel free to forward this message to child care centre staff.

As always, you can contact me directly at to discuss any questions you may have.

Sincerely,

*Please note that any data in the email pertaining to your child care centre is retrieved from the Child Care Licensing System. Please access the system here if you would like to update any information for future communications.



05/24/20

Your Upcoming Licence Renewal for

As your Program Advisor, it is my role to help you feel confident in your ability to meet and maintain compliance with licensing requirements. With almost six months since your last licence renewal, I thought it would be a good time to check in and see how things are going.

***Understanding your performance**

is currently in Tier . Your tier is assigned based on your cumulative non-compliance score over the last three years of licensing history. **The lower your non-compliance score, the better your performance during inspections**. Programs with low non-compliance scores have a strong history of being in compliance with the requirements for licensed child care centres.

Your non-compliance score is . The average non-compliance score of child care centres in your region is . The average non-compliance score of the top 20% of child care centres in your region is .

Taking Action to Improve Your Performance

We know that the health, safety and well-being of children in your program is of the utmost importance to you. Here are a few things that you can do to improve your performance and compliance:

- Review the summary report from your last inspection (available in the Child Care Licensing System) and ensure that the changes you made are still in operation at your centre.
- Take some time to organize your records. Ask yourself, do you know where all of your records are? Are they easy to locate and retrieve?
- To ensure everyone is comfortable with the inspection process, consider booking some time with your team to do a "dress rehearsal" for an unannounced inspection, and/or develop an internal checklist of key compliance items.
- Visit the Early Years Portal, as well as the Tools and Resources module in the Child Care Licensing System for helpful templates and other information that could accelerate your work.

You can also complete a confidential compliance self-assessment and see how your program would score today on a few key items.
PLEASE NOTE: I **will not have access to your results**, and this exercise will ***not count in any way towards your actual non-compliance score***.
The self-assessment tool is intended to support your program's efforts to continuously improve.

Trial: 3,235 Tier 2 and Tier 3 child care centres were randomly assigned to receive one of the three behaviourally-informed emails or to serve as a passive control and region, and centres belonging to the same parent organization were clustered into the same treatment condition to avoid spill-over effects. A total of 6,470 emails were sent to the licensees and operators of the child care centres from late 2018 to September 2019. Child care centre licensees and operators received emails at the start of a six-month window during which they were eligible for an unannounced annual renewal inspection. No significant differences between control and treatment conditions were observed.

1.4 Improving Health and Safety

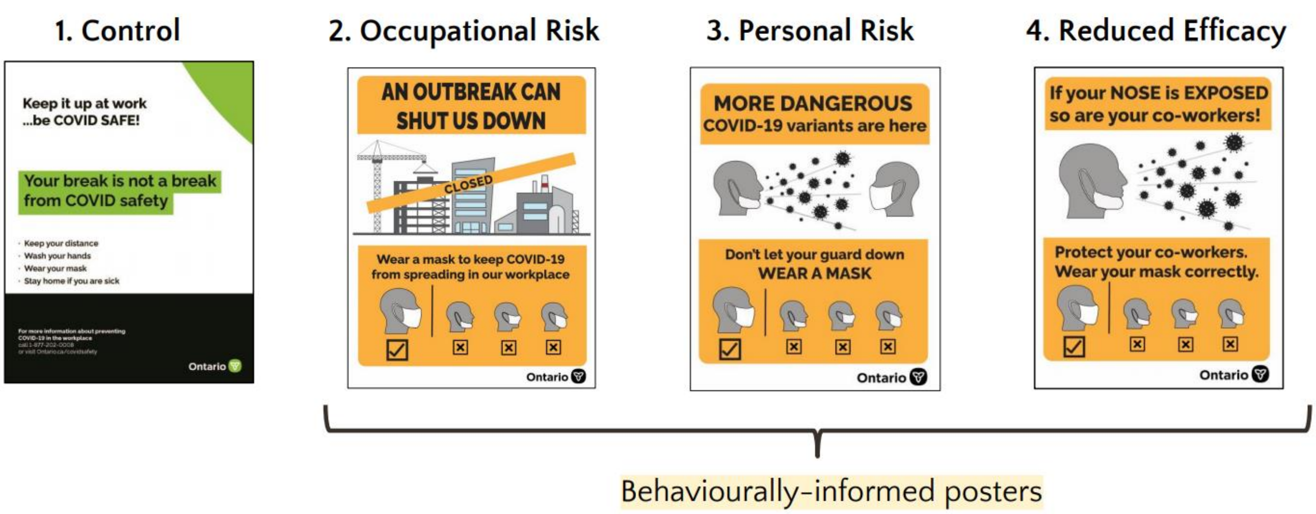
Increasing COVID-Safety in Workplaces (Masking Survey)
Ministry of Labour, Immigration, Training and Skills Development (MLITSD)

Target: The COVID-19 pandemic significantly increased health and economic risks for Ontario's workers. As part of Ontario's pandemic response, MLITSD supported safety campaigns to educate and enforce COVID-19 health and safety requirements amongst workers. MLITSD and the BIU partnered on an experimental survey to learn more about people's understanding, values, beliefs, and attitudes on COVID-19, especially around mask wearing, to improve workplace safety and stop the spread of COVID-19 in workplaces across Ontario. It is important to note that this project was initiated in early 2021, a point in the pandemic when the response and evidence were still evolving rapidly and that preceded some of the government activities to curb the spread of COVID-19, including vaccine rollout.

Explore: A jurisdictional scan of public health and workplace measures implemented, and a review of the emerging behavioural science literature on barriers to mask use (and compliance with other public health measures) informed the decision to conduct a survey of Ontario workers.

Solutions: The project team designed a survey to gather information from workers about three key topics: messaging, motivations, and risk perception and behaviours. The first section of the survey used randomization to expose respondents to one of four workplace messaging posters. The survey would later assess respondents' recall of the key poster message~~s~~ which was used to understand which approach might be most effective in shifting beliefs and attitudes about mask wearing in workplaces. Other questions in the survey sought to assess understanding, motivations, and beliefs related to mask use, as well as general behaviours and risk perceptions in the context of the COVID-19 pandemic.

The posters that were tested in the experiment portion of the survey included a control poster that was one of the existing downloadable resources on the ministry website. Three additional behaviourally-informed posters were designed by the BIU to test key messages encouraging mask use.



All three behaviourally-informed posters employed the same clear, simple visual guide to support effective mask-wearing behaviour. The amber colour used on these workplace posters is both eye-catching (salient) and is associated with warnings or danger – intended to prime the reader for an important message.

The difference between these three posters was in the messaging, with the framing of each being designed to focus on a specific aspect of the threat posed by COVID-19 and to appeal to related motivations.

The *Occupational Risk* framing leveraged social norms such as the responsibility to act against a common threat (COVID-19) and the personal threat from the virus (both health and economic), as well as highlighting the novel threat of having one's workplace shut down.

The *Personal Risk* framing also leverages the attention-getting power of a novel threat by referring to emerging and more dangerous viral variants, as well as appealing to the motivations of infection anxiety or disgust (through the poster's visuals). This poster also drew on evidence that people are motivated to take action when they perceive a risk of infecting others.

The *Reduced Efficacy* framing leverages both the infection anxiety/ disgust motivation as used on the Personal Risk poster, as well as the social norms/ responsibility motivation of the Occupational Risk poster. In addition, this poster used a playful slogan ("If your NOSE is EXPOSED so are your co-workers!") to capture attention and make the instructions on correct mask use (i.e., not exposing your nose) more memorable.

Trial: The approximately 60-question, confidential survey was answered by 1,359 workers across 10+ key sectors of interest. Analysis of the survey responses revealed several key findings. Overall, the behaviourally-informed posters were more memorable, impactful, and easier to understand than the existing poster. In addition, survey analysis suggested that social context in the workplace drives worker behaviour. For instance, beliefs about social norms were the best predictor of mask wearing behaviour. Respondents reported that they complied with guidelines to protect their colleagues and family members. Importantly, the analysis also suggested that people may underestimate the risks of transmission – and therefore the need for masking or other protective measures – during certain types of activities, such as sharing rides in vehicles and while eating meals within six feet of each other.

Scale: The results of the survey focused on mask wearing in the workplace, which at the time of reporting remained an important policy objective. However, the project team observed that much of the report's advice could be applied to other related domains such as the promotion of other workplace health and safety practices and vaccine uptake as well as to other types of setting such as community and social organizations and events.

2.0 High Touch Advisory

2.1 Ensuring Compliance

Improving the Cemetery Closures Process
Ministry of Public and Business Service Delivery (MPBSD)

Target: In Ontario, a cemetery cannot be closed without submitting an "Application to Close a Cemetery (or Part of a Cemetery)" to the Registrar responsible for burial sites under the Funeral, Burial and Cremation Services Act (2002) (the Registrar) for approval. Despite ongoing efforts by the Ministry of Public and Business Service Delivery (MPBSD) to provide guidance and reduce administrative burdens, the submission of complete, high-quality applications remains a challenge for applicants. In most cases, the application must be returned two to three times before all required information is correctly submitted, which impacts timely processing of the form and has negative impacts on the citizen experience with the application process. The Registrar identified that most applicants are senior citizens who are active members of the religious community seeking to close the cemetery in question – meaning that this interaction with the Government of Ontario was often fraught with complex feelings around the loss of or significant changes to their religious community. In addition, while the Registrar currently receives only about 4-6 new applications annually, MPBSD anticipates the volume of requests to increase alongside land development projects in more rural areas of the province, as a cemetery must be officially closed and severed from a church property before private sale of the property can occur. Although the scale of the behavioural challenge was too small to conduct a pilot project, the BIU identified the potential impact for the Registrar and Ontarians seeking to close a cemetery to be significant. MPBSD and the BIU collaborated to better understand what barriers are leading to the submission of incomplete forms and to identify potential solutions to address these barriers.

Explore: The project team employed several methods during their exploratory research to better understand the potential barriers and bottlenecks that hinder Cemetery Closure applicants' submission of timely and complete applications. The BIU conducted a literature scan that focused on the challenges of form completion and decision-making among an elderly client population. In addition to creating a behavioural map of the client journey to closing a cemetery, the team conducted a behavioural audit of the existing form. The team also employed qualitative methods to gather and analyze primary and secondary data from these clients through one semi-structured interview, an email questionnaire and thematic analysis of client correspondence with the Registrar. This in-depth research allowed the team to confirm aspects of our theory of behaviour, highlight unanticipated issues, multi-level barriers and potential solutions, and gain a deeper understanding of the motivations and pre-existing assumptions surrounding the cemetery closure process.

> We had to close off the church portion of the property from the cemetery because the trustees are the owners of the whole property, which include the cemetery and the church property. I mean, we always thought the cemetery was cemetery and the church property was the church property.
>
> \- Cemetery closure client

> At the beginning I couldn't understand it – but I think that the more I go through this process, I believe the real reason for the closure is that the Ministry wants to make sure that this cemetery that's left is looked after. Like having a fence around it, so that people that are next door don't encroach on the cemetery, and so on. Also, who's going to look after the ownership and maintenance of the cemetery in the future. So, I do see the purpose of it.
>
> \- Cemetery closure client

Advice: The team identified three key themes from the qualitative research that informed the BIU's behavioural advice to MPBSD. These key themes highlighted that there were in fact many different actors and entities involved in the process besides the Registrar at MPBSD. Before the applicant ever connected with the Registrar, they may have already sought advice from the Bereavement Authority of Ontario, their municipality or township, the religious institution that has ownership over the cemetery (e.g., local parish, church or diocese), a licensed professional archaeologist, legal advisors, and potential property buyers. Often, applicants felt caught in the middle, receiving sometimes conflicting information, advice and decisions from these different parties. A second key finding was that clients felt that there was a lack of guidance in the process, resulting in many – sometimes costly – surprises and frustrations. Applicants' first encounter with the Registrar and application may occur well after the process has begun, with the result that most do not have a clear overview of the various requirements, length of process and potential costs associated with closing the cemetery. A final key theme that emerged from this research was that despite applicants' potential frustration with the process, the Ministry's goal to "preserve the quiet, dignity and good order" of the cemetery aligns with their own goals of supporting their community.

Bringing a BI-lens to how the team came to understand the behavioural context for cemetery closures allowed the BIU to recommend several solutions to address key barriers faced by applicants. These included: 1) proactively providing comprehensive Guidance Documents to support religious organizations and other community stakeholders before they engage in the closure process; 2) providing applicants with more personalized advice early on in the process; and 3) creating supports to so that applicants avoid common errors. MPBSD plans to take this advice into consideration as the Registrar seeks to modernize the cemetery closure process.

Increasing Jury Pool Participation in Ontario
Ministry of the Attorney General (MAG)

Target: Serving as a juror is both a civic duty and an important component in ensuring fair trials under Ontario's justice system. Under the Juries Act, the MAG mails out a juror eligibility survey each year to randomly selected individuals to identify potential jurors. Although completion of the questionnaire is mandatory under the Juries Act, response rates have historically been well below 60%. In addition, maintaining an adequately filled jury pool by mailing and processing hundreds of thousands of questionnaires incurs considerable expense to MAG.

Explore: The project team created a behavioural map to understand the context and identify potential opportunities to motivate questionnaire completion and submission and conducted a behavioural audit of the existing jury package which comprises a Juror Survey Envelope, Letter, Instructions and Questionnaire Form.

Advice: The team provided recommendations on enhancements that could be made to the Jury Survey Envelope, Questionnaire Form and accompanying instructions. Recommendations comprise annotating the first touchpoint prospective juror receive, the Jury Survey Envelope, with text to prompt action, and simplifying and clarifying the contents of both the Questionnaire Form and Instructions. The BIU also recommended modifying the Instructions to include Frequently Asked Questions and highlighting salient contact information should the recipient have additional questions. MAG implemented the behaviourally-informed materials in July 2020. As a second phase to this work, the BIU provided recommendations to increase jury questionnaire responses via online submission by removing paper questionnaires, highlighting salient information and inclusion of a QR code. MAG implemented the behaviourally-informed materials in August 2023.

Increasing Case Processing Efficiency
Centre for Forensic Sciences (CFS), part of the Ministry of the Solicitor General (SOLGEN)

Target: The CFS conducts scientific investigations in cases involving injury or death for crimes against people or property. Staff at the CFS conduct analyses on forensic evidence following its submission by clients that include police, coroners, and other official investigators. Submissions are received through a dedicated CFS Case Submission Portal. As a result of significant demand for services, the number of submissions has increased significantly: 52% in Toxicology Section, 97% in Firearms Unit (since 2015) and by 300% in Biology Section in the past ten years. Relatedly, the turnaround time required for all analyses has also increased leading to a backlog of cases as capacity continues to outstrip demand. The CFS and the BIU explored the feasibility of making subtle, low-cost changes to the Evidence Submission Portal and associated processes to increase the efficiency of case processing.

Explore: Exploratory research for this project involved several activities. The CFS facilitated demonstration sessions on the CFS Case Submission Portal and supplied the BIU with handbooks and other documents to review. These included background materials, demos, access to staff/systems, the Web Submission

Portal, and related data. The BIU then participated in a mapping session and solutions workshop where they provided feedback on potential barriers and solutions. A focus group with CFS Scientists was also conducted by the BIU. They discussed trends in case submissions and completed a literature scan on the application of behavioural insights to digital services and test ordering. BIU also conducted a ‘behavioural lensing session’ to identify target behaviours for the submitter audience.

These exploratory research activities generated a variety of insights. First, submitters do not receive feedback on their use of CFS resources through testing, and do not bear the costs of the analysis requests they submit. The lack of feedback, combined with pressures for developing a strong case for litigation purposes, creates an incentive to request more analyses rather than fewer. Second, submitters are not prompted to review the entered case information, or analysis requests, before completing their entry. The lack of a formal review stage could lead to incomplete submissions and longer review timelines.

Advice: The BIU used the insights gleaned from this exploratory research to design a set of solution recommendations for CFS’s consideration. These recommended solutions included: 1) Adding costing information for tests ordered, so that submitters are more aware of the resources required to process their requested analyses and a review submission button that includes all ordered analyses as well as the total cost for CFS to run them, 2) Using enhanced active choice to prompt submitters to allow CFS scientists to cancel subsequent analyses if sufficient proof has been established in through previous tests, and 3) Reconfiguring a critical page on its Web Submission Portal to ensure greater prominence of a regularly utilized analytical service.

2.2 Shift to Online

Supporting Online Appointment Booking
Ministry of Public and Business Service Delivery (MPBSD)

Target: Like many government services, the Archives of Ontario (part of MPBSD) was initially closed to the public as part of Ontario’s public safety response to the COVID-19 pandemic. To support the plan to re-open, the Archives planned to change their service delivery model from a largely walk-in service to an appointment-only system to ensure staff and client safety during the COVID-19 pandemic. The Archives sought to leverage this unique opportunity to introduce a virtual reference interview system into its service delivery model to modernize service delivery and improve client experience. The reference interviews would allow Archives staff to work with clients to determine whether an in-person visit of the client to the Archives is necessary and if so, allow staff to prepare the requested archival holdings prior to the client's visit to reduce waiting times and minimize in-person interactions. The Archives partnered with the BIU to anticipate and mitigate potential behavioural barriers to the adoption of this digital approach. While the circumstances and potential sample size meant that a pilot project was not possible, the BIU identified this as an important opportunity to support Ontario's pandemic response and embed human-centred design into ongoing modernization efforts.

Explore: The project team created a behavioural map of the current and proposed service delivery experience to understand potential barriers and bottlenecks clients face in accessing the Archives. A literature scan pointed to common capabilities, opportunities, and motivational barriers that might impact the shift to the Archives' online appointment-based service delivery model, and potential solutions that have worked in similar contexts/ jurisdictions. In addition, the team conducted nine semi-structured interviews that yielded in-depth information from selected Archives' clients to gain a better understanding of how clients use the Archives, communicate with staff, and their expectations for service delivery. For the team's exploratory research, interviewees were habitual, long-time users of the Archives (n=6) and former/ new Archive Ontario (AO) staff who were not current users of the AO, but familiar with archival research (n=3). This research allowed the team to confirm aspects of our theory of behaviour, highlight unanticipated issues, barriers and potential solutions, and gain a deeper understanding of the context in which clients access the Archives and its services. Through these interviews, the team was able to develop user personas to help understand the different types of Archives clients (from frequent to lighter or new users, and the range of professional and personal or hobby users). These personas helped the team to frame and understand these users' different challenges and concerns around return of service and the proposed online booking system.

User Profile	Top Considerations/ Concerns
Heavy User, Personal (James)	• Willing to make changes to return to the AO; very familiar with website and/or catalogue • Interested in accessing frequent appointments to "catch up" on their research projects
Occasional User, Personal (Delilah)	• May like to have a longer appointment timeslot and to book several weeks in advance
Heavy User, Professional (Aliyah)	• Working to external deadlines means they may need multiple consecutive appointments or to book an impromptu follow-up the next day for an effective research visit
International User, Academic (Bjørn)	• Needs a longer time window to support research trip planning (3-6 months in advance) • May need multiple, consecutive appointments for an effective research visit
New User, Student (Patricia)	• May be familiar with using libraries, digital archival materials, but still need one-to-one support to successfully navigate in-person materials and database
First-time Visitor / Non-User (Chris)	• Doesn't know where to start • Might not understand time commitment, how to order materials in advance, or that an appointment is required

Advice: The BIU adopted a multi-phased approach to providing advice to the Archives. Initially, the team provided general advice drawn from behavioural science principles and a behavioural audit of the existing website and phone system. In the second phase, the team provided more tailored advice building on the findings from the team's in-depth qualitative research. The Archives of Ontario has implemented much of the BIU's evidence-informed advice in the development and launch of their online appointment booking system.

3.0 Projects Underway

The Ontario BIU continues to work with our cross-ministry partners on several exciting BI opportunities. In addition to some of the other projects in our pipeline, here are a few that are currently underway:

Increasing Apprenticeship Completion (MLITSD): The BIU is partnering with MLITSD to evaluate whether changes to the communication and administration for the two financial incentives available as part of the Skilled Trades Strategy, can increase uptake of these incentives. The goal is to encourage apprentices to complete their Certificate of Apprenticeship. Results expected spring 2023.

Increasing *Provincial Offenses Act* (POA) Fine Collection 2.0 (MAG): The MAG and BIU are iterating on the findings reported from our trial on increasing POA compliance with York Region (see the 2020 Update Report for details), to research factors that affect compliance with court-ordered penalties. This project will investigate whether some municipal Provincial Offences Courts' existing practices may be associated with higher compliance rates than those observed in other municipal Provincial Offences Courts, and whether novel collection methods can be designed to increase POA fine collection rates for Municipal Partners.

4.0 BI Upstream: Ontario's COVID-19 Response

One of the logistical challenges of applying BI early in the policy or program development cycle is the ability to test our hypotheses in the field. This is where the BIU's Advisory Services can play a role by applying a BI-lens upstream, even when testing solutions is not feasible. The BIU's role supporting the province's COVID-19 pandemic response provides a good example of this. This body of work demonstrates how a BI-lens can play a role in solving some of Ontario's policy challenges. In this context, BI can identify and avoid potential barriers when building new programs and services, as well as reduce bureaucratic hurdles for internal-to-government operations and processes.

During the COVID-19 pandemic the BIU was actively involved in providing our best advice through participating in the Behavioural Science Working Group that provided input to Ontario's COVID-19 Science Advisory Table.[8] Through this working group, the BIU contributed to several Science Briefs, providing advice based on behavioural science principles to help stop the spread of COVID-19:

- Behavioural Science Principles for Supporting COVID-19 Vaccine Confidence and Uptake Among Ontario Health Care Workers (March 5, 2021)
- Behavioural Science Principles for Enhancing Adherence to Public Health Measures (April 22, 2021)
- Strategies to Support Ontarians' Capability, Opportunity, and Motivation for COVID-19 Vaccination (June 23, 2021)
- Behavioural Science-Informed Strategies for Increasing COVID-19 Vaccine Uptake in Children and Youth (October 26, 2021)
- Ask Ontario's Science Table: Omicron Edition (December 23, 2021)

Building Ontario's reputation as a public sector BI-leader, the BIU also participated in other interjurisdictional working groups for public sector behavioural science practitioners, such as the federal working group leading work on the COVID Alert App (chaired by the Public Health Agency of Canada), a Behavioural Insights in Canada community of practice, and the United Nations - Organization for Economic Co-operation and Development's International COVID-19 Behavioural Insights & Policy Group. Participating in these working groups has contributed to Ontario staying on the leading edge of the application of BI in global pandemic responses.

Throughout the pandemic, the BIU contributed to response efforts across the government through offering rapid (light-touch) advice on targeted challenges.

Some examples of this approach have included the targeted advice in the following areas:

- Public Health Measures and direct pandemic-response for Ontarians:
    - The BIU provided rapid BI-informed advice to Public Health Ontario in the development of the province's contact tracing program, including the script for case investigators and the virtual assistant.

[8] The Science Advisory Table and related working groups were dissolved on September 6, 2022.

    - Toronto Public Health sought the BIU’s advice to support several initiatives throughout their pandemic response. These have included providing input on their primary care provider outreach survey regarding the city’s vaccination strategy, to make vaccination consent forms more user friendly, and to improve laboratory protocol for reporting COVID-19 results to Public Health Ontario.
    - Ontario’s MOH, in partnership with Canadian Blood Services, approached the BIU to explore how BI may be applied to increase convalescent plasma donations. Behavioural mapping with these partners provided valuable insights to where in the potential donor journey enhanced messaging could encourage donations.

- Return of regular service:
    - During the early stages of the pandemic, many services offered through ServiceOntario centres were granted extraordinary extensions in response to pandemic public health measures. The MPBSD (formerly Ministry of Government and Consumer Services) reached out to the BIU throughout the pandemic to provide behaviourally-informed advice to clearly communicate the temporary, legislated changes in service as well as return of service on several service offerings. Some of these have included outreach to drivers aged 80 and over regarding their drivers’ licence renewal, instructions for Ontarians on how to replace their blue licence plate and sticker, and letters to heavy Commercial Vehicle owners on how to pay outstanding fees on their commercial licence plate sticker renewals.

- The OPS:
    - The TBS sought the BIU’s advice in the development of the vaccination attestation process for OPS employees returning to in-office work.

Educational Service Offerings

The BIU's core service offerings to ministry partners – running full-scale TESTS Pilot Projects and targeted BI Advisory Services – are complemented with a range of BI capacity-building activities and resources.

In large part, our BI training is embedded in our collaborative partnership approach to BI projects. BI capacity building often starts when we first connect with potential project partners. The BIU's regular Office Hours are an opportunity for ministry partners to book an hour with one of the team's behavioural scientists and senior policy advisors to discuss their policy challenge, get a sense of whether BI might be the right tool for the job, or ask general questions about the BIU and our services.

Throughout the TESTS journey, partners play an integral role in scoping potential BI opportunities, assessing their fit for an intervention, identifying barriers and co-developing potential solutions. Through hands-on participation in the scientific process, partners develop an understanding of BI principles and best-practices and see how we can promote an experimental mindset toward program and service innovation. Depending on how the project team plans to run their field experiment, the BIU may also work with ministry partners to build capacity in using specific software or tools.

Since 2020, the BIU has led 25 internal training workshops with OPS colleagues including Behavioural Insights 101 sessions with potential project partners and sessions related to research methods, such as survey design. Additional resources related to BI are shared with cross-ministry colleagues on our internal-facing intranet page.

Since September 2020, the BIU has undertaken internal training to increase the team's capacity to conduct high-quality qualitative research as a complement to existing strengths in quantitative analysis. Drawing from the professional expertise of team members and existing best practices for user research in Ontario, the BIU developed qualitative research training for team members, expanding this professional development offering to other Ontario public servants. This training has been important in building rigour in qualitative research design, data collection and analysis.

Conclusion

The discipline of behavioural science continues to evolve. Practitioners across sectors are reflecting on how to build upon successes in applying BI to "last mile" challenges to further addressing system-wide challenges in program policy and service delivery. As the last few years have shown us, the opportunities to apply BI to public policy challenges continue to grow. The projects in this update report demonstrate that BI continues to serve as a valuable tool in improving the lives of Ontarians through delivery of better public services, while also proving adept at supporting evidence-based responses to public health emergencies such as the COVID-19 pandemic. As the BIU looks towards the future of BI, we remain committed to helping government build better services and expanding our skillset to align with the latest innovations in behavioural science.

Glossary

Active choice
Presenting people with a choice between two options can help crystallize their decision, as it streamlines their decision-making and seemingly removes the option of doing nothing in response to the prompt.

Anchoring
Initial exposure to a number serves as a reference point and influences subsequent judgments about value (e.g., full price being shown before sales price).

Anticipated regret
Prompting people to consider the regret they may feel if they fail to act and therefore experience a negative consequence can help them overcome inertia and make a decision.

Audit and feedback
Collecting and then providing people with information about their own performance can help them focus on improving.

Behavioural affordance
The options that are immediately obvious in the decision-making environment (e.g., a phone number prominently placed in a mailed notice may encourage more calls, even if an email address is present on the back of the notice).

Ceiling effect
In situations where the encouraged behaviour is the uptake of a finite resource (such as booking an appointment at a fixed number of clinics), behaviour change can hit a "ceiling" once the resource is fully used (i.e., all appointments are booked).

Cocktail party effect
Using a person's first name or other identifying factors can get their attention, as people subconsciously scan for mentions of their name in most situations.

Escalation of commitment
People prefer to act in accordance with their past behaviour. If they take a small step toward a goal and then are reminded of this commitment, they may want to finish the task.

Exclusivity
Emphasizing how unique an opportunity is can cause people to value it more.

Forgetting
People may miss important information because of inattention or distraction with other concerns.

Framing effects and loss aversion
People can assess the same option differently, depending on how it is framed (e.g., placing a coffee cup in between a smaller and larger cup can make it seem ‘just right’ even if it is an objectively large cup). People tend to avoid risk when they are prompted to think about what they might gain but seek risk to avoid losing. People are loss averse and feel the effect of small losses more keenly than small gains.

Hassle factors and friction
The effort required to perform an action, even seemingly small requirements such as creating a new account, often puts people off. Reducing the required effort can increase uptake or response rates.

Inattention blindness
If people are not focused on a particular piece of information, they can miss it entirely.

Information and choice overload
The greater the number or complexity of choices or pieces of information offered, the more likely a person is to experience decision fatigue, go with the default option, defer the choice or avoid making a choice altogether.

Learned helplessness
After repeated exposure to uncontrollable situations, people may feel as though they may have no control over them, which in turn, undermines the motivation to make changes.

Limited mental bandwidth
People have a “mental bandwidth” made up of attention, cognition, and self-control. These abilities are all finite and easily depleted by the countless decisions people must make as they go about their daily lives.

Messenger effect
People add varying amounts of weight to a message depending on who delivers it.

Moral self-image
People are motivated to see themselves as morally upright and honest. Reminding someone that a particular behaviour relates to their moral self-image may increase the likelihood that they respond in a manner consistent with that desired image.

Nudge statement
A short phrase that incorporates one of the principles listed in this glossary, usually prominently featured in a communication. An example social norm nudge statement is “9 out of 10 people recommend this glossary to an acquaintance.”

Null result
A null result occurs when there is no statistically significant difference in outcomes between groups in an evaluation. If the evaluation had enough people to provide sufficient statistical power, a null result means that the tested solution is likely unable to achieve the desired level of impact, and that other approaches should be pursued instead.

Optimism bias and risk misperceptions
People tend to think that bad outcomes will happen to other people, rather than themselves. This can cause them to deprioritize actions to protect their physical and financial health because they misperceive their risks as being lower than they are.

Planning prompts
Encouraging people to make plans about where and when they will complete an intended behaviour can make it more likely the behaviour will occur.

Present bias
People tend to give stronger weight to short-term payoffs (rather than longer-term benefits) when considering a trade-off.

Procrastination
People tend to put off making decisions or completing tasks partly due to inertia, the complexity of decision-making and present bias.

Prospective memory failure
People are often convinced that they will remember to do something in the future (such as book a follow-up appointment in three months), but unless they take specific steps to remind themselves, they tend forget about these tasks because present concerns dominate their attention.

Reciprocity
People are more likely to want to take action to help someone who has helped them in some way.

Salience
Describes how much a piece of information “pops out” at first glance, and how memorable it is; colour, bolding and positioning, as well as removing non-important content, can all help increase the salience of key information in a communication.

Scarcity
When you realize that something in your life is missing (e.g., material resources, time), your brain can seem to only focus on that missing thing, which can distract you from daily tasks and can inhibit long-term planning.

Self-efficacy
People’s belief in their ability to perform well at specific tasks.

Self-evaluation
Giving people an opportunity to assess their own performance can encourage more reflection and motivate improvements.

Simplification
People are deterred by small barriers, such as information-dense instructions or being shown too many options. Simplifying the wording and layout of a communication to make it easier to understand can encourage action.

Social benchmark
Providing people with specific information about how they compare to their peers, or a high-performing subset of their peers, can motivate people to act to bring their performance up to the benchmark.

Social norm
People are heavily influenced by what they perceive others as doing, and most people tend to act in accordance with what they perceive to be the norm.

Status quo bias
People prefer things to stay the same by doing nothing or sticking with a previously made decision.

Timely reminders
People do not have great memories; reminding them of their intended actions at a critical point in time can make it more likely the action will occur.

Timing
The exact moment when someone is delivered a message, prompt or reminder about an action can have a significant effect on whether they take action (e.g., a request sent to a worker at 5:01PM on a Friday may elicit a different response than the same request at 9:15AM on Monday morning).

Touchpoints
Existing communication channels or materials already used to interact with the target group that can be used to deliver a behavioural insights intervention.

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