New Era of Digital Health Service in Bangladesh: Perspective of Telenor Health
Internship Report

Course title: BUS 400

Submission date: 3rd September, 2018

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Internship Report on New Era of Digital Health Service in Bangladesh: Perspective of Telenor Health
Letter of Transmittal

3rd September, 2018

Raisa Tasneem Zaman

Lecturer

BRAC Business School

BRAC University

Subject: Submission of Internship Report

Dear Madam,

With great pleasure, I hereby submit to you my internship report titled “Digital Health Service Innovation in Bangladesh: Perspective of Telenor Health”. My gratitude goes towards the Telenor Health Team for giving me the opportunity to work with them and gain valuable experience. In this report, I have provided company insights, research findings and overall recommendations from different perspective.

Therefore, I request you to accept this internship report. I believe that you will find it in order and in accordance with your instructions. I will be eagerly expecting your feedback on the report.

Sincerely

Fahima Ryhan Kabir

ID: 13204075

BRAC Business School

BRAC University
Letter of Endorsement

This is to ensure that Fahima Ryhan Kabir, ID: 13204075, BBA Program, BRAC Business School, BRAC University has done this report on "New Era of Digital Health Service in Bangladesh: perspective of Telenor Health " to complete BBA internship program. I acknowledge this report as a final internship report.
I wish all achievement and prosperity of her career and life.

Raisa Tasneem Zaman
Lecturer
BRAC Business School
BRAC University
Acknowledgement:

This internship has been a great experience and a huge learning opportunity, which has given me a chance to witness first-hand the building of a one-of-a-kind brand, to see strategies being formed and impacts driven.

For the successful completion of this report, I would like to show my gratitude towards the Almighty. And then I would like to thank the entire Telenor Health team, specially my supervisors Jannatul Nayeem, Head of Customer Service, Fariha Dola, Team Leader of Customer Service and Farzam Aidel khani, Quality Assurance Executive for their help to assist me to conduct telephone interviews and give me NPS data. Special thanks to other members of product team, Dr. Khaled Hasan and J. M. Aminur Rahim helps for research purpose. And Thanks to Anam Ahmed from Technological Team. And final thanks to Keith De Alwis (Chief Technological Officer), Andrew Smith (Chief Operations Officer) and Matthew Guilford (Chief Commercial Officer) for their constant motivation to all the employees of Telenor Health.

And most importantly, I would like to thank my internship supervisor Raisa Tasneem Zaman, Lecturer, BRAC Business School, BRAC University who valuable expertise over the subject matter and guidance has been most valuable in the preparation of this report.
Executive Summary:

This report is a partial requirement of the internship phase of BBA program. The topic of the report is, **New Era of Digital Health Service in Bangladesh: Perspective of Telenor Health.**

The health sector of Bangladesh has progressed significantly since its independence. In the course of the most recent two decades its progress is strongly notifiable. Specifically, it has made strong progress in increasing life expectancy, reducing child and maternal mortality rates and decreasing fertility.

The main objective of this report is the Telenor Health A/S established its new dimension of digital health care service in this Location by the service Tonic. Working in Telenor Health is a great practical experience for my carrier life. Tonic is one of the first and fastest growing digital health start up Bangladesh. Telenor Health, a Telenor Group concern, started his journey in 2016 June, by launching the first health care brand of Bangladesh. Tonic which includes—TonicCash, TonicJibon, TonicDiscount, Appointment Booking, Executive Health Checkup and TonicDaktar. After 2 years of their active operation in the market, Tonic has now reached a 5 million subscriber base. This has been possible greatly due to the unconventional partnership with its sister concern, Grameenphone. Together, these two companies aim to provide value to their combines customers, and solving health care problems.

Telenor Health has established multiple digital channels in order to reach the target group effectively, and uses a mix of traditional marketing and innovative below the line promotional campaigns. This report looks at the basic demography of the user group and assesses traction of the business in terms of scale, active usage and engagement. A number of metrics have been used to provide these insights. It also directly reflects customer feedback and satisfaction level.

Along with the advantage of being a first mover, there are certain risks the company is open to—such as fraudulent cash claims, maintaining relationship with too many partners, growing churn rate and exposure to competition. There portal so outlines future course so faction in the form of recommendations.
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1. Overview of the organization:

1.1 Telenor Group:

Telenor is Norway’s largest telecommunications company and one of the fastest growing providers of mobile communications services worldwide. Telenor is also the largest provider of TV services in the Nordic region. Telenor has mobile operations in some of the world’s fastest growing markets. Its home market, Norway, is one of the most advanced in the world today. Telenor is ranked 6th among the world's top ten mobile operators with ownership interests in 11 telecommunications companies across Europe and Asia and 19 countries through Telenor's 31.67 per cent ownership in VimpelCom Ltd. and a total subscriber base of 149 million. In Bangladesh, Telenor operates as Grameenphone by establishing a joint venture with Grameen Telecom Trust which is a non-profit sister concern of the microfinance organization and community development bank Grameen Bank. Grameenphone is now the largest mobile phone operator in the country. As of February, 2017 the total number of mobile Phone subscriptions in Bangladesh has reached 129.584 million, out of which 59.306 million are subscribed to Grameenphone.

1.1.2 Telenor Health A/S:

Telenor Health is a new Telenor venture using mobile technology to make high quality health information, advice, and services accessible for everyone. Telenor Health is a purpose driven business. It aims to bring together deep healthcare expertise, a human centered approach and cutting edge technologies to solve real problems. Telenor unveiled its first move to significantly improve healthcare in emerging markets, with the introduction of its digital health service, TONIC, in Bangladesh. By addressing local health challenges through Technology, Telenor takes another step into the digital Space. In April 2015, Telenor Health replaced a local value-added services vendor as the delivery partner for Grameenphone’s “789 Health line” service. Launched in 2007, the health line
used to provide GP customers across Bangladesh access to general medicine physicians over the phone at affordable rates, 24 hours a day, seven days a week. Recently Tonic is working with their own “20000 Health line service” which has been soft launch in this month.

On June 16th Telenor Health introduced Tonic in Bangladesh through Grameenphone. Tonic is one of Asia’s first comprehensive mobile-based health and wellness services platforms providing a myriad of digital health services from health information to a modern health line and exclusive medically-related financial benefits. To pilot Telenor’s first venture in the healthcare sector in the Bangladesh market was a strategic decision, considering the already existing huge customer base of 59.306 million in Bangladesh itself, which is almost one third of Telenor’s total customer base of over185 million. Upon success in Bangladesh, Telenor Health will be able to represent the first step in scaling digital health services to tens of millions of consumers across Telenormarkets and beyond.

<table>
<thead>
<tr>
<th>The Challenge</th>
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<tbody>
<tr>
<td>Tens of millions without access to quality healthcare</td>
</tr>
</tbody>
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<table>
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<tr>
<th>The Purpose</th>
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<td>Health for all</td>
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<table>
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<tr>
<th>What they do</th>
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<tbody>
<tr>
<td>They help out members access cheaper, better, health and wellbeing – when they need it</td>
</tr>
</tbody>
</table>
### 1.1.3 Competitive Scenario:

The digital healthcare movement is driving a vast array of startups in Bangladesh, many working in mobile healthcare. Even though currently there are low direct competition for Telenor Health currently, some of the significant competitors are:

<table>
<thead>
<tr>
<th>Rx71</th>
<th>Doctorola</th>
<th>Shasthobatayon</th>
<th>MDatar</th>
</tr>
</thead>
<tbody>
<tr>
<td>A startup that promises to offer 360-degree digital health platform.</td>
<td>A digital healthcare provider that enables anyone to schedule doctors appoint online.</td>
<td>A service where people can seek medical advice over their mobile or land phones by dialing 16263.</td>
<td>A new mHealth service by Robi.</td>
</tr>
</tbody>
</table>

#### Services

- **Disease Diagnosis**
- **Information on Health Topic**
- **Information on Food and Nutrition**
- **Doctor’s Directory**
- **Hospital**
- **Doctor’s Appointment Booking**
- **Doctor’s Directory**
- **Hospital Directory**
- **Blood Donor’s Directory**
- **Call Centre Consultancy**
- **Information on Health Services**
- **Daily Health and Nutrition tips by SMS**
- **Doctor consultation over phone**
- **Free Life insurance and Hospital cash benefit**
- **mDaktar**
1.2 Introduction to the study:

1.2.1 Rationale of the study:

Tonic is one of the first and fastest growing digital health startup in Bangladesh. Tonic is the product of Telenor Health A/S, a subsidiary of Telenor Group. As I have done my internship program in Telenor Health A/S, for three months, I have got the opportunity to work with customer service department and also with the digital & partnership loyalty team. These helps me to observe all the activities of a start-up company how they initiate their business design and make it successful and how they collaborate with customer with the business model. In this report which is titled “New Era of Digital Health Service in Bangladesh: Perspective of Telenor Health” is relevant with the study and research. Because in this study it is found that how a digitally dependent industry work with the user experience and develop their design thinking model and correctly assessing customer needs and offering affordable solution to mass people. These helps to increase customer acceptable products and helps to build a strong foothold in the market.
1.2.2 Background:

Challenges of accessibility and affordability has been a constant for the health system of Bangladesh – some of the most crucial challenges being the unequal distribution of qualified health human resources high population density and rapid urbanization – all of these leading to deterioration of quality provided. Though Bangladesh has shown considerable progress in terms of health indicators as a nation, the utilization and access to existing healthcare system is still limited for the mass.

In the context of new and unfamiliar public health challenges including high population density and rapid urbanization, digital healthcare services are being promoted as a route to cost-effective, equitable and quality healthcare in Bangladesh. These services work under the assumption that a combination of tools such as computers, telephonic and wireless communications can better equip healthcare providers, enhance the quality of care and reduce existing disparities in health. These tools are used with the purpose of providing access to providers, care management and education.

Digital healthcare is a rising trend that is getting popular on a global level, and Bangladesh is no exception. There have been many initiatives under progress since the 90s. The reach of mobile phones throughout the country, especially in rural areas, is now being used to potentially to overcome geographical boundaries and ensure access to healthcare.
1.2.3 Origin of the Report:

This report titled “New era of Digital Health Service in Bangladesh: Perspective of “Telenor Health” is prepared as a mandatory requirement of the internship program under the Department of BRAC Business School, BRAC University. The organization which this report represents is Telenor Health A/S. The internship program started on May 07, 2018, continued for a total of three months. This report was prepared under the supervision of Raisa Tasneem Zaman, Lecturer, BRAC Business School, BRAC University.

1.2.4 Objectives of the Report:

1.2.4.1 Broad Objectives:

To provide insight on the innovative service offerings of Telenor Health A/S and the growth of tonic by understanding the service of digital start-up program, consumer analysis of Tonic and the potential risk of Tonic.

1.2.4.2 Specific Objectives:

- To get an inside and outside understanding of the services by Tonic.
- To analyze the present consumer base and accomplishment of Tonic.
- To get insights on usage trend of the services of Tonic and survey the potential risks for Tonic from business perspective.
1.2.5 Scope:

The scope of this study is limited to digital service providers specializing in healthcare and operating in developing countries such as Bangladesh. The respondents of this research were all active users of the digital services.

1.2.6 Limitation:

Since the report was purely based on one company which has only recently started operating in with an unconventional business model, it was not possible to find out the implications of the findings on the whole of the industry as new competitors are only just rising. There were some shortcomings, conditions or influences that could not be controlled that place restrictions on the methodology and conclusions.
2. Review of Related Literature:

2.1 Digital Health in Global Context:

Health systems – particularly in developing countries – need to optimize resource use and expand population coverage, the process of improvement and scaling up needs to be based on sound local strategies for quality so that the best possible results are achieved from new investment. (World Health Organization 2006)

Digital health is a combination of digital and genomic revolutions along with health, healthcare, living, and society. The functions of this digital health service are mainly viewed information, transmit results and access services. So day by day effectiveness of this new service is increasing day by day and people are adapting this service because of getting best possible outcome. Digital health tools change how people interact with their health care teams and contribute to improved care for themselves and their loved ones. Digital health investments can improve quality and access to care. They also contribute to economic development in terms of job creation, increased productivity and other economic measures. The value from an economic perspective lies in three main areas: Personal benefit to patients and their caregivers; value to the health care system; and economic return to the country as a whole (Morrison 2015)
2.2 **Bangladesh Scenario:**

Bangladesh is one of the most densely populated countries in the world. It is a unitary state and parliamentary democracy. Health and education levels are relatively low, although they have improved recently as poverty levels have decreased. Most Bangladeshis continue to live by subsistence farming in rural villages. Bangladesh faces a number of major challenges, including poverty, corruption, overpopulation and vulnerability to climate change. However, it has been lauded by the international community for its progress on the Human Development Index. Bangladesh has made more notable gains in a number of indicators than some of its neighbors with higher per capita income, such as India and Pakistan. Since 1976, to complement the Government’s limited capacity and resources to provide basic health services, the private sector and NGOs have established a network of facilities to provide health and family planning services. In response to the low quality of public services and their inability to reach the entire population, particularly the poor, a vibrant and large NGO sector has emerged as “third sector” of health providers in Bangladesh. According to the latest Bangladesh National Health Accounts, Bangladesh spends US$ 2.3 billion on health or US$ 16.20 per person per year, of which 64% comes through out-of-pocket payments. While, according to WHO estimates, Bangladesh currently spends US$ 26.60 per person on health per year. Public funding for health is the main prepayment mechanism with scope for risk pooling, which constitutes 26% of total health expenditure. The other major funding source is international development partners. Chronic under spending of the Ministry of Health and Family Welfare’s budget indicates inefficiency in utilization of resources as observed in the public-sector review of the health sector. Due to epidemiological and demographic change, Bangladesh is facing the double burden of communicable and non-communicable disease including the emergence and re-emergence of other diseases. Moreover, with recent incidents in garments factories, the focus is shifting towards the occupational health and safety of workers in the ready-made garment sector.
Yet there have been several initiatives regarding digital health in Bangladesh, which are managed by public, private (for profit and not for profit) and NGOs. Some of these are:

<table>
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<tr>
<th>Public</th>
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<tbody>
<tr>
<td>§ DGHS District Health Information System</td>
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<td>§ Version 2 (DHIS-2) DGHS Office Attendance</td>
</tr>
<tr>
<td>§ Monitoring System (OAMS)</td>
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<tr>
<td>§ DGHS Telemedicine</td>
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<td>§ DGHS Mobile Phone Health Service (MPHS)</td>
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<th>Private (For Profit)</th>
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<tr>
<td>§ Medinova Telemedicine</td>
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<td>§ eClinic24 (Chakaria Project) by TRCL</td>
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<td>§ AMCARE by TRCL</td>
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<td>§ Health services for expatriates in Singapore by TRCL</td>
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Private (Not for Profit)

| § | mCARE by JHSPH |
| § | mTIKKA by JHSPH |
| § | MJiVitA by JHSPH |
| § | SAJIDA Mobile Telemedicine |

NGO

| § | CRP Telemedicine |
| § | infoLADY by DNet |
| § | Aponjon (MAMA Bangladesh) by Dnet |
| § | BRAC m-health |
The development of a wide variety of e-health and m-health innovations has been stimulated by funding from a number of channels which include bilateral support to NGOs, special donor programs for supporting e-health and m-health, and challenge funds operated by large foundations. In addition, the mobile phone operators have been actively seeking new sources of revenue as they compete in a market with very high levels of mobile phone coverage. Following are some of the ways being adopted as means of providing digital health care services:

§ Health advice hotlines by mobile operators as a value-added service (VAS)
§ Partnership with service providers
§ Digital content as sources of health information
§ Use of smartphones to enhance the capacity of health workers

2.3 Measurement of Success for Digital Businesses:

To measure the success of their digital transformation, companies need to look beyond traditional financial key performance indicators and focus on digital traction metrics. Many companies have discovered that traditional financial key performance indicators (KPIs) are no longer effective at measuring the success of a digital business. But for companies that started out with providing digital services with zero or low cost, measuring success of the services becomes crucial. But there are as a set of key actions for companies to help them identify and measure the metrics that are most relevant to their business.

Companies need to measure and monitor a combination of essentially behavioral metrics, such as frequency of use, customer engagement and number of users, through which they can communicate both the popularity and the momentum in market adoption of a product or service. Following metrics (or a subset of them) can be used to analyze digital traction of a business.
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<th>Engage ment</th>
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<tr>
<td>Active Usage</td>
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<table>
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<tr>
<th>Unique Visitors</th>
<th>Daily active users</th>
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<tr>
<td>Number of visitors</td>
<td>Number of active users</td>
</tr>
<tr>
<td>Number of registered users</td>
<td>Monthly active users</td>
</tr>
<tr>
<td>Month-on-month growth in registration</td>
<td>Ratio of new users to repeat users/customers</td>
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<tr>
<td>Organic User Acquisition</td>
<td>Conversion rate</td>
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<td>Abandon rates</td>
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(World Economic Forum, n.d.)
Net Promoter Score (NPS):

The Net Promoter Score (NPS) and its expanded version the Net Promoter System are metrics proven to measure customer loyalty. The Net Promoter Score gauges acceptability of product or service and also customer loyalty, on the basis of very short surveys. NPS is based on a single question. Customers are asked to give a score between 1 and 10. Customers that give you a 6 or below are Detractors, a score of 7 or 8 are called Passives, and a 9 or 10 are Promoters. To calculate your Net Promoter Score, we detract the percentage of Detractors from the percentage of Promoters. The importance of the Net Promoter Score is that it gives us insights into customer loyalty spectrum. (Hoque et al. 2014; Reni, 2016)

2.4 Telenor Health makes “TONIC”:

Telenor Health set out to address an array of specific problems, and focused on being the one step solution for all healthcare problems. And thus, Tonic was born.

Grameenphone consumers & Telenor Health Health & wellbeing providers

Tonic is the digital front door to health for millions of Bangladeshis. It is the bridge to connect consumers and health care providers, and wellness brands, at scale. It has now become:

The promoted digital health service of Grameenphone, which has over 57 million customers, and is one of the most trusted brands of the country. An expert in digital distribution and marketing, with overall digital weekly reach of over 1.5 million people. The digital health market leader in Bangladesh, gaining 1 million early adopter customer base in the first three months of launching. A business with over 3 million members within 7 months of launching in the market. A partnership business, that brings customers to others in the health and wellbeing value chain.
2.5 Product Vision for Tonic:

Telenor Health is building the future of healthcare. Their purpose is to use technology to democratize access to health for all, by understanding the customer and their problems, combining this with a deep knowledge of health care and technology – and shipping products that make a difference to people's lives and that they love.

2.6 Understanding the health care journey:

The user journey of health is non-linear. Along the path there are many opportunities for intervention and for technology to play an important role. Following is a summary of the journey and where their solutions address customer problems.

2.7 Tonic Products:

Timeline of Tonic product launch:

- **Date:** 5 June, 2016  
  **Product:** Tonic Basic (free product)

- **Date:** 12 April, 2017  
  **Product:** Tonic Advanced (128 tk/month), Tonic Premium (298 tk/month)

- **Date:** 30 October, 2017  
  **Product:** Tonic Astha (126 tk/month), Tonic Shurokkha (296 tk/month)

- **Date:** 1 March, 2018  
  **Product:** Tonic Asha (47 tk/month)
3. **Methodology of the Study:**

Both primary and secondary data has been used for preparing the report.

3.1 **Primary Sources:**

The primary data was collected from qualitative interviews of department heads, managers and executives of Telenor Health.

Also, in research part, a user research was done by 32 interviews with existing users of Tonic who have renewed their service at least one. It was done in June and July, 2018. The questionnaire is given in appendix.

3.2 **Secondary Sources:**

The secondary data was collected from system generated data and quantitative research conducted by Tonic’s own customer service team and third party agencies. The form of survey chosen for this report was NPS (Net promoter score). NPS questionnaire is given in appendix. Documents, journals and reports available online have been used as secondary sources for the report. A list of all such documents has been provided at the end of the report.

3.3 **Data collection:**

The qualitative data for this report has been acquired from extensive interviews with:

1. Dr. Khaled Hasan, Head of Clinical Operation
2. Md. JannatulNayeem, Head of Customer Experience & Service
3. Allama S. Nomany, Member Engagement Manager.
4. Analysis and Interpretation of the Data:

4.1 Research objective:
How Tonic is helping its users and what motivates users to renew their membership and stay with Tonic and how we can improve Tonic service.

4.2 Sample criteria, size and time:
Existing Tonic users who have renewed Tonic membership at least once. There are total 32 respondents. The research took place during June and July of 2018. The research questionnaire is given in appendix 1.

4.3 How users get to get to know on Tonic:
One of the first thing of this study is know, how users get to know about Tonic. As Tonic is yet to start mass marketing on TVC and print media, so the result is most users get to know about Tonic is from friends and family. This is a good sign in this age of social media as good services are spread quickly over FnF via social media and also the opposite happens, bad services are also spread quickly.
Graph: Source to know Tonic
4.4 User interview:

In Tonic, user interview is frequently used in various stages. Interview is done in both structured and unstructured ways. There are basically two ways user interview is taken.

4.5 Telephone interview:

Telephone is the mostly used interview method used by Tonic. It has a call center location in the head office and thus the call center is utilized to make telephone interviews. Telephone interviews generate the highest number of data points.

Face to face interview: Face to face interviews are done is far less frequent numbers.

Face to face interview respondents are picked from two points:

- Picked from touch points
- Picked from telephone interviews
4.6 Focus group discussion:

Focus group discussion is a widely used research methodology. In focus group discussion the moderator tries to find out the components more broadly that were found during one of one interviews. Focus group discussion is also used to discuss different aspects of user’s journey. But there are some problem in FGD, not all the respondents are proactive in giving their opinion in FGD. Some respondents dominate while others remain in lateen position. Also, arranging FGD requires time and money, which is not always available for a startup and in an agile methodology.

Focus group discussion is also used by Tonic but very rarely. The company tried to follow agile method and rapid iteration of products. Thus focus group discussion is avoided. Focus group discussion is mostly used in the following cases:

- Focus group discussion is used to generate product ideas and test different product ideas
- Focus group discussion is used to understand the pain points of existing product usage
4.7 Card sorting:

Tonic has one of the most variant and complex product features in the market. And different segments has different needs of the product. As a result initially the company suffered a lot to design the website, app and other channels. So, in such a case, Card sorting method is used for information architecture (IA) in website, app and other channels. For example, Tried to arrange features based on the introduction time in Tonic. But users suffered to find their desired service. Then the managers tried to find to place the products based on their usage but it also put users in difficulty to find their service.

Finally, after several iterations on card sorting, the channels were designers. In card sorting it was found that, users want to have the features based on the service. For example, doctor related service should be clubbed together under Doctor, hospital related services should be clubbed together under Hospital. The current has high success rate in term of least time and effort to find a service.
4.8 Analytics:

Analytics is also used for product usage, pain point analysis and demand analysis. Some of the cases where analytics are used are:

4.8.1 USSD

Analytics in USSD is a great source of information. Still more than 75% of the users use feature phone and they are habituated to use USSD. Moreover, prevalence of Bkash among mass people made USSD a far more common tool to use. In USSD analytics, it is followed that:

- Where do people go after they go to USSD
- Which feature gets highest number of visitors
- Where do user traffic goes down
- Which stage of USSD purchase has highest number of drop rate

Website and App

Analytics in website and app is a great source of information. Analytics from these two sources can be used for various purposes. Some of those purposes are below:

- To understand user demand
- To understand user pain point

These analytics are used to improve the online purchasing and service usage.
4.9 Doctor Call Service and Customer Service:

Analytics is used in doctor call service to understand the demand of the service and allocate doctor respectively.

Analysis from doctor call service from its database can also be used to making various analysis on healthcare needs of its users and improve the product to cater the needs of the users.

4.10 Expert Review:

Expert review is an important tool for product analysis. Expert review is usually done after a complete flow of product is done. An expert is then take a walk through the whole process and gives valuable input from his/her experience.

Telenor Health has a wide array to expert review accessibility to review its products. Some of the unique and great resource that Tonic has is:

- Expert review from GP
- Expert review from Telenor Academy in Fornebu, Norway
- Expert Review from other business units of Telenor
4.11: Field Testing:

Guerrilla testing is one of the most useful and effective tool to test digital products. Guerrilla testing gives quick feedback and enables the designer for rapid iteration. Tonic uses this method as a User experience research method for its different products:

1. Website
2. App
3. Marketing Materials

Some of the things that were analyzed in field testing is:

1. Respondents understanding of Tonic from marketing materials.
2. Respondents understanding of Tonic features from marketing materials.
3. How do respondents purchase Tonic from its marketing materials?
4. How do respondents use any feature from the communication materials?
5. Findings of Study:

In March, 2018 - the subscriber base of Telenor Health hit the four million mark. For a completely new service in a moderately unaware market, user base is the best weapon to continue the fight for survival. This is why getting to know more about the user is one of the priorities of the company.

5.1 The reason to purchase Tonic:

As Tonic is a new idea in the market. So there are various reason to purchase Tonic. This research result is given below on respondent’s reason to buy Tonic.

![Graph: Reason to purchase Tonic](image)

5.2 Try the product:

As it is a new digital health venture there are many early adopters who would like to try to product. There are many customers who have no explicit health needs. They took Tonic, like Uber, Pathao, WhatsApp and such new digital platform.
A good portion of those users are aware of Tonic Cash and understood that it will be a service when they might need it in future and thus bought Tonic.

5.3 Being related to GP is another such reason to buy Tonic:

Grameenphone being the largest telecom provider has a huge loyal user base. So, when they were introduced to Tonic, they gave Tonic a higher value than any other healthcare or health insurance provider and purchased it right away.

5.3.1 Discount:

Medicine is one of the major source of out of pocket expenditure (OOP) in healthcare sector in Bangladesh. Also, diagnostic test in also very costly and it took a great toll in many patient’s pockets. So, when they got to know the wide range discount service they became interested in Tonic and buys it.

5.3.2 Cash:

Tonic Cash is one of the major USP of Tonic. But health insurance companies are not well received in most of the part in the world. And in Bangladesh people have severe trust issue in any insurance. But when Tonic bought this Tonic Cash, many users trust Tonic’s association with Grameenphone and trust this service. So, Tonic Cash became one of the major reason to buy Tonic.
5.3.3 Doctor Call:

Tonic doctor is a 24/7 service and it is in market for a very long time. And this service in particular has special appeal to people in outside of Dhaka. Many surveys revealed that this service has special appeal to users from North Bengal. Also, across whole Bangladesh access to quality doctors is not possible everywhere. People resort to pharmacy owners and if available then known family doctors for any emergency. But those are not always available and pharmacy doctor is not 24/7 and not always trustworthy. So, Doctor call service has attracted those potential users to buy Tonic.

5.4 Service Usage:
From the survey among the 32 respondents, 37.5% have not used any service, and an almost all of those mentioned that, Tonic is a need based service and they will use it when needed.

Graph: Usage of any Service
On the other hand, among the services that were used, doctor call was the most used service and respondents were happy with it. After doctor call, discount is the second most used service. The experience from using discount is mixed. To all the users of discount, they are happy that it saved them money but some users complained that the behavior of discount partners was not satisfactory. And the third one is Tonic Cash. The recipients are very happy with the service. There are 2 recipients who were rejected for cash claim service for insufficient documents. The feedback from cash service is, users want information to be more clear and communication from the cash team to be more precise.

Graph: Tonic service usage
6. **Recommendation:**

6.1 **User experience improvement:**

User experience is one of the most discussed part of the business world currently. One of the major reason for its failure is the company is designing the service based on their assumptions of the user base and most of the time very little user research is done before product launch, rather UAT is done in house.

6.2 **Design Thinking:**

Tonic can use design thinking to improve the User experience of its service. Couple of ways to use design thinking is with the following methods.

- Participatory observation is point of sales (POS) and service usage points (discount partners and appointment booking centers). With this way, the relevant product stakeholders can make a better product for their users.
- Field testing with products is also important to see how users engage with a product on their own. This field testing should be done with both POSM materials and real products.
- Diary studies is useful for engaged users. This method will help the management to see the engagement components to keep the users engaged with the product and also, pain points while using the product.
- Go agile with selected solutions and finally this method is not rigid and not a one-time exercise. The exercise needs to be done iterative even after launch of the product.
6.3 **User Feedback and Lean Data:**

Lean Data collection method is taking place in many companies. There are two main principles of this methodology:

1. Data should be collected at the point of interaction.

2. Data only relevant to action should be taken, all other irrelevant data should not be collected.

3. Each questionnaire should not exceed 6-8 questions.

Currently the data collection of users is not in a good shape. Tonic collects user’s data in 2 ways.

- Welcome Call (script is given in appendix)

- NPS Call

6.4 **Service improvement:**

To improve the feature usage experience of Tonic, it first needs to address the complaints of the users and improve it.

6.4.1 **In doctor call:**

Some of the common complaints is the behaviors of the doctors and too much questions asked by the doctors before delivering the service. The first complaint is well addressed and steps have taken to improve this issue. And things are better now. But then again improvement is a continual process and so this should be continued.
6.4.2 **Discount:**

Discount is the second most used feature after doctor call and many users complaint of behavior issue of the discount partners. Moreover, users also cannot find the discount partners easily. If these two things are handled properly then User experience from this usage will users a lot eventually contribute in retention.

6.4.3 **Cash:**

Cash is one of the vital feature of Tonic. People in all over the world have several trust issue with health insurance. The problem with this feature is, huge number of fraud cash claims. And to verify the fraud one, authentic users get hampered. So, if two things are ensured here then User experience will be improved here significantly.

- A precise timeline of delivery
- Required documents to submit for cash claim

6.5 **Expansion of market:**

Depending on the success of the company targets, Telenor Group can use the business model used in Bangladesh to scale the operations of Telenor Health to other geographic markets where Telenor has a strong existing customer base. The key to Telenor Health’s exemplary growth in less than a year has been the already existing consumer base of their sister concern, Grameenphone. Telenor Group can thus use their presence in other market to expand till tapping new geographic markets becomes feasible in terms of operations and finance.
6.6 Training and development:

Though Tonic’s services are completely digital, there are human aspects to it as well. Being a technology driven and service oriented company, employing and retaining a skilled and stable workforce is of utmost importance, where the culture and leadership of the organization plays a great role. Along with this, training and development can be very effective. Along with the core set of competencies, trainings can help the people of the company acquire extra skill-sets, which can be provided according to specialized system use.
7. **Conclusion:**

Tonic has bought a comprehensive healthcare package to Bangladesh. Both primary sources and secondary sources revealed that, healthcare journey in Bangladesh is very bad. Patients and their relatives suffer a lot in the healthcare journey. In such a circumstance, Tonic would work as a relive to the Bangladeshi people.

A consistent growing user base is needed for the company to grow and survive. The User experience of the services that are often used needs to be improved on a regular basis and also steps should be taken to inform more users of these services. Like, Doctor Call and Discount. And the services that are not utilized much needs to be more visible to the users to ensure its optimum usage. Like Doctor Chat, Appointment Booking, Executive Health Check-up. At the same the management must give the best quality of the services. And to provide best quality services to users the company should take steps to keep its users at the centers of all the activities. Rapid user testing and quick and actionable user feedback can be a great for this.
8. Reference:


Appendix:

PMF (Product Market Feet) Questionnaire:

General Information:

1. MSISDN
2. Tonic Status
   a. Advanced
   b. Premium
3. How did you get to know about Tonic
   a. GPC
   b. SMS
   c. Pharmacy
   d. FnF
   e. Facebook
   f. GPSMS
   g. Field Sales Agent
   h. Flexiload
   i. TVC
   j. Leaf let
4. What is your reason to buy Tonic
   a. Cash
   b. Discount
   c. Doctor Call
   d. Appointment Booking
   e. Executive Health Checkup
   f. Other

Service specific information:

1. What are the services that you have used?
   a. Doctor Call
   b. Doctor Chat
   c. Discount
   d. Cash
   e. Appointment Booking
   f. Executive Health Check-up
   g. No services Yet
   h. Other

2. Please rate your experience (1 to 10)
   a. 1 (Extremely Bad)
   b. 10 (Extremely Good)
3. Why:

4. What is your reason for renewal:
   a. Cash
   b. Discount
   c. Doctor Call
   d. Doctor Chat
   e. Appointment Booking
   f. For future need
   g. Other

5. What else you want in Tonic:

   Personal Information:
   1. Gender
   2. Age
   3. Marital status
   4. Profession
   5. Location
   6. Health Need

8.1 Appendix: NPS Script:

   1. On a scale of 1 to 10 how satisfied are you (where 1 is highly dissatisfied and 10 is highly satisfied)
   2. Reason behind the scoring
   3. How can we improve the service
   4. Is there anything you want in Tonic

8.1.1 Appendix: Welcome Call Script

   1. How did you know about Tonic
   2. Your reason to become Tonic member
   3. Are you aware of the benefits of Tonic
   4. Do you use smart phone
   5. Do you want anything more in Tonic
   6. Name
   7. Age
   8. Gender
   9. Marital status
   10. Number of family dependents
   11. Health conditions