Is WhatsApp Suitable for Transmitting Learning Content?

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We help people around the world learn, share, and act on critical family planning and public health knowledge.
K4Health Overview – How we do it

• Systematic learning

• Meaningful connections

• Digital health strategy

• Health workforce strengthening

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Context

- Health workers need regular access to up-to-date technical information
- Traditional trainings can be costly, logistically challenging, and time consuming
- Use of smartphones and mobile messaging platforms is exploding
Avoid SMS charges by using WhatsApp! It doesn’t matter which cellular network you use.

That’s why 1.2 billion people are active users!

In 49% of all mobile phone users use WhatsApp
Intervention

- Use WhatsApp Messenger as a learning platform
- Family planning professional development for students and health providers in Kenya
- Focus on healthy timing and spacing of pregnancy (HTSP)
Content Adaptation

Healthy Timing and Spacing of Pregnancy (HTSP)

Why does HTSP matter?
Healthy timing and spacing of pregnancy helps women and families make informed decisions about delaying, spacing, or limiting their pregnancies to achieve the healthiest outcomes for the whole family. Research shows that HTSP helps save the lives of mothers and babies.
## Training Format

- 4 WhatsApp Group Chats with 40 participants each
  - 2 student groups & 2 provider groups

<table>
<thead>
<tr>
<th>Week</th>
<th>Content</th>
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<tbody>
<tr>
<td>Weeks 1 and 2</td>
<td>- Introduction and instructions</td>
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<td></td>
<td>- Pretest knowledge assessment survey</td>
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<td>Week 3</td>
<td>- Video introduction to HTSP</td>
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<td>- Journal article providing evidence on women’s growing desire to limit births in sub-Saharan Africa</td>
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<td>Week 4</td>
<td>- HTSP case study videos providing training on counseling clients on HTSP (5 videos)</td>
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<td>Week 5</td>
<td>- Infographic explaining why Christian values support family planning</td>
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<td>- Blog post on why family planning is consistent with Christian values</td>
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<td>Weeks 6 and 7</td>
<td>- Wrap-up</td>
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<td></td>
<td>- Post-test knowledge assessment survey, usability survey</td>
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Role of Facilitator

• Recruit and add group members to their respective groups
• Encourage members to invite colleagues to join the K4Health WhatsApp groups
• Provide group members with technical support for using WhatsApp
• Monitor the activity within the groups—mostly for troubleshooting purposes and to monitor the appropriateness and accuracy of posts
Methodology

• Research questions
  • Did participants understand the training instructions?
  • Were participants able to access the training content?
  • Did participants actively participate on the platform?
  • Did participants report experiencing technical issues with the platform?
  • How did participant learning outcomes compare between pretest and post-test knowledge assessments?

• Data Collection Instruments
  • Usability survey
  • Qualitative analysis of Group Chat transcripts
  • Pre-test and post-test knowledge assessment
Findings – Acceptability and Usability

- Health workers were receptive to using WhatsApp for professional development
- Using the Group Chat feature for structured training is relatively easy
- Facilitator had to provide instructions for completing training and accessing resources multiple times
Findings: Usefulness of Content Types

• Most useful formats
  • Research articles
  • Videos
  • Discussion questions

“…that video is making the understanding so easy.”  
-Student Group 2 Participant 1

“But checking on the video ideally as it outline the various goal of achieving HTSP, I would like to point out a concern on how possible it is to the idea of reaching out for the women, because to me i thing a bigger challenge than the picture portrayed in the video. i would love to know what others think in the group.”  
-Student Group 2 Participant 2
Findings: Platform Participation

• About half of all messages posted in each group were by participants
• 74% of participants reported posting a message
• Types of messages
  • Introductions
  • Interest in the training
  • Responses to discussion questions

“Greetings friends. I am a nurse in a leadership and governance position in a hospital setting. I am interested in HTSP because I like supporting the other nurses in family planning.”
-Provider Group 1 Participant 2
Findings: Knowledge Assessment

- Small increase in average score from pre-test to post-test
- Sample sizes not sufficient for statistical analysis
Discussion

• Challenges adding new participants to groups
• Some users needed more support
• Active facilitation key to maintaining engagement
• Although participants found videos useful, some had technical difficulties accessing them
Discussion - Participation

- Participants responded to shorter resources more quickly.
- More active on weekends.
- Participant discussion more closely related to resources than week of training.

“As a young wife and mother, I can say without fear of contradiction, that the courses were an eye opener. I understand my body better; I can explain to others what HTSP is and what family planning is all about. The courses have equipped me with formidable knowledge. I now know of so many family planning methods that I can use and recommend to others. There is a method for everyone.

-Lydia Mutua, a third-year student of KMTC-Kitui
Recommendations

• Provide a mix of resource types
• Decrease number of questions asked of participants
• Allow more time for participants to answer questions
• If more knowledge exchange and discussion is desired, ask scenario-based, open-ended questions.
Conclusion

- Using WhatsApp as a training solution has potential
- Training content, content format, and finding the right group admin are important considerations
- More research to understand best practices

“The methodology promotes interaction; many students are shy, but open up in the comfort of the distance created by the mobile phone...The students being of reproductive age were gaining vital life skills that they will apply to their lives apart from helping others.”

-Thomas Mwenge, Lecturer of Health Informatics