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mHEALTH for Community-Based Family Planning Services

IMPLEMENTATION DATE: November 2014 to September 2016

Using a mobile application to guide community health workers to provide high-quality family planning services in Tanzania

Tanzania is faced with significant sexual and reproductive health challenges, including high fertility rates, low contraceptive prevalence, and elevated rates of HIV/AIDS. In 2010, the contraceptive prevalence rate (CPR) for modern methods among married women was 27 percent, and the unmet need for family planning was 25 percent.¹ In Shinyanga region in northwest Tanzania, 12.5 percent of married women age 15 to 49 use a modern family planning method, less than half of the national average. The total fertility rate (TFR) is 7.1 compared with the national TFR of 5.4, and HIV prevalence is 7.4 percent compared to the national average of 5.1 percent.

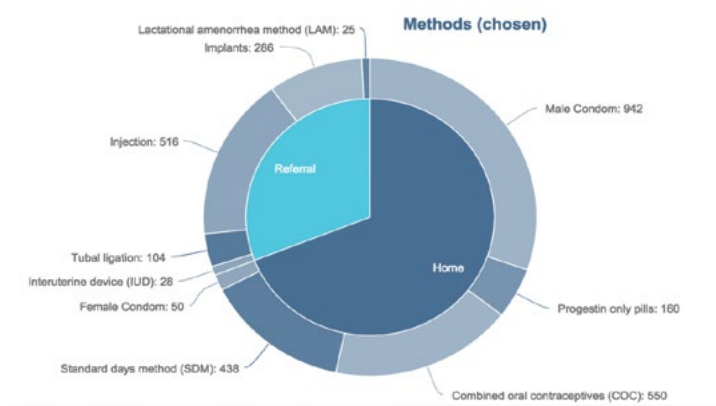
In order to improve access to family planning services, Pathfinder International and D-tree International are implementing a community-based family planning program using mobile technology to improve the quality of care. This program is being implemented with 230 community health workers (CHWs) and 32 CHW supervisors in five districts of Shinyanga region.

About mHealth for Community-Based Family Planning

In this program, CHWs use a mobile application to provide counseling following the Balanced Counseling Strategy Plus.² Each CHW goes through a well-defined protocol to educate clients about all available methods and draws on their fertility intentions and personal preferences to support the choice most appropriate for their needs. CHWs provide condoms, pills, and Standard Days Method® to clients at their homes

and provide referrals to health facilities for clients wishing to receive long-acting and permanent family planning methods and for HIV and sexually transmitted infection services. The mobile application includes reminders to CHWs to follow up with their clients for refills or to confirm if the referral was successful. In addition, the application includes an electronic Citizen Report Card, which is administered by the CHW

Figure 1. Method mix among family planning clients using a method



to all clients who complete a referral to assess the quality of family planning services at health facilities.

To develop a scalable training and follow-up model, Pathfinder and D-tree International are applying innovative strategies to roll out training programs and provide ongoing support, including a:

- cadre of “champion” CHWs who mentor and support newly trained CHWs through regular follow-up visits;
- simple mobile application for project staff and the champions to guide follow-up visits with newly trained CHWs and alert the program team of issues in the field;
- pay-for-performance system with monthly performance targets with real-time performance tracking on the CHW phone and program dashboard;
- system for the field team to monitor data and provide feedback to CHWs on a weekly basis;
- dashboard for reviewing individual providers, district performance and regional performance.

As of March 2015, 109 CHWs who were offering family planning services in two districts of Shinyanga region were trained to use the mobile application.

Evaluation and Results

By March 2015, a total of 3,165 clients had been registered and received family planning counseling. Among these, 93.5 percent are using a family planning method (see Figure 1 for the method mix). Of the 516 referrals given for a family planning method at a health facility, 337 (65 percent) have been completed. During the program, 134 clients (4.2 percent) discontinued a method, while 94 percent of clients reported continued satisfaction with the current method.

To measure the outcome of the mobile system on CHW activity, the project team compared the number of registrations and follow-up visits before and after the mobile system was introduced. In November 2014, 60 CHWs

in Shinyanga District Council, who had previously been delivering family planning services using a paper-based system, were trained to use the mobile application. The pay-for-performance system, along with rigorous data monitoring and feedback to CHWs, was also introduced at this time. In the four months since the introduction of this system, CHW performance increased dramatically. On average, there was a 522-percent increase in the number of monthly registrations comparing paper- and mobile-based registrations, and a 15-fold increase in the number of follow-up visits, comparing the average number of follow-up visits with the paper system to those conducted in February 2015.

Lessons Learned

- **Pay for performance**, focusing on counseling and follow-up, can be an effective strategy to increase CHW performance while adhering to the Tiahrt Amendment. Using the mobile system offers real-time tracking of pay-for-performance targets for CHWs and the project team to increase transparency of the system.
- **Training CHW champions** to support trainings and mentor newly trained CHWs in the field is an efficient and scalable model, allowing implementation teams to roll out high-quality mHealth programs at scale.
- **Communicating with CHWs on a regular basis** is very important as it provides a venue for both feedback and support and allows the program to identify and act on issues in the field.
- **Data quality** has improved after introduction of the mobile application. The system automatically flags suspicious data entry for follow-up.

Conclusion

This program demonstrates that mobile tools can effectively be used to improve the quality of community-based family planning services and increase CHW performance. With the use of pay-for-performance and CHW champions, this model has the potential to be implemented at scale. The next phase of the program will focus on training an additional 123 CHWs and the development of supervisory tools to further transfer monitoring and management of the project to the local government. ■

Geographic Coverage: Five Districts in Shinyanga Region, Tanzania

Implementation Partners: Pathfinder International, D-tree International

Donors: USAID Tanzania, David & Lucile Packard Foundation

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