



CHIPATALA CHA PA FONI (HEALTH CENTER BY PHONE)

Linking community members with the health system to improve reproductive, maternal, newborn and child health outcomes in Malawi

SERVICE DELIVERY

Implementation date: 2013

In Malawi, a woman has a one in 34 chance of dying during childbirth¹ while 71 children die for every 1,000 live births². Knowing where to go for care and when to seek care are integral to reducing maternal and child mortality rates. To this end, VillageReach and the Malawi Ministry of Health (MOH) operate Chipatala cha pa Foni (CCPF) or Health Center by Phone, an mHealth innovation designed to increase access to timely and appropriate maternal, newborn and child health (MNCH) information, advice and care.

CCPF's goal is to improve health outcomes through increased uptake of home and facility based care practices among women of reproductive age, pregnant women, and caregivers of young children. CCPF is designed to encourage appropriate utilization of the health system, save patient time and transportation costs, and provide women and caregivers with greater control and opportunity to interact with the health system without having to travel long distances to a health facility.

A variety of demand generation and community mobilization strategies have been employed to spread awareness of CCPF. During the pilot, community volunteers were chosen in each village and given a low-cost phone to provide those without personal phones access to the service. In addition, CCPF is promoted through community outreach events, health workers and print media. The initiative is currently implemented in four districts in Malawi and serves a population of over 300,000 women and young children.

About Chipatala Cha Pa Foni

CCPF has two main components. A toll-free hotline provides clients with information and advice on reproductive, maternal and child health issues and refers callers displaying “danger signs” for further care at a village clinic, health center or hospital. Secondly, a “tips and reminders” mobile messaging service provides regular text or voice messages on reproductive, maternal, and newborn health topics. Messages are tailored to the client’s week of pregnancy or a child’s age.

The CCPF technology solution has four main applications that sit on two different servers: the hotline server and communications server. The hotline server manages the client data from the hotline application (developed by Baobab Health Trust) and a notification application (developed by VillageReach). The communications server manages a Hub application (developed by VillageReach) and IVR (developed by Yo! Uganda).

Evaluation and Results

In 2013, the Invest in Knowledge Initiative, an independent research firm, performed a comprehensive external evaluation on the CCPF pilot project. The mixed method evaluation included a baseline and endline survey in both implementation and comparison districts. Data showed that there were significant improvements among CCPF users for the following indicators:

- Increased use of antenatal care within the first trimester
- Increased use of a bed net during pregnancy and for children under five
- Early initiation of breastfeeding
- Increased knowledge of healthy behaviors in pregnancy, including drinking more water and minimizing strenuous lifting
- Increased knowledge that some traditional medicines can be harmful in pregnancy
- Increased knowledge of maternal health services including number of recommended antenatal visits

In addition, CCPF users were highly satisfied with the service, citing the ability to access the service from home (saving time and money traveling to the health center) and respectful treatment from hotline workers as major benefits of using CCPF.

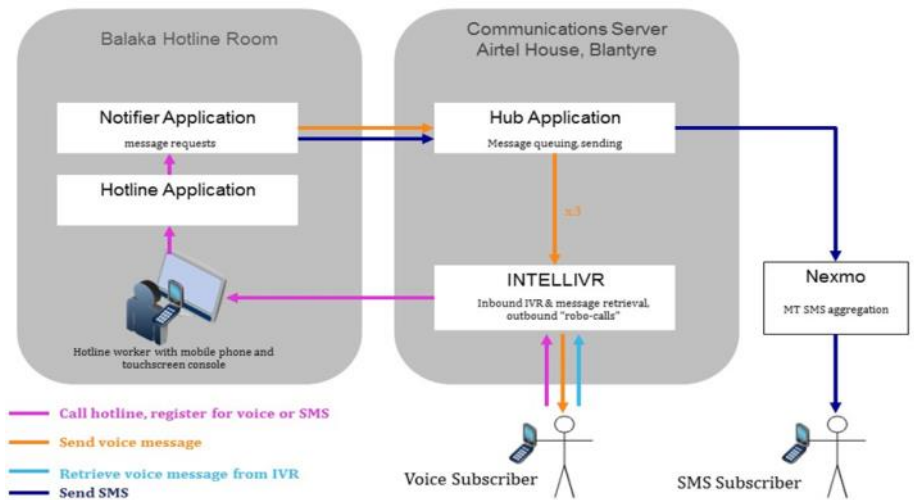
Furthermore, over 75 percent of CCPF's calls are typically resolved without needing a referral. Therefore, the program reduces undue burden on the health system by encouraging uptake of appropriate home-based care.

Lessons Learned

- Working with partners supports scale-up; VillageReach has worked with partners to create cost-sharing agreements, utilize existing programs to implement CCPF in new areas, and to generate demand for the service
- Government engagement is critical; VillageReach and the MOH have a strong partnership achieved through engaging the MOH in content development, encouraging MOH officials to visit the CCPF call center, soliciting and incorporating MOH feedback on implementation, and receiving endorsement from the Reproductive Health Unit
- The rigorous evaluation of the pilot has helped garner support for expanding CCPF to new districts, as well as contributed to the global evidence base for mHealth
- Using community volunteers equipped with phones can help increase access and generate demand for mHealth services in areas with low phone ownership; however, adequate ongoing resources need to be allocated to maintain phones and volunteer motivation in order for the strategy to remain effective over time

Conclusion

CCPF leads to significant improvement in MNCH indicators among its users while reducing undue burden on the health system. Expansion to four more districts by 2016 could lead to a greater impact by the initiative in Malawi. VillageReach is actively working with the MOH and other partners to expand CCPF nationally.



Geographic Coverage: Four districts in Malawi

Implementation Partners: VillageReach, Malawi Ministry of Health, Baobab Health Trust, Concern Worldwide Malawi, Clinton Health Access Initiative (CHAI), Support for Service Delivery Integration, Presidential Initiative on Safe Motherhood, Airtel

Funder: WHO's Innovation Working Group/UN Foundation; Concern Worldwide's Innovations for Maternal, Newborn and Child Health

Contact Information:

VillageReach | Zachariah Jezman, CCPF Project Manager (+265 999 942 663, zachariah.jezman@villagereach.org); Jessica Crawford, Malawi Country Director (jessica.crawford@villagereach.org)

Malawi Ministry of Health | Fannie Kachale, Director, Reproductive Health Unit (fankachale@yahoo.co.uk)

See References on page 89.