



A multi-faceted digital health approach to engaging with and learning from Haitians via mobile phone

December 11, 2018

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Context

Challenge

Haiti confronts high maternal and child mortality and devastating humanitarian emergencies



Goal



Promotion of healthy behaviors, increased demand for specific health products and services

Health areas

Family planning, maternal and child health, cholera, zika, and home water treatment



Mobile penetration

60% of Haitians have a mobile phone



Partner

SHOPS Plus engaged Viamo in 2016 to establish an SMS and IVR platform for mobile health communication





Engaging Haitian Beneficiaries

On-demand SMS and IVR content

- SHOPS Plus developed on-demand SMS and for Interactive Voice Response (IVR) menus for FP, WASH/cholera, and Zika

On-demand Content Accessed



91,648 unique numbers accessed the on

370,078 connections, 140 connector

Over half of callers acc

Pushing health information

120,000 people reached

In 2017 SHOPS Plus supported the Ministry of Health to push SMS about Zika

13,000 people reached

In 2017 SHOPS Plus supported the Ministry of Health in advance of Hurricane Irma to use its digital platform to reach people with hurricane safety and cholera prevention messages

Contraceptive use reminders

- Women can opt in for daily reminders to take oral contraceptives or quarterly reminders to get injectable contraceptives
- Reminder messages taking pills at the
- 378 women opted
- Challenge: sending

Issue tracker

- The issue tracker is a toll-free voice mailbox which gives users the opportunity to ask specific questions not answered by the on-demand platform
- Questions shape new content creation
- SHOPS Plus reviews questions and sends an SMS, a pre-recorded voice message, or personal phone call to the user
- Total voicemails received as October 2018 (all topics): 3,959



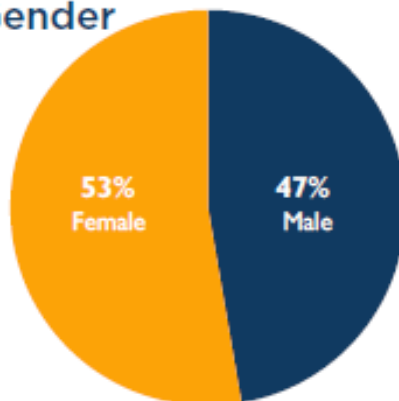
Learning from Haitian Beneficiaries

Mobile demographic surveys

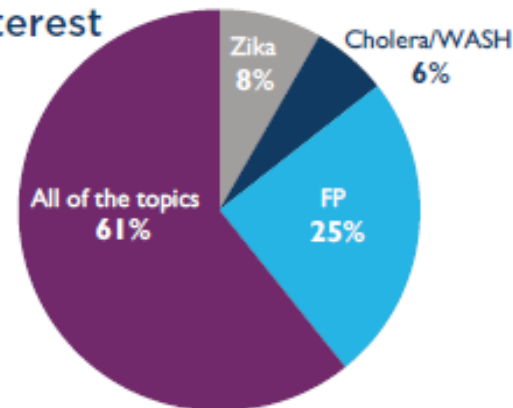
- First time callers are asked to take a short demographic survey to help SHOPS Plus shape content and target future messages

What we've learned about health-seeker demographics

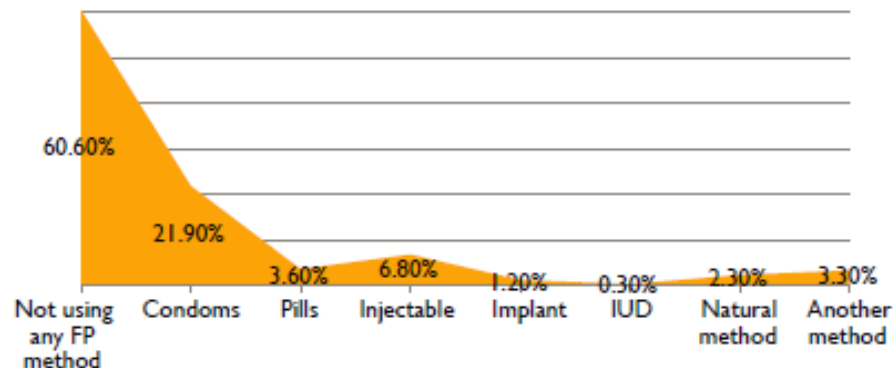
Users Gender



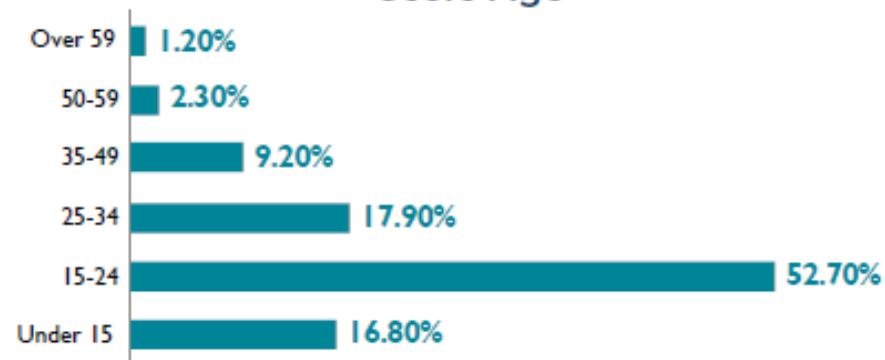
Topic of Interest



Users and FP Methods



Users Age





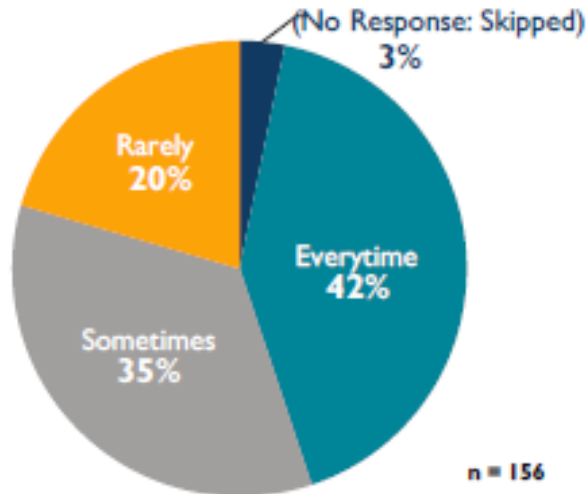
Learning from Haitian Beneficiaries

Mobile survey on condom market, knowledge and behavior

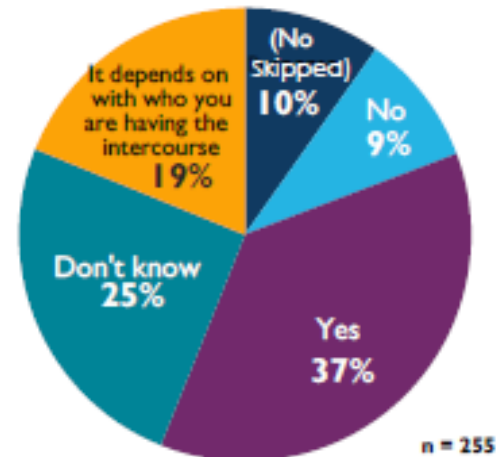
- This survey sought to learn about beneficiary knowledge and behaviors regarding condom use

Key findings from mobile survey on condom market

How often do you use condoms in your sexual intercourse?



Do you think it's important to use condoms during every single intercourse?



- 275 users responded to this survey



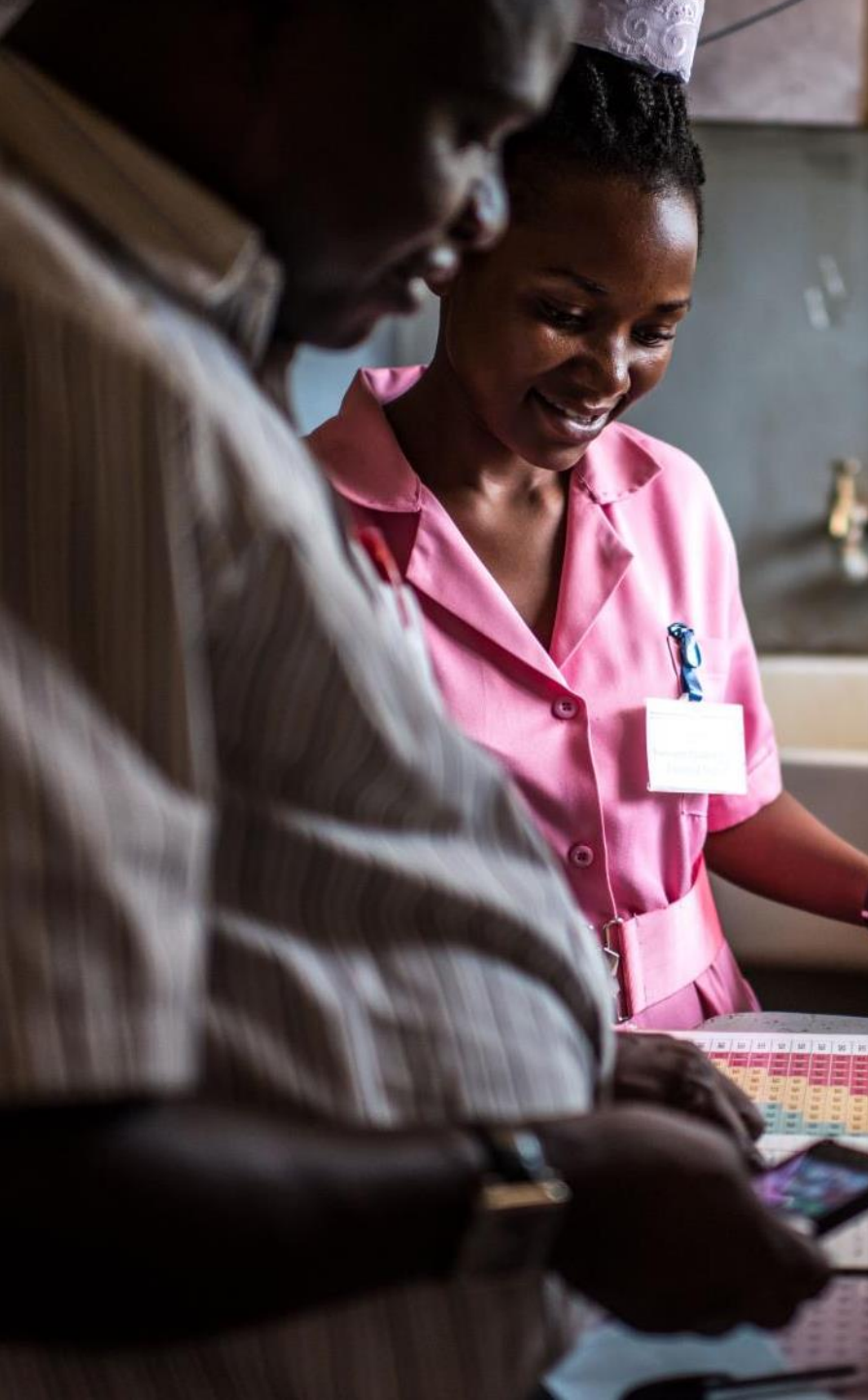
What's Next?

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Duty Roster and Attendance Tracking Mobile Application for in Uganda

Dennis Kibiye, MIS

Informatics Developer
Intrahealth International

STRENGTHENING HUMAN
RESOURCES FOR HEALTH

Background

In 2013, health workers' rate of unauthorized absenteeism was at 52%

- In 2014 IntraHealth worked with MOH & districts to implement absenteeism reduction strategies
- Technology-based strategies are implemented to generate real-time data linked to iHRIS for analysis & decision-making

Process Flow

Facility-Level Activities

1. Develop duty roster to document days scheduled for work, leave, etc.



2. Collect attendance data from biometric machines & mobile phones



3. Automated summary reports on staff attendance



4. Upload to HRIS



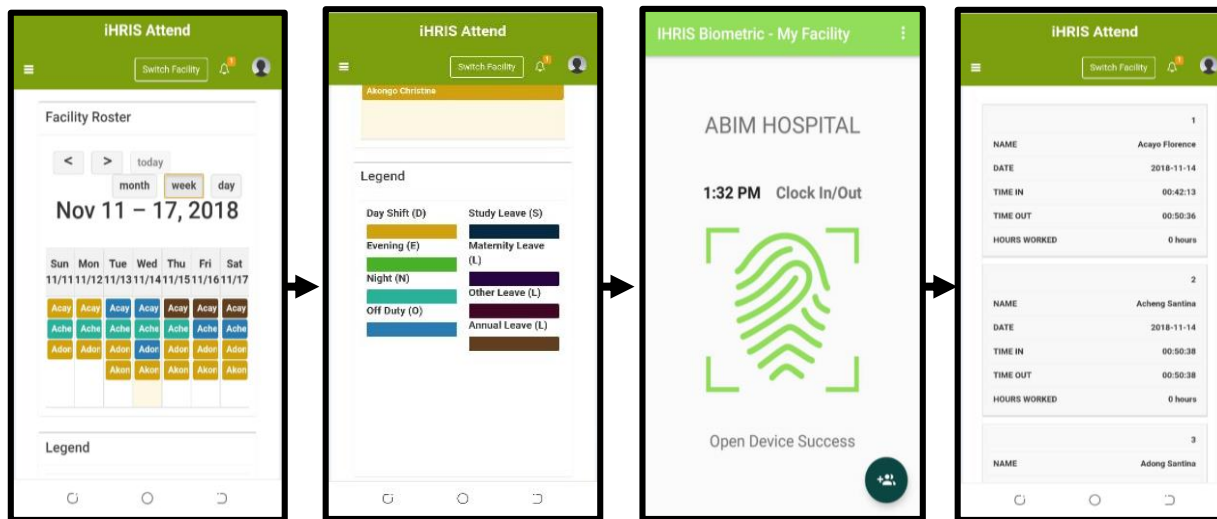
5. Generate reports



6. Take district-level action



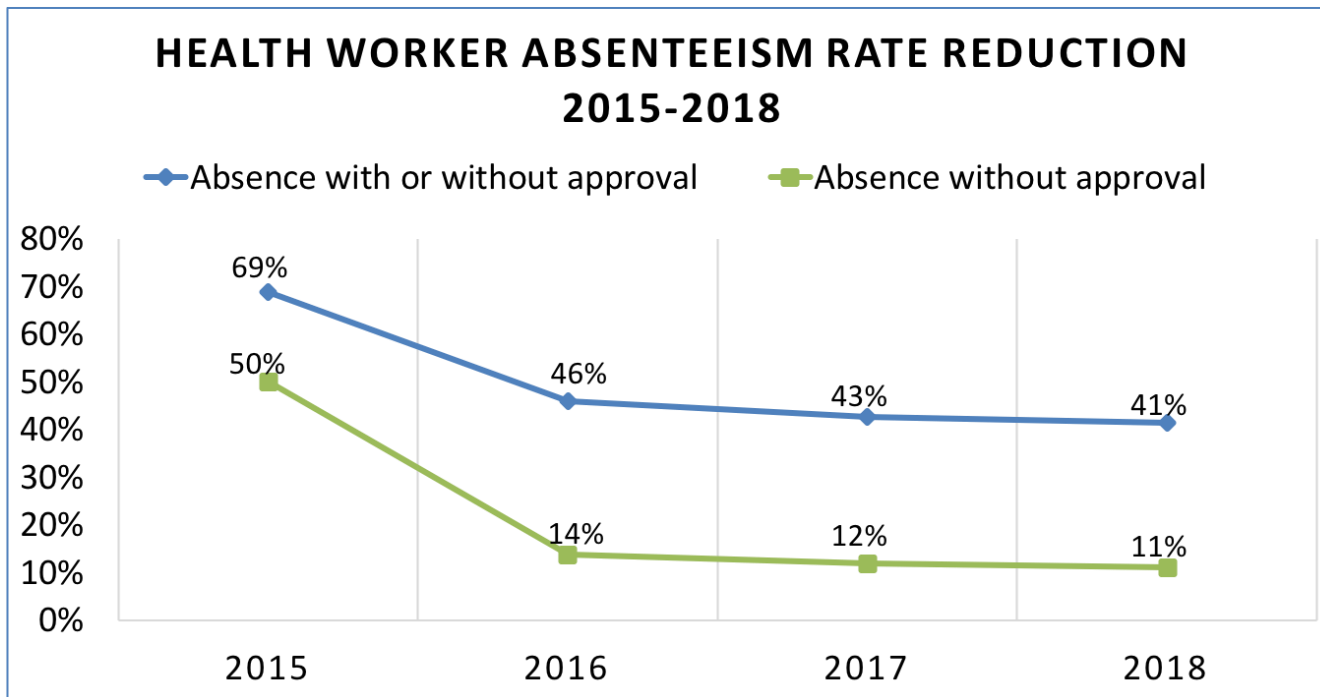
District-Level Activities



The Mobile Application

- Facility in-charges create the duty roster within in the application. Once submitted, the duty roster cannot be changed.
- As the month progresses, clock in and out information is captured using the mobile application
- At the end of each month, attendance summaries are sent to the central iHRIS

Attendance Reports



- Reports can then be viewed and analysed by district officials through the iHRIS system
- The districts use the data for health worker performance improvement measures

STRENGTHENING HUMAN RESOURCES FOR HEALTH

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Thank You

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UKaid
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International Development

IntraHealth
INTERNATIONAL
Because Health Workers Save Lives.





John Snow, Inc.

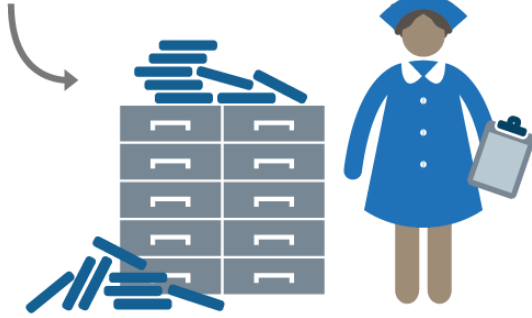


Digital Supportive Supervision

Leona Rosenblum, Lisa Kowalski, Sarah
Hodsdon, Steve Ollis

How Can Digital Help?

CURRENT SS



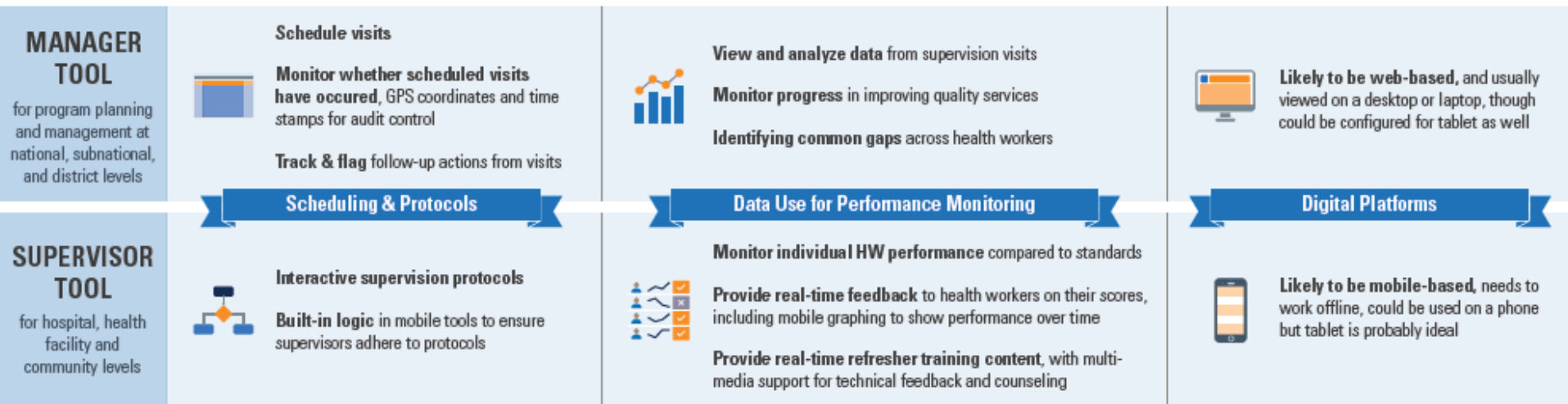
DIGITAL SS



Digital tools can be applied to strengthen SS in assisting:

- **Managers** in knowing if SS visits are planned, when the visits are held, and what are the main outcomes of the visits
- **Supervisors** in evaluating service quality, what needs to be improved and what resources are needed
- **Health Providers** in assessing their own performance, e.g. getting feedback at the time of the supervision

JSI's Digital Supportive Supervision Framework



Pakistan Integrated Dashboard



Health Department Government of Sindh Integrated Dashboard

Login

Sindh Health Information System (SHIS) - Integrating health services, logistics and surveillance data

MIS Dashboards


M&E Dashboards


DHIS
DISTRICT HEALTH
INFORMATION SYSTEM
DHIS Dashboards


M&S


LHW-MIS


MNCH-MIS


Family Planning


TBC MIS


V-LMIS


C-LMIS


Hepatitis


Malaria-MIS


EPI

Surveys

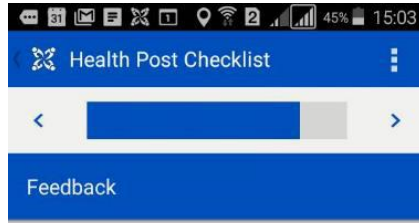

PSLM


MICS


PDHS

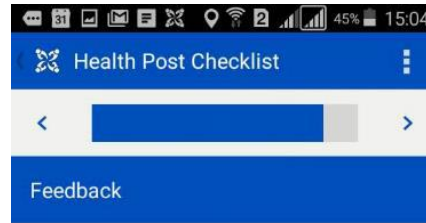
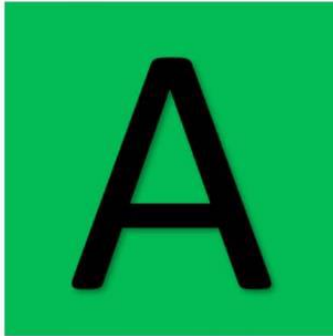

Nutrition

eCHIS Ethiopia



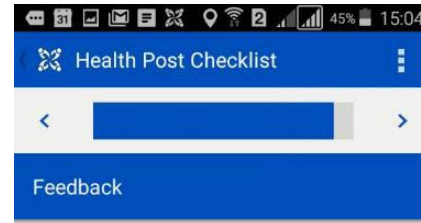
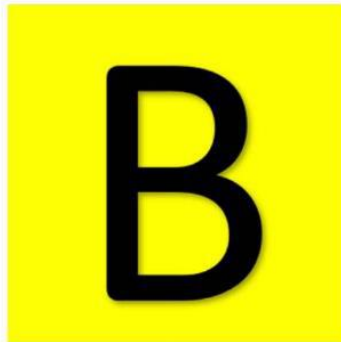
The Score for **General Conditions** is: 100 %

- This is scored as adequate



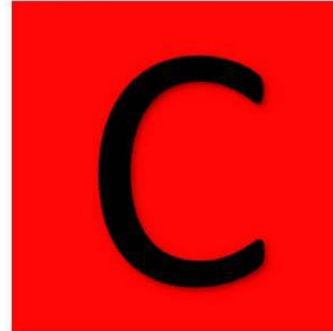
Score for availability of functional **Materials and Stock** is: 78 %

- This is scored as borderline



The Score for **HP Activities and Tracking** is: 25 %

- This is scored as inadequate



Thank you!

