JAMII SMART | KimMNCHip – REFERRALS, mSAVINGS AND eVOUCHERS

Community Module   Clinical Module   Clinical Module

BRIEF OVERVIEW

According to the World Bank, Kenya is among the highest 15% of countries for maternal mortality and the highest 20% for infant mortality, As part of its commitment to the UN Global Strategy for Women's and Children's Health, Kenya will recruit and deploy an additional 20,000 primary care health workers; establish and operationalize 210 primary health facility centers of excellence to provide maternal and child health services to an additional 1.5 million women and 1.5 million children; and will expand community health care and decentralize resources. With integrated mobile financial services, mHealth solutions are especially able to enhance health outcomes at scale, including essential health services in the context of Reproductive Health and Maternal Neonatal Child Health (MNCH). Currently, most mHealth approaches are project based and often at the pilot level. There is urgent need to move from this stage to national mHealth solutions that are cost-effective and evidence-based in terms of health benefits. Brokering multi-stakeholder partnerships towards creating convergence and new business models, such as Jamii Smart, is needed to bring solutions to scale.

Jamii Smart (meaning "smart families") aims to convert the huge success of M-Pesa - Safaricom 's mobile wallet solution adopted throughout Kenya into an effective

mHealth solution that significantly improves MCH by modeling on existing, sustainable mobile technologies with inputs from end users. Through the Kenyan integrated mobile Maternal and Newborn Health information platform (KimMNCHip), this national-scale mHealth initiative offers pregnant women more choices, control and medical care for them and their babies during and after their pregnancy.

The solution is scheduled to go live in April 2013. Phase-ins will run in the Eastern region, Kilifi, Kwale and Kakamega Counties of Kenya, with work already commencing in Kilifi County, and will eventually lead to a nationwide scale-up.

ABOUT JAMII SMART | KimMNCHip

Jamii Smart has three critical phases:

1. Strengthening Kenya's community health referral system through the use of a dynamic mobile phone and web portal solution linking the demand and supply of MNCH services

2. Promoting mSavings and eVouchers for pregnant mothers, leveraging the existing M-Pesa which also offers micro-insurance services

3. Scaling up nationally and regionally in Africa

KimMNCHip aims to reach 8,000 public health facilities, six million mothers and their children, 88,000 community health workers, and health policy and decision makers.

EVALUATION AND RESULTS

To date, the program has automated Kenya's mother and child health booklet which the Government of Kenya (GoK), Ministry of Health uses to track critical areas of MCH. It contains critical content for mothers, information on the four delay-related barriers to obtaining emergency obstetric services, and methods for community health workers (CHWs) to proactively support mothers and the role of fathers and men in caring for pregnant women and their children below the age of 24 months. To avert printing costs that lead to

shortages and data management and data quality challenges, KimMNCHip has automated the booklet for use at the clinic level on both mobile and web portals, as well as to the GoK's DHIS database which is accessible by both CHWs and health facility staff. A prototype shared with the GoK has met their approval and the full application was launched in May 2013.

Additionally, the program has created mSavings for mothers through Linda Jamii (meaning "family protection"), an innovative and affordable healthcare insurance option targeting 35 million uninsured Kenyans. For Kshs.12,000 ($150) per family a year, families will be able to register on a mobile phone and access comprehensive medical coverage. Coverage also includes support for the birth planning process which requires expectant mothers to establish a financial plan. It will also explore the option of communities building a mobile wallet community fund to support women.

Future plans include adopting and automating the currently manual reproductive health Output Based Aid voucher program initiated by the GoK.

LESSONS LEARNED
- Government engagement is critical in mHealth initiatives and in linking technology to programmatic interventions

- A funder is not necessary to begin implementing creative ideas. Starting with zero funds enabled the initiative to align to the needs on the ground as opposed to donor objectives. The implementation team is also able to contribute to financial and nonfinancial resources.

- The initiative completed many firsts, including prioritizing approaching the government to determine national e/mHealth priorities and aligning technology to the priorities, rather than designing a platform and later engaging users

- The role of an independent consultant/partnership

broker in the process was critical for cross-sector partnership success, providing a central coordination point and ensuring equity, conflict resolution, and a central point of communication. This role will eventually transition to the forming governing body of the solution.

CONCLUSION
Jamii Smart and KimMNCHip demonstrated its ability to create business models that are affordable for all with the ability to scale up to a national level.

GEOGRAPHIC COVERAGE
Kenya

IMPLEMENTATION PARTNERS
Government of Kenya, Safaricom, World Vision, CARE Kenya, African Medical Research Foundation (AMREF) Kenya, and Aga Khan University/Foundation

FUNDER
Both financial and nonfinancial resources have been provided solely by Implementing Partners

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