



Impact Evaluation of a Family Planning mHealth Service in Kenya

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SHOPS is funded by the U.S. Agency for International Development. Abt Associates leads the project in collaboration with Banyan Global Jhpiego Marie Stopes International Monitor Group O'Hanlon Health Consulting

Outline

- Background
- Research questions
- Study design for pilot SMS survey
- Results from pilot SMS survey
- Study design for impact evaluation
- Results from impact evaluation
- Conclusions



Background

Mobiles for Reproductive Health (m4RH)

- Provides free, confidential info on family planning via SMS
- Funded by USAID PROGRESS project
- Designed and implemented by FHI360 in response to pervasive myths and lack of info about family planning
- Currently available in Tanzania (>170,000 unique users to date) and Kenya (> 60,000 unique users to date)
- Only available in English in Kenya

Implants are small rods placed under skin of woman's arm. Highly effective for 3-5 years. When removed, can become pregnant with no delay. No infertility or birth defects. Main menu reply 00. More information reply **12**.





Users can also choose to receive vignettes (sent daily) about "someone just like me"

Installment 1: Hi, I'm John. I'm a 29 yearold university student. Yesterday my girlfriend says she wants to use family planning. I don't know what this means and I'm embarrassed to ask her. My friend Tupa says if I support Amina, she will go fishing and I will lose her.



Research Questions

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Pilot SMS Survey

- Is it feasible to collect outcome data directly via SMS?
- Impact Evaluation
 - What is the impact of accessing m4RH on knowledge of family planning methods?
 - What is the impact of accessing m4RH on use of contraception?



Study Design for Pilot SMS Survey

Pilot SMS Survey

- Preliminary pilot conducted to determine feasibility of data collection via SMS and optimal design of SMS survey
 - Pilot SMS survey sent to 1,393 new users
 - Survey timing randomly assigned to either 3 hours after first contact or 8 AM next day
 - Talk-time incentive for completion randomly assigned to low (~0.5 USD), high (~ 1 USD), or lottery



Results from Pilot SMS Survey

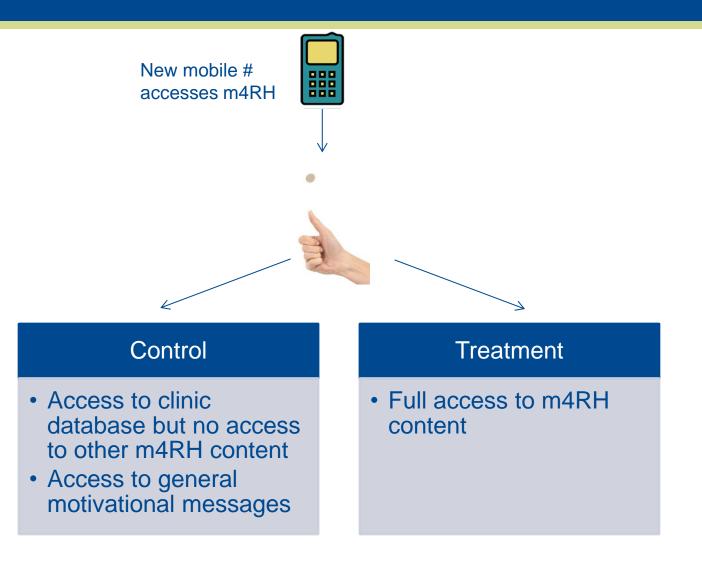
Pilot SMS Survey Results

- 40% of users started the pilot survey and 21% finished
- Response rate did not vary significantly between treatment and control groups
- Survey timing, incentive amount, and incentive type (lottery vs. guaranteed amount) had no effect on response rates
- Vast majority of responses were properly formatted and readable



Study Design for Impact Evaluation

Study Population and Random Assignment



Details of study design registered with RIDIE prior to data collection (Study ID RIDIE-STUDY-ID-5294abf913209)

Data collection

- Questions sent directly to users over SMS in three waves (just after first accessing m4RH, 1 week later, 3 months later)
- Background questions: age, religion, education, gender
- Knowledge questions (modified slightly for readability)
 - When is a woman most likely to get pregnant?
 - Women can avoid pregnancy for 6 months after birth if period has not returned and she breast feeds the baby, true or false?
 - About how long does an IUD last before it needs to be replaced?
 - How many days after sex is emergency contraception pill effective?
 - About how long do contraceptive implants last before they need to be replaced?
- Use and behavior questions
 - Whether using contraception
 - Whether discussed family planning with sexual partner recently
 - · Whether visited clinic to discuss family planning recently

Massive Marketing Push

Large effort to increase number of people accessing m4RH by advertising through radio, newspaper, posters, community outreach, etc., with a lot of help from GoK and family planning NGOs





Results from Impact Evaluation

Sample Profile

- Out of 13,629 new mobile numbers during study period:
 - 47% (6,432) answered at least one knowledge question
 - 24% (3,277) answered at least one use/behavior questions
- Among those who answered background questions:
 - Average age: 25
 - 32% men
 - 90% have secondary or higher degree (compared to 37% national rates)
 - 81% use contraception (Kenya-wide, 39% of women of reproductive age use modern contraception)

m4RH Increases Knowledge of FP...

	Control	Treatment	Impact
Total knowledge correct	2.06	2.33	0.27*** (0.055)

Means are regression adjusted means with missing answers filled in using multiple imputation.

...But Does Not Lead to Behavior Change

	Control	Treatment	Impact (in pct points)
Discussed with partner	39.7%	42.6%	2.9 (2.1)
Visited clinic	72.8%	73.9%	1.1 (1.8)
Use of contraception	81.1%	80.8%	-0.3 (1.5)



Conclusions

Conclusions

- It is feasible to directly collect data from mhealth users via SMS
- m4RH is a cost effective method of increasing knowledge of family planning
- m4RH did not lead to behavior change for sample of survey respondents





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