Framework for Planning, Implementing, and Evaluating an mHealth Project for Family Planning or Maternal and Newborn Health



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Experience of an ongoing effort relating to a planned project in Sierra Leone

Background:

- •Sierra Leone, in West Africa, is in the bottom rankings of the Human Development Index with unacceptable maternal and child mortality figures.
- •The health system in Sierra Leone is characterized by a lack of appropriately qualified health care workers, insufficient supplies of drugs and equipment, poor coordination and management, and charges levied at point of service delivery.
- Free health care for pregnant and lactating women and children under 5: launch 27 April 2010



Mobile phones are everywhere in Sierra Leone, so why not to take advantage of them in strengthening health systems for enhancing maternal and newborn health and survival





Reproductive Health and Research

1. Planning phase

Started in
March 2010
---- On-going







Many issues to be decided:

Choices	Options	How decided	Importance	Priority Order
Field of w	ork MNH FP both	IDIs with MOH	ownership	1
Objectives	Access, quality Saving lives	y, IDIs with health personnel	results	2
Approache	SAM, networking, mentoring, hotline	Literature review,	feasibility	3
Levels	IFC, Health system	Literature review, IDIs with partner organizations	feasibility	3

	Choices	Options	How decided	Importance	Priority Order
	Hardware	Ordinary cell PDA Smart phones	IDIs with IT	Applications, cost	3
	Software	None, Iimited and specific, broad and flexible	Review of experiences elsewhere	Practicality, sustainability	3
	Areas	District, region	coverage	necessity	1
	Collaborators	National International	Meetings, existing collaboration	Approvals, integration, funding	2
	Time frame	Short, long	funds	deliverables	1





2. Definition of roles and responsibilities of collaborators



- Management
- Technology
- Health services
- Training
- Research
- Coordination
- Communication







3. Advocacy for the project

- National authorities
- Partners
- Media
- Population







4. Resource mobilization

- In kind: Possibility to link up with existing activities and use their resources
- funds:
- a. Within alreadyfunded programmesb. Applying forearmarked funds





2. Implementation phase

Possibly starting in July 2010









1. Carrying out pilot(s) to test feasibility

- Focus on Keeping It Small and Simple
- Emphasize quality over quantity

2. Carrying out the project itself







3. Training in

- Technology use
- Research
- Maternal and newborn health
- Family Planning

4. Using "Gender lens" for

- choosing collaborators
- accessing resources,
- disseminating results









3. Evaluation phase

To start very shortly after the implementation has begun





Health systems research to assess

Feasibility: observations, IDIs

Acceptability: FGDs, IDIs

•Impact: Case studies, registry data







Conclusions and recommendations based on experiences in Sierra Leone

- Things are already happening
 - strategic thinking quickly needed
- Easy to become excited
 - requires strong coordination



- Private Public Partnerships deserve more attention
- Need a Champion





