



m4QI Uganda

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USAID High Impact Practice: CHWs



Community Health Workers:

Bringing family planning services to where people live and work

What is the proven high-impact practice in family planning service delivery?

Train, equip, and support community health workers (CHWs) to provide a wide range of contraceptive methods. When appropriately designed and implemented, community-based family planning services can increase people's use of contraception, particularly where unmet need is high, access is low. and geographic or social barriers to use of services exist, Community-based family planning programs are particularly important to reducing inequities in access to services.

other HIPs, see http://fphighir



... CBD [Community-based distribution] is viewed as the single most important family planning innovation. – Phillips et al., 1999

Background

In communities where contraceptive use is low, individuals often face social as well as physical barriers to accessing family planning services. Community health workers help to address these barriers by bringing information, services, and supplies to women and men in the communities where they live and work rather than requiring them to visit health facilities, which may be distant or otherwise inaccessible.

CHWs "provide health education, referral and follow up, case management, and basic preventive health care and home visiting services to specific communities. They provide support and assistance to individuals and families in navigating the health and social services system" (ILO, 2008). This cadre of provider is also referred to as a village health worker, community-based distributor, community health aide, community health promoter, or lay health advisor. The level of education and training, scope of work, and employment status of CHWs vary across countries and programs.

Training, equipping, and supporting CHWs is one of several "high-impact practices in family planning" (HIPs) identified by a technical advisory group of international experts. When scaled up and in the comprehensive family plannin

 Evidence shows that trained and supported CHWs can.

- Address critical shortages in health HR
- Expand access to methods
- CHWs need
 - Competency-based training
 - Links to facility

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Service Delivery HIP

Mobile messages provide critical ongoing engagement and interaction

What is **m4QI?**



SMS intervention to build provider capacity

- Training reinforcement pilot
- 34 FP providers with Marie Stopes Uganda

Intervention

 Sent daily messages for eight weeks on 4 topics

Results

Identified knowledge gaps
 with actionable data

m4QI User Experience



How text messages meet CHWs needs

- SMS offer "spaced education" to reinforce training
- Interactive quiz format engages, enables assessment
- Messages provide link to supervisors
 - Overcomes geographic barriers and isolation

Sample question

3. True or False: You never need to wash your hands with soap and water between clients, alcohol rub is sufficient. Reply T for True, F for False.

If Correct Response (False) –

That is correct! You can use an alcohol rub if your hands aren't visibly dirty, otherwise you must use soap and water.

How mobiles take HIPs to scale

- Marie Stopes integrating into programs Nigeria, India and throughout Uganda
 - Applications will address a range of providers, from social franchisees to mobile outreach teams
- SHOPS conducted impact evaluation with non-FP providers in Ghana
 - Significant impact on knowledge, but no change in recommended treatments – inviting further research
- FrontlineSMS:Learn available for free download here: http://learn.frontlinesms.com

Low cost way to increase CHW engagement and maintain skills