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**DIGITAL HEALTH TECHNOLOGIES FOR TUBERCULOSIS
INNOVATIVE PLATFORMS FOR SCALE-UP**

MomConnect: Lessons for TB mHealth

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Mobile health messaging service and helpdesk for South African mothers (MomConnect): history, successes, challenges & lessons



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



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History

- **MomConnect was launched in August 2014 as a flagship program of the South African National Department**
- **Messages, free of charge to user, sent to pregnant women and women with young infants.**
- **Messages designed to be linked to the age of fetus/infant & sent 2x per week**
- **System designed so women could interact with a helpdesk, staffed by professionals (questions, complaints, compliments)**





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Successes

- Strong on-going leadership from the DOH
- Represents 63% of all pregnant women in public sector
- In 3.5 years MomConnect has reached 2m pregnant women; Entirely free to users
- Virtually all (95%) of public sector clinics have MomConnect in place
- Helpdesk deals with 500+ questions/day
- Compliments outstrip complaints 8fold
- Complaints result in improved quality
- Data hosted in DOH and inter-operable





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Fast & effective communication

- South Africa had the largest recorded outbreak of listeriosis.
- Within days a message was sent to all moms registered on MomConnect and 20,000 front line nurses on NurseConnect

“It takes a long time for information to get to us in the rural areas. With this NurseConnect we get information on the same dy as the nurses in the city”





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Challenges



- Registrations (getting moms on board) is difficult (USSD timeouts) & takes valuable health worker time
- Sending messages via SMS is both limiting (content) and costly at large scale
- SMS limits feedback and interaction especially at the local level between users themselves and health workers
- Mobile phone number changes occur frequently and result in drop outs from system



Ten lessons learned

1. **Government leadership** is fundamental
2. A scaled digital health implementation requires **complex multi-stakeholder partnerships**
3. Open-source software and open standards enable an **interoperable system** that can grow and expand as technology and requirements change.
4. SMS and USSD were the right choices originally, but there is need to use **alternative technology for registration and messaging.**
5. **Formal integration** with the public health system via facility registration & code, & helpdesk allows MomConnect to **generate demand for health services while collecting data to strengthen supply.**



Ten lessons learned (2)

6. It is possible to write **evidence-based messages** that address the most important identified perinatal and child health problems in South Africa **in language that women can understand.**

7. SMS messages increase use of the helpdesk, but as demand increases, **mechanisms to streamline and improve helpdesk responses** must be explored

8. Large-scale mobile health programmes require **long-term commitment and earmarked funding** for core functions and innovation.

9. Messaging programmes **need monitoring throughout the complete user journey** to identify points of failure from first contact through to receipt of messages.

10. mHealth programmes should consider **evaluation from the outset**, including collection of baseline data prior to implementation.



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Thank you

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