 REGIONAL WORKSHOP FOR CIS AND GEORGIA

“Most Popular Mobile Applications: Ways of Implementation and Development in the CIS Countries”

mHealth

Issyk Kul, Kyrgyz Republic, 6-8 September 2016

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ICT Applications, ITU
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Good Health and Well-being

Ensure healthy lives and promote well-being for all at all ages.
## Examples of mHealth Strategies

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Source: Dalberg research and analysis)
## Examples of technology options for Health

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<th>CHANNEL</th>
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| IVR (Interactive Voice Response) | • Voice- and phone-enabled access  
• Fast time-to-market  
• Supports natural language  
• Ease of integration | • Limited capability and development tools  
• Inability to pause, resume, forward and rewind |
| SMS | • Simple, easy and convenient  
• Cost effective  
• Private communications  
• Fast communications | • Some security vulnerabilities  
• Fake SMS (spoofing) |
| USSD (Unstructured Supplementary Service Data) | • Simple and logical  
• Real-time, fast and responsive  
• Inexpensive  
• Interactive navigation | • Session-based timeouts  
• Codes more difficult to remember than Common Short Codes |
| MMS | • Direct and personal  
• Messages can be stored and forwarded  
• Interactivity through multi-media | • Not compatible with basic phones  
• More expensive than SMS  
• Content adaptation limited by screen size and resolution variations  
• Read and response rates lower than SMS |
| Data Applications | • Self-contained experience  
• Graphics and user-generated content  
• Automatic updates and read content offline  
• Leverages device-native capabilities (camera, GPS)  
• Strong paid model | • Fragmentation, need to build for multiple platforms, with time and costs  
• Managing multiple releases  
• Client side changes  
• Need to submit app to some stores for approval |
| Mobile Web | • More economical than mobile apps  
• Mobile phones and smartphones supported  
• Mobility for content and services  
• Videos and photos | • Less functionality, unable to use advanced phone features such as camera, GPS  
• Small display size  
• Low text input and low bandwidth |

In addition to Helplines, Voice calls, TV, Radio, Social Networks, etc.
Examples of eHealth supporting health promotion for MNCH

### A. eHealth services provided to individuals, new and expectant mothers, infants, their families and communities

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<th>ICT innovations and services</th>
<th>Pre-pregnancy</th>
<th>Pregnancy</th>
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<td>Access to Reproductive Health Information</td>
<td>Providing tips on appropriate care and general information on pregnancy</td>
<td>Incentivizing women to attend facilities providing skilled care during and after birth</td>
<td>Access to information about infant and child nutrition, safe drinking water, hygiene promotion, etc.</td>
<td></td>
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<td></td>
<td>Reinforce positive health behaviour change, such as child spacing</td>
<td>Support the prevention and treatment of mother-to-child transmission of HIV/AIDS and other communicable diseases</td>
<td>Peer support networks of pregnant women</td>
<td></td>
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<tr>
<td></td>
<td>Stimulate demand on Reproductive healthcare</td>
<td>Improving access and utilization of Maternal Health Services by pregnant women</td>
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The NHP Voice Web is a 24X7 toll free helpline (1800-180-1104) wherein you can get authentic health information.
Example of eHealth for Health Promotion: SMS for MNCH

Mom receives personalized, stage-based messages 2–3 times a week.
- Encouragement
- Warning Signs
- Reminders

"Dizziness, headaches and tiredness are all symptoms of low iron. Take a daily iron and folic acid supplement. This should help.”

"Baby kicking? Try tickling him when he kicks. He can feel your touch now. If his movements slow down, talk to your midwife.”

"Look out for signs of illness. If your baby vomits more than five times during a day, go to the clinic. Give her plenty of extra breastfeeds.”

"Give your baby a big smile or scrunch up your nose: watch and your baby will copy you. You are the center of his world!”

http://www.mobilemamaalliance.org/
Connecting Frontline Health Workers to resources and each other to expand their knowledge, organize content into courses, and share their learning with the community.
Preparing Injectable Medicines
Video from Global Health Media Project
This film shows how to use a dosing guideline and how to prepare and draw up two commonly used antibiotics, ampicillin and gentamicin.

The Position of the Baby
Video from Global Health Media Project
This film demonstrates how to feel where the baby is within the uterus and how to measure the station of the baby.

Giving Good Care During Labor
Video from Global Health Media Project
This film shows ways to help a laboring woman and contribute to a feeling of trust.
Health Education for Women and Children Health

Uganda: delivering vital health content in rural areas

Makerere University

Medical Aid Films

Global Health Media

Video training content

www.health-orb.org

ORB by mPowering

Outernet’s Lighthouse

https://outernet.is/

Health content can be viewed offline and shared with other health workers and the community
Care Program Management Phase – Example: Open Smart Register Platform
Care Program Management Phase – Example: Open Smart Register Platform

Across the system: linkage to the Maternal Child Tracking System (MCTS); Drishti-based real-time monitoring of provider performance (head-, hand-, heart-scores) related to service delivery and client health outcomes; automated reporting of services, commodities, and health events into HMIS.
SMS printers aid early infant diagnosis of HIV/AIDS in Nigeria

- Early infant diagnosis of HIV is critical
- Infant tested, sample sent to lab
- Lab test for HIV and results instantly returned to remote health facility by SMS technology
- Results received and printed by SMS printer, and shared with baby's caregiver
- Life-saving treatment promptly initiated
Non-communicable diseases (NCDs) are rising faster than the decline of infectious diseases and maternal and child health issues.

Four out of five deaths from NCDs worldwide are in low- and middle-income countries.

Be He@lthy Be Mobile: mHealth for NCDs

- Joint initiative between two UN agencies: WHO and ITU
- Supports government scale-up of health interventions for NCDs using mobile technology
- Collects global evidence on best practices for technology, health content for prevention and management
- Promotes universal health coverage, innovation and intersectoral collaboration
- Focus on Partnerships, Toolkits, and Countries

Scale-up model: from pilot to institutionalization
Example of a Smoking Cessation programme using mobile in India, Tunisia, Philippines and Costa Rica

https://www.dropbox.com/s/mjr6z96ejdbdglx/Changing%20the%20Face%20of%20ICTs%20Costa%20Rica%20%281%29.mp4
Some design principles for SMS for Health Promotion and Behavior change

User opts-in by sending a «keyword» to a short code e.g., SEND cessation to 21214

Promotion Campaign to publicize the Health promotion Programme

Different enrollment mechanisms e.g., filling a form, calling hotline, online form submission or by SMS

Sample profiling data gathered at opt-in:
1. sex, 2. age, 3. heavy/light smoker, etc

Profile data not required at opt-in

Profile details request

User profile refined

User gives details

Tailored interactive SMS

User replies

User asked to complete a step, e.g., confirm quit date reached

Reminder sent

User replies

Education

Personal time-triggered motivation: “Don’t smoke, text us”

User profile refined

User replies

Education

Time-triggered calls to action: “don’t smoke after meals”

Motivation

Education

Quitting Tips

1-way communication

SMS

2-way communication

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Some tips when writing the message library

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<th>Approach</th>
<th>Example message</th>
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<tr>
<td>Provide health information, advice and tips, often tailored around user characteristics</td>
<td>Try using Nicotine Replacement Therapy (NRT). Smokers who use NRT double their quit rates.</td>
</tr>
<tr>
<td>Ask users to set goals</td>
<td>By how many cigarettes do you hope to cut down?</td>
</tr>
<tr>
<td>Provide opportunities for tracking progress</td>
<td>Track how many cigarettes you smoked yesterday.</td>
</tr>
<tr>
<td>Provide reinforcement for goals which are met</td>
<td>Congrats! You met your goal.</td>
</tr>
<tr>
<td>Offer reminders (e.g. to take vitamins; to follow-through with goals)</td>
<td>Your Quit Day is tomorrow.</td>
</tr>
<tr>
<td>Offer social support</td>
<td>Hi! I’m your quitpal. I’ve been through this and quitting is tough. Stick with it and you’ll make it through.</td>
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</table>
2-way SMS behavior change programme for Tobacco Cessation

Promotion to media and public

Participants register via online form or by text (including mobile phone number, self-selected quit date (between 1-3 weeks from registration), and ID number)

On completion of registration, sent first text message “Do you want to receive the X text message programme? Reply OK”

Participants reply (S, s, i, S, s, acen, is, Si, ….. all recognised). Scheduled programme of text messages starts

Countdown to quit date (QD) includes one message per day with preparation tips (from registration to day before QD)

Text STOP – stop sending text messages
Text CRAW – immediate text message from crave database, different each time
Text LAPSE – immediate text message from lapse database, different each time
Text RELAPSE – can start another 4-week intensive round of messages if desired

Intensive period of 3 text messages per day from QD to 4 weeks post-QD (between 8am-8pm, allow participants to change time if shift work). Quitting question at 4 weeks (How many cigs per 7 days?), allow to re-set QD?

Maintenance period of reducing frequency of text messages to one per day, three per week, one per week, one per 2 weeks, up to 6 months post-QD: Quitting question @ 6 months

Programme finishes at 6 months.
Option to allow people to re-start programme
Example of mHealth for Behavior change through mApps

SmokeFree App

Welcome to your first step in becoming smokefree
Every week thousands of people decide to become smokefree. For the next 28 days, this app is here to help you join them.
Example of mHealth for Behavior change through mApps

Progress

Gamify the process and make success sharable

Core messaging built around 28 day journey

Progress to visually demonstrate achievement

Example of mHealth for Behavior change through mApps

Progress

Gamify the process and make success sharable

Core messaging built around 28 day journey

Progress to visually demonstrate achievement
Example of mHealth for Behavior change through mApps

- Raises awareness on the hazards of tobacco dependency
- Offers quitting tips and encouragement using video clips with local celebrities
- Non-smokers can use it for advice on helping family and friends quit smoking
Example of mHealth for Behavior change (Smoke Quit)

BupaQuit is an evidence based intervention for craving monitoring and management

Help you stay smoke free for 28 days…

…by helping you overcome your cravings…

…through clinically proven behaviour change interventions
Diabetes: a significant Public Health Issue

1 in 12 people with diabetes do not know they have it.

1 in 9 healthcare is spent on diabetes.

In 2014, diabetes expenditure reached US$612 billion.

4.9 million deaths in 2014.

387M people living with diabetes worldwide.

Macrovascular Complications:
- The risk of stroke in newly treated Type 2 Diabetes patients is more than double that of the general population.
- People with diabetes are two to six times more likely to develop cardiovascular disease than people without diabetes.

Microvascular Complications:
- Damage to the kidney filtering systems from diabetes (diabetic nephropathy) is a leading cause of kidney failure.
- Microvascular damage to the retina from diabetes (diabetic retinopathy) is a leading cause of blindness.
- Damage to the nerves from diabetes (diabetic neuropathy) is a leading cause of foot wounds and ulcers, which frequently leads to foot and leg amputation.
The mDiabetes intervention needs to be embedded within the continuum of prevention & care.
There are plenty of ad-hoc solutions to tackle specific needs, but there’s a lack of integrated solutions.
1. Lifestyle guidance (diabetes awareness)
1.3. Text Messaging: mDiabetes, by Arogya World (India)

Arogya World (www.arogyaworld.org) is a global health non-profit organization working to prevent NCDs, non-communicable diseases, through health education and lifestyle change.

mDiabetes in India reached more than one million people from all over India with text messages in 12 languages about diabetes and its prevention, and has tested the program’s effectiveness in bringing about behaviour change known to prevent diabetes.

**Evidence:**
Consumers’ awareness of diabetes and its complications increased, and promising trends in behaviour change were noted: an 11% increase in daily exercise, a 15% increase in the intake of 2-3 servings of fruits a day, and an 8% increase in 2-3 servings of vegetables a day.

- 2 texts a week for 6 months
- 56 txts about diabetes
- 45m txts sent
- 1m people enrolled / 186K people finished programme
- Partnership with Nokia, Emory University, J&J, Aetna & Ipsos
- Deployed in India in 12 languages.
- Arogya are based in the US.
Diabetes UK is the leading charity that cares for, connects with and campaigns on behalf of every person affected by or at risk of diabetes.

The Diabetes Risk Score determines risk of Type 2 diabetes over the next 10 years.

People at increased or low risk will be given lifestyle advice in order to keep the risk low.

People at moderate or high risk will be asked to visit their local GP surgery for lifestyle intervention advice and possible diabetes diagnostic tests.

- In conjunction with Leicester University and Leicester University Hospitals
- Over 324,000 assessments delivered online. Sept 2013:
  - Low: 29%
  - Increased: 37%
  - Moderate: 25%
  - High: 9%
- Available via website and mobile browsing site.
- Those at moderate or high risk receive a PDF letter for the GP (over 30% of total).
Care4life is a mobile health program that sends text messages according to the individual’s care plan and focuses on the core principles of diabetes care.

The messages will have education about diabetes, tips for managing diabetes, reminders to test blood glucose, take medications, and record weekly progress on weight, exercise, and medication adherence.

Evidence:
- 85% reported improved knowledge of diabetes and how to manage it
- 85% said care4life helped them remember to take medications and attend doctors’ appointments
- 86% said it helped them set health goals and work toward achieving them
- Further, 96% of participants would recommend care4life to other people with diabetes.

- Launched in Oct 2012
- Free interactive 6-month mobile programme.
- Text messaging + Data tracking + Virtual coaching
- In collaboration with the American Diabetes Association.
- Free for individuals. Licensing model for healthcare professionals and health insurers.
5. Care monitoring & coaching
5.2 Care companion app: DiabetesManager, WellDoc (US)

DM is the first mHealth solution cleared by the U.S. Food and Drug Administration (FDA) to provide real time, automated clinical and behavioural patient coaching combined with decision support for the patient’s doctor.

Evidence:
The intervention impacted medication therapy management at the provider level, while simultaneously supporting other key aspects of diabetes self-management, such as glucose testing, diet, and exercise.

The virtual patient coach portion of the WellDoc solution reduced A1c on average by 1.5 percent and when physicians utilized the clinical decision support the A1c was further reduced by approximately 30 percent, or a total of 1.9 percent. These results were significant compared to the 0.7 percent A1c reduction for control group.

“Mobile Diabetes Intervention for Glycemic Control: Impact on Physician Prescribing Behavior” (ADA) 72nd Scientific Sessions

• Two insurance companies have already agreed to pay more than $100 a month for patients who use WellDoc’s DiabetesManager.
First phase

- A series of SMS messages sent during Ramadan to help diabetics manage their diabetes in 2014-2016.
- High visibility and engagement at the population level
- More than a million SMS messages sent to more than 52,000 participants so far.

Four tracks:

i. Prevention (general population risk awareness)
ii. Management for diabetics
iii. Health care worker training
iv. Foot complications
Portable health clinic consists of cost-effective portable devices and back-end service infrastructures.
ITU’s Personal Health Care Standards

- **ITU-T H.810** Interoperability design guidelines for personal health systems (transposition of Continua Healthcare Guidelines) – Dec 2013
- **ITU-T H.860**: Multimedia e-health data exchange services: data schema and supporting services (ongoing)
- **H.820-H.849**: Interoperability compliance testing of personal health systems (HRN, PAN, LAN and WAN) (ongoing)
mCessation English version

Flow Start
Send Message
Congratulations on your decision to quit smoking. Before we start this program, please tell us your name. Reply with your full name (Example: John Doe).

Send Message
Thank you @flow.name for your registration. If you feel like you lost your way and you want to end this program reply with END otherwise reply with GO.

Confirmation
GO
END
Other

Send Message
Now @flow.name, we are sorry that you are not interested to continue with our program. However, we hope to see you when you feel like you are ready. Bye.

Send Message
@flow.name, we are sorry that you are not interested to continue with our program. However, we hope to see you when you feel like you are ready. Bye.

Send Message
Dear @flow.name, the date you gave us is in the past. Could you please give us a date between today and the next 2 days (ex. 01.03.2015).

Send Message
Dear @flow.name, the date you gave us is not valid. Could you please give us a date between today and the next 2 days (ex. 22.12.2014).

Send Message
Update Contact
Update value for Quit day

Send Message
Update Contact
Update value for Contact Name

Name
All Responses
Welcome to VOTO Mobile

VOTO Mobile’s platform lets you bridge language, literacy, and distance barriers using the power of mobile communication. Share information with InfoLink, request feedback with SurveyLink, and be always listening with OpenLink.

Send a Message  
Send a Survey

Current Activity
- Sending Call with Message: Welcome to programme
- Calls Sent Total Succeeded: 0, Total Failed: 0
- SMS Sent Total Succeeded: 0, Total Failed: 0
- Call Started: Today at 3:16pm

Recent Activity
No Recent Activity

Overall Engagement

InfoLink
- Subscribers: 2
- Calls Sent: 4
- Calls Answered: 2 (50.00%)
- Total Airtime

SurveyLink
- Surveys: 0
- All Respondents: 0
- Questions Asked: 0
- Questions Answered: 0 (0%)

OpenLink
- Received Calls: 0
- Average Duration: 00:00
- Messages Retrieved: 0
- Surveys Completed: 0
Some tips when writing the message library

- **Messages can take many forms.** Providing information or advice, asking users to track behaviours, providing feedback on goals, offering reminders or providing social support. Remember: try to keep it to one actionable message per text.

- **Message language.** Text messages generally should start with the programme name. Do not use abbreviations or text speak (e.g. ‘how r u doin?’).

- **Provide a way for users to get more information.** Give them the option to either reply to a text to request more information or provide a link to a web page with more information.

- **Consider smartphone or social media integration.** Users may be reading text messages on smartphones. This means that text messages can seamlessly link to email, web and Facebook, and the content can include multimedia (audio, video), games and visualization of data.

- **Repurpose already-existing content.**

- **Focus on message quality.** Messages should be evidence-based and derived from theory.

- **Consider the literacy demands on your audience.**
ITU-WHO National eHealth Strategy Toolkit

Part 1
National eHealth vision

- Manage the process
- Engage with stakeholders
- Establish the strategic context
- Learn from trends and experience
- Draft an initial vision
- Identify required components
- Gather information on the eHealth environment
- Assess opportunities and gaps
- Refine vision and develop recommendations

Part 2
National eHealth action plan

- Manage the process
- Engage with stakeholders
- Develop eHealth action lines
- Develop an integrated action plan
- Determine high-level resource requirements
- Apply funding constraints to refine plan
- Define implementation phases

Part 3
National eHealth monitoring and evaluation

- Define indicators for monitoring and evaluation
- Define baseline and target measures
- Define supporting governance and processes

Leadership and governance

- Strategy and investment
- Services and applications
- Standards & Interoperability
- Legislation, policy and compliance
- Workforce
- Infrastructure