



Data Use Campaign Update and Report Out

Andrea Fletcher, Stream Lead, Cooper/Smith

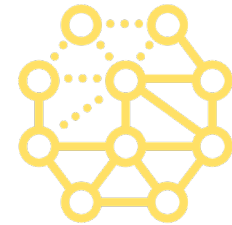
March 2019

01

Background

Data Use Campaign

What we knew prior to campaign:



From our Data User Study (2016) and Discrete Choice Experiment (2017) we found that **~65% of nurses and clinicians have smartphones**. That number jumps up to **~85% of district staff**.

From the Discrete Choice Experiment we know that healthcare workers are incentivized by mobile applications, as much as **1.5 more than other incentives**.

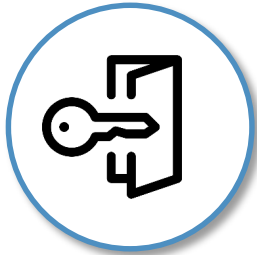
From our mobile health landscape analysis, we know that the DHIS2 dashboard app has never been deployed in Malawi. Deploying it would **build upon national systems**.

What is the data use campaign?

As part of the Kuunika "*Core Package*" districts will receive an activity called the "*Data Use Campaign*" which delivers to each facility an **exposure to the various data use services planned and encourages them to explore** what is already available.

How will the campaign improve data use?

By Improving:



Data Access

Ensuring all decision makers & data handlers at district and facility levels have logins and know how to access DHIS2



Knowledge & Understanding

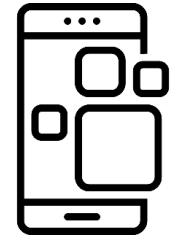
Providing simple training, how-to guides, and basic intros to data systems



Critical Thinking

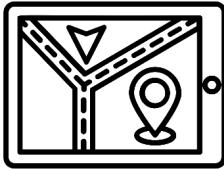
Through case studies and examples of how others are using data in decision making

How will the campaign do this?

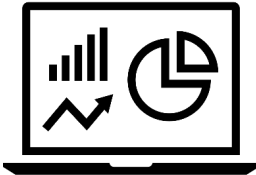


- Visit all sites across 5 districts (200+ sites)
- Start with Zomba district in November 2018
- ~40 facilities will be reached within 2 weeks.
- Teams of consultants (4 teams of 2)
- 1 team goes to each facility
- Meets with staff, provide materials, help download the mobile application and provide technical support
- Accompany DHIS2 mobile application and DHIS2 dashboards
- Provide case studies on how others are using data

How will we know if we are successful?



Use a mobile application for tracking consultants delivering materials to collect demographic data and track what each individual and facility received as part of the campaign

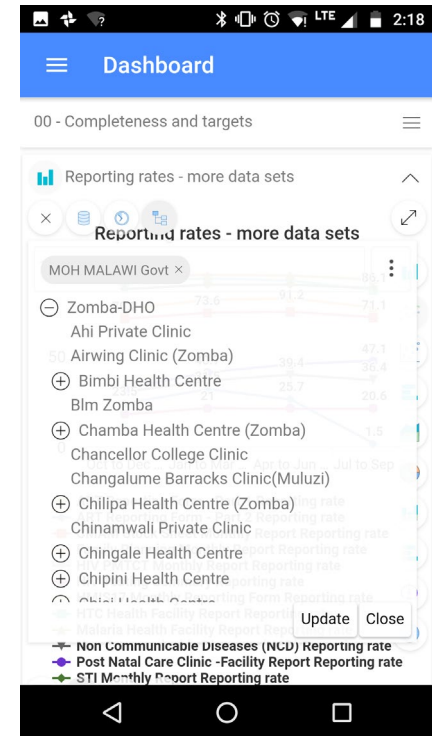
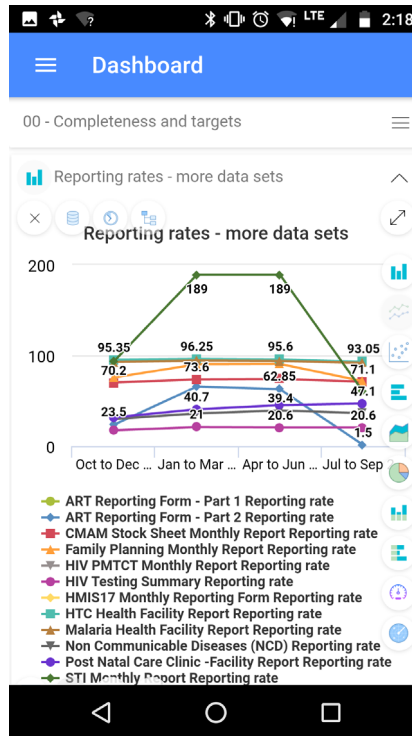
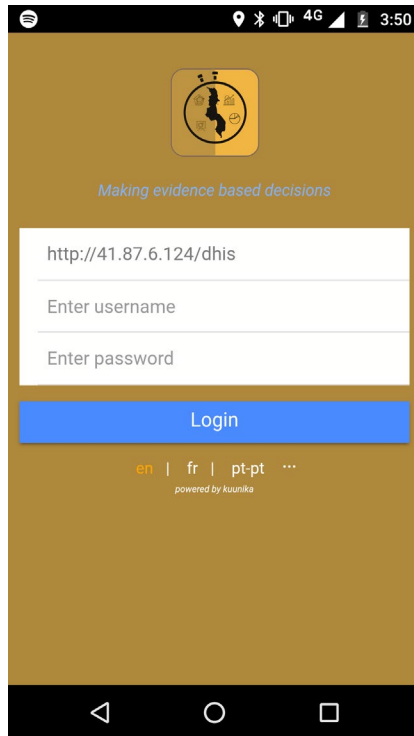


Track DHIS2 analytics using Google Analytics



Produce reports on district and national DHIS2 usage

The Malawi HMIS App



Accompanying Materials (available in English and Chichewa)



DHIS2: GETTING
STARTED

A GUIDE TO THE DHIS2 HEALTH INFORMATION SYSTEMS



DHIS2 Getting Started Guide - a simplified DHIS2 training booklet for the application and the web browser.

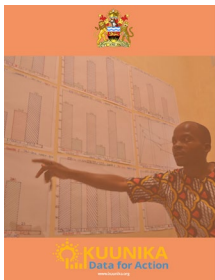


DATA USE CASE
STUDY WORKBOOK

HOW TO ENGAGE WITH DATA IN HEALTHCARE SETTINGS TO IMPROVE SERVICES



Data Use Case Studies – to engage in critical thinking and understand how others are using data in healthcare settings.



Campaign and Project Brochures – to help users orient to other available services and understand the campaign.

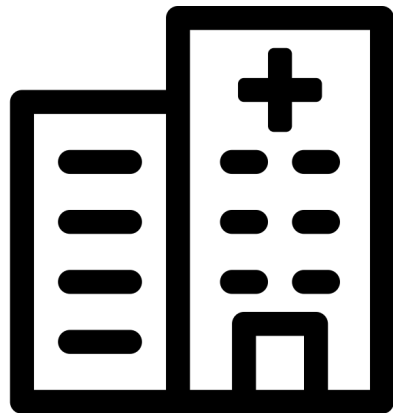
Visit www.kuunika.org to download copies of the materials.

2

Implementation
**Achievements to
Date**

Number of Facilities Reached by the Campaign

- From 1 November 2018 – 1 March 2019, a total of 166 facilities were reached
- *This does not include Lilongwe District (55 facilities) which is scheduled to roll out in March/April.*



District	Number of Facilities
Zomba	42
Blantyre	42
Thyolo	40
Mangochi	42
Total	166

Number of Facility & District Staff Reached by the Campaign

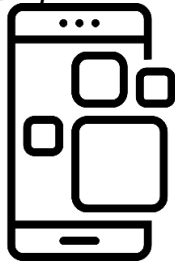
- From 1 November 2018 – 1 March 2019, a total of 1782 individuals were reached
- *This does not include Lilongwe District (55 facilities) which is scheduled to roll out in March/April.*



District	Number of Individuals
Zomba	238
Blantyre	445
Thyolo	392
Mangochi	525
Total	1782

HMIS App Downloads

- From 1 November 2018 – 1 March 2019, a total of 744 were able to download the application. 42% of all Data Use campaign participants. It did vary from 23%-57% by district.
- *This does not include Lilongwe District (55 facilities) which is scheduled to roll out in March/April.*



District	Number of Individuals
Zomba	238 (57%)
Blantyre	242 (54%)
Thyolo	92 (23%)
Mangochi	172 (33%)
Total	744 (42%)

Data Use Campaign:

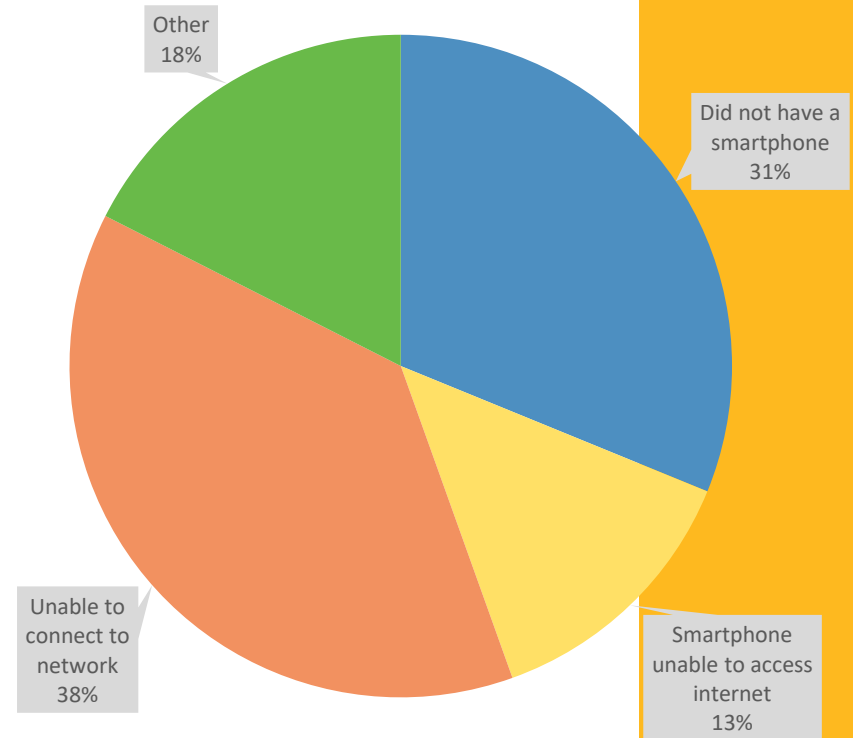
District	Number of Facilities	Number of Participants	Participants able to download HMIS app
Zomba	42	238	238 (57%)
Blantyre	42	445	242 (54%)
Thyolo	40	392	92 (23%)
Mangochi	42	525	172 (33%)
Total	166	1782	744 (42%)

This does not include Lilongwe District (55 facilities) which is scheduled to roll out in March/April.

Common Issues - Unable to Access App

1. Unable to Connect to the Network (364 participants)
 - We left behind information with facilities and participants so they can download the app when they are next in a place with connectivity
 - *We should encourage Districts meetings to spend time helping staff download the app when they are in bigger cities.*
2. Did not have a smartphone (299)
 - We used a "bring your own device" model, however, anecdotally we know this may encourage people to purchase new phones
3. Smartphone unable to access the internet (128)
 - Smart phone is the wrong model/old/broken
4. Other (168)

Breakdown of why Data Use Campaign participants could not download the mobile application



3

Our Users

**Understanding our
Users**

What Users are Saying

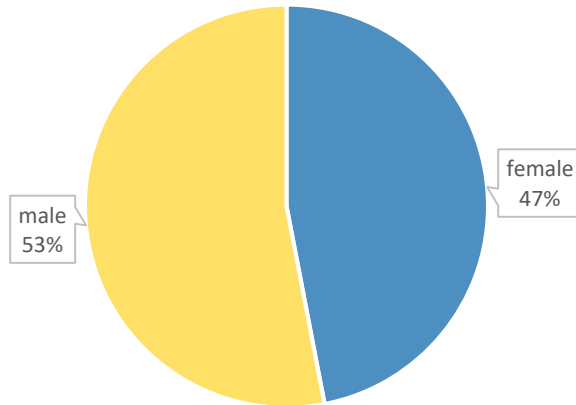
"In many instances, we find serious discrepancies between the data they show us at DHO during review meetings and the data in our registers. This application, as you have said, will help us identify these anomalies way before review meetings take place. This application is relevant".

-Facility In-Charge, Ngapani Facility, Mangochi District

Participant Demographics

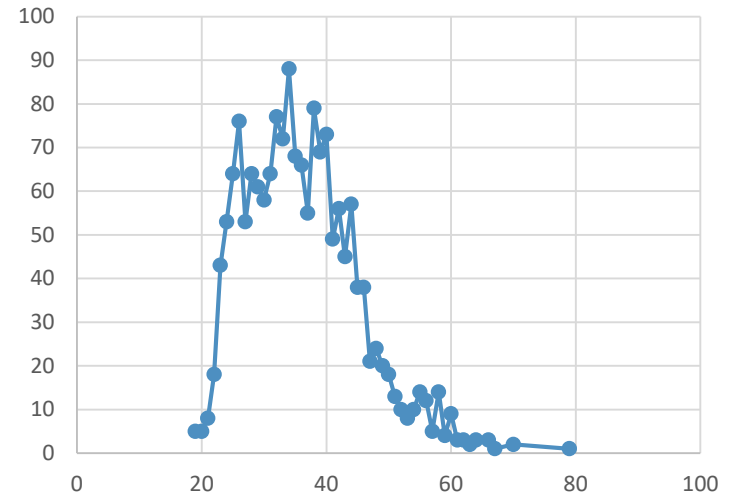
GENDER

DUC Participants by Gender



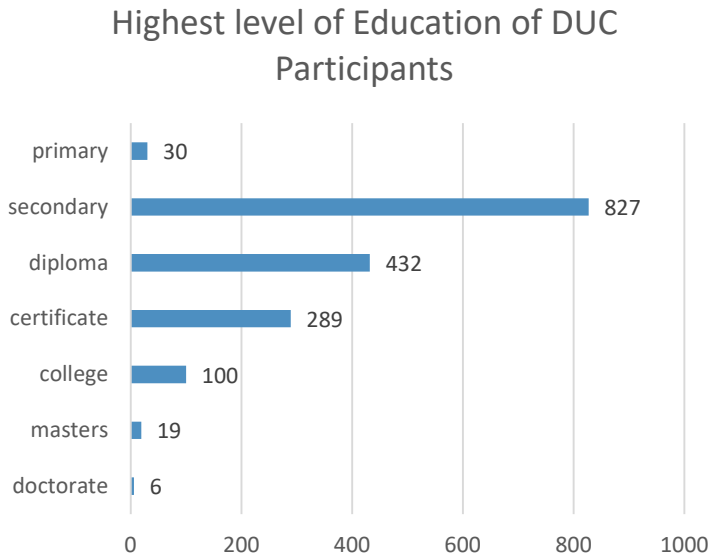
AGE DISTRIBUTION

Age Distribution of DUC Participants

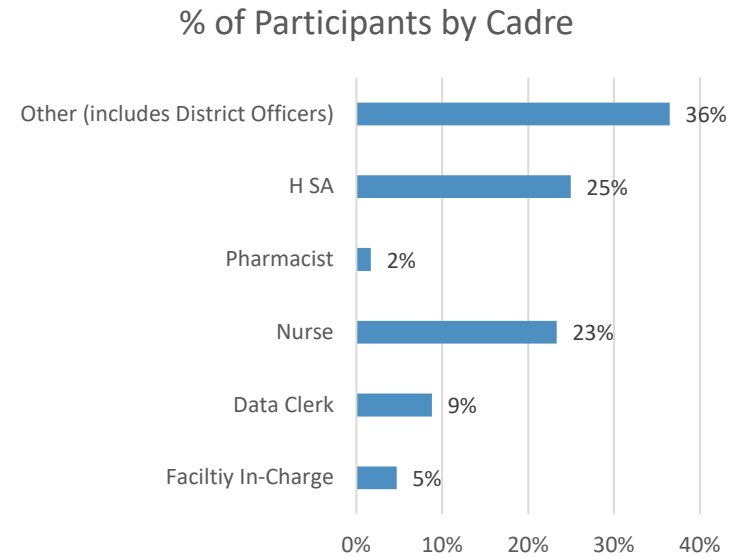


Participant Demographics

EDUCATION



POSITION



What do our users think?



57 %

Do **NOT** have access to a computer.



97%

Are *"very likely"* or *"somewhat likely"* to recommend the HMIS app to a colleague.



97%

Are *"very likely"* or *"somewhat likely"* to use the HMIS in the future.

The Challenge of Connectivity

Connectivity remains a challenge, however, people find solutions.

To the right is a picture of lead trainer Dumisani Mambiya orienting the Data Use Campaign participants at Chipho Health Center in Thyolo District where they relocated a kilometer away from the facility in search of network.

Staff at multiple facilities were so eager to use the application they walked to get service.



4

| App Usage

Google Analytics

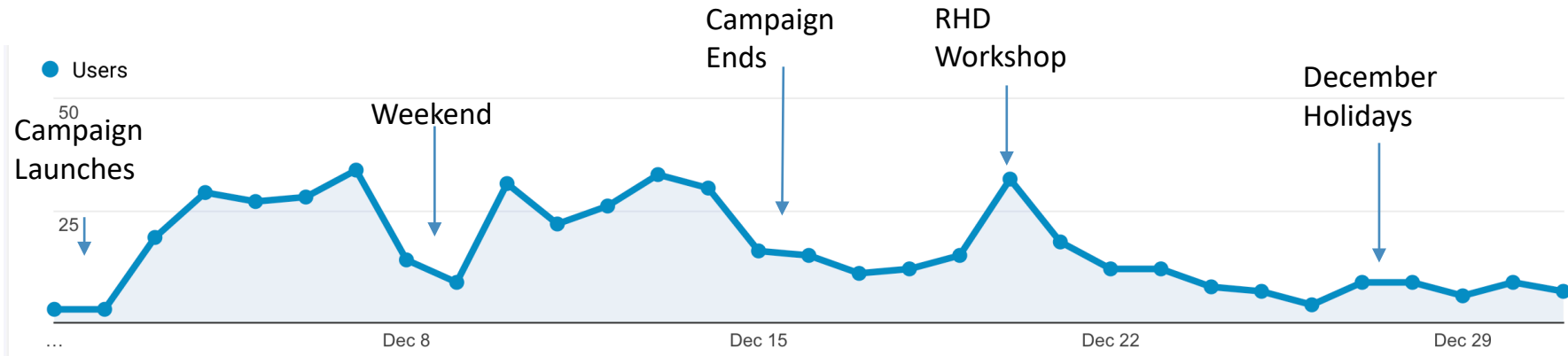
Blantyre District Campaign Timeline & App Usage

OVERVIEW

Snapshot of HMIS app usage during the Blantyre campaign in real time from December 1 to January 1 2019

HIGHLIGHTS

- In the weeks between the campaign ending and the holidays beginning, the app averaged 13 users per day (excluding the RHD workshop held in partnership with GIZ)
- 7 users on Christmas Day!

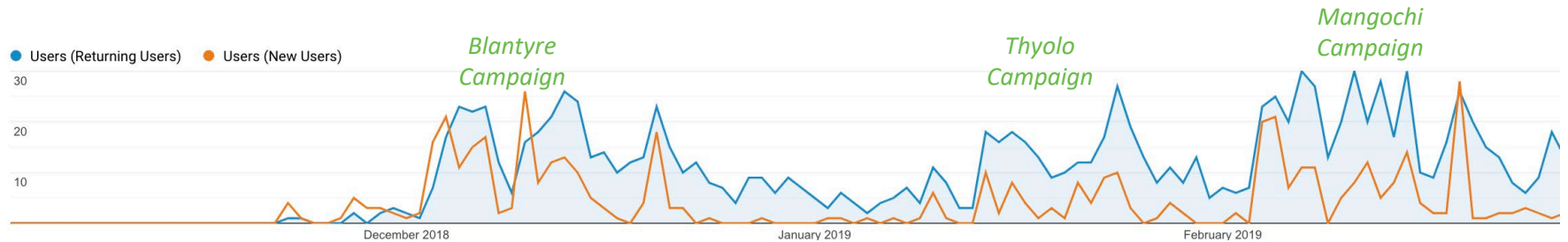


HMIS App Users up to March 1, 2019

479
Total Users

77%
Returning
Users

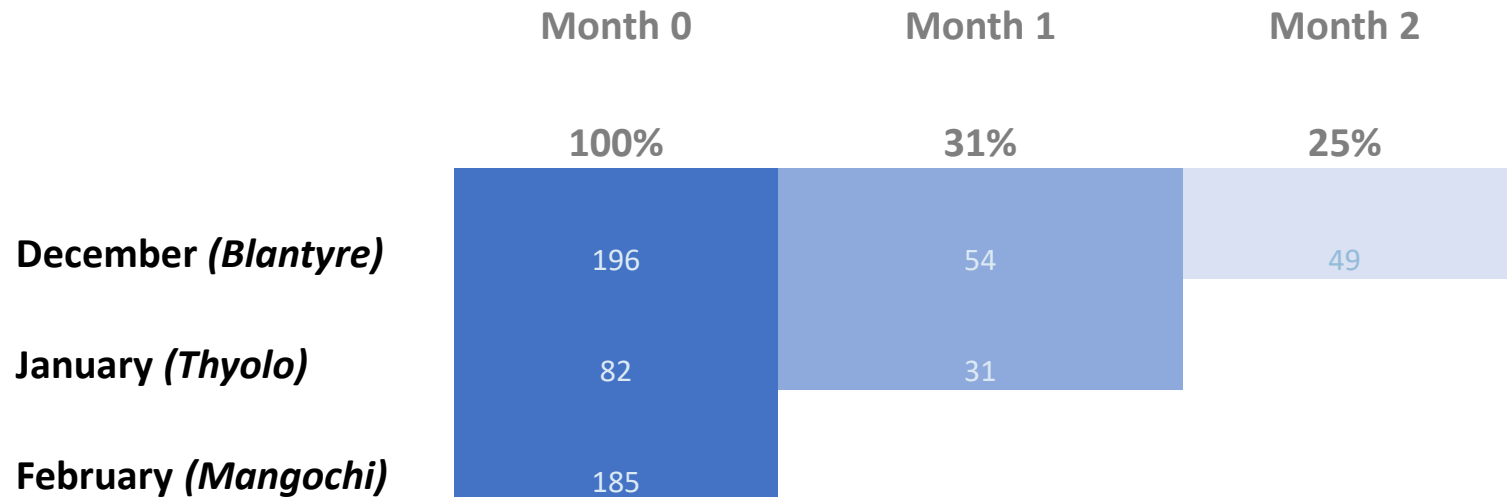
6:24
Average time
spent on app



*Excludes Zomba due to not having Google Analytics properly configured prior to the launch of the core package

User Retention by District Cadres

3 months out, 25% of users from Blantyre are still using the app. This is pretty standard/good for an app like this and we are getting the numbers we expected to see.



**Excludes Zomba due to not having Google Analytics properly configured prior to the launch of the core package*

5

Next Steps

**Where do we go
from here?**

2 Options for Phase II:

OPTION 1: Go In-depth in the same 5 Districts

1. Follow-up with end users
 - Go back to low performing facilities in each of the 5 districts
 - Send consultants to all MOH Departments, and consider all DHMTs in all districts
 - Go more in depth on user analytics
 - Test out SMS reminders
2. Incorporate Feedback from end users into dashboards
 - Upgrade to next version of DHIS2 to unlock new features and test with end users
 - Gather feedback on dashboards and incorporate it into dashboards
3. Launch new case studies
 - Develop new case studies based on real stories
 - Push them out via WhatsApp, social media, listservs, paper to facilities etc.
4. Develop DHIS2 login application
5. Launch new communications activities
 - Media/video campaign
 - Document success stories, push out via social media, WhatsApp, listservs, and traditional media outlets

OPTION 2: Roll out to 5 new districts

1. Dive deeper into what is working
 - HMIS application
 - Consultants going out to all facilities
 - Launch meetings with DHMT
 - Campaign with DHMT
 - Campaign to all MOH staff
2. Fix issues we have had over the past 4 districts prior to roll out
 - Coordination with District Staff
 - Communications materials
 - Login Creation app