

Voices from the Field: Community Health Workers' experience with mHealth

Few people in the continuum of health care services have more demands than community health workers (CHWs). For many employed by Government or volunteering with World Vision, the services they provide day-to-day are becoming more efficient by using mobile phones. World Vision mHealth projects in 14 countries have equipped hundreds of CHWs with phones using MoTECH Suite, a software application enabling users to track and plan household visits, remember and capture key information, and make referrals to local health services for clients in need of urgent medical attention.

Armed with their new mobile phones, CHWs are empowered to provide better care for people in their communities and save lives while also working faster and with greater ease. In the words of Augustine Tyre, an mHealth Project Coordinator in Sierra Leone, "Other CHWs are seeing the impact the mobile phones are making, and almost every day they are asking when they can be trained and given phones."

"Other CHWs are seeing the impact the mobile phones are making, and almost every day they are asking when they can be trained and given phones."

—CHW, Sierra Leone

Phones as motivators

CHWs frequently are unpaid volunteers chosen by their communities. Their motivation stems from community recognition for their work, and mobile phone ownership is an incentive. This may be because of its basic utility or the novelty of the software provided, but also because using a phone for their work may enhance their credibility in the community. After receiving her mobile phone and training, one CHW in Sierra Leone claimed, "This work has made me own a phone, which has never happened in my life before the project. This is why I will not quit."



For CHWs unable to read English, this innovation is particularly beneficial. A CHW in Uganda explains, "For some of us who may not effectively read and understand English, this innovation allows us to do our work well with the audio messages in our local dialects which we can understand. This has made our work very easy compared to the other system of recording on paper."

Mobile phones also can be an exciting experience for those receiving health care services. A CHW in Sri Lanka shares that "because this is advanced, as soon as I enter the height and the weight of a child the color appears that would signify their nutritional status. It made it very exciting for the mothers as well."

Improving efficiency to deliver better services to communities

World Vision's mHealth projects are a transition from a paper-based tracking and data collection system to electronic, where all data can be entered into a mobile phone and made available in real-time.

“Before receiving a mobile phone, it would take us an hour to try and understand what questions to ask and write the answers. Now we can finish our work in 10-15 minutes. It is a ray of hope for the women in our village.”

–CHW, India

Without a World Vision phone, CHWs must manage paper forms and carry them during visits. A CHW in India remarks: “Before receiving a mobile phone, it would take us an hour to try and understand what questions to ask and write the answers. Now we can finish our work in 10-15 minutes. It is a ray of hope for the women in our village.” This not only translated into time spent record-keeping instead of caring for families, but it

also led to data quality problems. The mobile system eliminates processes necessary to transfer the data into a database, and information can be accessed by CHWs, their supervisors, and health clinic staff. A CHW in Uganda highlights the value he sees in using the mHealth system, saying, “With these phones, home visits have been made easy. Data can easily be recorded on these phones and sent straight away.”

Using data from each household visit, CHWs know when it is time to revisit a household, enabling them to better organize their work and deliver more timely and effective care. The ability to facilitate prompt access to health services when a family needs them is also enhanced when CHWs employ these mobile phones. As described by Kari Costanza, World Vision U.S. communications manager, following a Zambia field visit: “mHealth is being used to speed up the process when a woman is referred to a clinic. Before mHealth, the caregiver would write a note to give to the woman, who would then experience long waiting times when she went to the clinic. Sometimes she would never go at all because of this. With mHealth, the caregiver in the community communicates immediately with the health center. When the woman arrives, health care providers call her name quickly because they know she is coming. Wait times are reduced dramatically. mHealth is greatly improving the responsiveness of the referral system.”

“Before mHealth, the caregiver would write a note to give to the woman, who would then experience long waiting times when she went to the clinic. Sometimes she would never go at all because of this. With mHealth, the caregiver in the community communicates immediately with the health center. When the woman arrives, health care providers call her name quickly because they know she is coming. Wait times are reduced dramatically. mHealth is greatly improving the responsiveness of the referral system.”

–Kari Costanza, WVUS communications manager



Strengthened working relationships between CHWs and health staff

With their mobile phones, CHWs are able to call one another and supervisors at health facilities to share information, seek advice, or request emergency support. Improved connections between CHWs and health staff include better use of the data the CHWs collect. “Data collected can easily be shared with the relevant authorities – from Health Assistants to the In-charges of the health facilities – without delays,” according to a CHW in Uganda. “With the paper method, it would take some time for the information to reach these people.”

“If I come across any problem, I now have a mobile phone and I will call and inform the health facility before referring a patient.”

–CHW, Sierra Leone

Moreover, these improved linkages allow for better support in emergencies. Without a phone, a CHW dealing with an urgent matter has few options but to search for ways to transport a patient to a health facility. In rural areas, such a journey can take an hour or longer. These delays can be life or death issues for a pregnant woman, a vulnerable newborn, or young

child. Equipped with a mobile phone, a CHW can call the nearest health facility to get first aid instructions and request an ambulance and help prepare health facility staff by providing basic information on the patient’s status. If no ambulance is available, a phone call to a neighbor may be a life-saving alternative. Says one CHW in Sierra Leone: “If I come across any problem, I now have a mobile phone and I will call and inform the health facility before referring a patient.”

Continuing to learn and improve mHealth tools for CHWs

Learning from users is a core idea behind technology design, and mHealth is no different. World Vision continues to learn how to better and more effectively contextualize the tool using culturally appropriate icons and audio. This includes the importance of anticipating and appreciating the response to the program from CHWs who have not received phones and their disappointment. World Vision also is refining the software so that it more strongly encourages CHWs to follow protocols and to expand their capacities to diagnose and treat sick children during household visits.

World Vision and the CHWs serving communities are confident of the potential of mHealth to improve health outcomes, as well as to refine technology with feedback from CHWs using mHealth-enabled phones every day.

