

# Martyn Smith, Managing Director, FP2020, Moderator

Martyn Smith is the Managing Director at FP2020 and leads the Secretariat's engagement work with the 47 commitment-making countries and well as with the data community. He is passionately committed to the delivery of high quality, client-centered reproductive health services, and has extensive leadership experience in the sector in both Africa and Asia over the last 15 years. Before FP2020 Martyn led and transformed Marie Stopes International organizations in India and Sierra Leone. A graduate of Cambridge University, Martyn started his professional career in private sector logistics in Europe and South Africa.



FP2020: DIGITAL PLATFORMS WEBINAR

# **Speakers**



Trinity Zan, Associate Director, Research Utilization, GHPN, FHI360



Nirdesh Tuladhar, Marketing Director at DKT International Nigeria.



Dr. Sara Saeed Khurram, Co-Founder and CEO, Sahat Kahani (Health Story), Pakistan



Ms. Maja Kehinde, DKT Nigeria, Manager, HoneyandBanana, Nigeria



Ben Bellows, Co-Founder and CBO, Nivi

# Agenda

Hour (EDT)	Activity	Presenter	Timing
07:00 - 07:05	Welcome and Introduction	Martyn Smith	5 minutes
07:05 – 07:15	Introduction to Digital Health	Trinity Zan	10 minutes
07:15 – 07:25	Sahat Kahani	Sara Saeed Khurrum	10 minutes
07:25 – 07:35	HoneyandBanana	Maja Kehinde and Nirdesh Tuladhar	10 minutes
07:35 - 07:45	Nivi	Ben Bellows	10 minutes
07:45 - 08:10	Questions and Answers	Martyn Smith	20 minutes
08:10 - 08:15	Closing	Martyn Smith	5 minutes



# Trinity Zan, Associate Director, Research Utilization, GHPN, FHI360

Trinity Zan is the Associate Director of FHI 360's Research Utilization unit where she works on building research-to-practice linkages and promoting best practices in Family Planning and Reproductive Health (FP/RH). She has 18 years of experience working in international development in sub-Saharan and Francophone Africa. In addition to FP/RH, her subject matter expertise also includes digital health.



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# Exploring Digital Platforms for Family Planning during Covid-19: Introduction to Digital Health

#### **Trinity Zan**

Associate Director, Research Utilization, FHI 360 Research Utilization Lead, Research for Scalable Solutions Project



# Where to begin?



# **Definitions**













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# Channels/functions

- Make/receive calls (voice, IVR)
- Send messages (SMS, WhatsApp)
- Automate logic flows/decisionsupports (job aids)
- Enter, store and send data
- Apps
- Websites
- Social Media
- Chatbots



## Types of digital health tools

#### Provider-facing

- Counseling tool
- Job aid (for screening/ eligibility)

#### Client-facing

- Information service
- Personal health apps/trackers

#### **Systems**

- Logistics management
- Electronic
   Medical
   Register
   (EMR)

Telehealth; Referrals; Supervision

Overlap

Digital Health Evidence and Guidance



What is the promising high impact practice in family planning for social

Use digital technologies to support, maintain, and adopt healthy sexual and reproductive behaviors.

#### 0. .

and behavior channe?

Using digital technologies—such as mobile phones, computers, or tablets—to convey information and messages a part of an evidence-based multichannel social and behavior change (SRC) transage may contribute to promoting, adopting, and maintaining healthy sessual and reproductive behavior. This being amount of the current state of evidence in this apidly changing field. (A companion brief review digital applications aimed at supporting punsides and health systems.)



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People in developed and developing countries are spending mose time on digital devices." Smartphone ownership and Internet use are increasing uptilly among adults in most emerging and developing commonies, where nearly hall the adult population reports owning a smartphone or using the Internet at least occasionally. Digital rechnologies have the potential to provide accurate information to indebtalast when and where they need it. Making information available through digital applications may also reduce the time and cost related to seeking or receiving information through more traditional sources, such as pint or streppendin communication."

Use of figital technologies to support healthy sexual and reproductive behaviors is one of several possible. "Duly images practices in family planning (HIR) identified by a technical advisory group of international experts. A promising practice has limited evidence, with more information needed to fully documen implementations experience and impact. The advisory group recommends that these interventions be promoted widely, provided they are implementative within the context of research and or confully evaluated in terms of both impact and process. For more information about HIRs, see www.fnghi.ght.grayacticies.org/converties.

#### Which challenges can digital applications for users address?

As of this publication, 11 studies aimed at using digital technology to improve sexual and reproductive health outcomes were identified. Five of the studies evaluated the impact of digital technology on behavior change (contraceptive uptake) and the

Social and Behavior Change

Premising Practice







What is the program enhancement that can intensify the impact of high-

impact practices in family planning?
Use digital technologies to support health systems and service delivery for family

#### Backgroun

Countries are turning to digital health applications through technologies such as mobile phones, tablets, and computers to improve health care delivery, strengthen health systems, and support disease. Experts believe when approaches can countribute toward time and resource efficiencies by improving our ability to bridge physical distance and by increasing accuracy and speed of data collection and reporting. With the agaid expunsion of mobile and electronic platforms across the globe, including in low-and middle-income countries, 'there is potential for even generar use of digital host-and middle-income countries,' there is potential for even generar use of digital health technologies as strengthen beath workens and family planning service delivery.

This beief summarizes the experience and evidence for the most commonly used digital health technologies aimed at supporting health systems and providers. A companion brief will address applications aimed at supporting consumers.

Figure, cStock Data and Product Flow



HIP Enhancement

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# So what do we know about digital for FP?

- Evidence in support of change in knowledge, attitudes
- Particularly attractive to/for young people
- Mixed evidence for impact of digital SBC on behavior (e.g. contraceptive uptake, continuation)
- Evidence to support increased efficiency (esp time) and accuracy with use of digital for systems (registers, data collection, logistics management)
- Increasing evidence-base for improved provider knowledge and competency using digital tools
- Limited and mixed cost data

## Implementation considerations

#### So many!

- See <u>Principles for Digital Development</u>
  - Consider broader context for digital (electricity, phone ownership, cell coverage)
  - Interoperability
  - Reuse and Improve
- Informed choice, privacy and confidentiality
- Quality of care, confidence in interactions
- Gender dynamics



# Sahat Kahani (Health Story), Pakistan

Dr. Sara Saeed Khurram is the Co-Founder and Chief Executive Officer of Sehat Kahani, an allfemale health provider network including that is working to create quality health care solutions for communities where health access, quality, affordability of health care is still a dream, using cost effective ICT enabled solutions.



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### **Co-Founders Profile**



























#### The "Doctor Bride" Phenomena...



According to PMDC, 60% of the doctors graduating from medical college are females yet only 23% into medical practice!

#### The Problem

3.5 billion

people without access to basic healthcare necessities globally



3.7 million children died in South Asia in 2000 due to infectious causes

200million
Total Population of Pakistan

50%

Population does not have access to primary healthcare services 37%

of the women residing in rural Pakistan still deliver at home 1:5

children in Pakistan do not get to see their 5<sup>th</sup> birthday 1:1000

Doctor available for patients hence the deteriorating health conditions

# The Story of Health



### The Solution



technology enabled health based clinics



health-based mobile application



health education for doctors & patients

### Services



access to a panel of online general physicians & specialists

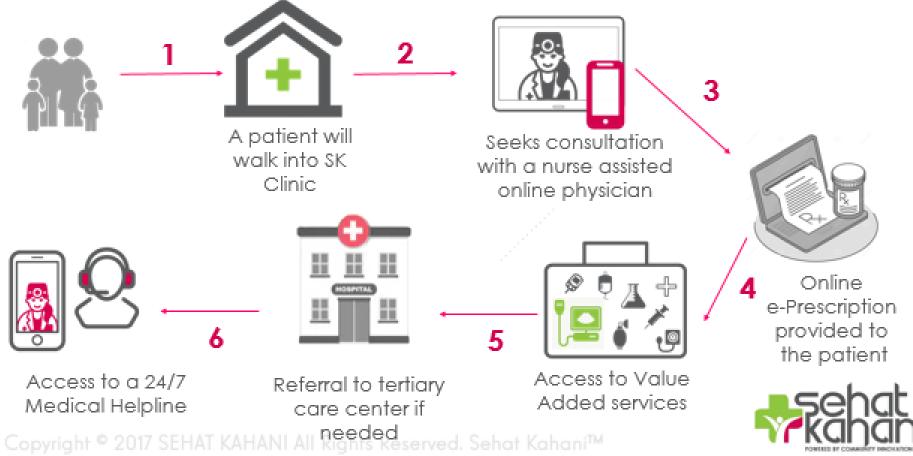


Medical records available in EMR along with a verified eprescription

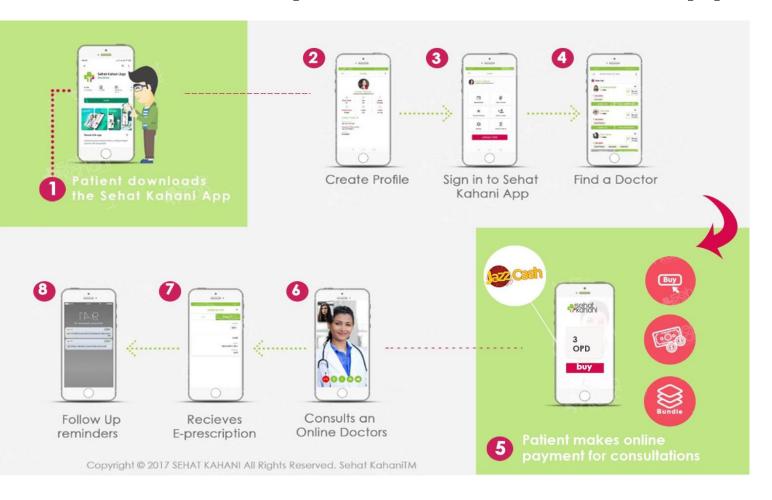


value added services available

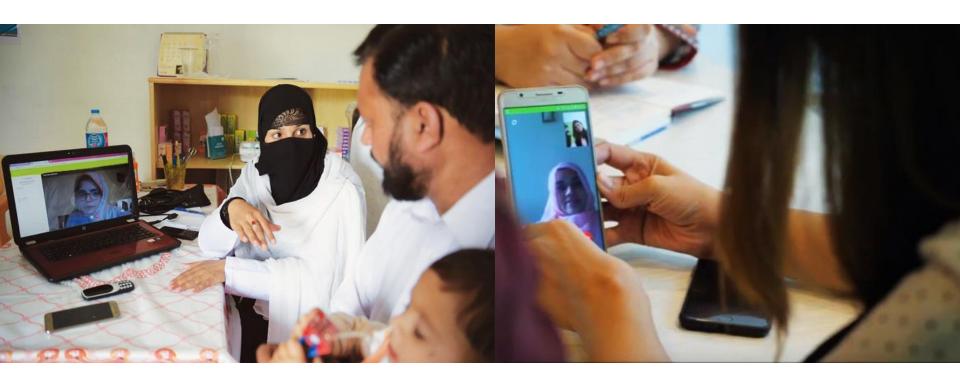
# Patient Journey- Sehat Kahani E-Health Clinics



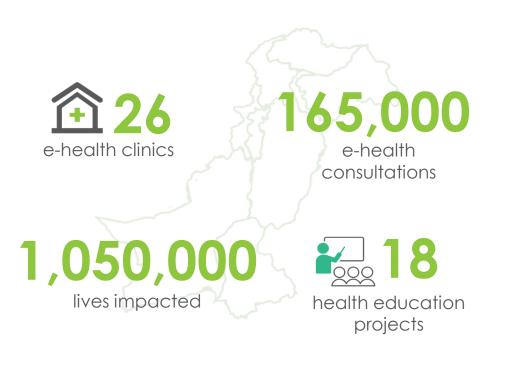
## User Journey - Sehat Kahani E-Application



# **Technology**



# Impact of E-Health Clinics & Health Education





## Impact of E-Health App



<b>Corporate Solution</b>	Retail Solution	
B2B Model	B2C Model	
For Corporates Only	For the Mass Market	
Subscription Based Only	Pay As You Go & Subscription Plans	
24/7 Access to Dedicate Pool of Online Doctors	24/7 Access to Pool of Online Doctors	
130,000 Lives Covered	35,000+ Lives Impacted	









































**Sehat Kahani** in partnership with **Government of Pak** made the App for all users across Pakistan during the next 3 months in response to the COVID-19 crisis!









25000+ consultations

The Global Impact of Sehat Kahani - COVID Project so far



Countries where Sehat Kahani App has been used by Beneficiaries

#### **Doctor Network**



# 1500

PMDC-certified Female Doctors

# Why Us?



achieved sustainability in 3 years



utilizing female human resource & health professionals





real time data analytics to find disease patterns



national & international partners for scale up

### **Partnerships**

Community & Development Partners

















**Technology Partners** 



Microsoft

















































USAID

SUPPORTED BY









#### 10-Year Vision



50,000 female physicians and 10,000 frontline healthcare workers employed



25 million lives impacted collectively through an integrated e-health system



Scale Up into MENA Region, Bangladesh & the US Market



# Where to find us?



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# HoneyandBanana, DKT International



Maja Kehinde is a Media and Communication Executive at DKT International Nigeria where she develops and manages communication strategies and the HoneyandBanana social media platforms. She received her BA in English Studies and MSc. in Writing for the Media in a Changing World.



Nirdesh Tuladhar is the Marketing Director at DKT International Nigeria. Previously he managed DKT International's Women First Digital program. He received his MPH from Brown University.

## Honey and Banana

DKT Nigeria's Digital Health Initiative
June 2020





#### Overview

Technology is rapidly transforming the world around us and DKT Nigeria, a social marketing organization with the largest contraceptive products portfolio, is leveraging the power of technology to ensure that individuals, particularly young people have a better understanding of and access to the contraceptive information, products and services they need.

DKT Nigeria promotes family planning through its **HoneyandBanana** social media platforms and website and **Honey&Banana Connect Call Center**.







## Why HoneyandBanana?

- A hub where youths can get contraceptive information in a fun, youth friendly and non-judgmental way.
- Designed with youths in mind (avoid stigma associated with searching for FP or sex related information, covert browsing history, slang).
- The actual designers were youths (between 22 27 years) and understood the target audience very well.
- Honey represents the lady, while banana represents the guy (street language).

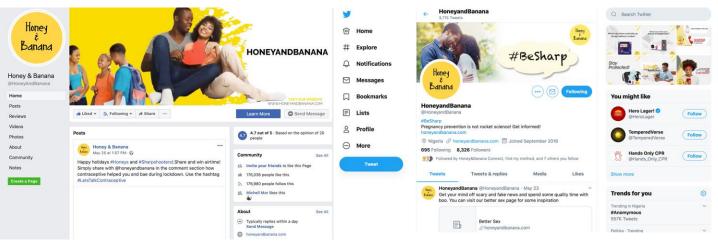




## HoneyandBanana – Digital Platform

- Launched September 26<sup>th</sup> 2016, World Contraception Day.
- Social media platforms: Facebook, Twitter and Instagram account with the handle @honeyandbanana.
- The Honeyandbanana website features information on contraceptive methods, blogs, quizzes and interesting relatable stories on pleasure and sex tips.
- Analytics show, most visited pages are on emergency contraception pill (Postpill) and better sex blog.







## **Book Appointment Page**

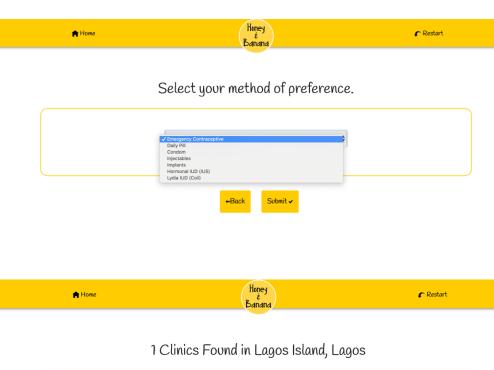
The **website's unique feature:** Individuals can book an appointment to DKT Nigeria's partner clinics for services and products. The partner clinics providers were trained by DKT to provide quality, affordable and youth friendly FP services.

Once an individual inputs the type of method she or he wants on the **Book Appointment Page**, a drop down directs the user to either book an appointment or clinic finder.

**Book appointment:** This means that you enter your phone number and first name only so the call centre agents will call you to link you up with a proximal partner clinic).

**Clinic Finder-** This allows you to find a list of proximal clinics along with the FP trained provider's information.

Link: http://getmethod.honevandbanana.com



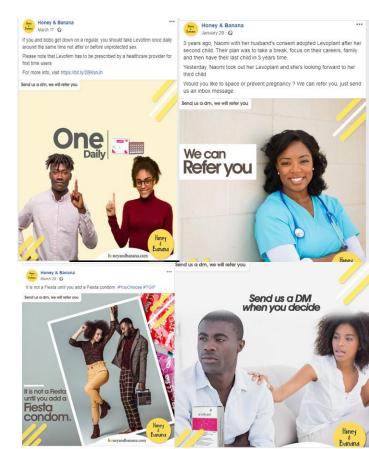


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## Components of HoneyandBanana Platform

- 1) Messaging: The core of what we do with on Honeyandbanana social media platforms can be seen in our messaging which comes in form of still images and videos. Be it product knowledge, Q&A, dispelling myths or relationship tips, our messages are designed in a creative, fun and educative manner to capture the audience's attention and equally prompt them to adopt a method of contraceptive.
- **2)** Live Chat: This is live Q&A session with a youth friendly medical expert who is able to address questions of our social media followers.
- **3) Referral:** We are able to refer followers who need a contraceptive method or service to DKT partner clinics. To prompt our audience to adopt a method of contraception, some of our messaging ends with "Send us a DM, we can refer you." A standard referral will provide details such as the name of the clinic, address, and provider's contact.
- **4) Honey&Banana Connect Call Centre:** we provide our followers with an additional option via Honey&Banana Connect call centre.





## Honey&Banana Call Center

Honey&Banana Connect is the first family planning call center in Nigeria with all round contraceptive services to callers from product information to management of side effects, clinic referrals and follow-up calls. It operates with an easy to recall short code number: **55059.** It came into operation in 2018 and works hand in hand with the Honeyandbanana social media platforms and website.

#### Honey&Banana Connect is:

- A toll-free line
- Able to give quick response to callers' questions and enquiries
- Is multilingual
- Confidential and private
- Able to provide non-judgmental responses
- Able to help with appointment bookings at clinics for affordable contraceptive services
- Able to follow-up on callers who have been referred

Honey&Banana Connect operates from Monday to Saturday from 8am to 8pm and we interact with our callers in 5 languages, which are: English, Igbo, Hausa, Yoruba and Pidgin English.





### Honeyandbanana during COVID-19

The pandemic affected the call centre operations and online promotions/messaging. Preventive measures were adopted to protect call agents and women referred to the partner clinics.

- **1. Call script amendment:** The call scripts were updated to address COVID-19 preventive measures and safety precautions to take when visiting a clinic.
- **2. Social media messaging:** Messaging reflected the lockdown period by evoking a sense of urgency for couples to adopt FP/LARC and avoid unplanned pregnancy. We positioned contraceptives as a necessity that our followers need to shop for just like food, water, hand sanitizers and face masks. The idea being with couples staying home, they are bound to have more sex.

When the lockdown was eased, our messaging moved to address the uncertainty relating to economic hardships (unemployment, job security) and health issues that might come up in the current context (risk of COVID to mother and child, frequent visits to clinics). The idea being this is not the best time to have a baby.

- **3. Referrals during the lockdown:** Women who were referred to partner clinics for FP/LARC services during the lockdown period or in-movement restricted locations also got personalized waver letters endorsed by the Federal Ministry of Health (FMOH) to ease movement without any hassles with law enforcement or while coming across checkpoints on their way to clinics.
- **4. Honey&Banana Connect**: The clinic database is updated regularly due to reports or concerns of COVID-19 infections or compliance issues.









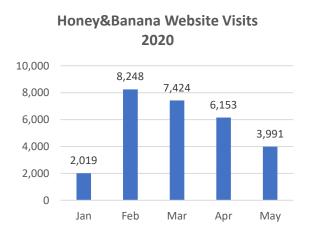


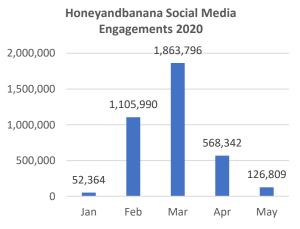
## Pre and During COVID-19 Insights

Interestingly for our digital platforms, we got more questions from men who wanted their partners to adopt a method or ask questions regarding the contraceptives they are on.

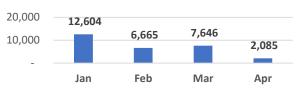
From March to May, most of the questions received on the platforms were on emergency contraceptive pill, missed pills and questions on how to prevent pregnancy.

In April and May, most of our referral requests were made on the Honeyandbanana website either by booking appointments or through clinic finder.

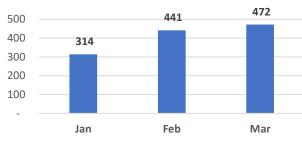




## Honey&Banana Connect Total Calls 2020



## Honey&Banana Connect Total Referrals for Service 2020





NTERNATIONAL

### Recommendations

**Target audience:** It is important to understand your target audience interests and lifestyles when promoting any service or product. This makes your brand relatable as they can see themselves in it.

**Branding:** A strong brand must be built around your digital health platform. This allows the platform to be more visible as well as credible.

**Referral Sites:** No doubt digital platforms are a great tool for providing contraceptive services but to provide a complete service, a referral site is needed as part of a seamless ecosystem. The digital platform provides information while clinics provide the service.

For HoneyandBanana, a LARC service starts from the digital platforms, leading to the service at the clinics and finally to follow-up through the digital platform.

To achieve this, an understanding and strong partnership with clinics is also necessary.



## Thank You





# Ben Bellows Co-Founder and CBO, Nivi

Dr. Ben Bellows, Nivi's Co-founder and Chief Business Officer, is a global health researcher with experience in healthcare financing, tech, and human rights. Ben also holds an Associate position at the Population Council in Washington DC and has worked with private sector, ministries of health, and non-profits on a range of initiatives funded by USAID, World Bank, DFID, Gates Foundation, and Merck for Mothers among others.



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Leveraging digital to address FP needs in COVID-19 era

Using AI and behavioral science to help every person realize their own aspirations for health

## **Enabling Self-Care** through insights & targeted engagement

#### **ENGAGE**

Focus on consumer and help them achieve their health goal
(via askNivi
Engage, Chat, Act model)



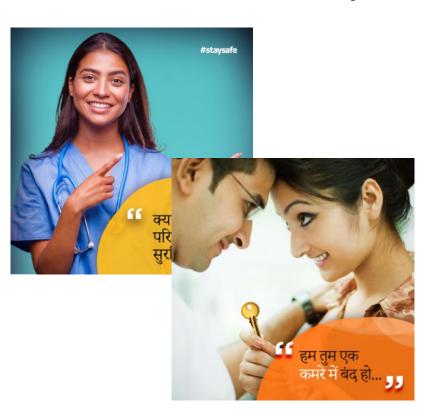
#### **INSIGHTS**

data from engagement +
Al-powered conversations provide
insights into channels, topics of
interest, the journey to behavior
change

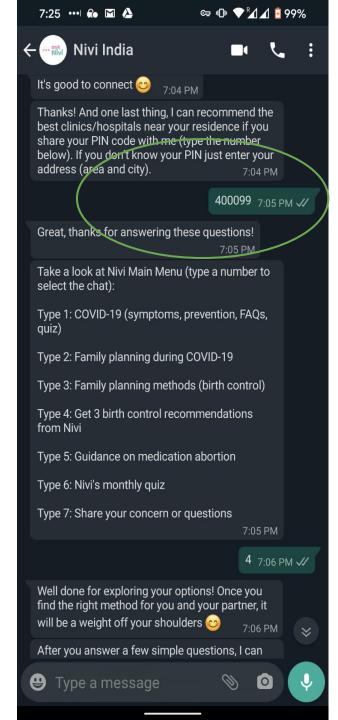
**TARGET** 

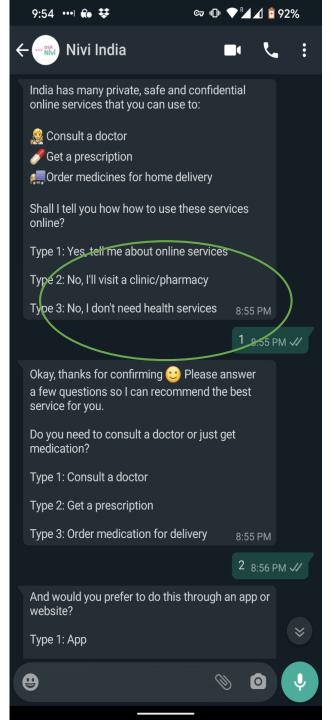
Use nudges & digital + offline channels with refined messaging to reach *specific* audiences to drive behavior change & adherence

## Rapid, scaled reach on COVID-19 & FP April 7 - May 11



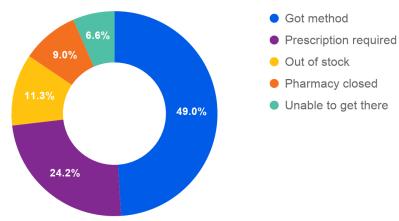
- Reached 12.6 million people with ad messaging
- Engaged **93,682 Nivi users**
- **185,000 conversations** on family planning and COVID-19.

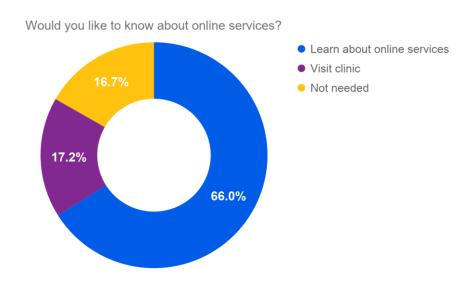




## Moving from pharmacies to e-referrals

What was your experience seeking FP at the pharmacy within the past month?







### Nivi

enabling access for PSI clients to FP via digital referrals

