K4Health Malawi

June 2011

Summary:

- *K4Health presents to Principal Secretary of Ministry of Health (MOH)*
- *End-line surveys and Focus Group Discussions are completed*
- *Nkhotakota District Learning Center has 78 visitors*
- *Salima District Learning Center has 261 visitors*

National Level Activities

Meeting with the Principal Secretary from the Ministry of Health

K4Health Malawi participated in a meeting with the MOH's Principal Secretary, Mr. Willy Samute. The meeting, also attended by other MSH team leaders from Basics, TB CAP, and SPS (Rudi Thetard, Chifundo Kachiza and Leonard Nkosi, respectively), briefed Mr. Samute about the close out of the majority of the MSH Malawi projects. They offered suggestions on how the Ministry could take over implementation.

The Principal Secretary was briefed on the progress made by various projects that MSH has been implementing in the past four years, including the K4Health project. K4Health emphasized the impact of the mHealth interventions and the potential they present to change information exchange among health workers.

The Principal Secretary indicated that he was well aware of the contribution that MSH was making in the health sector and the gap that would be created without its contributions. He pledged to take the suggestions to a senior management meeting of the Ministry. He also committed to participate in the MSH dissemination workshop in September.

Hand over meetings with districts

As planned, K4Health had meetings with District Health Management teams, nongovernmental organizations, and District Local Assemblies in Salima and Nkhotakota June 16-17. The meetings focused on handing over the projects to the districts. The district health officers (DHOs) made presentations to the other

participants on what the project involved and its achievements. Participants discussed sustainability mechanisms with the DHOs for the various interventions.

Some critical concerns included: continuation of Internet subscription, airtime replenishments for messaging, and information technology support for the District Learning Centers.

The DHOs explained that they already pay for monthly Internet subscriptions and they are working on establishing direct contracts with mobile phone providers with guidance from MSH. The DHOs have provided partial time commitment of data clerks to manage the District Learning Centers.

Data Clerks in Salima DLC

End-line Study

K4Health conducted an end-line evaluation for the pilot project in the districts of Salima and Nkhotakota. The study included one control district, Nkhatabay. The study used both a qualitative and quantitative approach. The target groups for the study were community health workers at health center level and district coordinators at district level.

For the quantitative approach, a Lot Quality Assurance Sampling (LQAS) methodology was used. The two intervention districts and the control district were divided into four operational zones each with assistance from the district health office. A list of all health workers in the program was developed. 19 health workers were sampled from each of the four zones from each district of interest. The tool used in collecting quantitative data was a structured questionnaire administered to users of Front Line SMS (FLSMS).

Below is a summary of the quantitative interviews:

Catchment area	Target group	No. of supervision areas	No. of respondents/ supervision area	Total interviews planned	Total interviews conducted
Salima	FLSMS users	4	19	76	76
Nkhotakota	FLSMS users	4	19	76	76
Nkhatabay (control)	Non users	4	19	76	76
Total				228	228

For qualitative data, the tools used were non structured question guides. Two types

of non-structured guides were developed: one targeting district coordinators and the other for community health workers, both on FLSMS. For District Learning Center interventions, focus group discussion guides were also developed targeting users of District Learning Centers and District Health Management Teams. Below is a summary of the number of focus group discussions conducted for the study.

District	Target group	No of Community Interviews	No of district interviews	Total
Salima	FLSMS	2	2	4
	DLC	-	2	2
Nkhotakota	FLSMS	2	2	4
	DLC	-	2	2
Total		**4**	**8**	**12**

The qualitative data have been transcribed and summarized in data summary tables for reporting purposes. The quantitative data have been processed. Data analysis and reporting will start in the first week of July.

District Level Activities

Some routine activities were conducted in June. These activities included: Frontline SMS application, general management of the learning center and basic computer training. In June, the District Learning Centers registered a total of 339 visits - of which 78 were from Nkhotakota and 261 were from Salima.

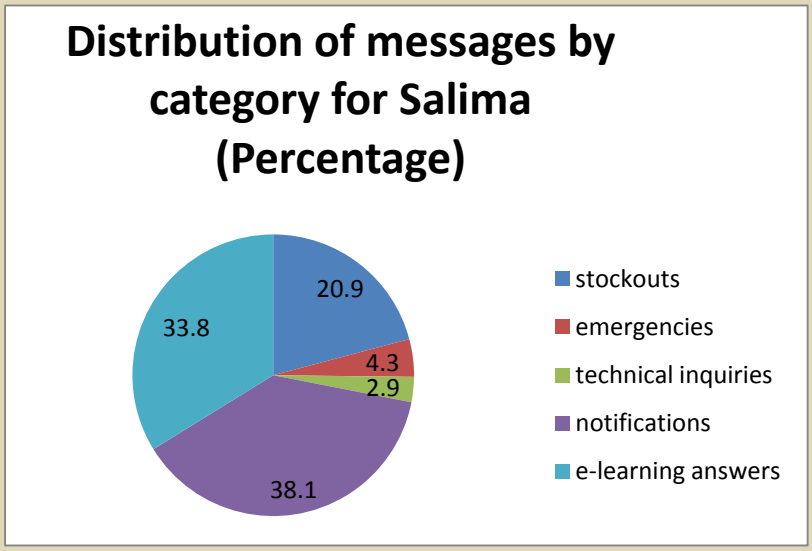
District	Attending Basic comp training		Accessing web based information		Responding to messages from CBDAs and HSAs		Accessing printed materials on HIV/AIDS		Sending and receiving reports		Searching on the internet and Email*		Toolkits	
	F	M	F	M	F	M	F	M	F	M	F	M	F	M
Nkhotakota	0	0	13	21	2	1	0	0	2	4	13	21	0	1
Salima	5	3	10	35	0	0	3	6	20	50	40	80	3	6
Total	5	3	23	56	2	1	3	6	22	54	53	101	3	7

Nkhotakota District Learning Center activities:

- Finishing orientation of Davie Kanyangala, a Health Surveillance Assistant, who was identified to manage the day to day running of the District Learning Center from July 1, 2011. He will be supported by the District Health Education Officer, Frank Mawiriga, who has been working with the Coordinator since the project started.
- The average access to the District Learning Center for Internet browsing was 12 people per day.
- The DLC library provided posters about HIV/AIDS, family planning, and sanitation to 137 Community Based Distribution Agents who attended monthly review meetings during the month.
- Nkhotakota District experienced one setback this month in terms of the mHealth interventions. Only 22 messages were sent and received - 7 (32%) of the messages were notifications and 11(50%) were notifications about stock-outs. The GPS modem at the hub was stolen by one of the visitors so the hub could not receive or send messages for 24 days of the month. The District Management Team is investigating the situation, and at the time of reporting, a suspect had been identified and the team is taking necessary measures to recover the modem.

Salima District learning Center interventions:

A total of 140 messages were sent and received in Salima. 100 messages were received at the hub and 40 messages were sent from the hub. The breakdown of the messages sent and received are graphically represented below:



In Salima, transition meetings were held with community health workers. The details of the meetings have been summarized in the table below:

Day/Month/Year	Male	Female	Total	Remarks
8/6/11	20	18	38	CHW meetings discussing exit strategy
16/6/11	20	19	39	CHW meetings discussing exit strategy
21/6/11	13	19	32	CHW meetings discussing exit strategy
28/6/11	20	33	53	CHW meetings discussing exit strategy
Totals	73	89	162	

Ofter Piri, DLC Data Clerk providing training in Salima

The major issues discussed were the transfer of the district intervention from the MSH district coordinators to Government. Given transition planning began months ago, the hope is FLSMS will not be affected by the departure of MSH District Coordinators.

Challenges

The major challenge this month was erratic internet services for both districts. This is attributed to the fact that internet service providers are not getting their payment in time due to delayed government funding to the districts. In both districts, discussions with the internet service providers are underway; the district health office is proposing that the subscription calendar for the service be adjusted to fit with government funding calendar.

The FLSMS modem which was stolen in Nkhotakota is another challenge. This completely halted the incoming and outgoing of FLSMS from the hub. Plans are at an advanced stage to replace the modem.

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See the K4Health Malawi Toolkits at

http://www.k4health.org/malawi#toolkits