Improving MNCHN outcomes in Mindanao, Philippines

Primary health care delivery through tech-supported volunteers
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VSO (Voluntary Services Overseas) is an international NGO that works on fighting poverty through volunteering. VSO Philippines is working on improving access to reproductive health services for local women and adolescents in rural areas of the Philippines, particularly in Geographically Isolated and Depressed Areas (GIDA). The communities are conflict-affected which has caused the populations to be displaced in the past and leaving them vulnerable to future displacement. VSO Philippines is improving access to women’s health and reproductive health services in these communities.

The ongoing conflict in this region has resulted in a severe access gap in health services, particularly in the availability of doctors, primarily due to security concerns. In addition, health services in the Philippines are decentralized and are provided by local governments resulting in a disparity in health service delivery to the poor. Access to doctors and nurses in such conflict-prone areas does not exist, and patients may have to travel up to 2 hours to get to the nearest city where they are able to see a doctor. Midwives or local community health volunteers provide majority of the care but they are limited in the scope of services they can provide due to inadequate training. This causes patients to live with easily preventable or manageable illnesses and result in adverse health events. These patients may live below the poverty line with a zero income or as little as $2-3 per day or which is why there is a critical need for wider support systems to treat patients.

MNCHN Project, Philippines

The MNCHN Project aims to improve access to primary health services for women of reproductive age, expectant mothers and adolescent girls with neo-natal and postpartum care, unmet needs for contraception, skilled birth attendance and adolescents at risk of unintended pregnancies along with child care in poor and marginalized communities. It also includes early screening and diagnosis for Tuberculosis in these populations. The project has been implemented in 7 Barangays of Bukidnon province in the Philippines with 40 volunteer health workers and 8 midwives.

Over the course of the pre-pilot period, the project goals are:
- Capacity building for frontline volunteer health workers (BHWs) in providing reproductive health services in underserved areas through training and the use of technology-assisted task-shifting using evidence-based protocols
- To improve the quality & scope of health services provided by volunteer health workers by connecting them with remote doctors over telemedicine
- To assess the feasibility of telemedicine as an approach to improve delivery of reproductive health services through community health workers (BHWs)
- To assess potential for scale up
- To identify donors for scale up
About Intelehealth & Ayu

Intelehealth is an open source digital health & telemedicine platform that empowers frontline health providers in rural communities. It's a cloud-based platform which can be used by hospitals, community health programs & governments to expand the reach of health services to ensure that vital primary care reaches remote, hard-to-reach and rural populations. It can work offline and in very low bandwidth environments with a simple user interface.

At the heart of the Intelehealth software platform is an evidence-based digital assistant called Ayu, which helps task shift healthcare processes, that are normally done by doctors or nurses, to frontline health providers. Using these software protocols and some very basic medical devices any one with a high school education can be trained to provide community-based affordable healthcare. Health organizations can program Ayu by building their own protocols to meet the needs of their programs. The platform also supports health workers to perform teleconsultations with remote doctors for additional support & diagnosis.

Preliminary impact reported

- Outreach to beneficiaries: The MNCHN Project has been successfully deployed in 7 Barangay Health Stations with **40 health volunteers (BHWs) and 8 midwives**. Overall, **406 beneficiary visits** were recorded. Beneficiaries have been provided with basic MNCHN, TB and FP services. These include **376 home visits** by the BHWs and **30 facility visits** with midwives for high-risk patients like pregnant mother, children with danger signs, couples in need of family planning and patients with chronic cough.

- Screening by volunteer health workers (BHWs): The MNCHN project shows that BHWs were successfully able to screen and record the patients visits in the app. They provided health counseling to **373 families**. They were able to provide patients with Health plans and referrals if needed. Use of technology has improved the capacity of the health system to reach out to the community through the use of volunteers.

- Referrals to Midwives: The Midwife were able to easily access the health information of the patients through data collected by BHW in app. The critical patients were than identified by Midwife and referred to the nearby hospital (Rural Health Unit or RHU) for higher level health care services through the app itself. The telemedicine module of the App allows the Midwife to connect directly with the doctor for immediate advice that saving a lot of time and money for the patient and also reducing unnecessary referrals to RHU.

- Telemedicine/Referrals to RHU: Through the telemedicine project, the Midwife and doctors get access to real time data of number of patients seen by BHWs and triage critical cases that needed immediate action. The MNCHN project effectively saves time and energy of health workers to document the health information of the patients.

- Patient Satisfaction: The beneficiaries receive home visit by BHW who screen for newborn, infant and child care; neonatal, postpartum care; family planning and chronic cough. The BHW screen for any health risk, provide with health plans and provide counseling. If any health risks are identified then such cases are referred to midwives. The midwives either provide services, teleconsults with the RHU or refer to RHU. The end-to-end provision of health care to patient results in quality services and high patient satisfaction. The average patient satisfaction rating was **4.29 out of 5**.