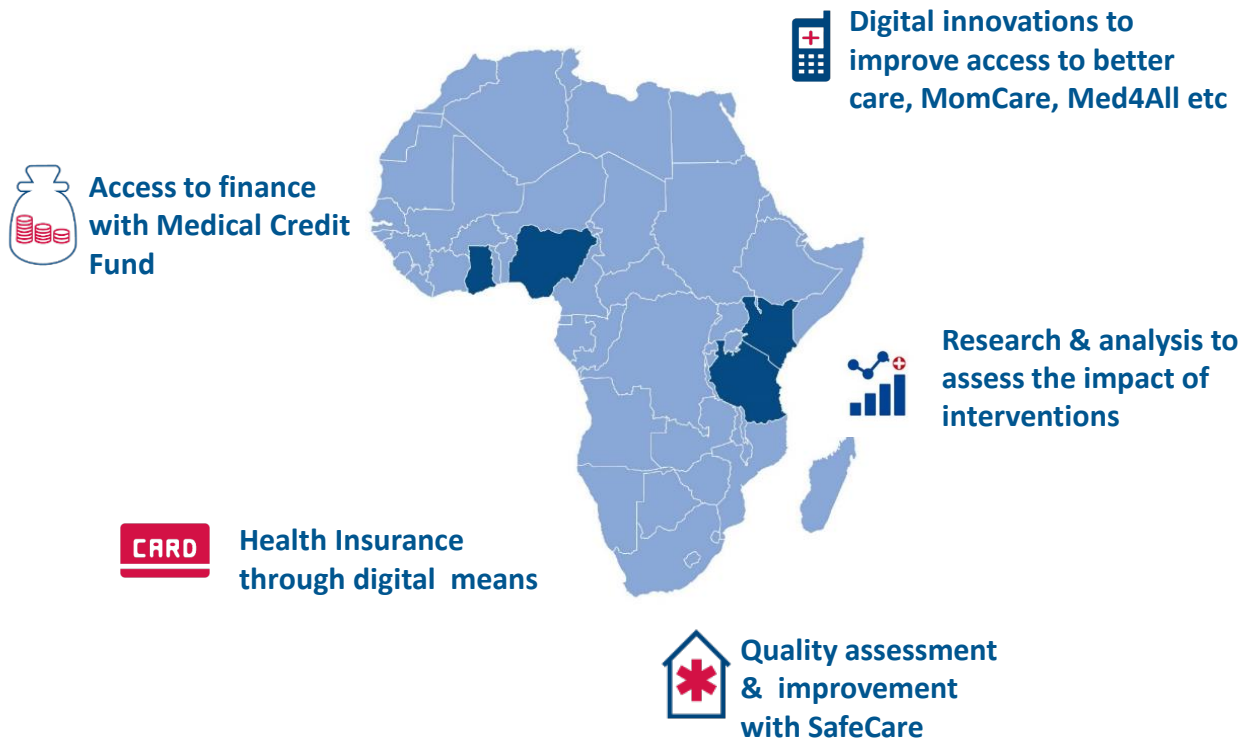


# MomCare

*A digital care bundle for MNCH*

RHSC presentation, June 9<sup>th</sup>, 2021





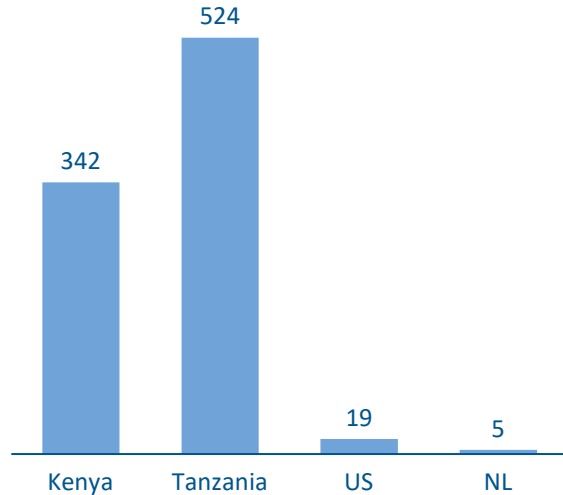
*Our vision is to improve access to healthcare for people in Sub-Saharan Africa by using digital technologies*

- **Health insurance** : Support states in designing and improving health insurance
- **Quality improvement:** First accredited quality rating system for health facilities in resource-constrained settings
- **Loans:** First impact investing fund that provide loans with technical assistance to health SMEs in Africa
- **Research & Analysis** : Academic research and data science at the core of our programmes

# The Challenge | Mothers and children dying from preventable causes

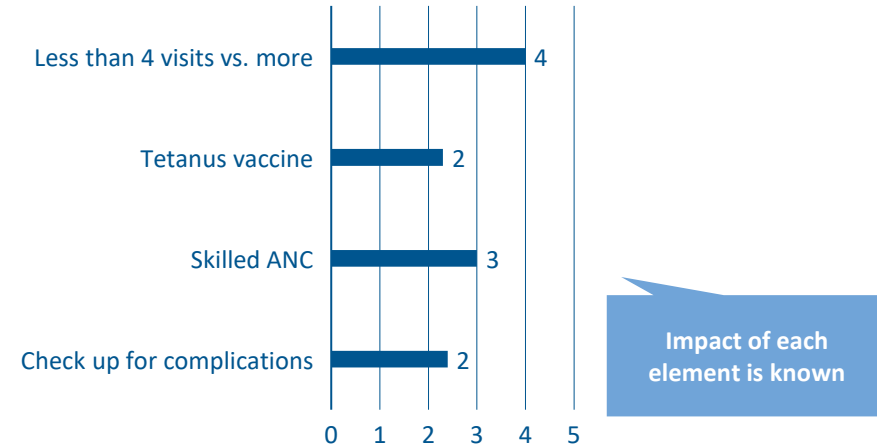
## Many mothers experience bad outcomes

Example: # of maternal deaths per  
100,000 live births



## While research is clear on how to prevent it

Example: Risk of mortality in Kenya 2-4 times higher if  
appropriate care is not used



1. Malachi Arundaa, Anders Emmelinb and B. Oppong Asamoah et al. *Effectiveness of antenatal care services in reducing neonatal mortality in Kenya: analysis of national survey data* ; *Global Health Action*
2. Eliphias Gitonga et al, *Determinants of Focused Antenatal Care – Uptake among women in Tharaka Nithi County, Kenya*. *Advances in Public Health* Volume 2017, Article ID 3685401

## Mother experience | 3 different journey types



**Mary, a 30-year-old, has 2 children**

- She enrolled early at 12 weeks, began attending her ANC visits
- She has had no previous pregnancy complications
- She has a stable marriage and currently sells water bottles at the bus stops; all her children are healthy



**Susan, 22-year-old, first child**

- She enrolled late at 25 weeks, as she wasn't sure when she should start her clinic visits
- She has so far missed her 2<sup>nd</sup> visit, and came late for her 3<sup>rd</sup> visit
- She dropped out of school and is recently married. She does odd jobs, and her husband is a motor taxi driver (boda boda driver)



**Tabitha, 16-year-old, first child**

- She enrolled late at 34 weeks and was diagnosed with HIV and Malaria
- She is currently a high school student but has not been attending classes due to stigma
- She is estranged from her parents, and currently lives with her grandmother who does not earn an income

*Low Risk*

*Medium Risk*

*High Risk*

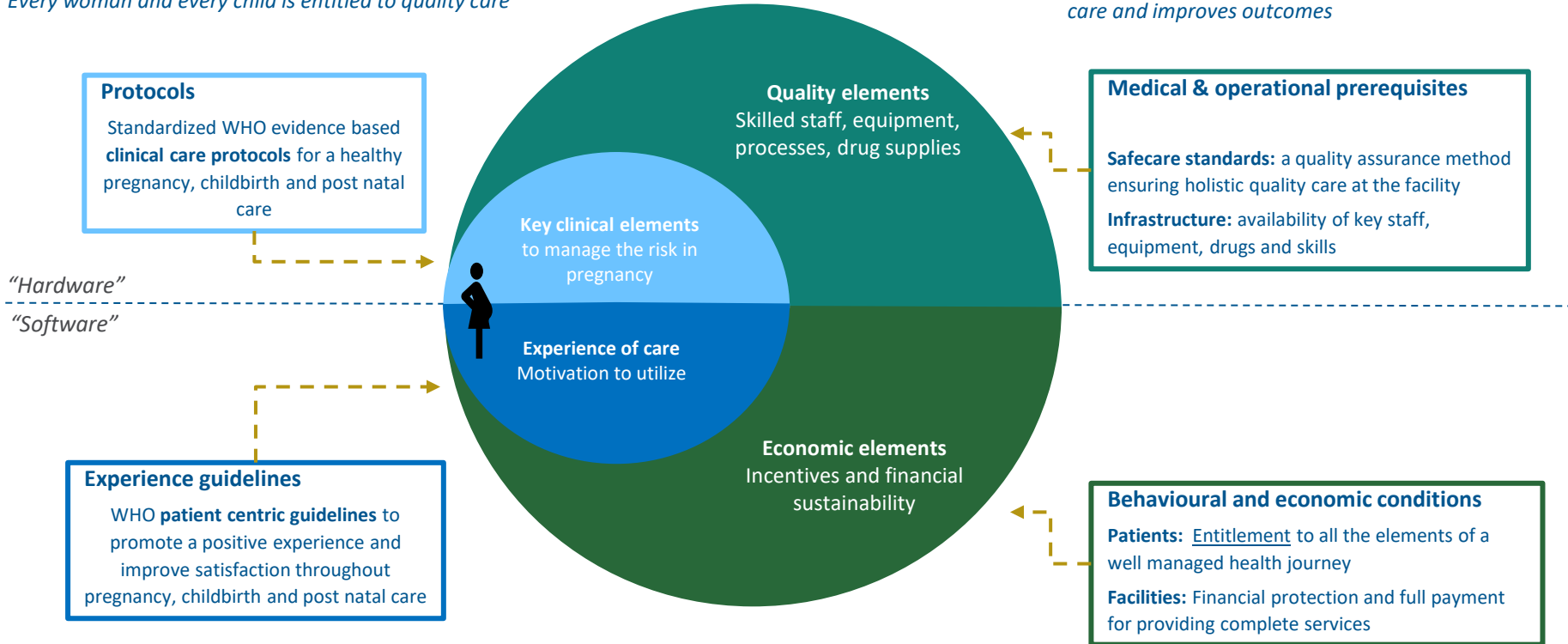
# Patient perspective | Better outcomes require 'hardware' and 'software'

## A quality health journey based on WHO standards

*Every woman and every child is entitled to quality care*

## An enabling environment

*An enabling environment transforms the culture of care and improves outcomes*

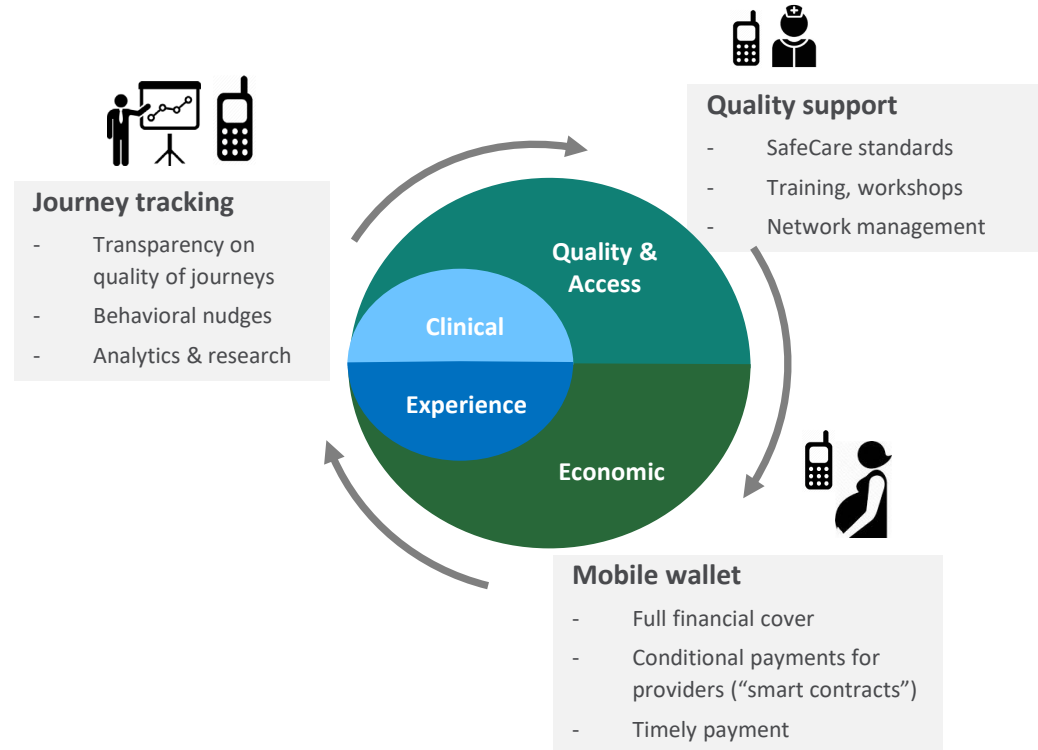


## A care bundle:

“A set of interventions that – used together – significantly improves health outcomes”

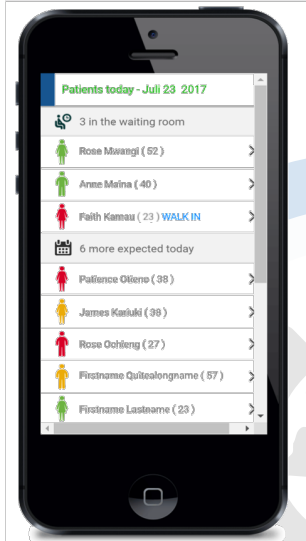
Key principles of digital development:

- Centered on outcome for the patient
- Starting with a minimum viable product, using a *progressive development* approach
- Using evidence from data to prioritize



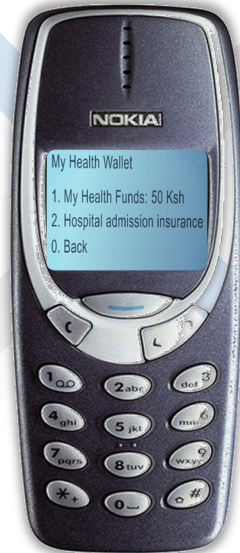


MomCare offers specific frontend tools for all parties involved built on a digital data-driven backend engine



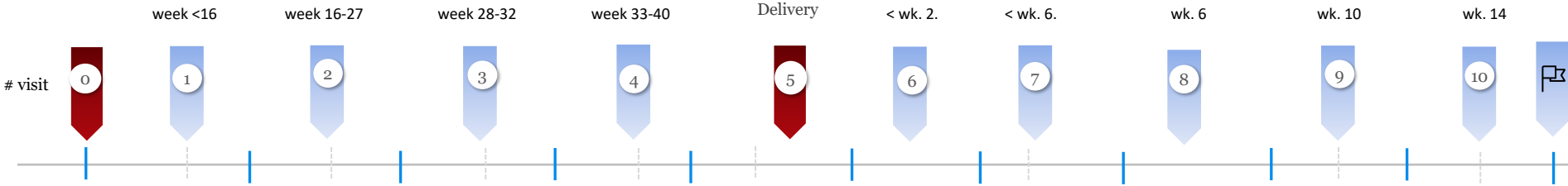
**Patient tracker for providers**  
*Showing treatment information  
and improvement suggestions  
over patients*

**Health wallet for patients**  
*Showing entitlements and  
prompting alerts for clinic  
appointments*



**Dashboards to Payers**  
*Reporting on financials, clinics  
and patients down to individual  
(anonymized) patient level*

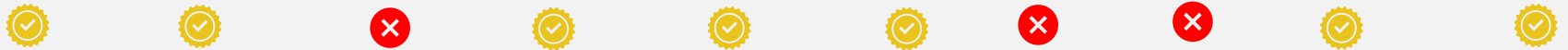
# Journey tracking | Transparency on all the elements of the care bundle



## 1. Track the full journey – across providers – for evidence of all elements of the care bundle (example blood pressure)



## 2. If elements are missing, use real time data to trigger alarms for both mother, care provider and payer



## 3. Use the platform to engage, provide actionable feedback and do behavioural nudges



“Patient XY has not received a blood pressure assessment for the last 2 visits.”



“Patient XY has received all blood pressure assessments”



“Dear patient XY, It is time to check how your baby is doing! All expectant mothers should receive an ultrasound. Visit your clinic on Wednesday or Friday within 2 weeks. “

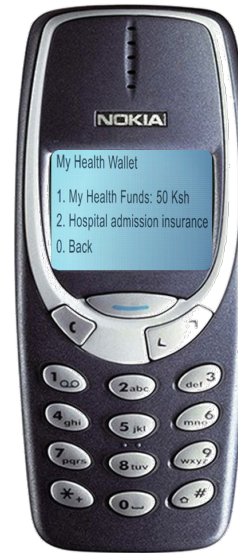


## Mobile wallet | A mother is empowered and has clear entitlement to care



**Susan, 22-year-old, first child**

- Total costs \$130
- Pay out Linda Mama \$100
- **GAP \$30**



Enrolled onto a mobile platform, giving clear **entitlement** to all care

Each visit, the mother opens her wallet, **validating** service delivery

Mother receives reminders, gives **satisfaction** score and complaints

The payment for her care is **ringfenced** for this mother

The wallet is **'smart'**: it pays out more for quality journeys

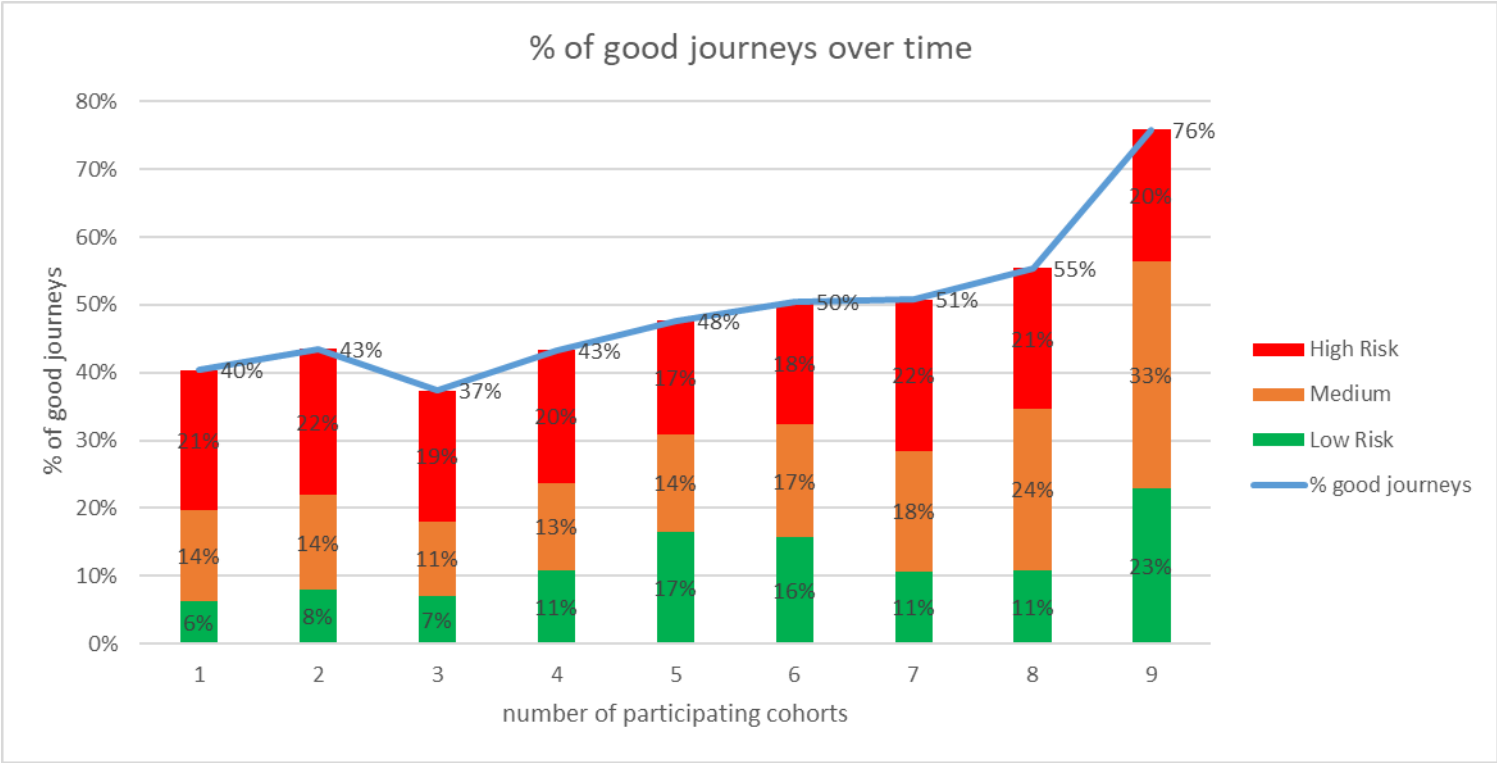
## Tanzania

Facilities in MomCare	Total Mothers
40	12,513
Facilities in SafeCare	Active Mothers
40	9,321
Facilities with SafeCare score improvement	Mothers with good journey scores
90%	56%
Average MNCH Score	Skilled Deliveries
71%	4,058

## Kenya

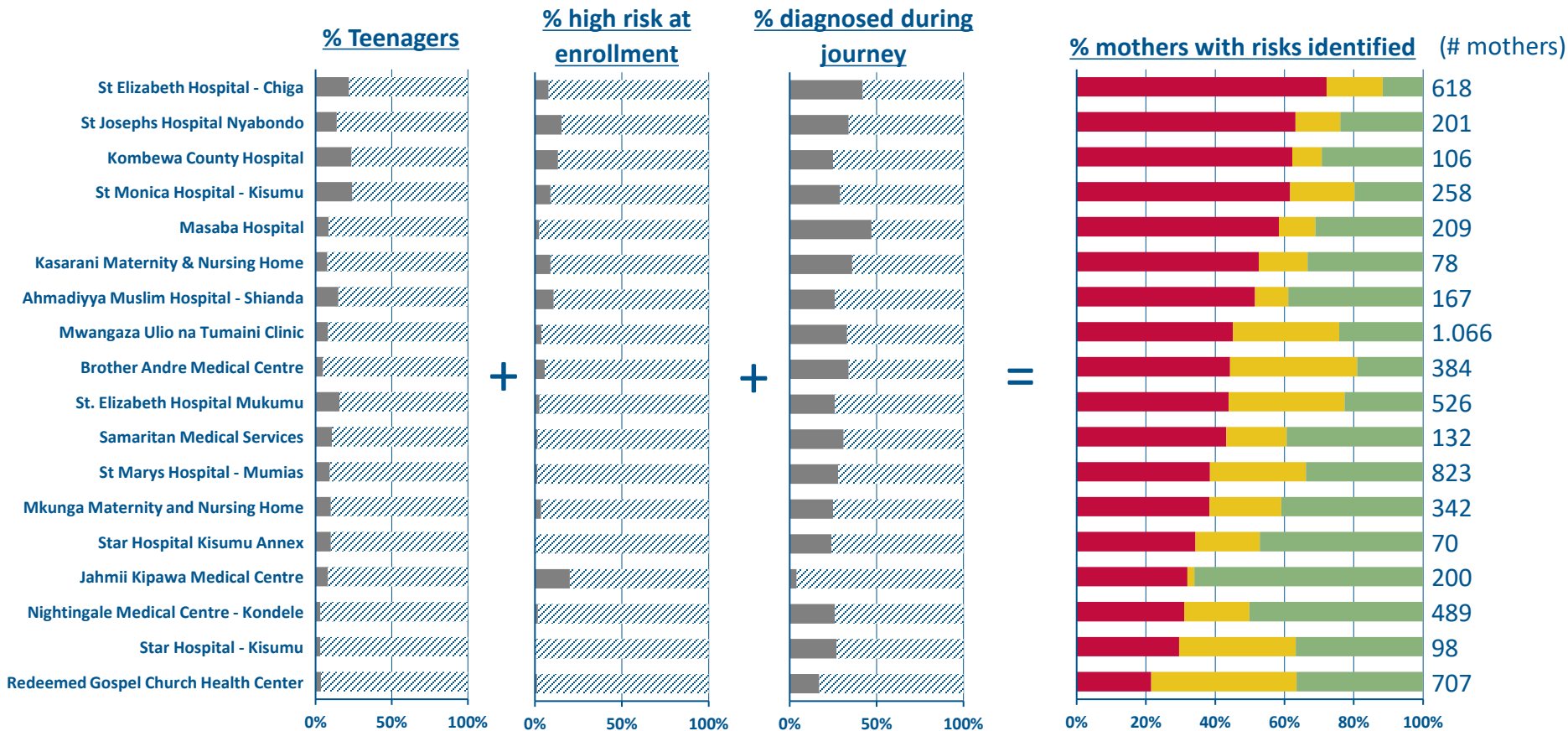
Facilities in MomCare	Total Mothers
19	15,537
Facilities in SafeCare	Active Mothers
18	6,172
Facilities with SafeCare score improvement	Mothers with good journey scores
69%	44%
Average MNCH Score	Skilled Deliveries
78%	6,600

# Journeys are improving over time with better adherence



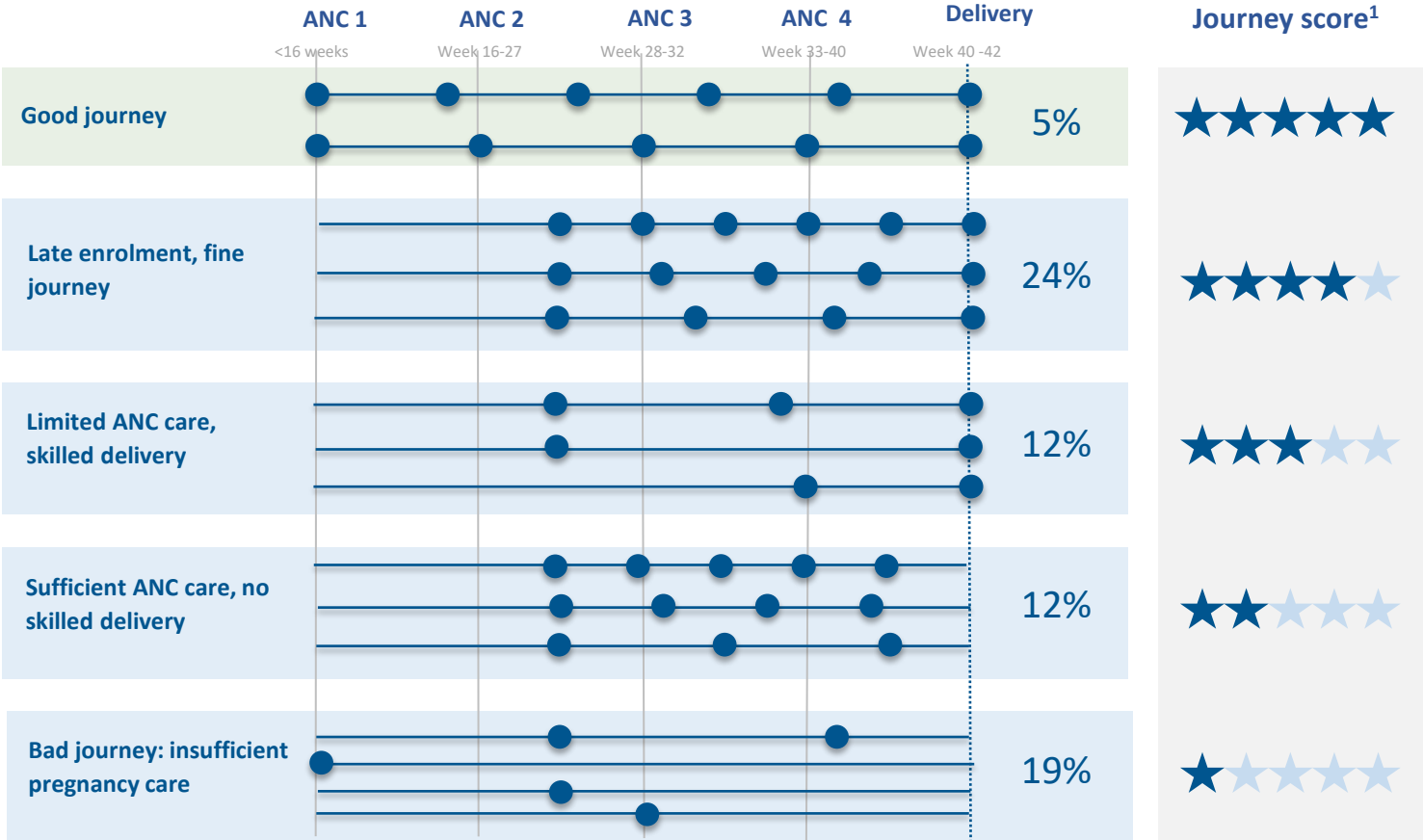
# Reach | % increased medical risk for women attracted to MomCare

high medium low



# Journey tracking | Identifying patterns and looking at drivers

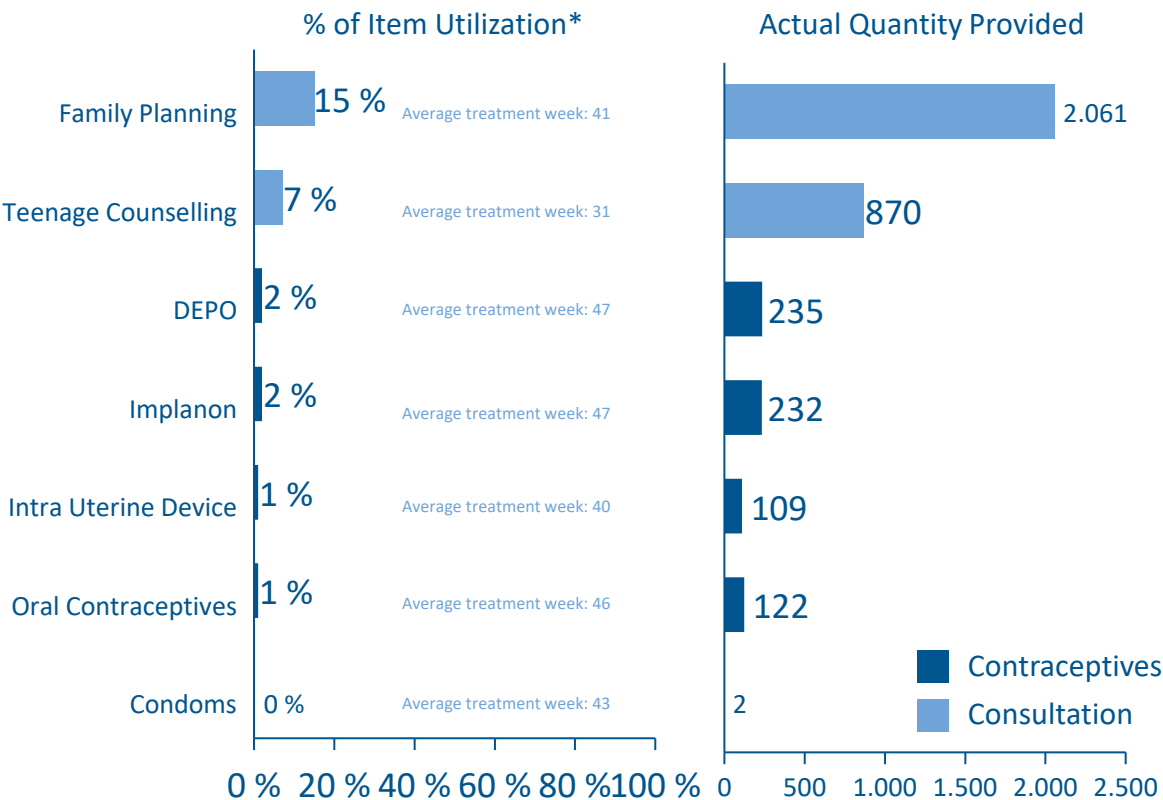
Top 15 patterns only



**Key drivers seem to be**

- Mother profile
- Availability and timely use of ultrasound
- Distance to clinic

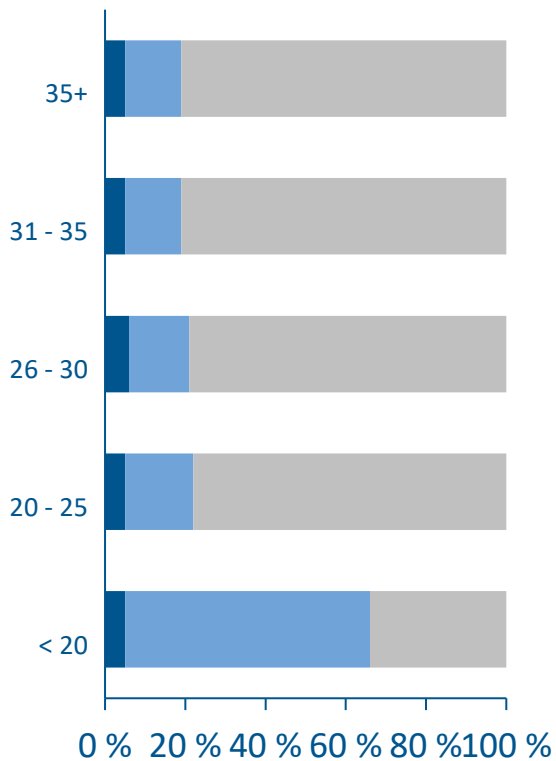
Source: MomCare data; Note: includes first 6.109 journeys that were completed until week 60, only top 15 patterns shown (72% of total); Note1: simplified, Journey score takes content (e.g. tests) into account



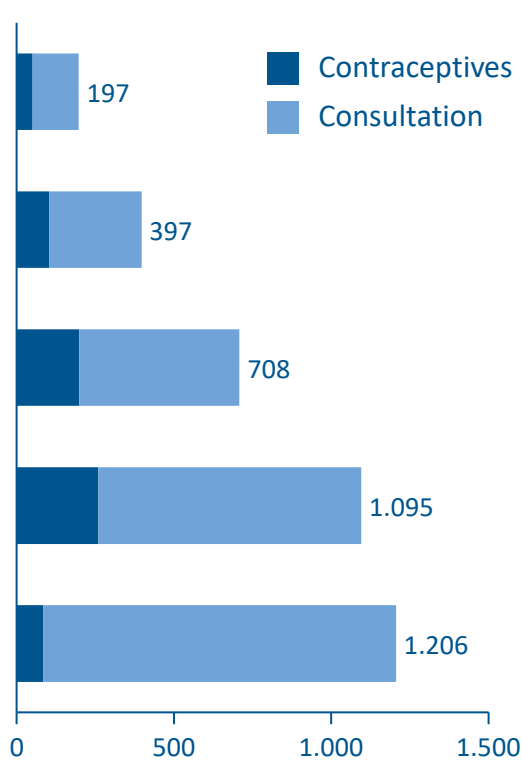
- Out of 13,325 finished journeys, 700 received contraceptives (5%), while 2,931 received consultation (22%).
- The average gestation week for receiving contraceptives is at week 45, while for consultation is at week 36.
- Teenage counselling is usually encountered before the delivery.

\* Numerator: number of mothers receiving the item at least once. Denominator: Total finished journeys (13,325) \*\* Data as per end of May 2021

% of Item Utilization per age group



Actual Quantity Provided

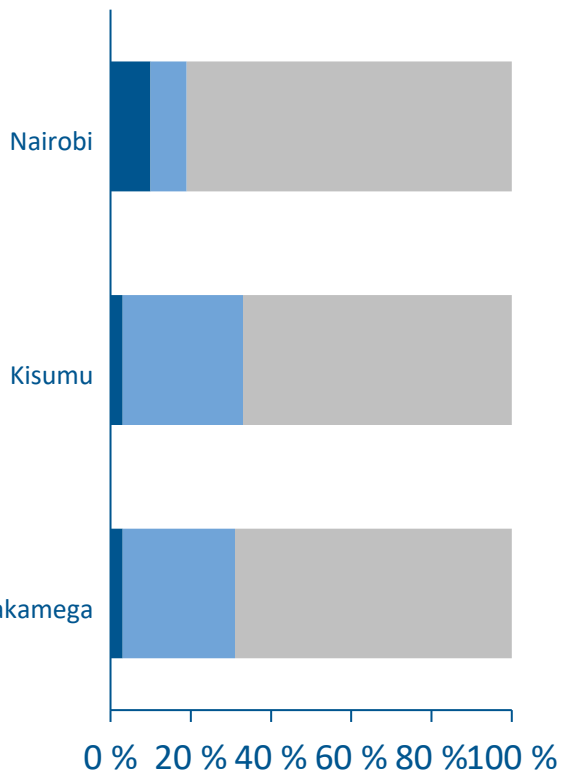


- Teenagers receive the highest % of consultation or contraceptives (66%).
- All other age groups have a utilization below 22%.

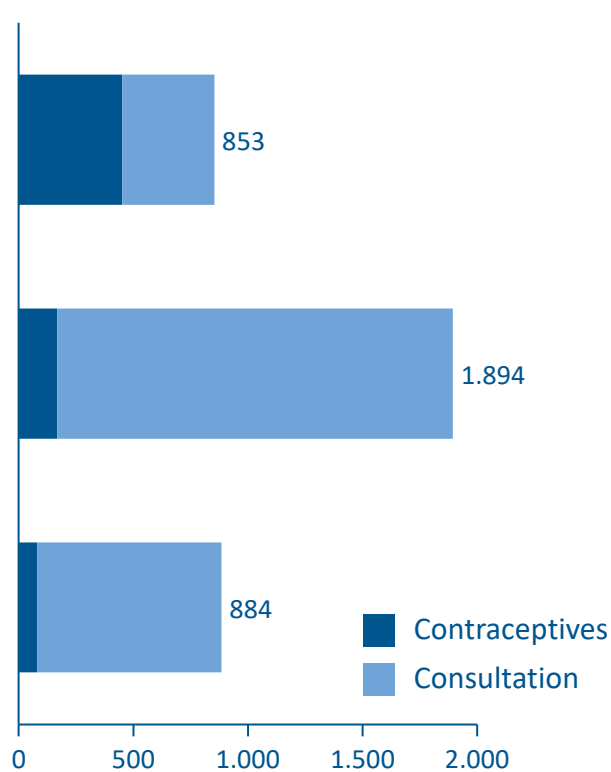
\*Data as per end of May 2021



% of Item Utilization per region

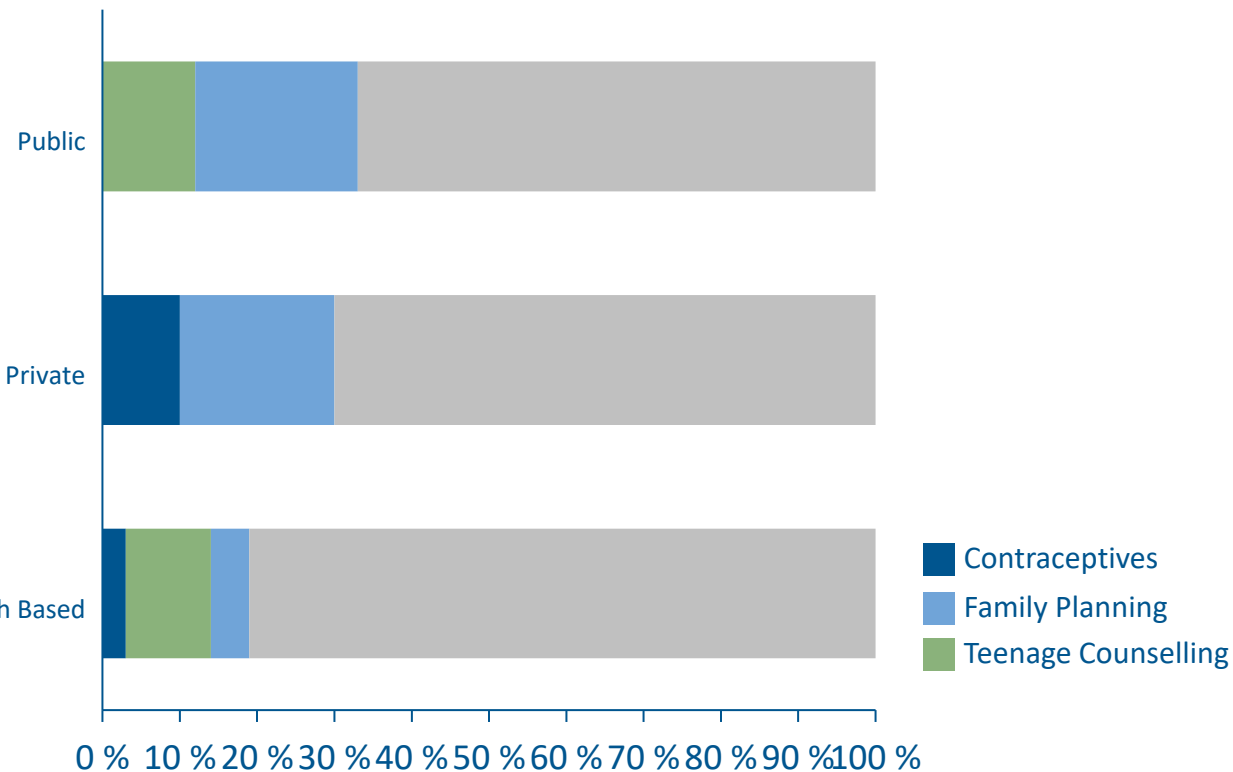


Actual Quantity Provided



- Mothers visiting health facilities in Nairobi have a higher utilization of contraceptives (10%) compared to Kisumu (3%) or Kakamega (3%).
- Mothers visiting health facilities in Kisumu or Kakamega have a higher utilization of consultation (30%, 28%) compared to Nairobi (9%).

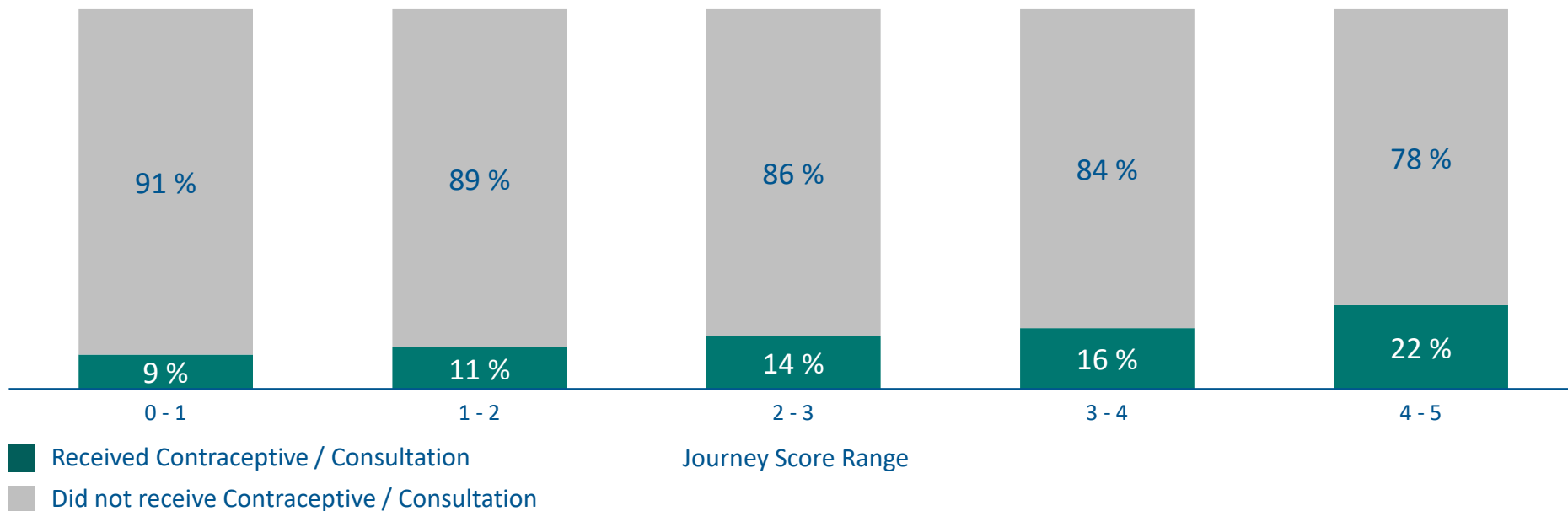
% of Item Utilization per facility type



- Faith Based Organizations provide in total the least utilization (19%), while Public health facilities provide the most (33%).
- Contraceptives are mostly utilized at private facilities (10%).

\*Data as per end of May 2021

Correlation between Contraceptives / Consultation on Journey Score



- Correlation between journey score and status of contraceptive / consultation. Mothers with a high score range are more likely to have received contraceptive / consultation over their journeys.

# MomCare | opportunities to merge SRH services into digital care packages





# Thank you

n.spieker@pharmaccess.org



Winner Commonwealth Awards 2020