

Summary of Discussion Forum for Module 1 of mHealth4SRH training course

Two questions were posted to the discussion Forum on Tuesday 5th March at 12.00 noon. The session was scheduled to last for 24 hours, and it was closed on Wednesday at 12.00 noon. During this time, 14 participants answered the two questions and there was also interaction between the participants. However, several answers came after the Forum was closed.

All the participants answered the first question, “Which of the uses of mHealth seems most interesting to you? And why?” The identified areas of interest are summarized below:

- Sex education – most people are not free to discuss on face to face.
- Integrated management of HIV in Women to improve the adherence and access to treatment – women are vulnerable
- Communicating with patients directly or through Health workers; for follow up after diagnosis, as reminders for routine visits to health services providers, adherence to treatments and preventive measure. - Populations in the remote areas who are hard to reach, but yet they own mobile phones.
- Information system for youth on reproductive health and HIV – constant reminders for prevention and treatments. Also as a Health Management Information System (HMIS) to collect and process data promptly thereby.
- Empowering women in reproductive health issues in stigmatized groups, especially targeting the sex workers
- Use of mhealth approaches to speed up response and recovery to instances of sexual violence in order to ensure immediate response and the "rape kit" examination.
- Education tool for health workers, junior doctors and on use of devices. It is also a good tool for on job training.
- Useful in emergency initiatives such as calls for emergency blood donation,
- Use mobile technology to track and monitor contraceptive commodity – Contraceptive Logistic Management System (CLMS). – this has a potential to improve contraceptive security
- Use in HIV/AIDS prevention and safe motherhood to foster monitoring efforts in government interventions and gather evidence to influence service delivery for the poor women and adolescents in the rural community

In the second question, the participants were asked to list their experiences with mHealth. Only a few participants indicated that they have mHealth experience in the following areas:

- Sending awareness messages to sex female workers on HIV, STI and beauty tips.
- An initiative that delivers DNA-RNA PCR (Early Infant Diagnosis) test results to health facilities through text messages via mobile phones and SMS printers.
- Training health workers on the use phones and SMS printers to receive the test results. The system (Rapid SMS) has proved to be effective because it has reduced the turnaround time (TAT) by more than half.
- Use of mobile technologies for remote Monitoring and Evaluation.
- Follow up of HIV positive mothers who miss their appointments using FrontlineSMS system.
- Theory-guided adherence phone intervention in HIV positive women in India as a means to improve antiretroviral medication adherence and support self-care.
- Use of mHealth for health surveillance and reporting.
- Development of Family Planning Distance Learning package using mobile phone.
- Text messaging on good agricultural practices in handling agrochemicals in Chile.

Conclusion: The Discussion Forum gave an opportunity to participants to learn about experiences of others in mHealth. It was obvious that the majority of the participants was not familiar with the nature of discussion forum and did not react during the specified time frame.

The areas mentioned in answers to Question 1 brought up one new idea that does not seem to appear in currently available reports and publications, namely use of mHealth approaches to speed up response and recovery to instances of sexual violence in order to ensure immediate response and the "rape kit" examination.

In the question 2 there was one answer, text messaging on good agricultural practices in handling agrochemicals in Chile, which is important to highlight opportunities to improve MNCH through approaches in non-health sectors.

For the future discussion forums, it would be beneficial to all to become more interactive and respond within the timeframe allowed.