FP2020
Exploring Digital Platforms for Family Planning during COVID-19
June 11, 2020
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.
Speakers

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

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

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

Nirdesh Tuladhar, Marketing Director at DKT International Nigeria.

Ben Bellows, Co-Founder and CBO, Nivi
<table>
<thead>
<tr>
<th>Hour (EDT)</th>
<th>Activity</th>
<th>Presenter</th>
<th>Timing</th>
</tr>
</thead>
<tbody>
<tr>
<td>07:00 – 07:05</td>
<td>Welcome and Introduction</td>
<td>Martyn Smith</td>
<td>5 minutes</td>
</tr>
<tr>
<td>07:05 – 07:15</td>
<td>Introduction to Digital Health</td>
<td>Trinity Zan</td>
<td>10 minutes</td>
</tr>
<tr>
<td>07:15 – 07:25</td>
<td>Sahat Kahani</td>
<td>Sara Saeed Khurram</td>
<td>10 minutes</td>
</tr>
<tr>
<td>07:25 – 07:35</td>
<td>HoneyandBanana</td>
<td>Maja Kehinde and Nirdesh Tuladhar</td>
<td>10 minutes</td>
</tr>
<tr>
<td>07:35 – 07:45</td>
<td>Nivi</td>
<td>Ben Bellows</td>
<td>10 minutes</td>
</tr>
<tr>
<td>07:45 – 08:10</td>
<td>Questions and Answers</td>
<td>Martyn Smith</td>
<td>20 minutes</td>
</tr>
<tr>
<td>08:10 – 08:15</td>
<td>Closing</td>
<td>Martyn Smith</td>
<td>5 minutes</td>
</tr>
</tbody>
</table>
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.

Trinity Zan
Associate Director, Research Utilization, FHI 360
Research Utilization Lead, Research for Scalable Solutions Project
Where to begin?
Definitions

mHealth

eHealth

Digital Health
Channels/functions

• Make/receive calls (voice, IVR)
• Send messages (SMS, WhatsApp)
• Automate logic flows/decision-supports (job aids)
• Enter, store and send data

• Apps
• Websites
• Social Media
• Chatbots
## Types of digital health tools

<table>
<thead>
<tr>
<th>Provider-facing</th>
<th>Client-facing</th>
<th>Systems</th>
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<tbody>
<tr>
<td>• Counseling tool</td>
<td>• Information service</td>
<td>• Logistics management</td>
</tr>
<tr>
<td>• Job aid (for screening/eligibility)</td>
<td>• Personal health apps/trackers</td>
<td>• Electronic Medical Register (EMR)</td>
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**Overlap**

Telehealth; Referrals; Supervision
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 Principles for Digital Development
  • 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
Dr. Sara Saeed
Khurram, Co-Founder and CEO, Sahat Kahani (Health Story), Pakistan
Dr. Sara Saeed Khurram is the Co-Founder and Chief Executive Officer of Sehat Kahani, an all-female 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.
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

200 million 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 5th birthday

1:1000 Doctor available for patients hence the deteriorating health conditions

3.7 million children died in South Asia in 2000 due to infectious causes
The Story of Health

We aim to democratize healthcare by providing affordable & convenient telemedicine solutions to patients in need, using a pool of online female doctors.
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 e-prescription
- Value added services available
Patient Journey - Sehat Kahani E-Health Clinics

1. A patient will walk into SK Clinic
2. Seeks consultation with a nurse assisted online physician
3. Online e-Prescription provided to the patient
4. Access to Value Added services
5. Referral to tertiary care center if needed
6. Access to a 24/7 Medical Helpline
User Journey - Sehat Kahani E-Application

1. Patient downloads the Sehat Kahani App

2. Create Profile

3. Sign in to Sehat Kahani App

4. Find a Doctor

5. Patient makes online payment for consultations

6. Consults an Online Doctors

7. Receives E-prescription

8. Follow Up reminders

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Technology
Impact of E-Health Clinics & Health Education

- 26 e-health clinics
- 165,000 e-health consultations
- 1,050,000 lives impacted
- 18 health education projects
## Impact of E-Health App

<table>
<thead>
<tr>
<th>Corporate Solution</th>
<th>Retail Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>B2B Model</td>
<td>B2C Model</td>
</tr>
<tr>
<td>For Corporates Only</td>
<td>For the Mass Market</td>
</tr>
<tr>
<td>Subscription Based Only</td>
<td>Pay As You Go &amp; Subscription Plans</td>
</tr>
<tr>
<td>24/7 Access to Dedicate Pool of Online Doctors</td>
<td>24/7 Access to Pool of Online Doctors</td>
</tr>
</tbody>
</table>

- **130,000 Lives Covered**
- **35,000+ Lives Impacted**

### Ongoing Projects:

[Logo Images of Various Companies]
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!

1 million+ lives reached
70000+ downloads
25000+ consultations

Accessible Globally!
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
- extensive community outreach in remote areas
- real time data analytics to find disease patterns
- national & international partners for scale up
Partnerships

Community & Development Partners

Technology Partners

Corporate & Pharmaceutical Partners
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

AI and Machine Learning Enabling Better Healthcare Outcomes
Where to find us?

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Maja Kehinde and Nirdesh Tuladhar, Honey and Banana, 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 26th 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.honeyandbanana.com](http://getmethod.honeyandbanana.com)
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.
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.
Using AI and behavioral science to help every person realize their own aspirations for health

Leveraging digital to address FP needs in COVID-19 era
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 + AI-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

Self-Care

Focus on consumer and help them achieve their health goal (via askNivi Engage, Chat, Act model)
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.
It's good to connect 😊

Thanks! And one last thing, I can recommend the best clinics/hospitals near your residence if you share your PIN code with me (type the number below). If you don't know your PIN just enter your address (area and city).

400099 7:05 PM ✔

Great, thanks for answering these questions!

7:05 PM

Take a look at Nivi Main Menu (type a number to select the chat):

Type 1: COVID-19 (symptoms, prevention, FAQs, quiz)
Type 2: Family planning during COVID-19
Type 3: Family planning methods (birth control)
Type 4: Get 3 birth control recommendations from Nivi
Type 5: Guidance on medication abortion
Type 6: Nivi's monthly quiz
Type 7: Share your concern or questions

Well done for exploring your options! Once you find the right method for you and your partner, it will be a weight off your shoulders 😊

After you answer a few simple questions, I can

India has many private, safe and confidential online services that you can use to:

- Consult a doctor
- Get a prescription
- Order medicines for home delivery

Shall I tell you how to use these services online?

Type 1: Yes, tell me about online services
Type 2: No, I'll visit a clinic/pharmacy
Type 3: No, I don't need health services 8:55 PM

Okay, thanks for confirming 😊 Please answer a few questions so I can recommend the best service for you.

Do you need to consult a doctor or just get medication?

Type 1: Consult a doctor
Type 2: Get a prescription
Type 3: Order medication for delivery 8:55 PM

And would you prefer to do this through an app or website?

Type 1: App
Moving from pharmacies to e-referrals

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

- Got method: 49.0%
- Prescription required: 11.3%
- Out of stock: 24.2%
- Pharmacy closed: 9.0%
- Unable to get there: 6.6%

Would you like to know about online services?

- Learn about online services: 66.0%
- Visit clinic: 17.2%
- Not needed: 16.7%
Nivi
enabling access for PSI clients to FP via digital referrals
Questions?

ben@nivi.io