GENDER AND THE PRIMARY HEALTH CARE SYSTEM: DIGITAL TOOLS

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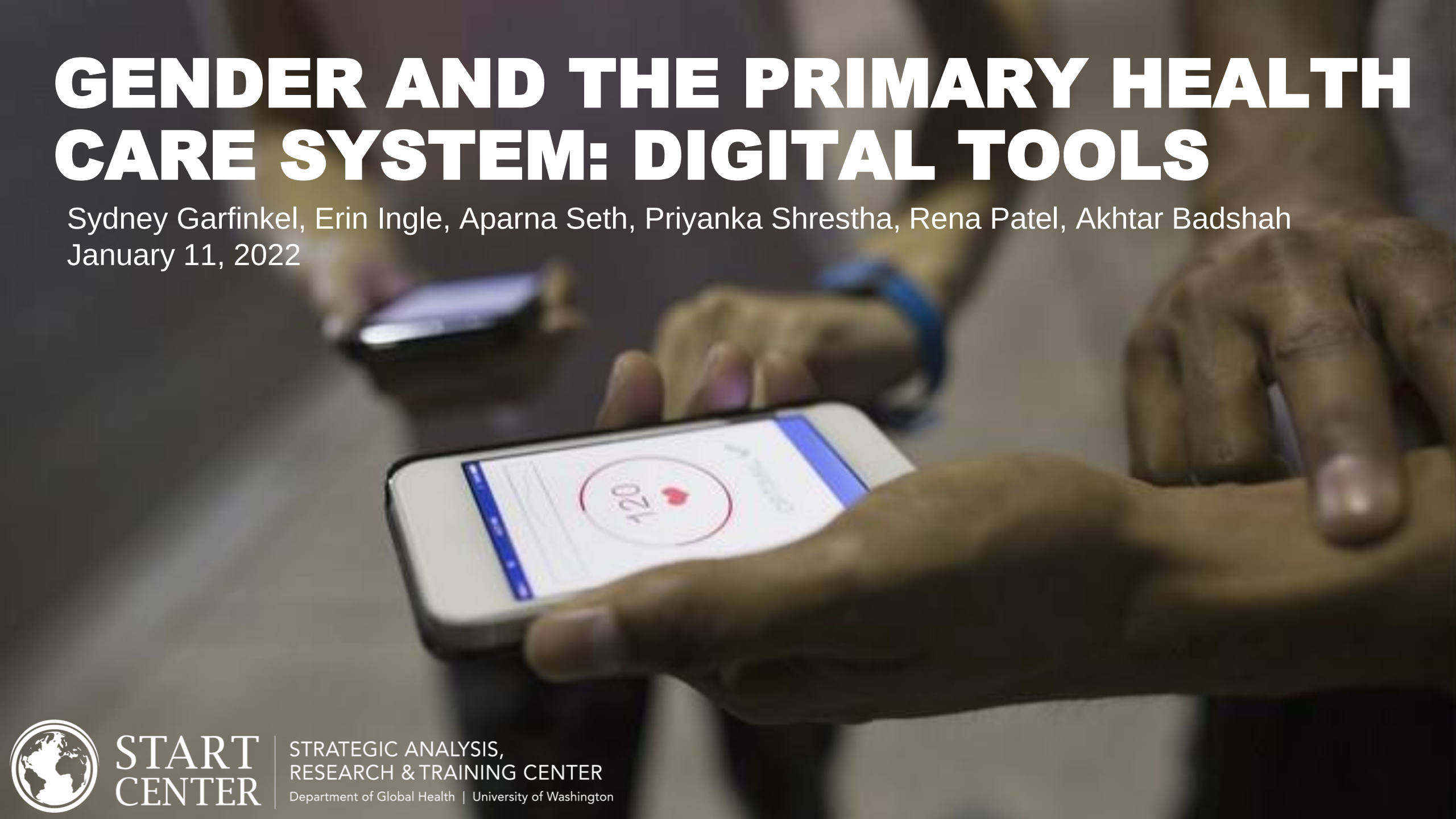

START CENTER
STRATEGIC ANALYSIS, RESEARCH & TRAINING CENTER
Department of Global Health | University of Washington

FINAL PRESENTATION AGENDA

- Overview, Background & Methodology
- Framing the Digital Divide: Health Care and Beyond
- Country Case Studies & Synthesis
- Analysis & Recommendation
- Questions & Discussion

START CENTER OVERVIEW

- Leverages leading content expertise from across the University of Washington
- Provides high quality research and analytic support to the Bill & Melinda Gates Foundation and global and public health decision-makers
- Provides structured mentorship and training to University of Washington graduate research assistants

PROJECT TEAM

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Faculty Lead

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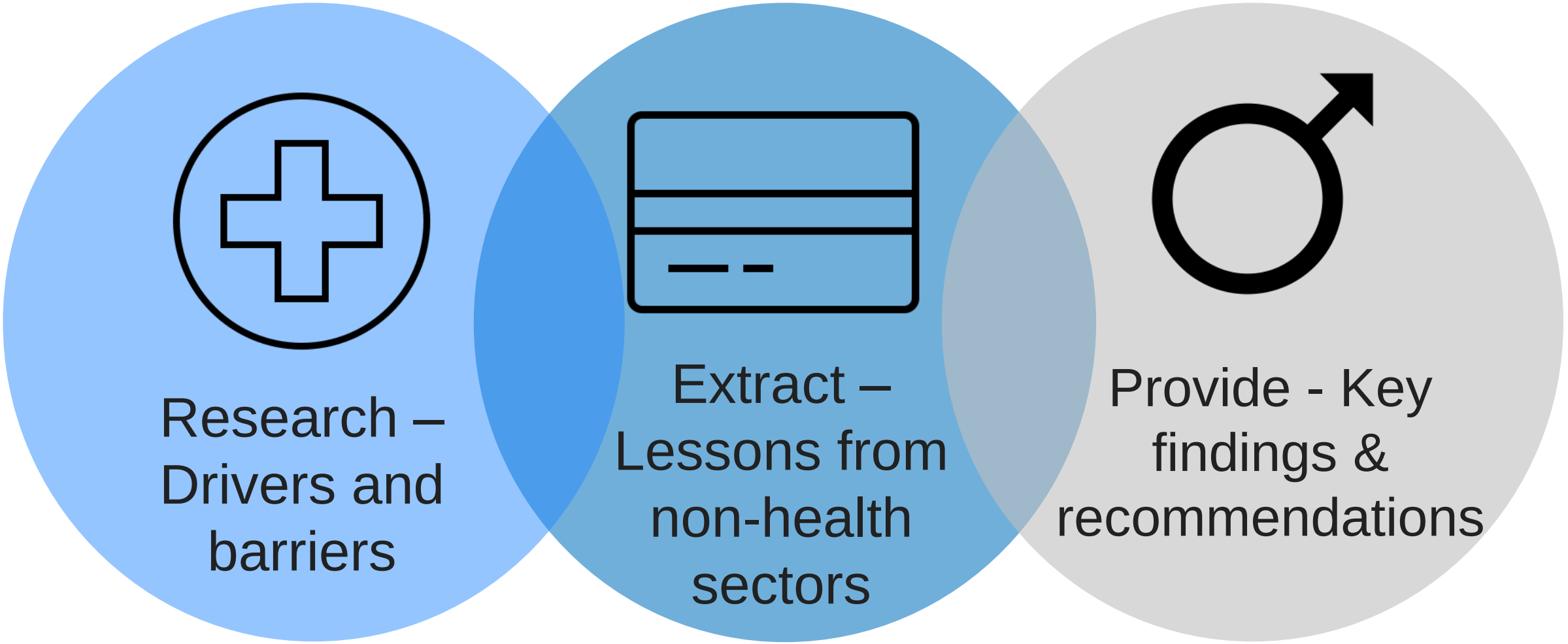
Faculty Lead

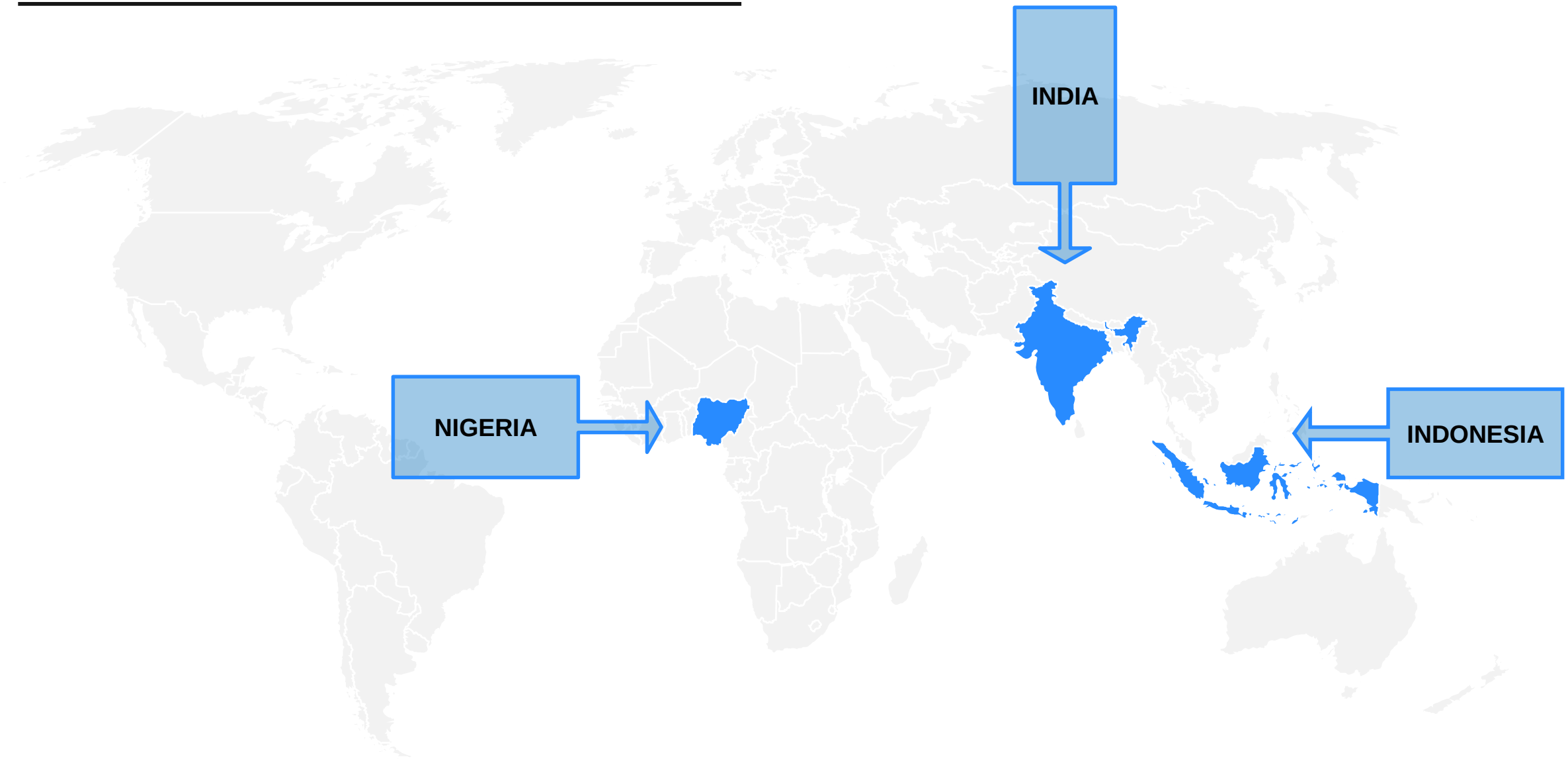
START CENTER


PROJECT OVERVIEW

RESEARCH OBJECTIVES



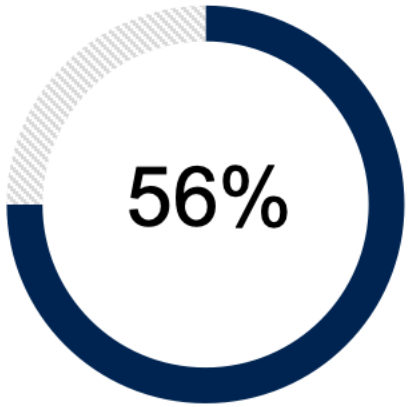
COUNTRY PROFILES



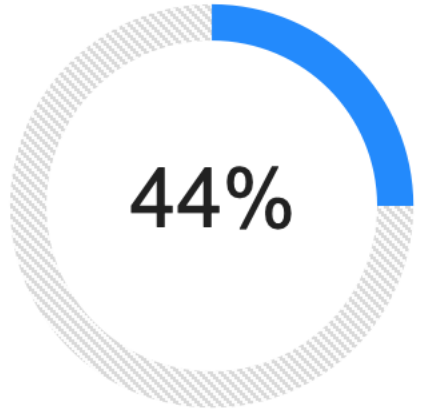
LITERATURE REVIEW

Rapid Literature Review:
Non-health sectors

Mapped Common Themes:
Used to guide Key Findings



ACADEMIC LITERATURE
45



GREY LITERATURE
36

KEY INFORMANTS

Key Informant	Title	Group/Affiliation
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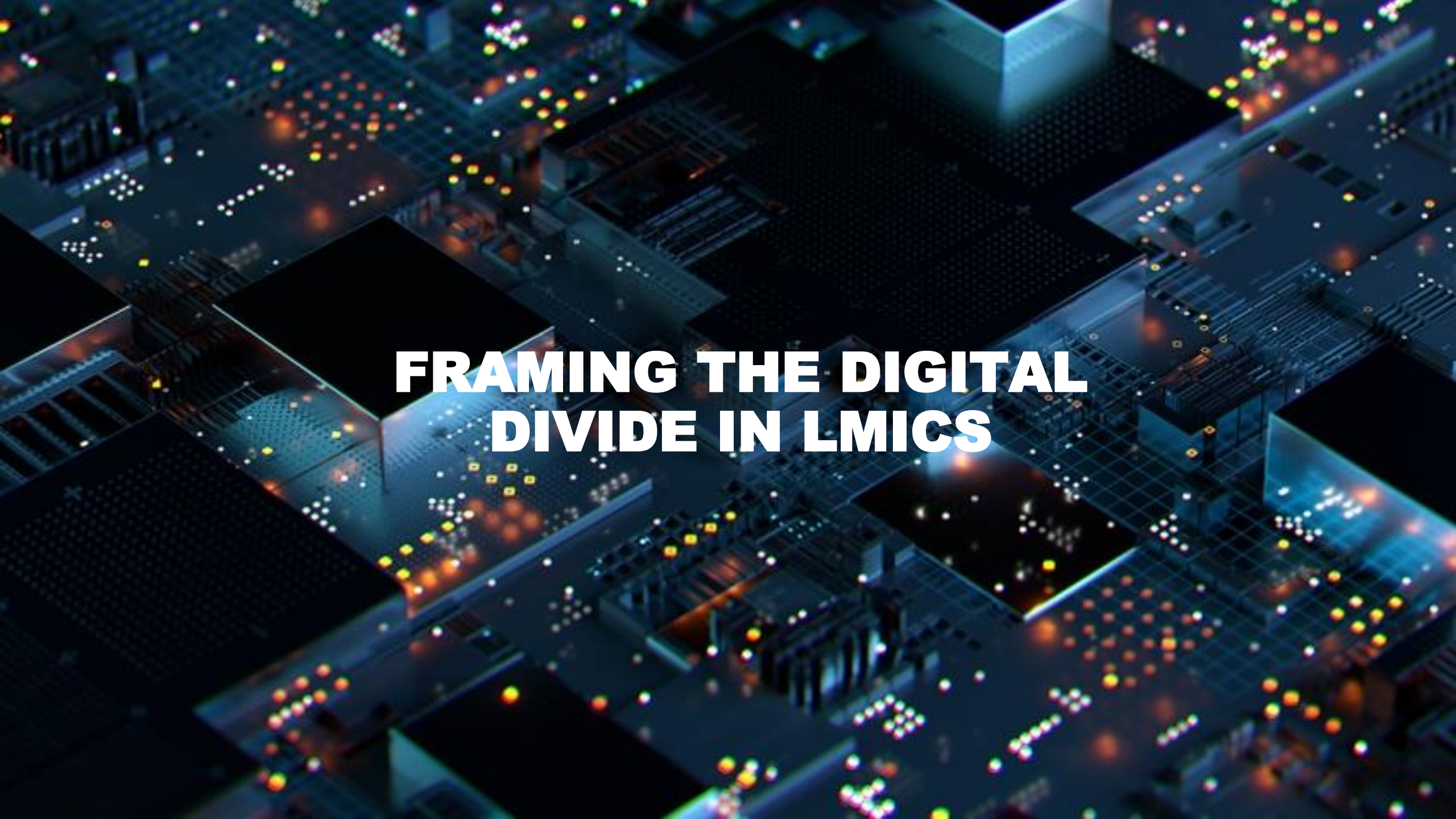
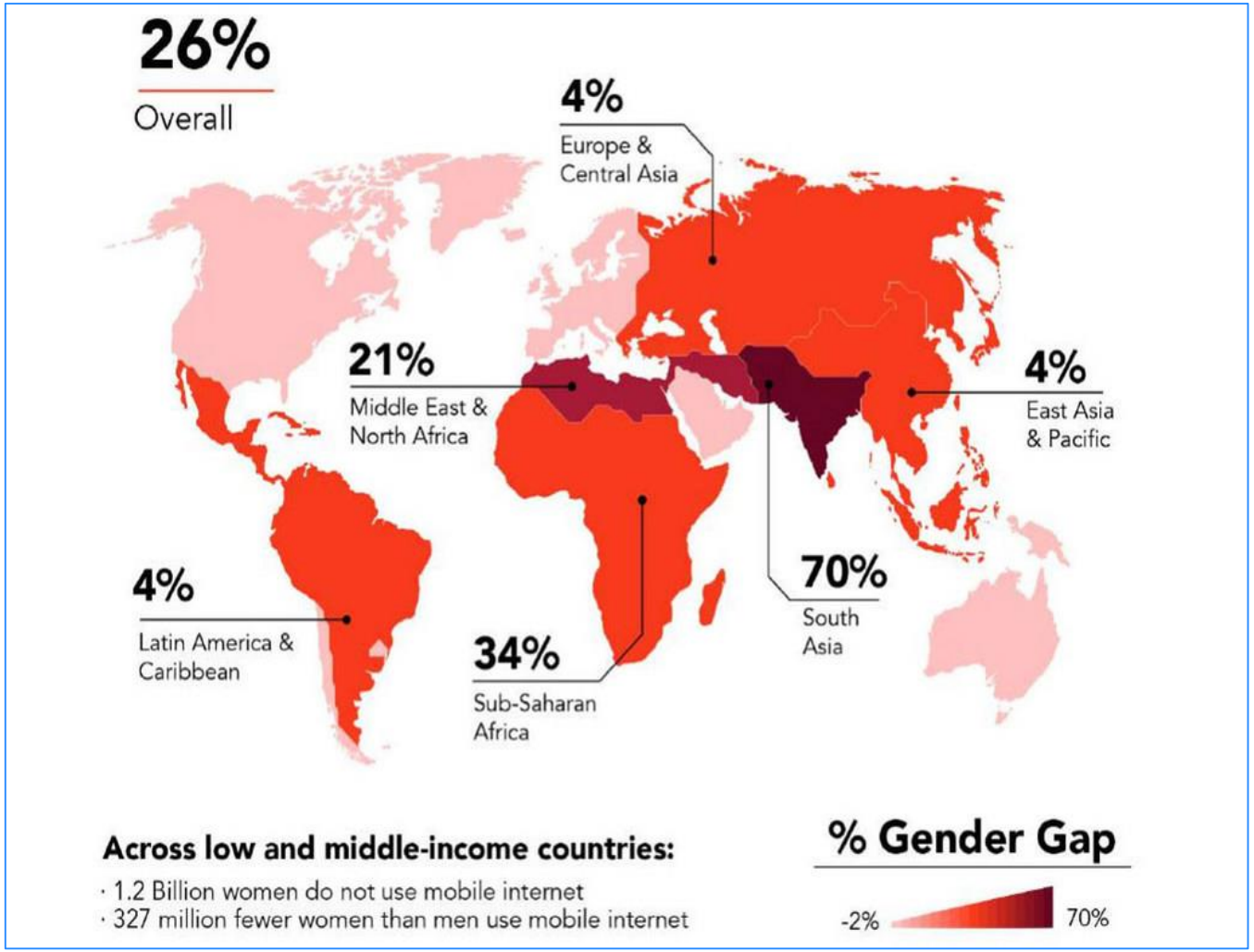
Araba Sey	Principal Researcher	Research ICT Africa
Maria Garrido	Principal Research Scientist	Technology & Social Change Group, University of Washington Information School
Farhad Ali	Project Director	Digital Green
Wale Adeoson	Founder, CEO	Wellvis
Claudia Marques de Abreu Lopes	Research Associate	Gender Health Hub, United Nations University
Andrew Buhayar	Program Officer	Bill & Melinda Gates Foundation – Digital Square Project
Jessica Watterson	Senior Lecturer	Monash University, Malaysia
Elizabeth Rowley	Senior Global Advisor	PATH
Zahra Lutfeali	Acting Executive Director	PATH – Digital Square


FRAMING THE DIGITAL
DIVIDE IN LMICS

UNDERSTANDING THE GENDER DIGITAL DIVIDE

- Digital economy is thriving
- However, digital services can reinforce or accelerate inequities
- Socio-cultural norms can be key drivers of digital divide
- Non-health sectors can be models in overcoming the divide



DIGITAL FINANCIAL SERVICES

DEVICE INCLUSION	• SMS & smartphone features • Infrequent data purchasers • Example: M-Pesa in Kenya
TRUST	*“Trust in institutions is only as strong as the social network in which a woman operates.” -Araba Sey*
HUMAN CONTACT	• Mobile money kiosks • Physical intermediaries • Outreach and social capital

EDUCATION

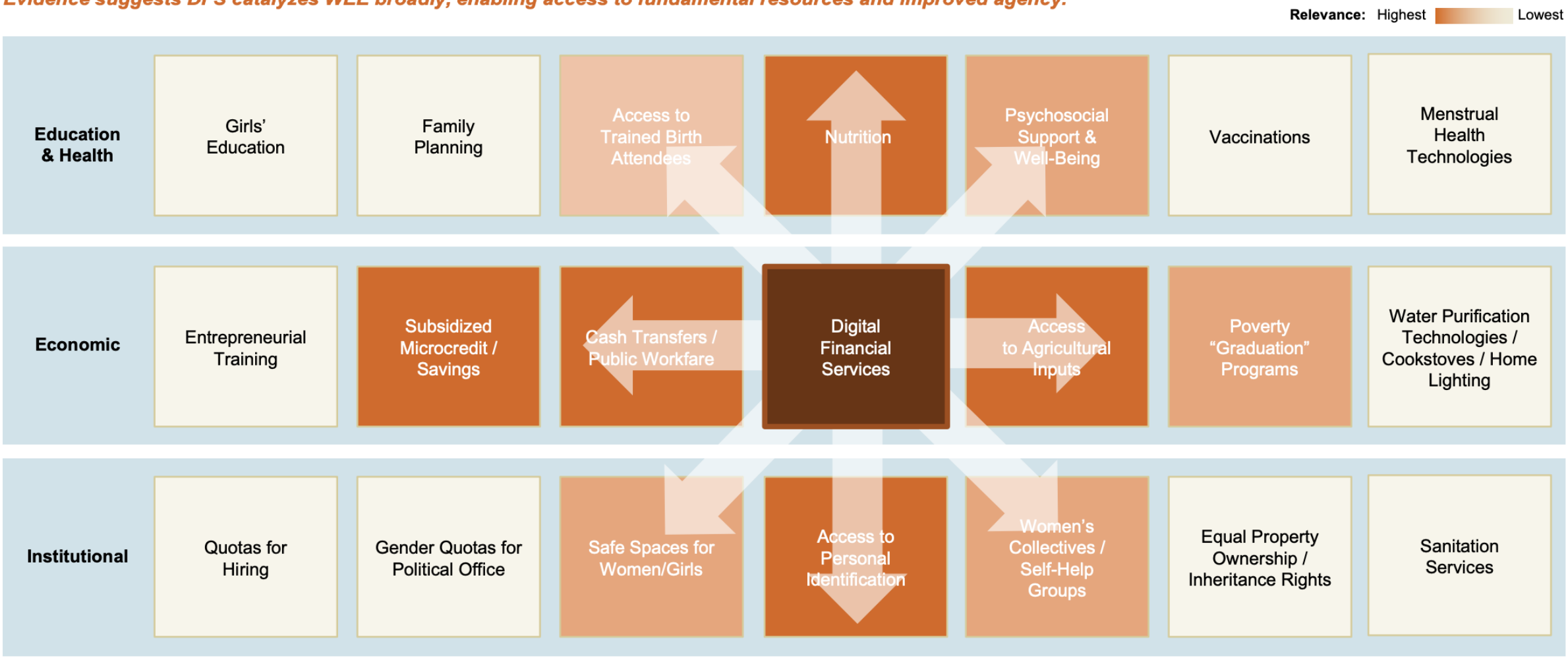
DIGITAL GENDER LITERACY GAP	• Increase access and use for women • Self autonomy and empowerment • Determinants multifaceted and nuanced
NORMATIVE BARRIERS	*"Tech come alive only when they are rooted in the communities where they are needed"* *- Alex Tyres Chowdhury*
METRICS OF APPROACH	• Developers of device algorithms • ICT infrastructure/pedagogy • Reduce conceptions of cost for access and use • Reduce fear of negative side of digital literacy

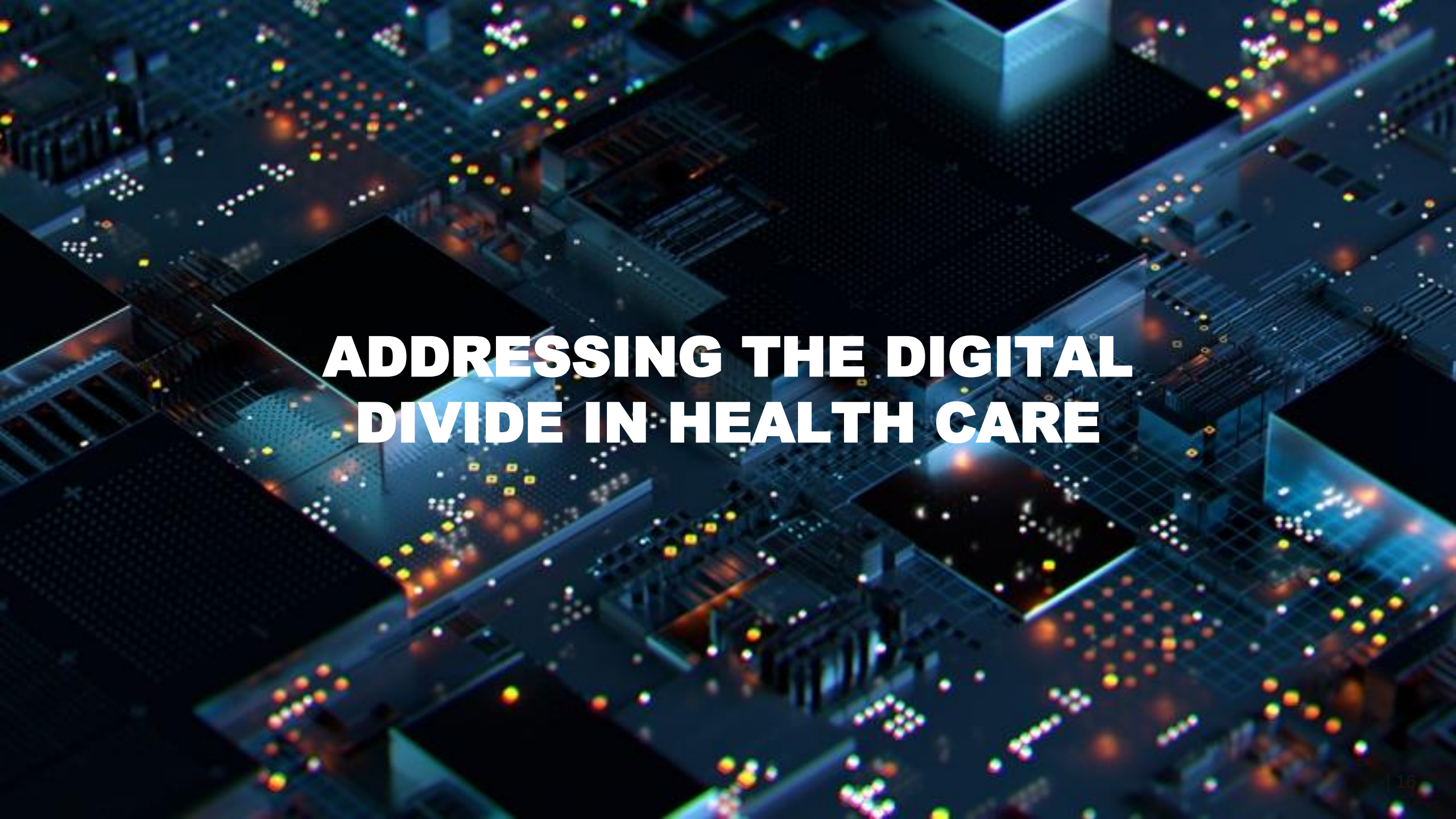
GOVERNANCE

DATA CHALLENGES	• Gaps in demographic data don't capture vital information • Affects women and girls more disproportionately
USER-CENTERED DESIGN	• Balancing technology-human elements in service delivery • Women must play a role in co-production and implementation
GOVERNMENT SUCCESS MODELS	• Togo • Rwanda • India

LEARNING: NON-HEALTH SECTOR FINDINGS

Evidence suggests DFS catalyzes WEE broadly, enabling access to fundamental resources and improved agency.



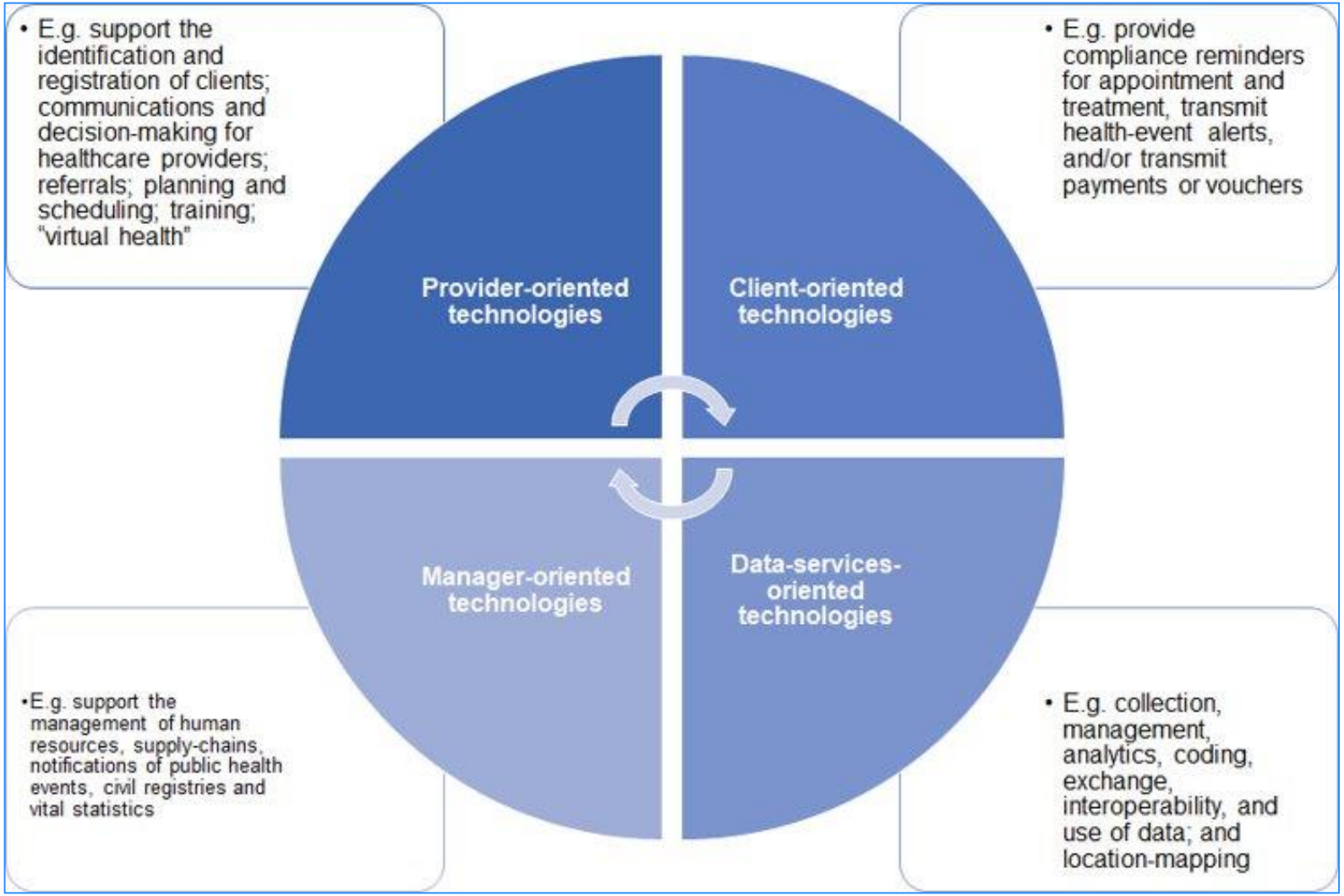

ADDRESSING THE DIGITAL
DIVIDE IN HEALTH CARE

CONTEXT

Primary Health Care: Accessible, affordable, and quality provision

Digital Tools for PHC: Improve allocation of services

Usage: Diagnose, prevent, improve systems



COUNTRY PROFILE: INDIA

What makes India unique?

01 Fastest growing digital market

>40% internet subscribers & 1.2 billion mobile phone users

02 Commitment from the government

Ayushman Bharat Programme
National Digital Health Mission

03 Scope for telemedicine

Market size predicted to grow at 31% from 2020 to 2025

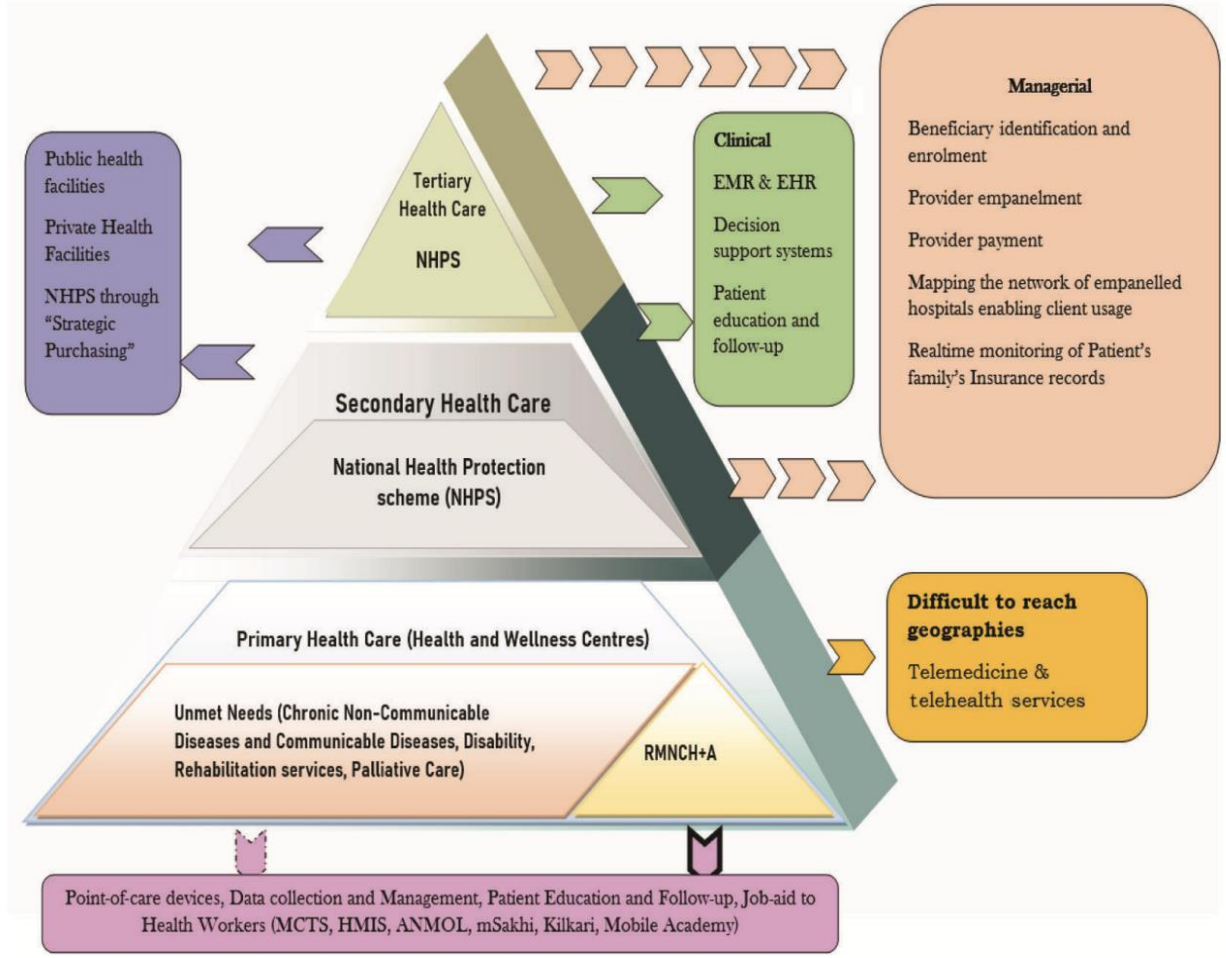


Figure 1. Framework for deployment of digital health technologies in the context of Ayushman Bharat Programme.

COUNTRY PROFILE: INDIA

Opportunities for improvement

01 Robust infrastructure and governance

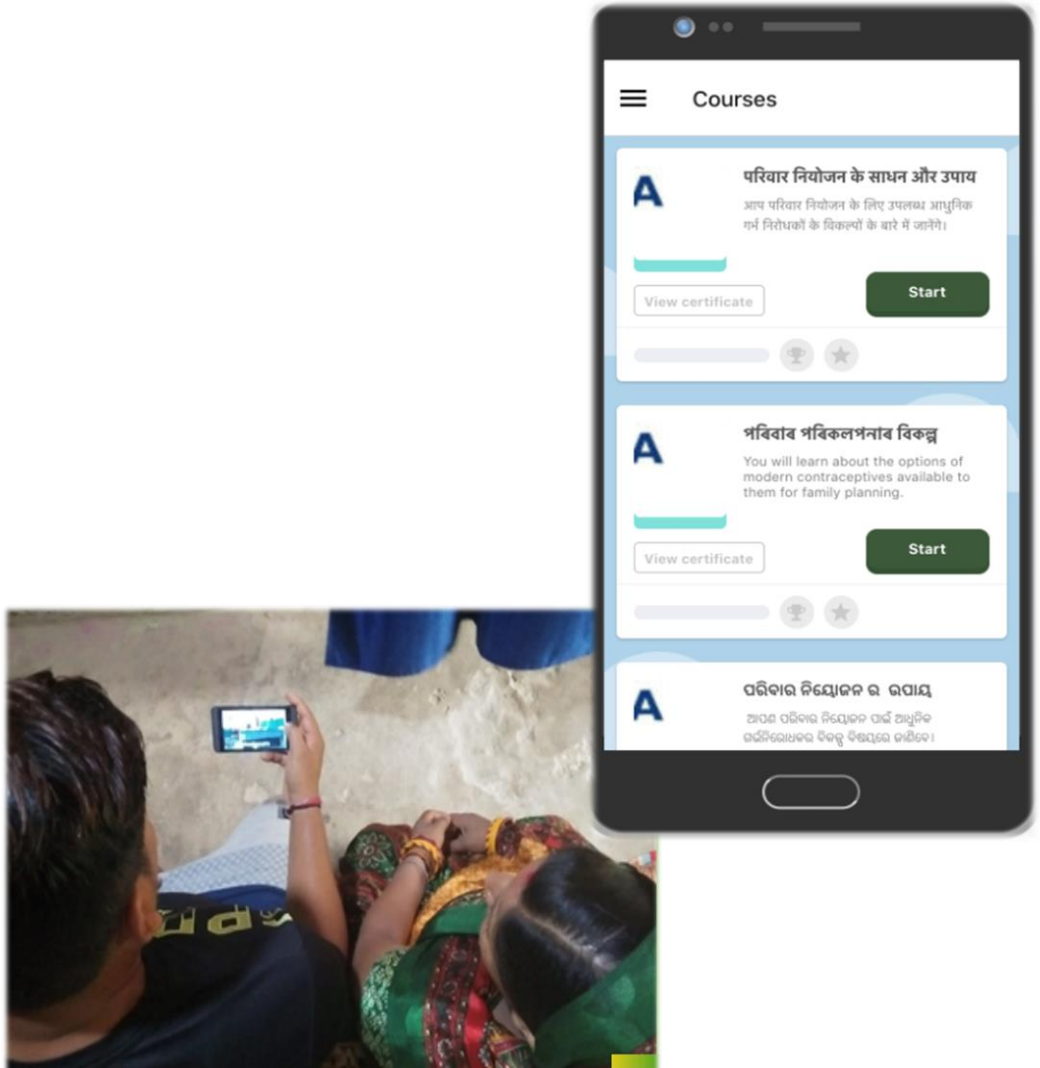
02 Build communities' trust and acceptance

03 Foster public-private partnership

Reducing Maternal and Newborn Deaths (ReMiND) project

CASE STUDY: EXAMPLE FROM INDIA

Project Samvad (Digital Green): a RMNCH project promoting family planning methods and nutrition messages among women in rural areas



GOALS: Improve maternal and child health outcomes

KEY POINTS:

- Patient & provider facing
- Shares locally relevant video content through WhatsApp groups and IVRs
- Trains front-line workers using micro-modules
- Partnered with community and frontline workers, local partners, and government agencies

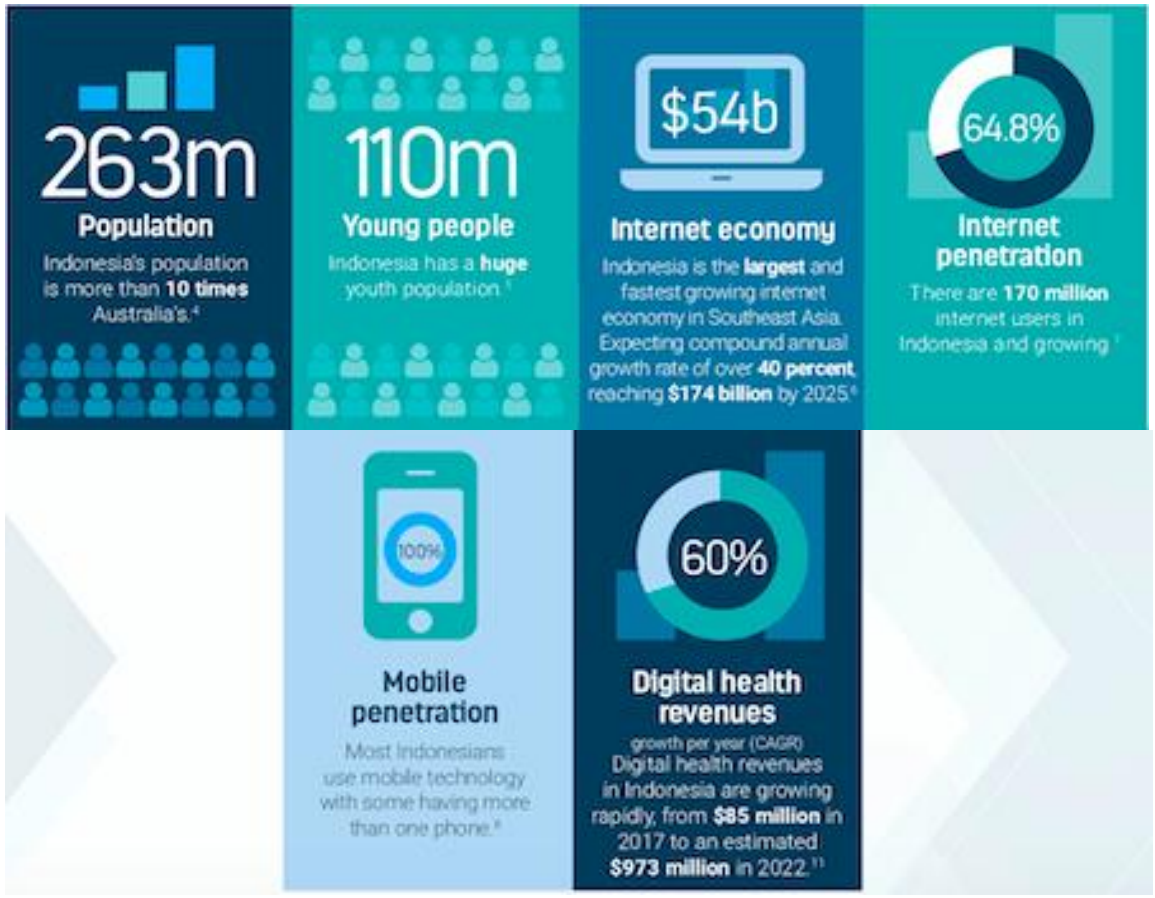
COUNTRY PROFILE: INDONESIA

What makes Indonesia unique?

01 Island archipelago consisting of 17,000 islands

02 High social understanding of technology and 95% female literacy

03 Government support and initiative to expand digital access with rural population in mind
Ex: Palapa Ring Project and the Hope Family Program



COUNTRY PROFILE: INDONESIA

Opportunities for improvement

01 Government regulation and multi-level partnership

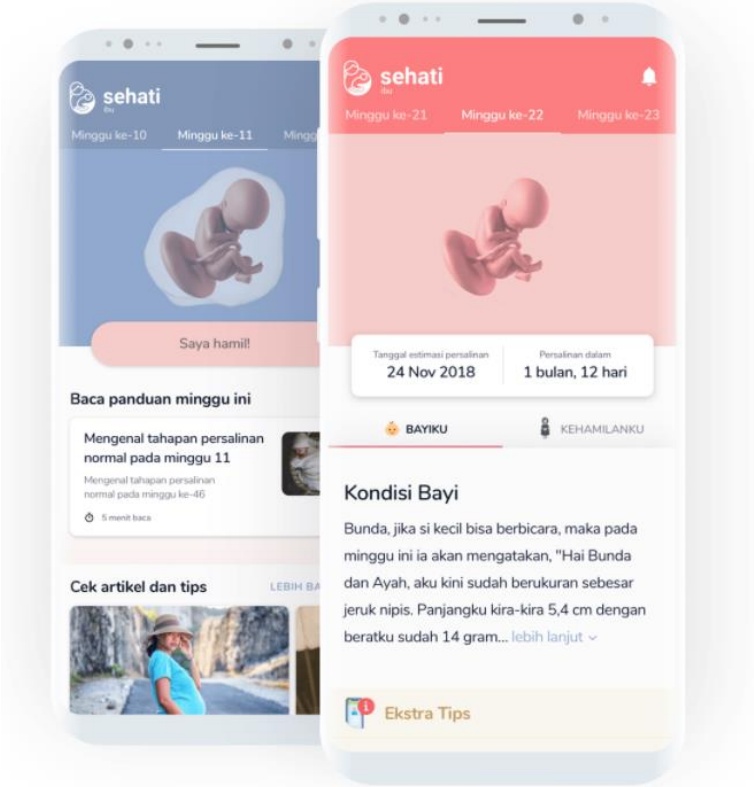
"With no regulation... this service has the potential to erode the inequity of access from the uneven distribution of health facilities and personnel" - Mira Tayyiba, Secretary General of Communications and Informatics

02 Invest in health infrastructure and training medical professionals

03 Continued expansion of physical access

CASE STUDY: EXAMPLE FROM INDONESIA

Sehati: Integrated healthcare app to provide maternal health services in hard-to-reach areas



GOALS: Reduce maternal mortality, increase accessibility, and reduce cost of neonatal diagnostics specifically in rural areas

KEY POINTS:

- Patient and provider facing
- Stores data and sends to doctors in other locations
- Partnered with midwives, healthcare facilities and government agencies

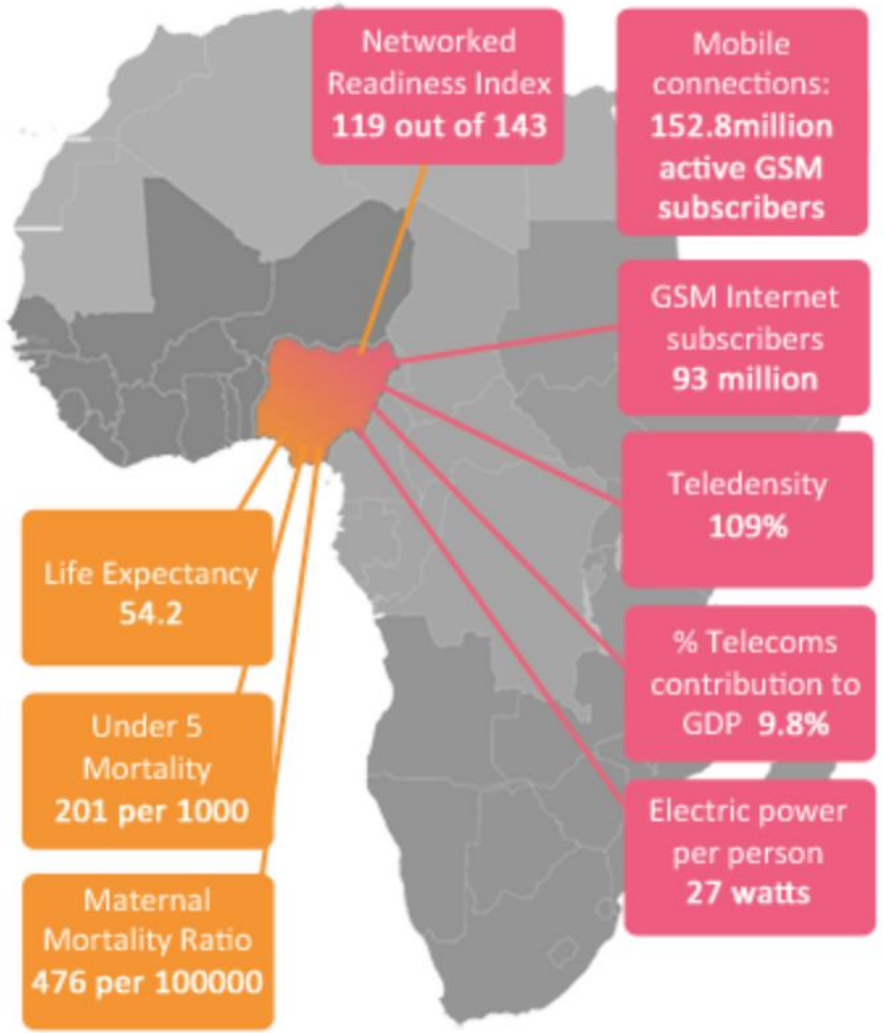
COUNTRY PROFILE: NIGERIA

What makes Nigeria unique?

01 Africa's largest economy; Lagos has exponential growth in tech solutions

02 Huge digital market with at least 84 ICT in health interventions

03 Supportive policy environment with focus to expand UHC



COUNTRY PROFILE: NIGERIA

Opportunities for improvement

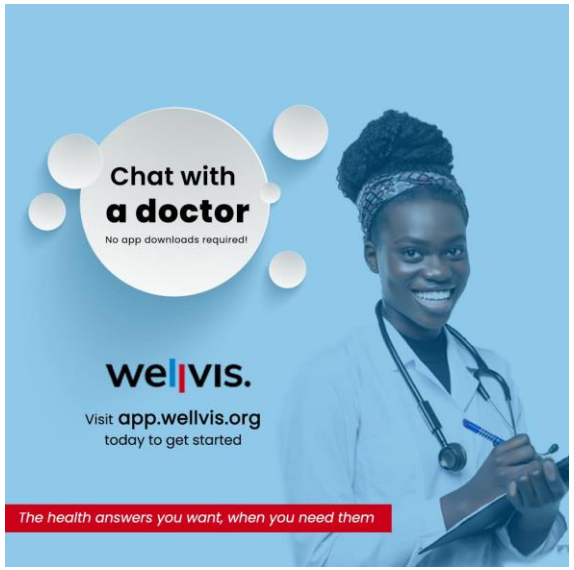
01 Strengthen digital health governance and capacity building

02 Strengthen Public-Private Partnerships

03 Engage users and stakeholders in design and implementation

CASE STUDY: EXAMPLE FROM NIGERIA

Wellvis: A comprehensive telehealth solutions platform in Nigeria to provide health information and services to users



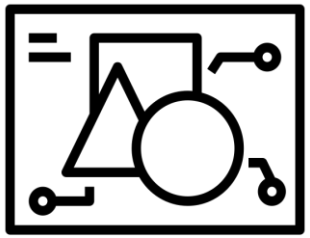
GOALS: To improve access to quality health information and services through features such as Question-and-Answer platform, one-on-one online consultation, appointment booking and reminders

KEY POINTS:

- Patient and provider facing
- Partnered with local healthcare workers and government agencies, e.g., NCDC


KEY LESSONS AND
RECOMMENDATIONS

KEY LESSONS

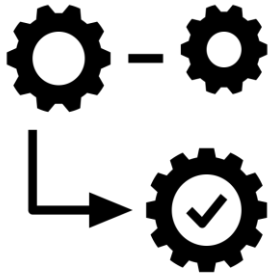


Design

Digital literacy and digital gender gap

User-centered design

Logistics requirements for digital access



Implementation

Interoperability of digital tools

Capacity building needs

Leverage existing systems/structures to build trust

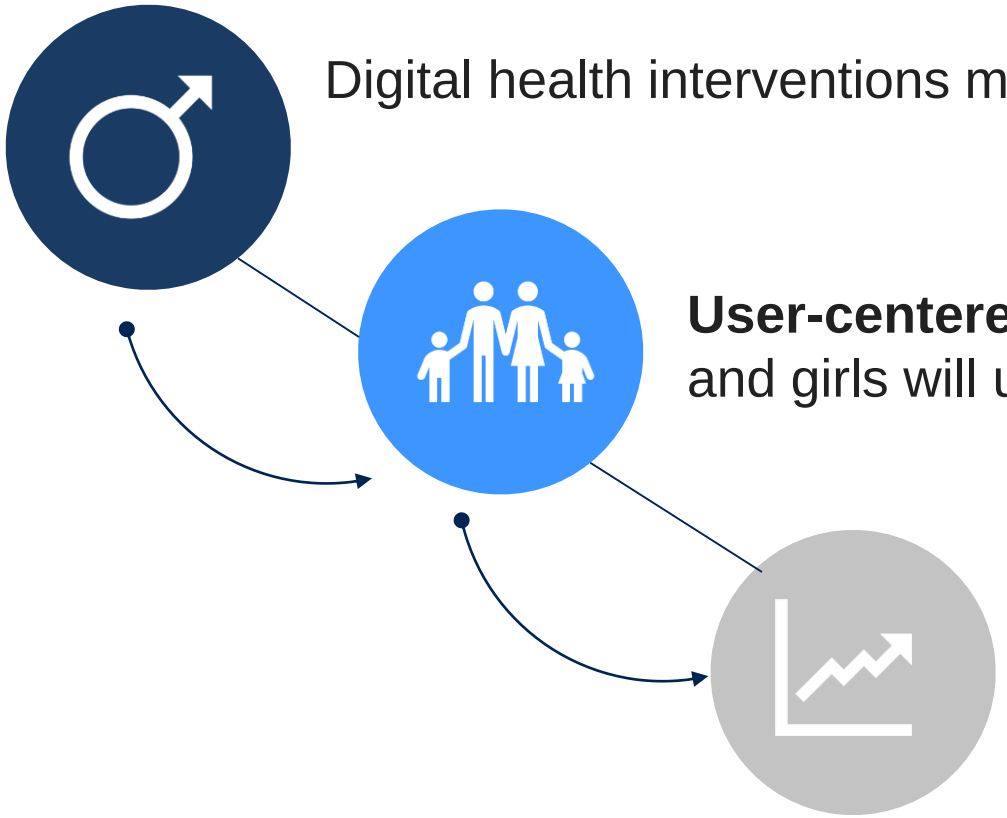
Policy

Robust infrastructure and governance

Data security and protection

Public-private partnerships

KEY LESSONS: DESIGN

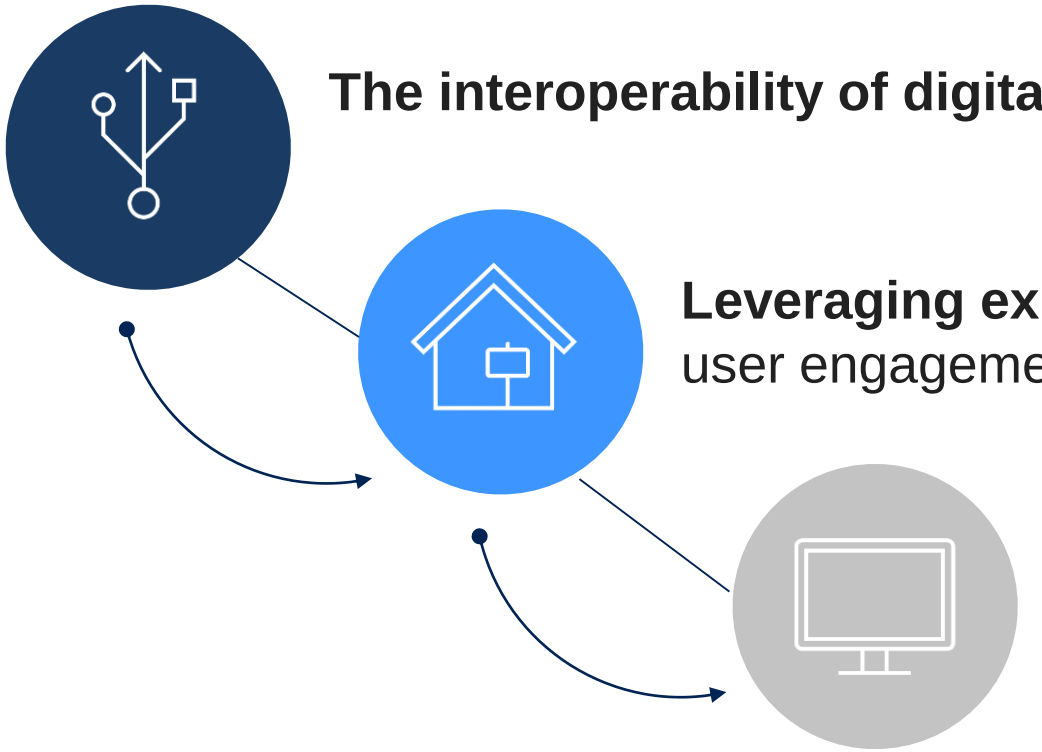


Digital health interventions must consider the **gendered digital literacy gap**

User-centered design is imperative for implementing tools that women and girls will use

Logistical requirements for digital access shapes user preference and engagement

KEY LESSONS: IMPLEMENTATION

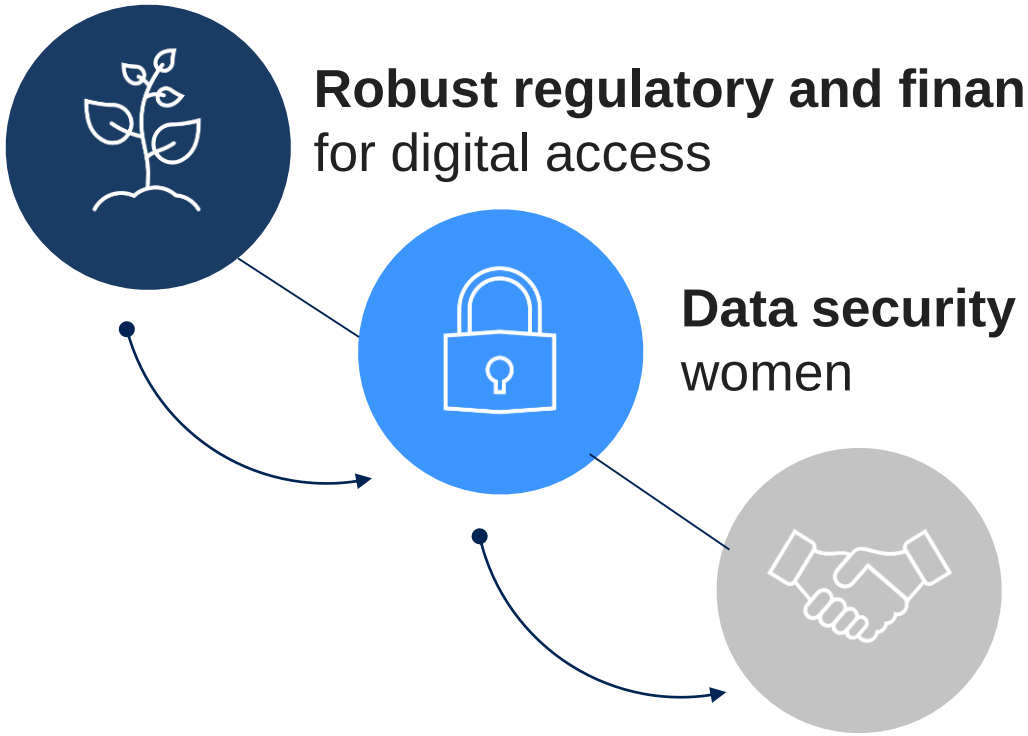


The interoperability of digital tools creates more effective digital health ecosystems

Leveraging existing systems and structures augments trust and new-user engagement

Implementing capacity building alongside program implementation may be essential

KEY LESSONS: POLICY



Robust regulatory and financial mechanisms can foster an enabling environment for digital access

Data security and protection is necessary to consider, especially for women

Private-public partnerships can spur innovation and reduce the fragmentation

QUESTIONS & COMMENTS

THANK YOU