How can ICTs be a catalyst for Women’s and Children’s Health?

Information and Communication Technologies (ICTs) can transform the way in which health services are accessed by and delivered to women and children (by governments and health service providers).

- **Improving access and empowering users**: ICTs can bring RMNCH* health services closer to end-users and empower them by filling information gaps on how and where to access services.
- **Reduce cost of service delivery**: ICTs can enable governments to improve service coverage and do so at lower costs.
- **Support capacity building of frontline health workers**: ICTs can help frontline health workers perform their duties more effectively by improving access to information.
- **Improving accountability**: ICTs can help improve the state of Health Information Systems (HISs) and allow for better resource tracking.

Countries are realising the importance of ICTs and are integrating them into their Health Systems. In a 2013 survey of CoIA countries, it was found that 69 per cent countries have implemented, at least partially, an electronic information system to register births, deaths, and causes of death. At the global level, the UN Commissions on Life-Saving Commodities (CoLSC) and Information and Accountability (CoIA) have made concrete recommendations for the increased use of ICTs in support of national efforts to improve women’s and children’s health. Still, the use of ICTs has so far been limited and few ICT enabled interventions have been successfully scaled up.

Purpose of this Planning Workbook

This Workbook has been designed for those who are considering scaling up the use of ICTs in support of country-led plans to improve women’s and children’s health. Using the Workbook, multi-stakeholder groups can collectively identify obstacles and enablers to the use of ICTs, including scale up, and identify the implementation pathways to address them.

Government ownership of the multi-stakeholder dialogue (MSD) on ICTs is critical as the use of ICTs requires cross-sectoral and cross-constituency initiatives.

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<td>The workbook builds on and complements past and current efforts of World Health Organization, Innovation Working Group, International Telecommunication Union, U.S Agency for International Development, GSM Association, mHealth Alliance, Johns Hopkins University Global Initiative, among others. The workbook highlights the use of particular frameworks and tools to answer key questions about scaling up.</td>
<td>This included an exhaustive literature review, stakeholder interviews and regular reviews by an advisory group comprising of key stakeholders and partners. Innovative methods were used to inform content, including a project website that was created to conduct mini surveys of emerging topics. Several partners have provided important inputs on the content.</td>
<td>The advisory group members were of the view that a resource that facilitated discussion between multiple stakeholders would be most useful. The workbook does not prescribe specific courses of action, but focuses on key issues that should ideally involve MSD and collective decision-making when leveraging ICTs. To guide MSD on ICTs, convenors may combine the use of this workbook with the MSD tool developed by PMNCH and its partners.</td>
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* Reproductive, Maternal, Newborn and Child Health.
Using the Workbook

Every country has different needs and readiness levels for the use of ICTs. Thus, the convenors of the MSD on ICTs will need to assess how they can use the workbook well in a specific situation. Guidance is provided here on the different steps that are required to understand the feasibility of using ICTs.

STEP 1: Get started

1a. **Identify key stakeholders** for Multi-Stakeholder Dialogue (MSD) on use of ICTs in RMNCH;
1b. **Conduct initial needs assessment** for Women’s and Children’s Health - essential interventions for RMNCAH (tools such as the RMNCH Policy Compendium, Countdown to 2015 country profiles may be used here to identify areas of concern).

STEP 2: Identify areas where ICTs are likely to make an impact

2a. **Assess ICT environment** (infrastructure, ICT literacy and current use, enabling policies);
2b. **Identify RMNCAH areas where the use of ICTs should be explored further** through MSD; this should be based on 1b and 2a.

STEP 3: Conduct guided dialogue to assess feasibility of using ICTs

3a. **Reach agreement on key risk factors for using ICTS** (project, institutional, sustainability, policy environment, infrastructure, interoperability, technology, access, social-cultural);
3b. **Identify level of risk for each of the above factors based** on the scoring mechanism (suggested in the workbook);
3c. **Determine next steps** based on feedback from participants during MSD and risk assessment results (from 3b). This would include: implementation plan, financing, roles and responsibilities, monitoring and evaluation, etc.

Workbook Content

The workbook includes:

- **Actions** that have been designed to prompt users’ participation to help identify ICT priorities for RMNCH.
- **Resources** that can be used to: identify key stakeholders; conduct the initial RMNCH needs assessment; understand the national ICT environment; and guide the MSD on ICT priorities.
- **Experts’ corner** that captures the prevailing thinking on key issues around the use of ICTs.

The development of this workbook was supported by the Innovation Working Group, the GSM Association and the Partnership for Maternal, Newborn & Child Health. Several other partners made important contributions. The workbook content has been developed by SageHagan GmbH.

This document can be accessed at: [http://www.who.int/pmnch/knowledge/publications/ict_mhealth.pdf](http://www.who.int/pmnch/knowledge/publications/ict_mhealth.pdf)