

# mHealth Technologies in India: Explorations in maternal health interventions

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# Technology for Emerging Markets

At Microsoft Research India

## Understand

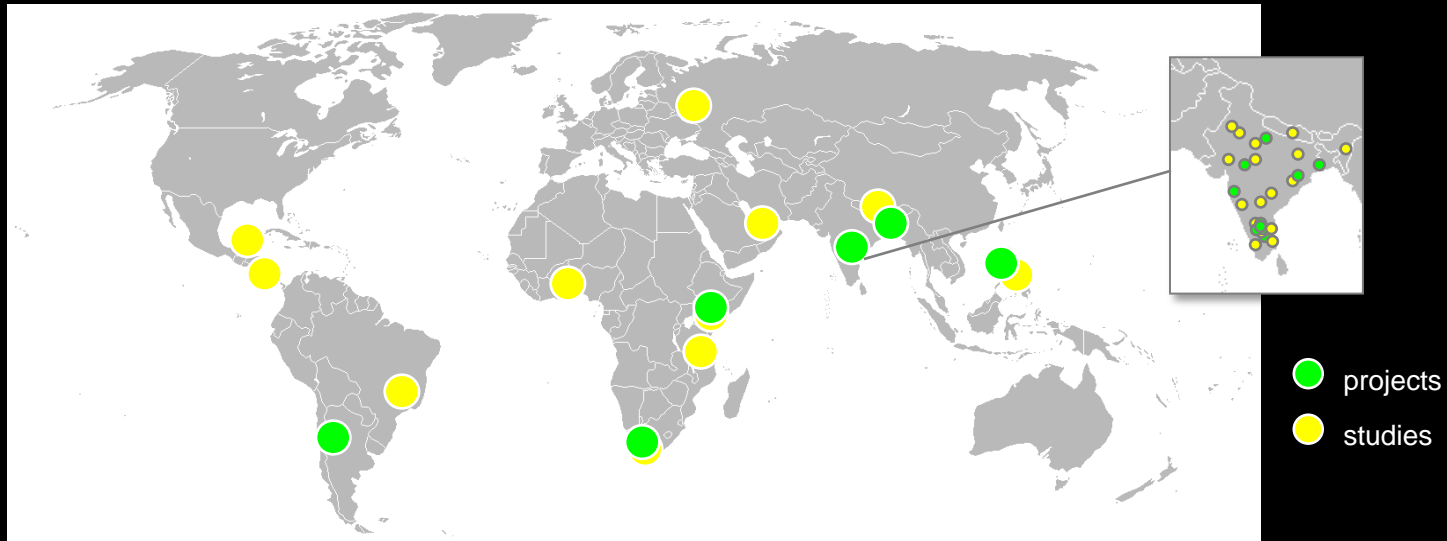
existing and potential technology users in developing communities

## Design

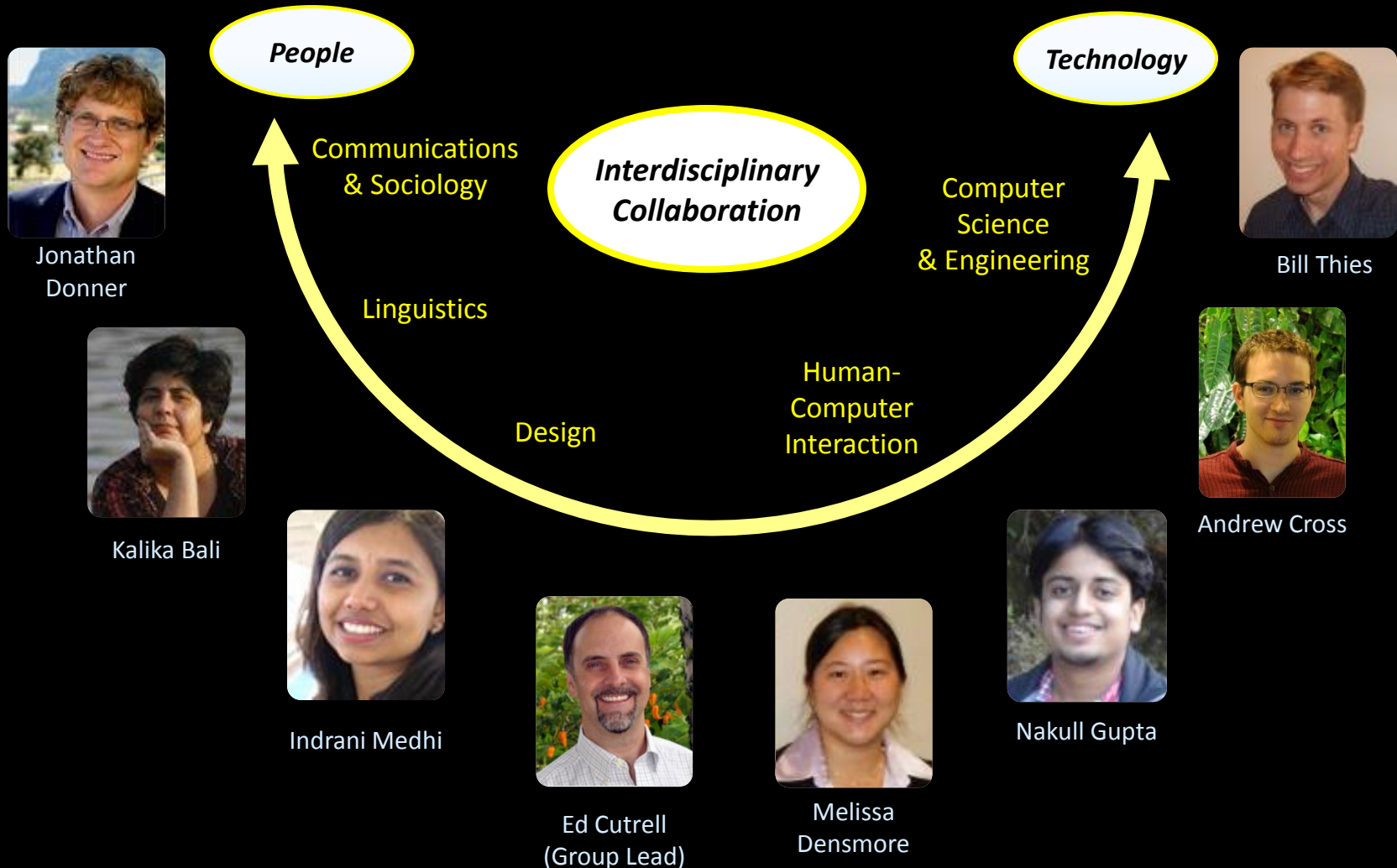
and evaluate technology and systems that contribute to socio-economic development

## Collaborate

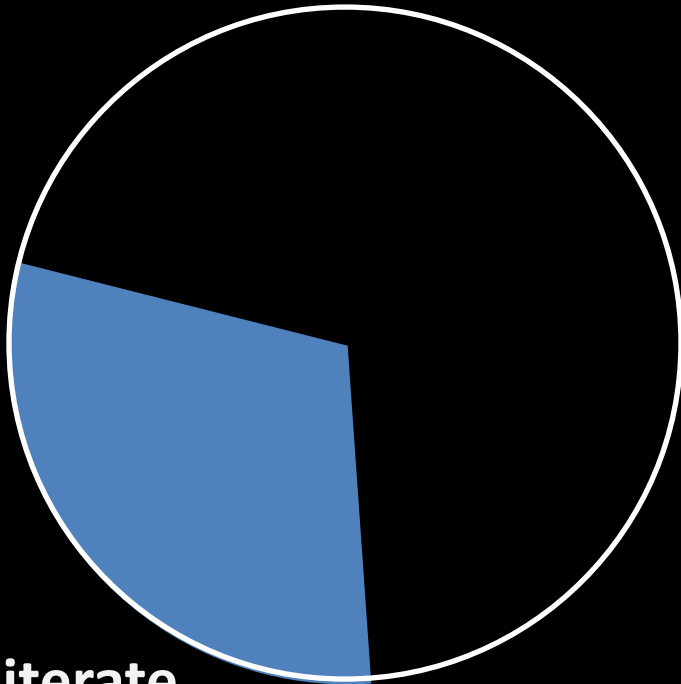
with development organizations, governments, academics & industry



# Technologies for Emerging Markets



# Voice Remains Primary Interface for Mobile Subscribers in India

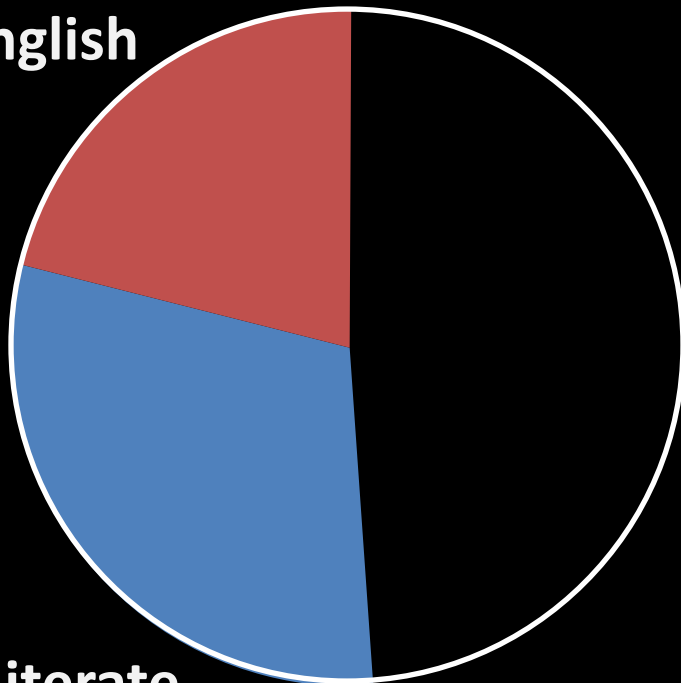


**Non-Literate**



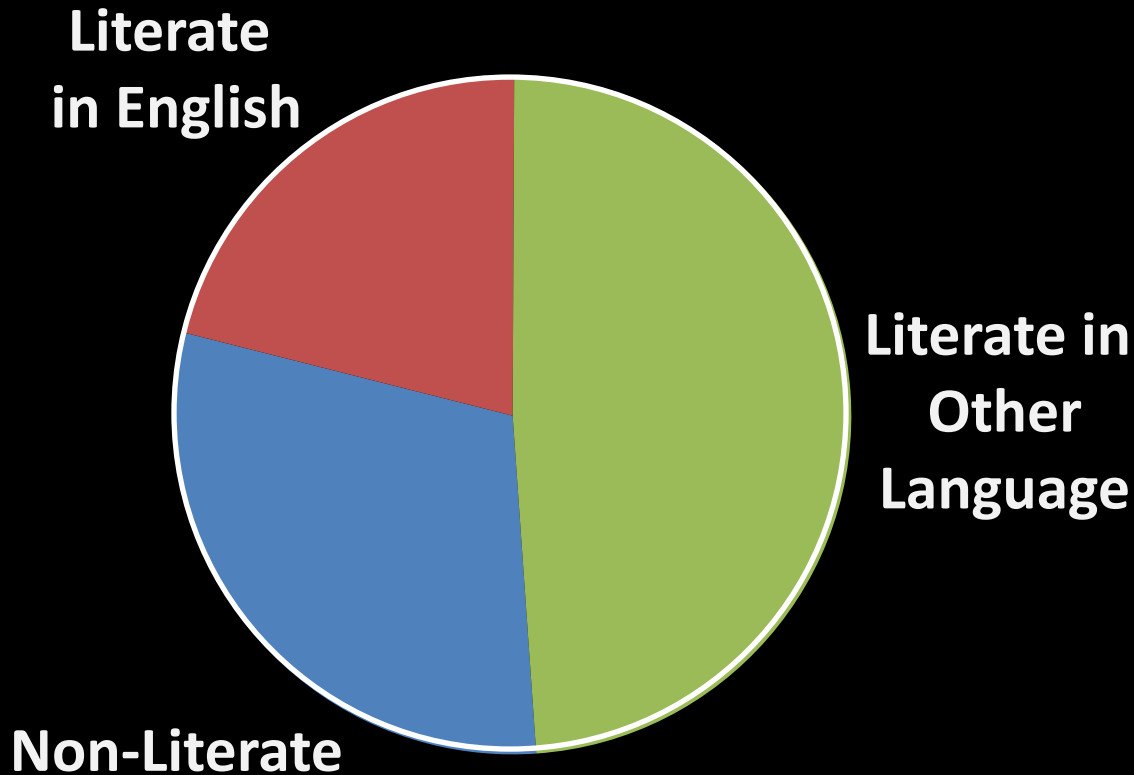
# Voice Remains Primary Interface for Mobile Subscribers in India

Literate  
in English



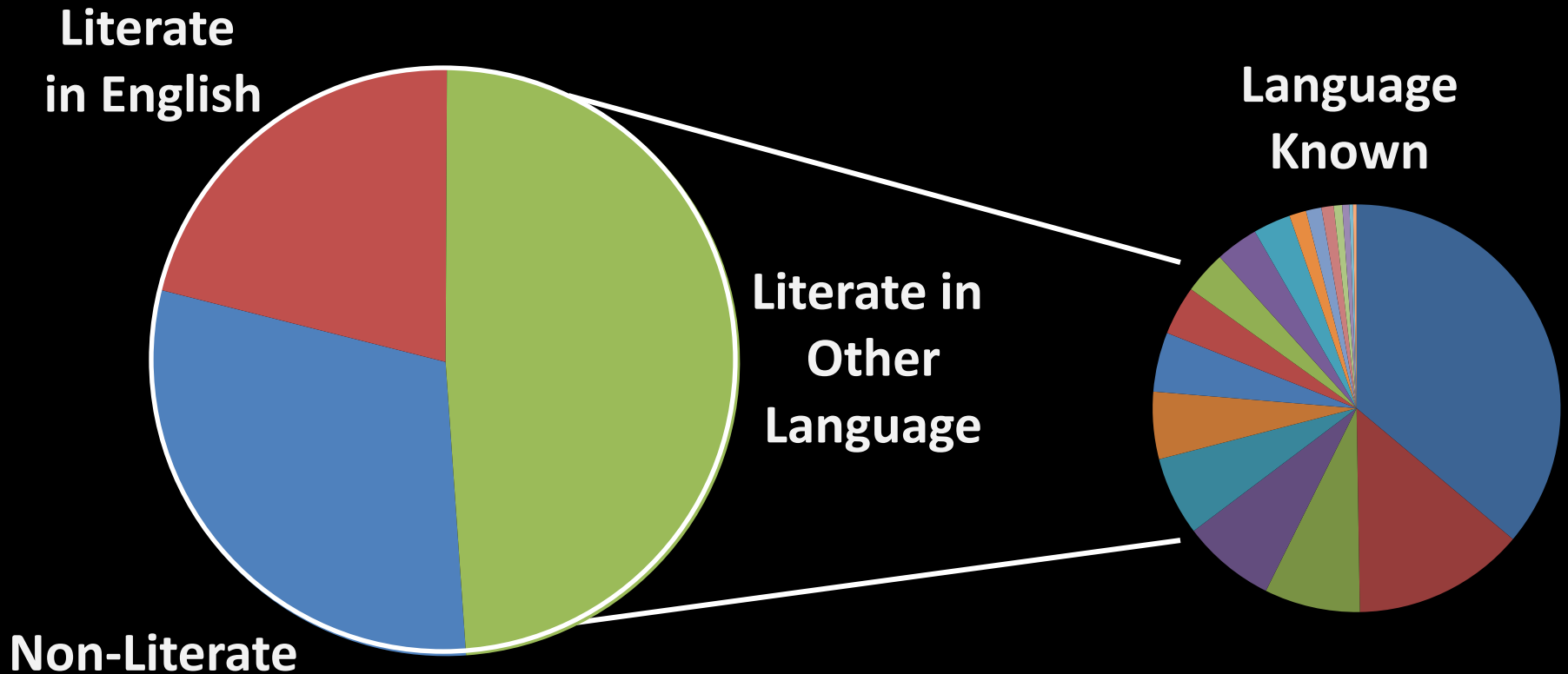
Non-Literate

# Voice Remains Primary Interface for Mobile Subscribers in India





# Voice Remains Primary Interface for Mobile Subscribers in India



**Interactive Voice Response: \$1B Industry**

# Voice Messages for Healthy Behaviors During Pregnancy

*In collaboration with Sion Hospital (Mumbai); to appear at ICTD 2013*

- Can automated voice reminders improve the adherence of pregnant women to iron pills?
- Randomized controlled trial across 79 women in Mumbai
  - Treatment group: Hb levels increase (0.32 g/dl)
  - Control group: Hb levels decrease (-0.10 g/dl)
- Evolved into DocTalk: doctor broadcasting system



# ASHA-Assist: A Counselling Aid for ASHAs

Interactive mobile videos for maternal health education



## Challenges

- Poor training programs
- Limited education/literacy
- Issues in credibility
- Traditional beliefs and barriers

## Goals

- Improve Efficacy of ASHA visits
- Encourage better maternal health practices
- Address language barriers

**Accredited Social Health Activists (ASHAs)** monitor and provide services for pregnant and postnatal women



**Research and Reality: Using Mobile Messages to Promote Maternal Health in Rural India.**

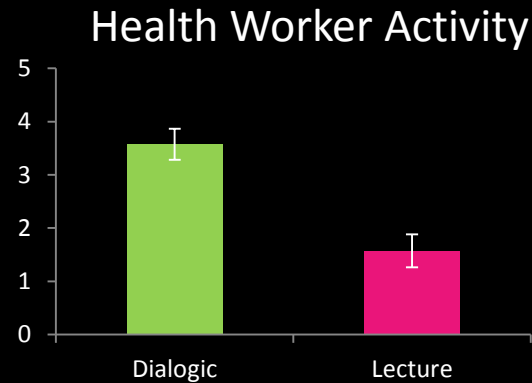
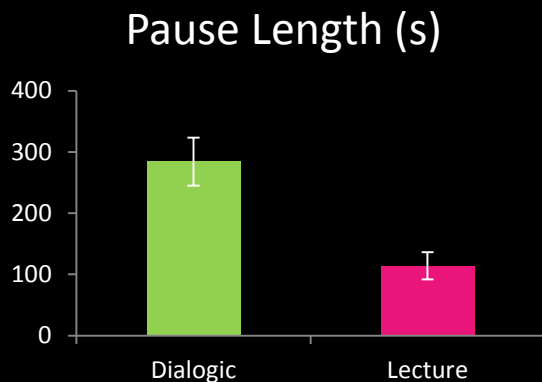
D. Ramachandran, John Canny, Prabhu Dutta Das, Ed Cutrell. ICTD'10.

**Mobile-izing Health Workers in Rural India.** D. Ramachandran, et al. CHI'10.

# Measuring Persuasiveness: Dialogic vs. Lecture-based Mobile Video

Common myth:  
iron tablets  
will make the  
baby too big  
to deliver  
normally

	Lecture	Example	Dialogic	Example
Myth	General Statement	Many women believe that <myth>.	Question about personal beliefs	Do you believe that <myth>?
Correction	Explanation	<myth> is not true; in fact, <correction>.	Explanation with rhetorical question tags	<myth> is not true; in fact, <correction>, did you know that?
Action	Instruction	You should <action>.	Request for Personal Commitment	Will you <action>?



Quality of counseling  
significantly improved  
with dialogic style of  
message presentation.

**Research and Reality: Using Mobile Messages to Promote Maternal Health in Rural India.**

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# How does ASHA-Assist compare to and relate with existing interventions?

Standard Intervention:

Flip Chart



Mobile Intervention:

ASHA Assist v.2



Interactive

Dialogic  
Flip Chart

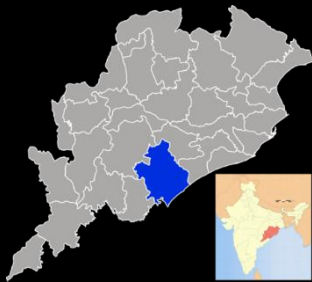
Dialogic  
Interactive  
Video

Traditional  
Flip Chart

Traditional  
Video

# How does ASHA-Assist compare to and relate with existing interventions?

Ganjam District  
Orissa



4-arm RCT, 12 months

ASHA-Assist v.2

- Touchscreen feature phone
- 29 videos
- UX learning



Per  
Arm

- 25 ASHAs
- 75-125 Mothers

Total

- 100 ASHAs
- 300-475 Mothers

- Topical Training Only
- Baseline and Exit Interviews for all Participants

Control  
Group



- Use format from flip chart developed for ASHAs in this region
- Baseline and Exit Interviews for all Participants

Traditional  
Flip Chart



- Interactive, persuasive, dialogue: Script on Flip Chart
- Baseline and Exit Interviews for all Participants

Dialogic  
Flip Chart



- Same script as Dialogic Flip Chart, on mobile phone
- Baseline and Exit Interviews for all Participants

Dialogic  
ASHA-Assist



Same content and images for all arms