



UiO : **Institute of Health and Society**
University of Oslo

Increasing health knowledge in rural Tanzanian communities with digital health messages

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UiO : **Global Health**





Non-discriminating access for Digital Inclusion (the DigiI project)



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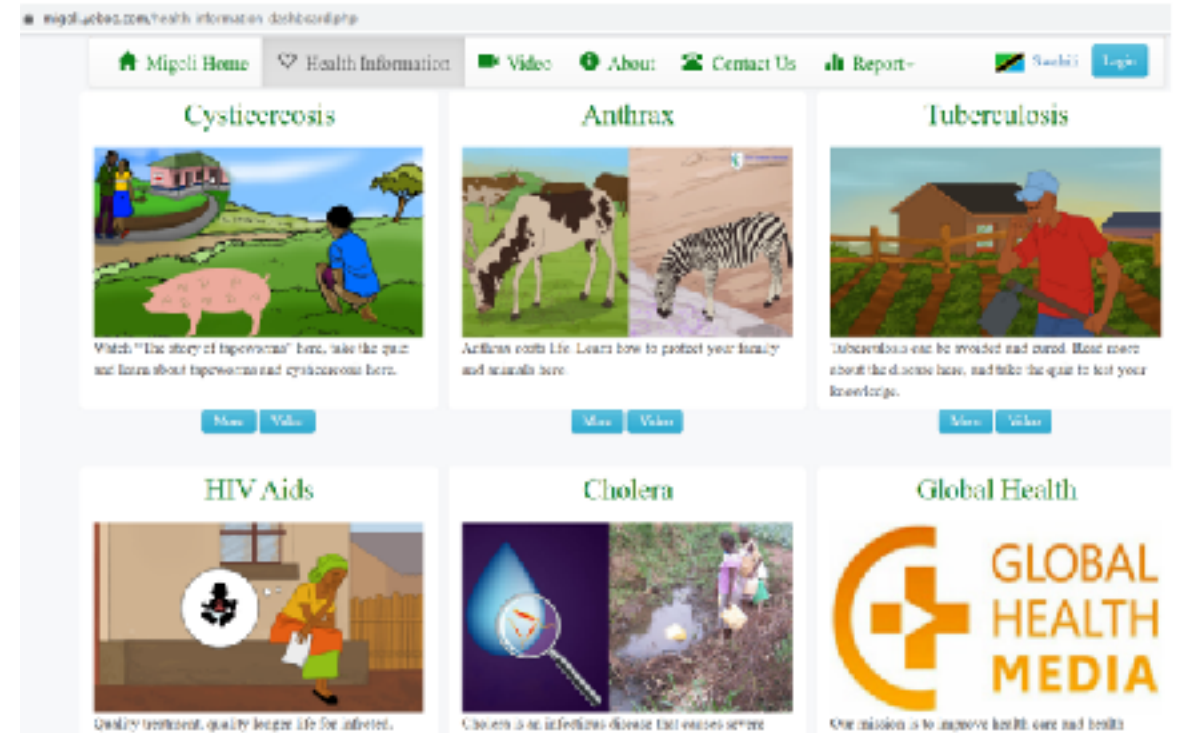
Digital Health components

- The InfoSpots / equipment
 - Affordable equipment in village offices, schools and dispensaries
- The digital health platform
 - Digitized public health promotion
- The intervention
 - A) Exposure to animations (April / June 2019)
 - B) Access to InfoSpots with health platform (Nov 2019)
- The study
 - Non-randomized controlled study (April 2019 – June 2020)
 - Semi-structured interviews (February 2020)



The digital health platform

- Creation of health messages
- Animations with local characters in local language
 - HIV / AIDS
 - TB
 - *Taenia solium* Cysticercosis/Taeniosis (TSCT)
- Text
- Illustrations
- Quiz



The digital health intervention



A) Exposure to the three animations (HIV, TB, TSTC (pork tapeworm and cysticercosis))

B) Access to the health platform in the InfoSpots

The study – data collection

- Non-randomized controlled study (April 2019 – June 2020)
 - Baseline assessment: April / May 2019 (n=600), both groups
 - Immediate post-test in the intervention group (n=298)
 - First follow-up, both groups: August 2019 (n=550)
 - Second follow-up, both groups: June 2020 (n=500)
- Semi-structured interviews, intervention group: February 2020 (n=35)



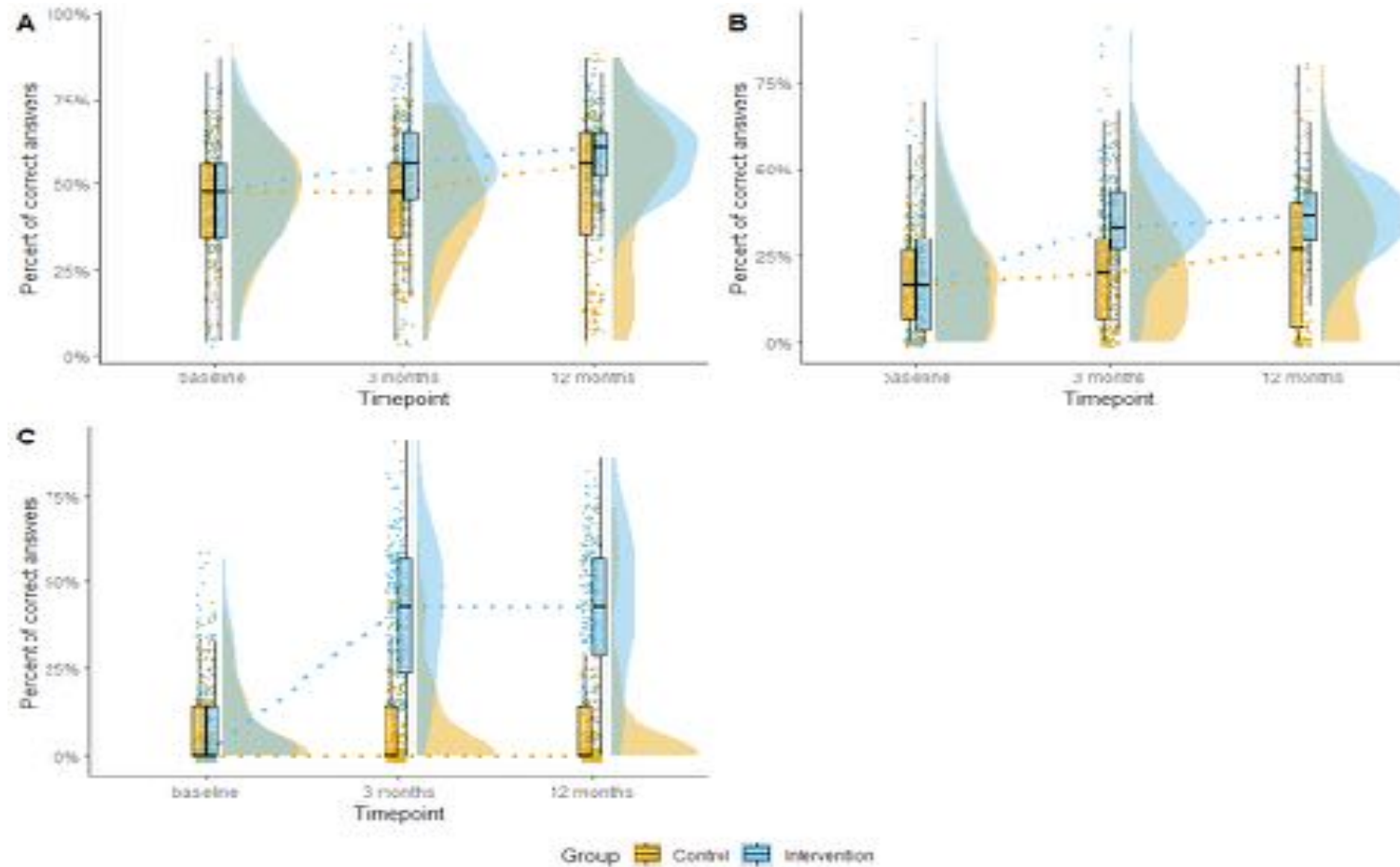
Results from the intervention study

- Mixed-effect models used.
- Significantly higher health knowledge in the intervention group than in the control group after one year:
 - HIV/AIDS – 9.4% higher mean score
 - TB – 10.7% higher mean score
 - TSTC – 31.1% higher mean score
- Adjusted for education, occupation, age and gender
 - HIV/AIDS – 9.6% higher mean score
 - TB – 11.3% higher mean score
 - TSTC – 30.8% higher mean score
- Sensitivity (dropout) analysis performed





Preliminary results from the intervention study





Main findings from the qualitative round

- Acceptability in the community
 - InfoSpots
 - Animations
- Health workers use the digital health platform to refresh own memory and to educate communities and groups within the community
- Students use the animations to rehearse on their curriculum and to practice English
- InfoSpot users wants more coverage and more devices
- InfoSpot users want more health content
- All non-users expressed that they would use InfoSpots if they knew they were open





Highlights & Lessons learned

- Multi-disciplinary teamwork
- Animations very well received
 - High health knowledge retention: Important messages repeated by users
- The work with TZ- ground team and the sub-village leaders
- Ownership in the villages





Special thanks



Dr. Bernard Ngowi



Prof. Josef Noll



Prof. Andrea Winkler



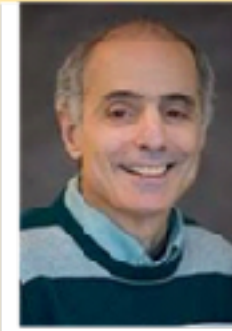
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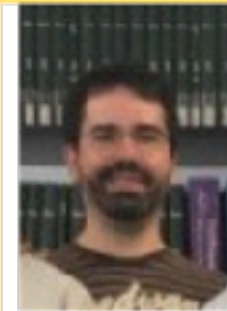
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