10th ECTMIH

16-20 October 2017 - Antwerp, Belgium

Free access to Digital Health Information in Tanzania

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Why is

Digital Health important in Tanzania?

- Digital inclusion is the key for sustainable development
- Digital health related to SDGs



3 GOOD HEALTH AND WELL-BEING Ensure healthy lives and promote well-being for all at all ages





UiO Global Health



Basic

UiO : Global Health Project structure

- Funding from Norwegian Research Council (1.6 M €)
- Project runs from Jan 2017 Jan 2020
- 11 partners from Tanzania, DR Congo, Rwanda, Serbia, Germany, France, Spain and Norway
- Multidisciplinary approach IT and health research
- InfoInternet in:
 - Phase A: 3 villages
 - Phase B: 10 villages

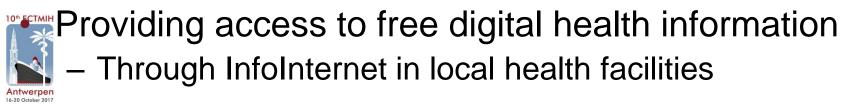






Digital Health Education Intervention

- Developing appropriate health messages within:
 - One-Health diseases, *Taenia solium* cysticercosis / taeniosis (TSCT)
 - Tuberculosis and HIV
 - Anthrax
- Synergies with CYSTINET-Africa





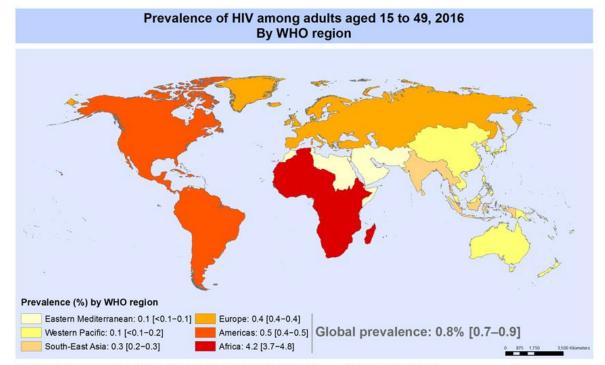


- 36.7 million
- 35 million lives so far
- 1.8 million people becoming newly infected in 2016 globally
- African Region is the most affected region, with 25.6 million people living with HIV in 2016

Source: WHO HIV/AIDS facts 2017



Prevalence HIV, 2016



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization Map Production: Information Evidence and Research (IER) World Health Organization



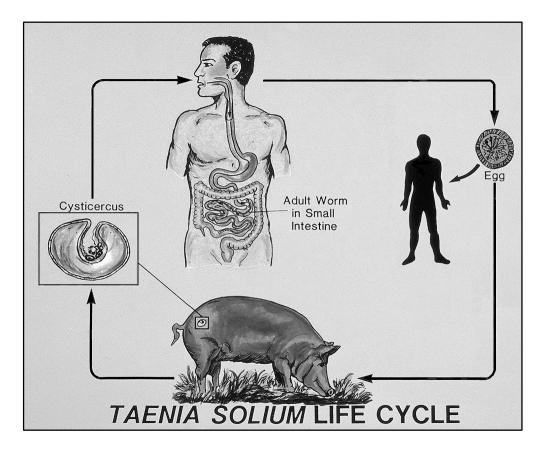
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10th ECTMIH





UiO **Control** Global Health Life cycle of *Taenia solium*

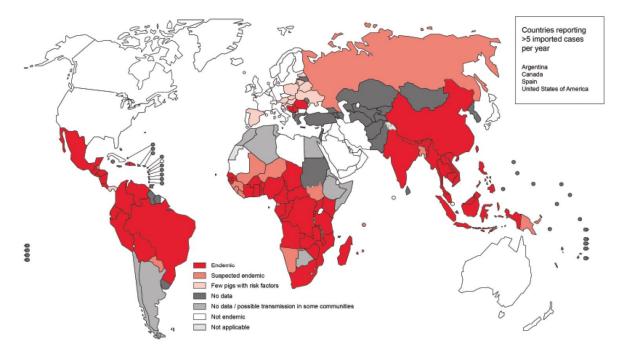




UiO : Global Health



Distribution of Taenia solium infection worldwide, 2015





Source: WHO (2016) *Taenia solium* taeniasis/cysticercosis diagnostic tools, report of stakeholder meeting, December 2015 http://www.finddx.org/wp-content/uploads/2016/06/Taenia-solium-Taeniasis-cysticercosis-diagnostic-tools.pdf

Tuberculosis

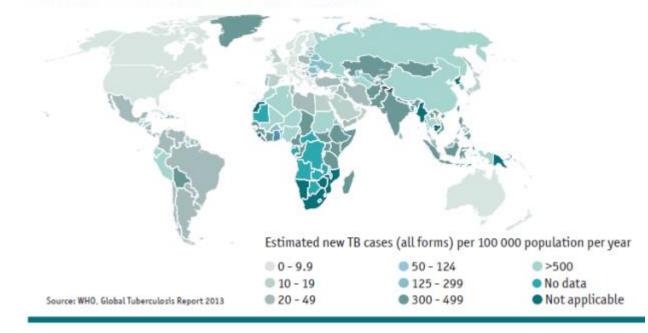
- **10.4 million** new TB cases in 2015
- Tuberculosis (TB) is one of the top 10 causes of death worldwide.
- In 2015, 1.8 million died from the disease
- TB is a leading killer of HIV-positive people: in 2015, 35% of HIV deaths were due to TB.



Source: WHO **TB** facts 2017

Tuberculosis

ESTIMATED TB INCIDENCE RATES, 2012





Pilot installation: Africa@Kjeller







Antwerpen 16-20 October 2017





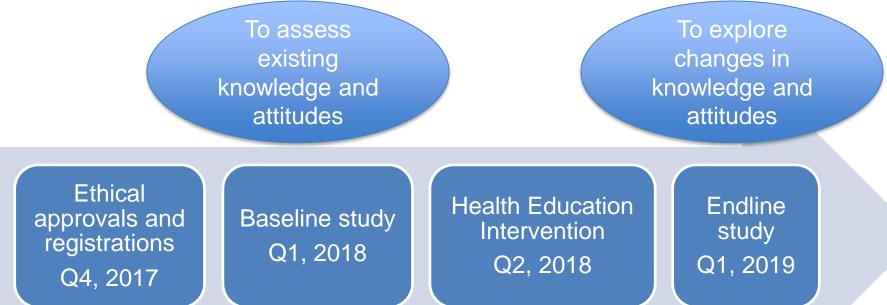


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Timeline



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How effective is the Health Education Intervention in order to improve knowledge and attitudes related to HIV/AIDS, TB and TSTC in intervention villages?



Cluster Randomised Trial

- Pre and post intervention to explore knowledge and attitudes, via questionnaires
- Study area: Mtera, Izazi and Selela, in addition to 3 control villages
- Sample size: +/- 2000 people to be followed up
- 3 research assistants from Sokoine / NIMR
- 12-15 days in each villages





UiO: Global Health Expected publications

- Digital Health Education Interventions in Sub-Saharan Africa: A systematic review
- Digital Health Education Interventions for improving knowledge and attitudes on HIV/AIDS and Tuberculosis – A cluster randomised trial in Tanzania
- Digital Health Education Interventions for improving knowledge and attitudes on *Taenia solium* Cysticercosis and Taeniasis – A cluster randomised trial in Tanzania



Thank you, all Digl Partners





Poster 5P28 displayed Thursday.

Thank you for listening!



UiO : Global Health



10 UIO : Institute of Health and Society

Connecting the unconnected in sub-Saharan Africa: Non-discriminating Access for Digital Inclusion with an emphasis on health (Digl)

Holst C.¹, Knobloch J.³, Schmidt V.¹⁰, Mwakapeje E.⁴, Ngowi H.⁸, Ngowi B.⁹, Prazeres da Costa C.⁷, Brügge B.², Winkler A.S.¹⁰, Noll J.⁹

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METHODS

INTRODUCTION

Free access to information technology for everyone is of utmost importance to toster equilable distribution of digital heath information. However, huge gaps need to be filled in sub-Saharan Africa that are partly due to the lack of sustainable heath message distribution platforms. Thus, the main objective of Digl, a three-year tinded project from the Research Could ol Norway (RNR) and the Norwegian Government, is to establish pilot projects for the infolmenter access in Tanzania (T2) and The Democracian Republic of the Congo (DRC). Digl collaborates with CYSTINET-Africa, a large detail network in a docum or pseudorous, funded by the Geman Ministry of Education and Research. Digl encompasses 11 pather organisations from 7 countries, which will establish and promote digital health information and content at health posts. The above-mentioned pilot projects will be evaluated, and the infolment will be established as an independent and self-sustanable information, communication and technology infrastructure for digital inclusion. Specific attention throughout the project will be given to diseases like HIV/AIDS, tuberculoss, Teamis employed. Independent interviews (publications) will be used to measure the experienced change in empowerment. Quantitative methods, such as a randomized control inity, will be used to measure the KPB and the change in knowledge, attitudes and practice (KAP) with regards to the update did digital health information.

