



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

TRAINING / PILOT / REVISION  
Morogoro March 2019

Free access to digital health information  
in Iringa, Tanzania

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UiO : **Global Health**

## *AIM for these days*

1. All research assistant know what to do during fieldwork
2. All ask any questions – always!
3. 50 submissions into Kobo





## Agenda for day 1 of training in Morogoro

8.00 – Welcome and introduction round

8.30- Info about the DigI project – and your role as a research assistant (RA)

**Feel free to ask!**

9.00 – Distribution of the training and piloting packages

9.30 – Coffee break

10.00 - 12.00 Going through KISH, DOI-list, informed consent, information letter

12.00 – Lunch

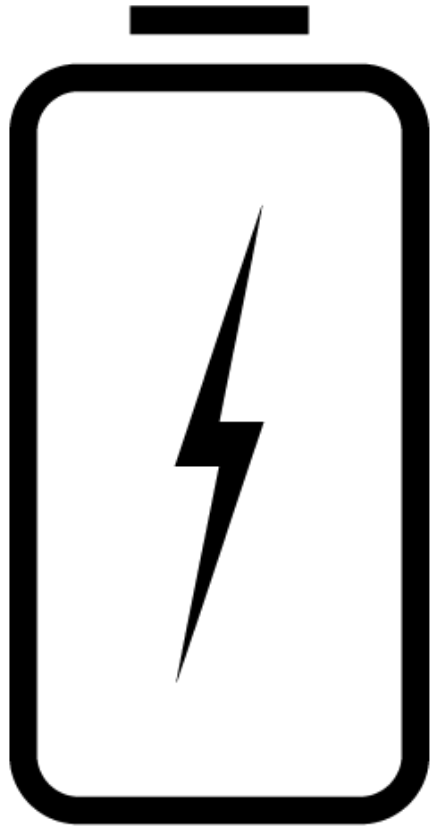
13.00 - Tablet time! We are going through the questionnaire and «nettskjema»

13.30 – 16.00 Mock interveiw

18.00 – You are all welcome for a dinner



Please remember to charge your Huawei





## Agenda for day 2 - PILOT

8.00 – Departure from University site to pilot village

8.30 – Snowball sampling of participants to answer the questionnaire

AIM: 8 each???

Dawn: we are going back to campus.

Dinner – please join me!





## Agenda for day 3 - REVISING

8.00 – 10 .00 Feedback from RAs on the questionnaire

10.00 - Coffee break

10.30 - Nettskjema

12.00 – Lunch

13.00 - SUM UP – how was the days? What can we learn from?

Do we have enough material for the pilot? Can we get any additional?

HOW WILL FIELDWORK BE???

15.00 – End of training





## *In this presentation*

- The project and the multi-disciplinary and multi-national team
- Development of the digital health messages
- Provision of the digital health messages
- Testing the effect of the digital health messages to rural communities



## *The DigiI-project and the team*

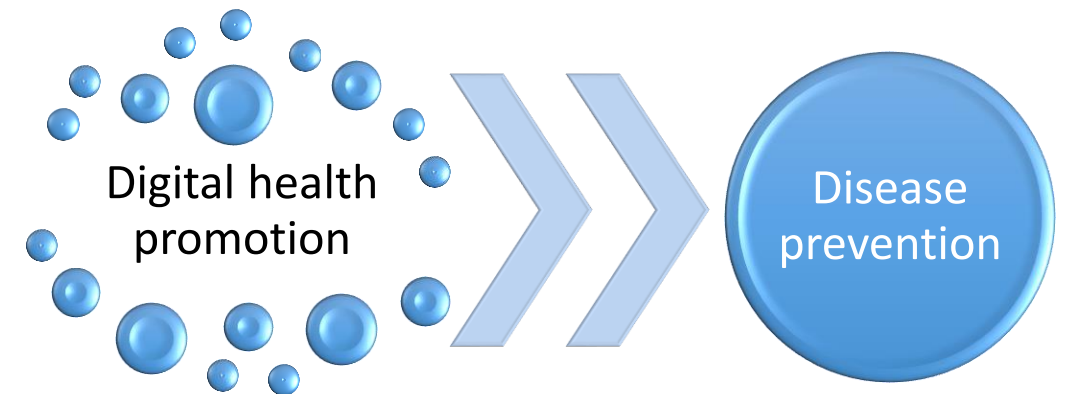
- “Non-discriminating access for digital inclusion” (DigiI)-project, funded by Norwegian Research Council and NORAD (1,5 million USD)
- Jan 2017 – Sept 2020
- 11 partners from Tanzania, US, India, DR Congo, Rwanda, Serbia, Germany, France, Spain and Norway
- Multidisciplinary approach - society medicine, health informatics, educational technology, gender, human geography and engineering





# Development of digital health promotion

- We used the official TZ-guidelines and practice within
  - HIV / AIDS
  - Tuberculosis
  - *Taenia solium* (neuro)cysticercosis / taeniosis (TSCT)
  - Anthrax
- We developed short animations with key messages
  - Unbiased
  - Understandable for everyone
  - Straightforward



# Snapshots from website, HIV and TSCT animations

Mwanzo Afya Kuhusu Wasiliana nasi Repoti Videos English Login

## Epuka Tegu

### Kisababishi ya Tegu

Mnyoo bapa airvae Taenia solium, husababisha binadamu kuugua vibaya sana. Binadamu hupata minyoo hao kwa kula nyama ya nguruwe mbichi au isiyoiva vizuri, yenye malengenge ya mnyoo (cysts). Ndani ya utumbo wa binadamu, malengenge hayo hutoka katika nyama na kujishikiza kwenye ukuta wa utumbo na kufanyika minyoo ambao hukua na kutaga mayai.

### Dodoso ya Tegu

Tafadhali jaza utafiti kuhusu Tegu

Jinsia yako ni ipi?

- A) Me
- B) Ke

Je, umewahi kusikia kuhusu minyoo aina ya tegu?

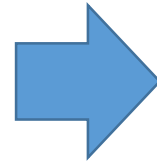
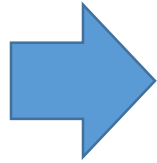
- A) Ndio
- B) Hapana
- C) Sijui

Je! Umewahi kusikia kuhusu minyoo ya tegu kwenye wanyama aina ya nguruwe?

- A) Ndiyo
- B) Hapana



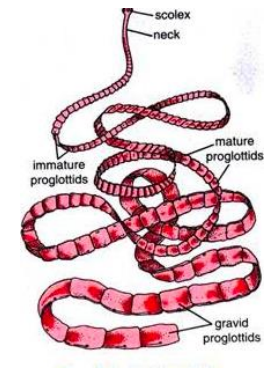
# Access to the free digital health messages



## The intervention – Main objectives

- Increased health knowledge → health literacy
- Better use of health care services
- Promote early treatment

= Strengthen the health care system  
and Disease prevention



# Testing of the digital health intervention

- Does it work?
- Has the intervention increased health knowledge?



## Testing of the intervention, continued

- Pre and post intervention investigations to explore **change in health knowledge, via questionnaires**
- Pilot study: Two intervention villages, two control
- 500 participants → increase to 600?
- 6 research assistants from NIMR in TZ
- 20-30 days for baseline / immediate after
- Three follow-ups over a year



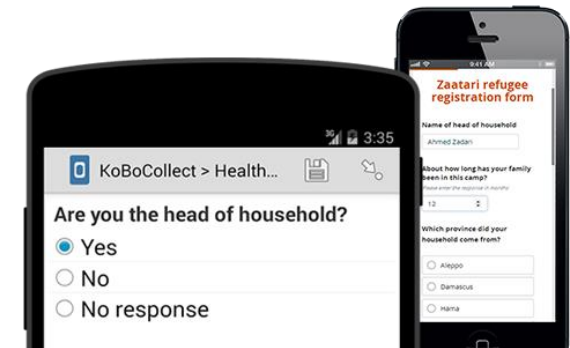
## Testing of the intervention, continued

- Two groups:
  - Intervention (two villages) Izazi and Migoli
  - Control (two villages) Kimane and Idodi
- Randomisation: households and participants within the households will be chosen randomly
- Included will be adults between the ages of 15-45



## Testing of the intervention, continued

- The participants will have several meetings with the research staff:
  - Baseline study (both groups) – exposure to intervention and immediately post survey (only intervention)
  - Second follow-up study (after 3 months) (both groups)
  - Third follow-up study (after 6 months) (both groups)
  - Fourth follow-up study (after 12 months) (both groups)
- Kobotoolbox to collect the data





# Testing of the intervention, continued

## Semi-structured interviews

- Planned with participants (users of intervention)
- In each of the intervention villages
  - After 6 months
  - After 12 months





# Special thanks



Dr. Bernard Ngowi



Dr. Felix Sukums



Ass. Professor  
Helena Ngowi





# Acknowledgements - DigI partners



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