REPRODUCTIVE HEALTH INNOVATION EXCHANGE

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MobiSAfAIDS App for Sexual and Reproductive Health and Advocacy

Innovation presented by: SAfAIDS

Problem statement

The MobiSAfAIDS app seeks to strengthen accountability of healthcare service providers in delivering sexual and reproductive health (SRH) services to adolescents and young people (AYP) through digital citizen engagement that generates real time evidence for advocacy.

Circle of Care stage

Before:	During:	After:
📻 Generates Demand	🤝 Builds Trust	🏠 Reinforces Linkages
👥 Creates Enabling Environment	🧍 Improves Provider Behavior	🧍 Enhances Follow Up
	🙆 Empowers Clients	

Audience(s)

AYP, civil society organizations (CSOs), Ministry of Health officials, local members of parliament (MPs) and councilors, healthcare facility administrators, health center committees, and healthcare service providers

Countries of implementation or design

Eswatini, Lesotho, Malawi, South Africa, Zambia, and Zimbabwe

Outcome(s) of interest

- Strengthen interaction between AYP and healthcare service providers
- Improve accountability of healthcare service providers in delivering accessible, affordable, and quality SRH services for AYP through digital citizen engagement
- Increase the numbers of AYP who access of SRH services

The innovation

The MobiSAfAIDS app is a new innovation, available as an Android application or on the web, utilized in unlocking barriers to SRH service access by AYP. The app is a Social Accountability Monitoring (SAM) tool that offers real-time evidence generation which is translated into policy advocacy actions led by AYP as agents of their own SRH agenda at local, national, and regional levels. The app is linked between AYP and health care facilities and enhances youth citizenry rights-holder engagement with policymakers (duty-bearers) to remove structural barriers to SRH service access. MobiSAfAIDS App provides a two-way communication between young people and health service providers. AYP can log into the app to report service delivery challenges faced, which creates a ticket for a health facility administrator to view and assign a staff member (service provider) to resolve the issues. When an issue is resolved, the AYP who opened the ticket has an opportunity to either close the ticket when satisfied that the issue has been resolved or unresolve the ticket if not satisfied.

The implementing partner, SAfAIDS and SAM Youth Champions, analyzes the frequency and volume of tickets and monitors those that remain unsolved so they can raise those issues in the advocacy processes in the community.

Why you should consider adapting and scaling this innovation

The MobiSAfAIDS app is a groundbreaking SAM tool for SRH service provision in the South African Development Community region. The application is being actively used by about 23,631 AYP, including those living with HIV; those who identify themselves as lesbian, gay, bisexual, transgender, queer, intersex, or similar; sex workers; and adolescent and young mothers. It offers real-time reporting and evidence for advocacy. It has an embedded service desk ticketing system that provides a single point of contact for AYP users to interact with service providers. Both service providers and AYP can track progress on SRH service delivery issues submitted into the system. Through data analysis, the tickets within the platform can be used to create advocacy plans to be used during interface meetings with relevant duty bearers.

Other barriers addressed through the application are improved privacy and confidentiality in provision of SRH services, establishment of youth friendly centers, and increase allocation of both finance and human resources for youth friendly SRH service providers, resulting in improved access by AYP.

As part of the Social Accountability Monitoring for Sexual and Reproductive Health and Rights Model, the app is unique in generating real-time and verified evidence for service providers, decision makers, CSOs, and AYP, while promoting transparency and accountability in service provision.

Resources needed to adapt or scale this innovation

This application can be implemented by CSOs and Ministries of Health. In order to use the application procurement costs, including a self service kiosk at health facilities (approximately $600 USD per facility), and Android cellphones for community mobilizers (approximately $1,500 USD for ten mobilizers). The ongoing monthly costs include cloud computing serives (aproximately $100 USD) and data costs for community mobilizers or SAM Champions (approximately $100 USD). We recommend implementers plan for at least two months of testing in order to adapt the app contextually before rollout.

Implementation recommendations

The MobiSAfAIDS app, which was initially piloted in six countries and six health facilities, has been scaled up to nine facilities in the same countries. Based on its success, different SAfAIDS programs in South Africa (Global Fund/AFSA) and Eswatini (UNICEF) have adapted the app to their use. A WHO Youth Arise Regional Project being implemented in Eswatini, Lesotho, Zambia, and Zimbabwe has also adapted the application. To address emerging challenges, routine mentoring, and monitoring is factored in for implementing countries

Have more questions? Contact the following people

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Relevant links

https://www.youtube.com/watch?v=bWYQIFNuPzc
https://www.youtube.com/watch?v=YZh9bBPw7xM
https://aisel.aisnet.org/ecis2020_rp/36