OPEN TALKS DELL’INNOVAZIONE 2021

Data Science al servizio della cooperazione internazionale: buone pratiche dal mondo

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WEMUNIZE

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WHY WeMUNIZE?

- Despite significant global investments by governments and funders into vaccine procurement, training of service providers and building/equipping of the Primary Health Centers for RI, immunization coverage remained low.

- Approx. 70% of the need for investments in Routine Immunization occurs in sub-Saharan African countries.
Nigeria has one of the worst RI numbers in the world. Country accounts for about a third of total number (2.3 million) of 10 million unimmunized children in the world!
Demand-side Challenges

- High drop out rate: Incomplete attendance
- General ennui towards RI attendance

Challenges of Access

- High left out rate: communities excluded from the services
- Low RI retention rate: Lose interest in the services
THE MATHS WAS SIMPLE:

GENERATE DEMAND

PROVIDE LINKAGE

ENHANCE ACCESS
WeMUNIZE is a Software-as-a-Service mHealth Immunization registry that aims to automate demand generation for public health services in Sub-Saharan Africa, using a combination of robocalls, SMS, mobile applications and geolocation.
The WeMUNIZE system comprises 4 apps that run concurrently. The aim was to create a synergy of 3 mobile applications and a web-enabled app on the same platform that does 3 main functions.
WeMUNIZE

WEMUNIZE: SOFTWARE-AS-A-SERVICE. 3 APPS IN A COORDINATED WALTZ

- Enrollment
- Immunization Session
- Web

Register & Schedule, Automate Scheduled Appointments, Maintain Registry with Geo-Location
How WeMUNIZE addresses the challenges of RI:

- High drop out rate/function of utilization
- High left out rate/function of access
- Poor coverage

**Demand**

**Community Linkages**

**Data**
UNIQUENESS OF WeMUNIZE

- Robocalls were in the voices of influential, religious and traditional leaders (male and female), in local languages and dialects.

- Additionally, WeMUNIZE enables service providers issue the child’s picture at each immunization visit, a proven incentive that ensured repeat visits to immunization centre for subsequent appointments.
Traditional Leader recording a WeMUNIZE voice message
Home-based record keeping immunization cards become Albums
The Process: Digital Feedback Loops and the value of Data
Naturally, WeMUNIZE soon became an efficient data-generating application for immunization and birth registration.
Care giver at the Health facility
WeMUNIZE DATA: EFFECTS ON IMMUNIZATION

- Increased attendance to **95%** across cohort of facilities for penta 3, up from **30%** prior to WeMUNIZE

- Home-based record-keeping increased to **98%**, up from **less than 10%**

- Defaulting clients and missed appointments tracking took **2 days**. Before WeMUNIZE, it took **21 days**.

- Real-time verifiable Immunization data: available to local immunization officers and policy makers on the go.
Next Steps:

1. WeMUNIZE mhealth to increase demand for COVID-19 vaccination services and schedule vaccination appointments.

2. COVID-19 contact-tracing/missed appointments.

3. Scale up under USAID/IHP for 1.5 million children under 1 year old.
Home-based record keeping immunization cards become Albums
Grazie

Qualsiasi domanda (Any questions?)