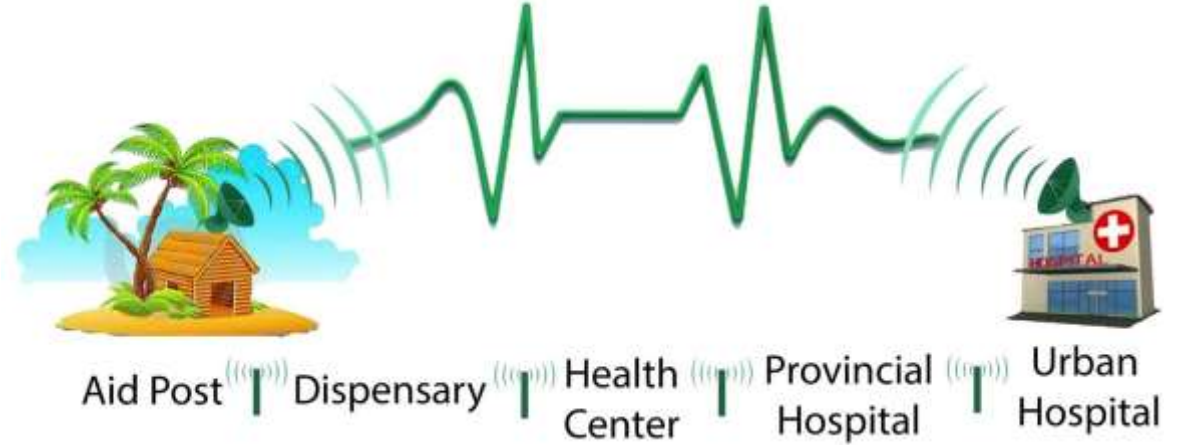




**1 World Connected**  
Data-driven Research to Bring Billions Online

**VITAL**

Vanuatu Inter-Island Telemedicine And Learning Network



# Deploying Telemedicine in Capacity Constrained Contexts: Lessons from the Vanuatu Inter-island Telemedicine and Learning Network Project

# Overview

- Relevance
- Context
- The VITAL Solution
- Data and Methodology
- Insights and Discussion

# Why should you care?

- **Relevance**
- Context
- The VITAL Solution
- Methodology and Data
- Insights and Discussion

# Relevance

- Telemedicine holds the potential to **help** people in underserved communities **access life-saving care, critical especially today**
- Telehealth applications can be **expensive**: 0.5-1.5 million USD (Ministry of Health, Malawi, 2018)
- Only **7%** developing countries report doing **evaluations** of mHealth programs (WHO, 2015)

# Where is this talk based?

- Relevance
- **Context**
- The VITAL Solution
- Some Insights
- Open Questions

# Context

- Vanuatu ranks **125th of 187** countries on the Human Development Index(WHO, 2012)
- Vanuatu has among the lowest physician densities in the world, with only **0.2 physicians per 1000** population
- Only **3% of households** in Vanuatu use English or French, preferring to speak local, indigenous language or Bislama
- **80%** live in rural areas

# Context



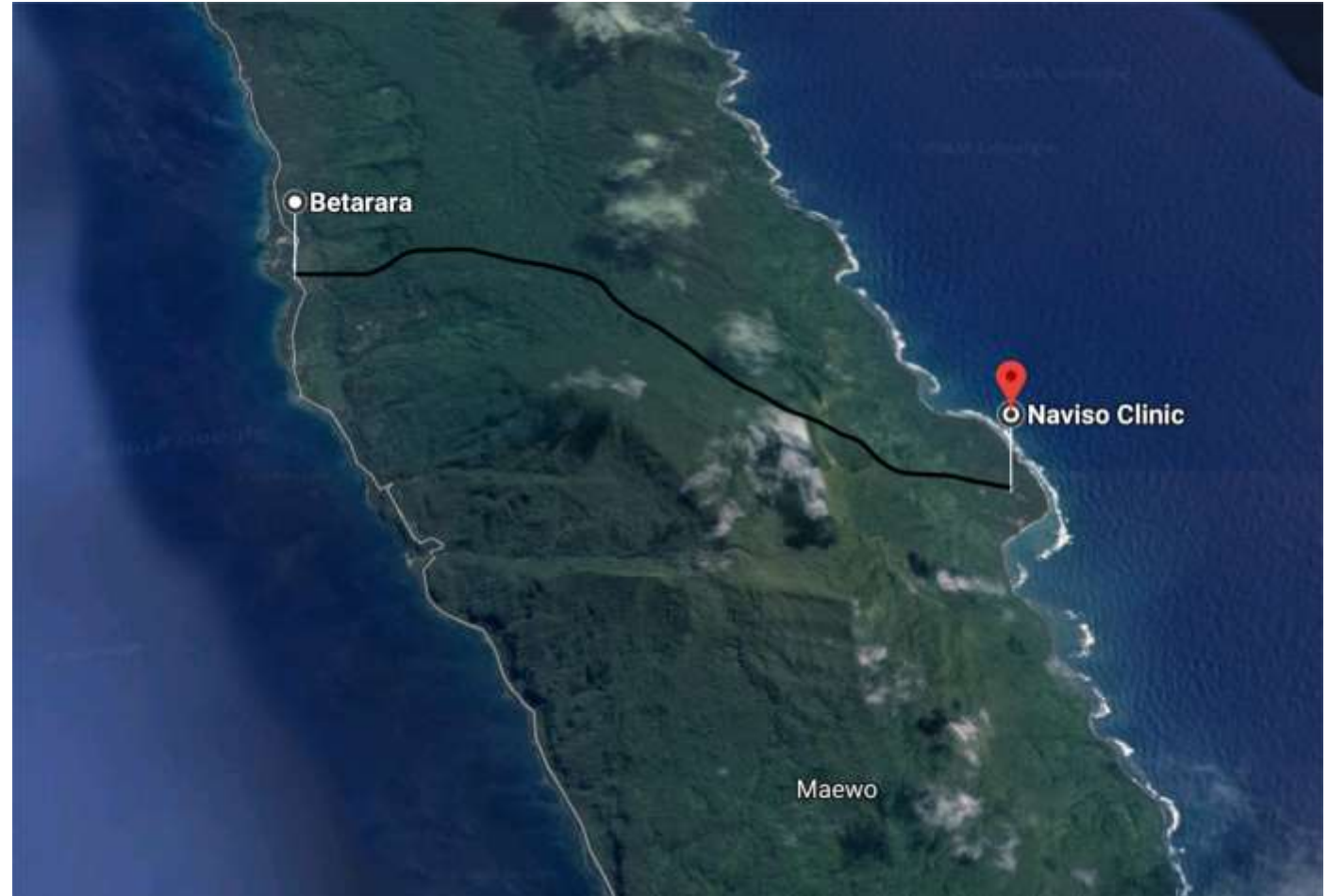
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# Context



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# Context

- Study based in **Maewo, Vanuatu** Northern Province
- Nearest Hospital: Northern Provincial Hospital in Santo, **40 minute flight** away
- Inter-island travel is **prohibitively expensive** and **at times impossible** owing to weather and infrequent transport (\$300+ for Maewo-Vila)

# Context

- Education levels are **low: 95% < 10<sup>th</sup> Grade;**  
Bakanao Primary School up to 6<sup>th</sup> Grade
- Two different **languages** spoken in Naviso
- Off-grid: only source of power is **solar**
- Village health worker + nurse aid at the **dispensary clinic** on Naviso
- Nearest health clinic with a nurse – 6 hours away

# So what do we do?

- Relevance
- Context
- **The VITAL Solution**
- Data and Methodology
- Insights and Discussion

- Vanuatu Inter-island Telemedicine and Learning Network
- Set up as a community-led telehealth solution and supported by ex-Peace Corps
- Extension of a community network started by the **Maewo Telecommunications Committee**, in July 2016

- Chat platform through a commonly used messaging application
- All the workers and nurses on Maewo are on the group, along with **doctors** from three **different hospitals**: Vila, Santo and Lolowai
- **Daily check-in** messages; communication through photos/video clips for urgent cases

# What methods did we use?

- Relevance
- Context
- The VITAL Solution
- **Data and Methodology**
- Insights and Discussion

# Data and Methods

- Data from the messaging platform used by the clinicians and specialists for telemedicine ~ 9000 messages on telemedicine platform (Aug-16-July '18)
- Data from in-depth interviews with key stakeholders
  - Peace Corps community health volunteers
  - Tribal chiefs
  - Health workers (doctors, nurses, aids and CHWs)
  - Office of the Chief Information Officer
  - Ministry of Health

# Data and Methods

- Text analysis of data from the messaging platform (anonymized, stripped of PHI)
- Supplemented by qualitative in-depth interviews to shed light on stakeholder perceptions, mechanisms that enabled the platform's widespread adoption and sustainability
- Analytics from messaging platform triangulated with interview data to derive insights on features of the platform that enabled better healthcare outcomes



# What did we learn?

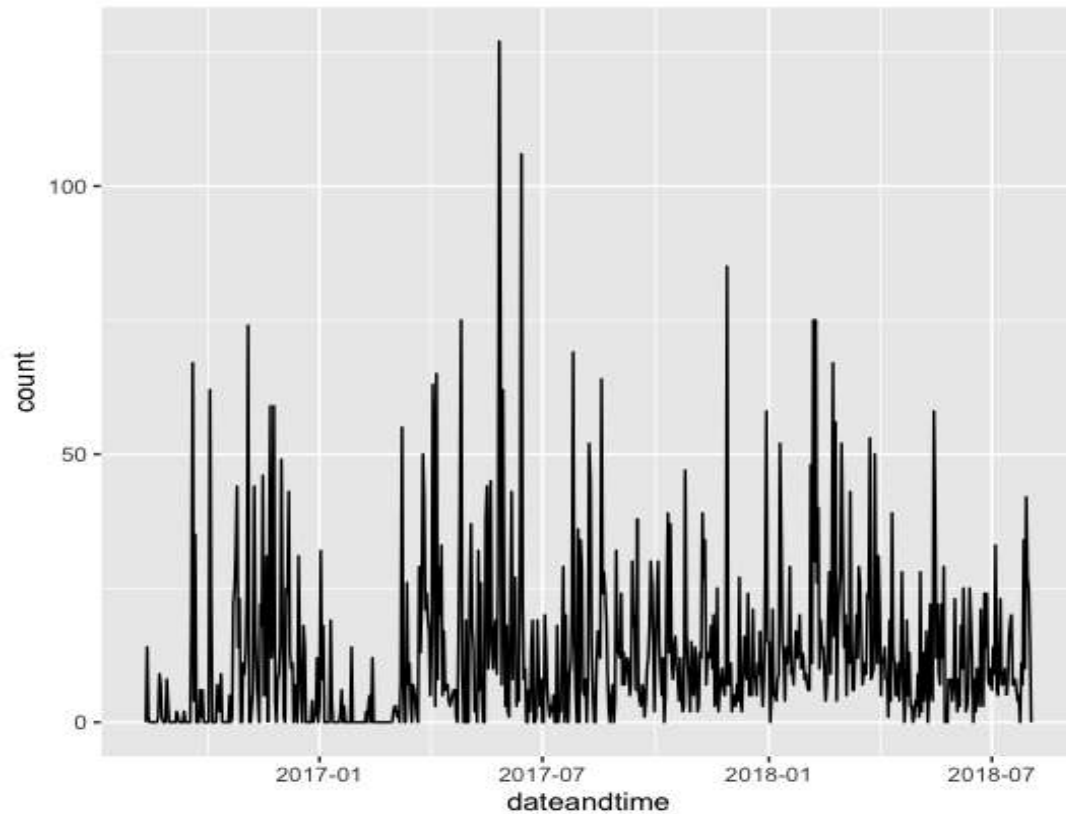
- Relevance
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# What did we learn?

<b>Stakeholder</b>	<b>Average word count of messages on the telemedicine platform</b>
<b>Former Community Health Volunteer (Peace Corps)</b>	13.1
<b>North Maewo nurse</b>	10.7
<b>NPH Doctor (Primary supervising doctor)</b>	8.12
<b>Kerembei Nurse Supervisor</b>	7.19
<b>Out-of-country Doctor</b>	6.69
<b>Ambae Doctor</b>	5.96
<b>Naviso nurse</b>	4.40
<b>Village health worker</b>	3.45
<b>Nurse aid</b>	1.90

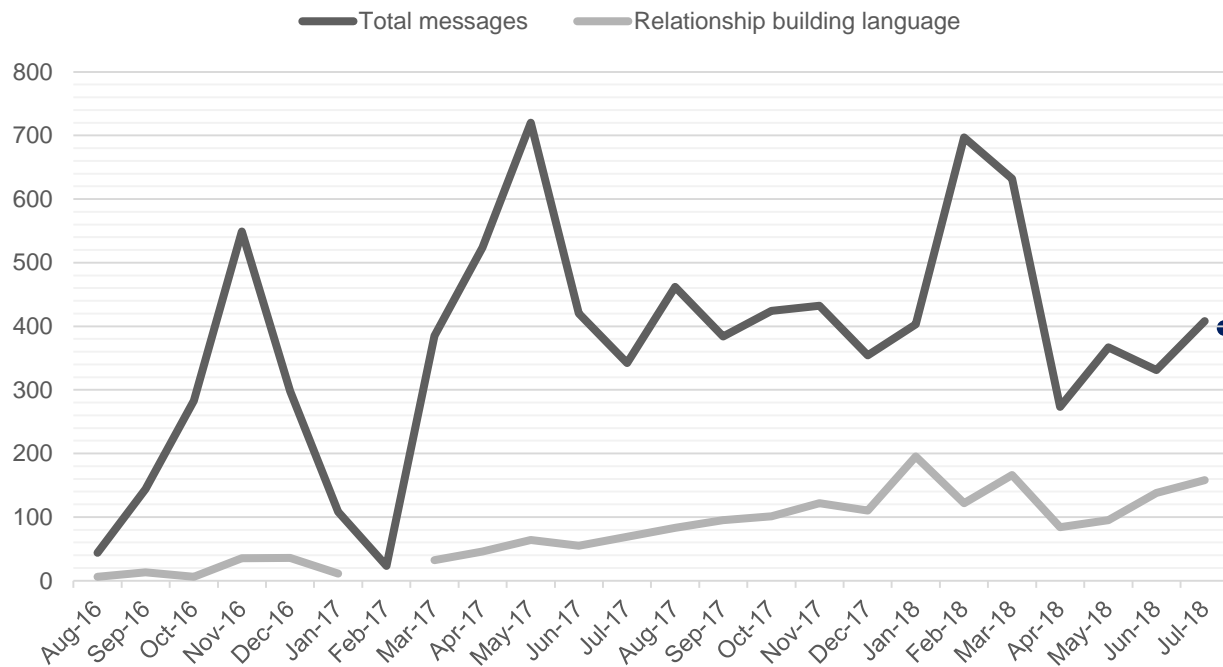
- Short, frequent communications characterized the usage of the platform
- The longest messages also corresponded to durations during which message frequency was at its highest
- An analysis of the top five longest conversations (by string length) showed that all of them related to patient care.
- The average response time across messages on the telemedicine platform was 114.4 minutes, less than 2 hours

# What did we learn?



- Take-up of the telemedicine platform amongst participating healthcare workers increased steadily over time.
- Highest number of messages per day was over 150 messages

# What did we learn?



- Relationship building language and regular check-ins through communications over the telemedicine platform increased over time and served to **reduce power distance and allow for social accountability**. Analysis of data from the telemedicine platform suggests that relationship building language – such as “good day, team,” “good morning, team”, “good evening, team”, and “good job” comprised **7.28% of all messages in 2016 but went up to 17.28% in 2017 and stood at a record 30.85% in 2018 (until July).**

- **No fancy interface:** removes cost intensive training requirement
- **Easy to learn:** ↗ take-up for village health workers
- **Minimal staff training:** lower costs
- **Not-in-real-time advice:** easier to transmit case information through photos with labels
- **Pools limited human resources:** more minds on the same case when in a common group

- **Confidence boosting to local staff:** reduces doctor-patient distance in hierarchical Melanesian societies
- **Less like a task:** conversational modes of talking to each other, as opposed to reporting
- **Accountability mechanism:** ability for others to check in in case a node goes offline
- **Regular check-ins:** makes it a cordial environment for local staff to reach out without hesitation



# Insights

## Health as a means to broader connectivity

- Success in lobbying the TRR to free up the **900 MHz** spectrum
- **New community-based grants** set up by the TRR for other such networks
- Rapid **take-up of smartphones** in the community to combat lack of cellular network with VoIP communications
- **Community ownership and fundraising model** for maintenance