An innovative intervention providing families with support for the first 4 weeks of their child’s life.

About People in Need
People in Need (PIN) is a Czech-based NGO with international programs in 23 countries. Registered in Cambodia since 2006, PIN focuses on four key sectors including maternal and child health, livelihoods and food security, disaster risk reduction and recovery, and environment and local development.

The Problem
According to the 2010 Cambodia Demographic and Health Survey (CDHS), 45 Cambodian infants die for every 1,000 live births. Their mothers’ level of education and wealth are key factors affecting their chances of survival. Children whose mothers have had secondary or higher education are more than twice as likely to survive as those whose mother had no schooling (31 deaths per 1,000 live births versus 72). Likewise, infant mortality in rural areas is approximately three times higher than infant mortality in urban areas (64 deaths per 1,000 live births versus 22).

The Challenge
In order to increase the survival chances of Cambodian children, PIN was looking to develop an intervention that would proactively target families with information on how to maintain their newborn’s health over the first month of its life. Given the rapid and widespread uptake of mobile phones in Cambodia, including in rural areas, PIN looked to mobile technology as a way to conduct a targeted messaging campaign. With levels of education and literacy being low and many phones not being compatible with Khmer fonts, it became apparent that very few people use their mobile phone for anything other than making or receiving calls. To effectively spread its message, PIN therefore had to find a way to make use of this same call function.

The Solution
Verboice, a software developed by InSTEDD, proved to be the perfect tool, enabling PIN to design and send out pre-recorded voice messages to its target group according to a pre-defined schedule. PIN used the software to send out 7 different messages to new parents, providing them with advice on how to care for their child during its first month of life as well as reminding them to seek care from a health center if experiencing any complications. As a pilot, the service was offered to patients from 11 health centres and one hospital in Kampong Chhnang province. Registration to the service was conducted by the midwives directly at the health facilities.

For more on PIN’s work in Cambodia, please visit www.clovekvtisni.cz/en/humanitary-aid/country/cambodia
The Design
Before launching this pilot, PIN conducted interviews with patients to inform the content of its messages and gather input on their preferred call time.

Based on the results from these consultations, the team developed messages that were 60-90 second long and designed to come from five influential characters from the community: three female characters (a midwife, a village health volunteer and a grandmother) and two male characters (a doctor and a village chief).

PIN’s decision to involve male characters was based on the fact that 55% of the women in the target area reported not owning their own mobile phones.

Though all had access to a phone, this meant that it was likely for their husband or other members of their family to receive some of the voice-messages.

Results
In the 10 months since the start of this pilot, over 1,500 people registered for the newborn support service, and approximately 210 women continue to register every month (roughly 80% of all women giving birth at the participating health centres).

When surveyed, most of the women reported finding the content of the messages useful and many expressed an interest in continuing to access the service for a small fee until their child reaches 2 years old.

Next Steps
Starting in June 2014, PIN scaled this pilot up to an additional 8 health centres in the Kampong Chhnang province.

Moving forward, the team is looking at further expanding the service as well as at increasing its scope to provide support from pregnancy until the child reaches 2 years. In addition to expanding the reach and scope of the service, PIN is also looking at turning the service into a self-sustaining and self-funded initiative.

“We asked women if the next time they would be willing to pay for this service. They responded that they would. Now the challenge is how would we manage such a payment and leave an option for the ID poors to access the service for free.”

“The women have asked that we expand our support and provide them with advice from their pregnancy until their child’s second birthday.”

Open source; easy to use; highly customizable and scalable
For more information, please visit www.verboice.com