**SEWA Rural, Jhagadia**

**Brief Note on ImTeCHO**

**(Aug. 2017)**

***Title:*** "Innovative Use of Mobile Phone Technology to Improve Maternal, Neonatal and Child Health by Empowering Front Line Health Volunteers (ASHAs) in Tribal areas of South Gujarat:"

***Background:*** “*ImTeCHO*” initiative is being successfully piloted by SEWA Rural in partnership with the Department of Health and Family Welfare, Govt. of Gujarat since May 2013. SEWA Rural, a voluntary service organization is providing medical, health and education related services to the rural, poor and tribal population of Bharuch, Narmada and surrounding districts in south Gujarat for past thirty five years.

“*ImTeCHO*” initiative is now being implemented in about 20 Primary Health Centers (600 villages) in high focus tribal talukas of Bharuch, Valsad and Narmada dists. Thus 600 ASHAs are now satisfactorily using the smart phones in delivering maternal, new born, infant and child care at the doorsteps more effectively including management of morbidities.

***Intervention:*** *ImTeCHO* stands for “Innovative Mobile-phone Technology for Community Health Operations”. “Techo” in Gujarati means “support”; hence, *ImTeCHO* means “I am support”. The mobile phone based software application for ImTeCHO is based on Android platform and developed and powered by Argusoft India Ltd, Gandhiangar for which content specific inputs were provided by SEWA Rural. Every ASHA is given a low cost smart phone (costing approximately Rs. 4,500) which is General Packet Radio Service (GPRS) enabled and have multimedia feature available. ASHA logins the mobile-phone application everyday and start making home-visits based on the schedule indicated through ImTeCHO application. ASHA fills out forms on her mobile during home visits. Data is being instantly sent using GPRS network to a server where data will be stored.

ImTeCHO is used in 3 ways: (1) Mobile phone as a job aid to ASHAs to increase coverage of MNCH care (2) Mobile phone as a job aid to ASHAs to screen and adequately manage morbidities among mothers, newborns and children and facilitate timely referral (3) Web interface to provide timely information to PHC medical officers for monitoring and supporting program, including accurate and timely reporting of births and deaths and incentive disbursement to ASHAs.

***Results:*** About 10000 pregnant women, and 9000 newborn infants predominantly from tribal communities, are directly benefitted every year through the use of ImTeCHO. Community based evaluation has shown that coverage of early pregnancy registration, complete ANC examination, institutional delivery rate, early and exclusive breast feeding, home based newborn care along with coverage of care during antenatal, postnatal and newborn complications has significantly increased in ImTeCHO project area compared to a similar control area. Findings of formative and process evaluation are quite encouraging in its acceptance, feasibility and usefulness by improving performance of government health workers at every level. Overall, the intervention and its delivery were found to be acceptable, feasible and useful within the ASHA program under existing government health system specifically for the rural, tribal regions. ImTeCHO has received few recognitions including two national level awards SKOCH Digital Inclusion Award 2014 and ICONIC IDC Insights Award and publication in peer reviewed international journal World Health Action.

Its a matter of pride that ImTeCHO initiative which is being successfully piloted in Bharuch and Narmada districts in partnership with district and PHC level health department has been selected for upscaling at the state level by State health department. About 10,000 ASHAs from 6 districts will be trained in using smart phone with imTeCHO application over a period of coming one year as part of phase 1.

**Financial Implications:**As a part of maintenance phase, the present project covering about 600 ASHAs will be continued over next years. The total cost of running this project is about 100 Lacs every year for which partial support will be available from government and other agencies. The cost would include extra incentives to ASHAs, Data transfer cost through net connectivity, software maintenance cost, refresher’s training and manpower cost towards supervision, guidance and field support.

***Thus cost per ASHA per year comes out to be Rs. 16,000 (250/- US Dollar). As mentioned earlier, about 10000 pregnant women, and 9000 newborn infants predominantly from tribal communities, will be directly benefitted every year. Hence in other words, the total cost per beneficiary per year comes out to be Rs. 525 (8/- US Dollar).***