INTEREST Conference

Abstract

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Title: Improving the competencies of VHWs to Screen, Deliver Health Education, and Report through Boost Health App in Lupane District

Introduction and background

The introduction of digital health is transforming healthcare delivery worldwide. Digital health tools are improving access to healthcare services and information, enhancing data collection, and empowering frontline health workers. The Boost Health App has emerged as a revolutionary tool for supporting community based Village Health Workers (VHWs) in delivering health education, conducting client screenings, and reporting efficiently. Recognizing the potential of this tool, Pangaea Zimbabwe, through its Wild4Life Health Program, partnered with OPHID and Avert to pilot the Boost Health App among VHWs in Lupane District.

Materials and Methods

Pangaea Zimbabwe through the Wild4Life health program piloted the Boost health app with 8 selected Village health workers in Lupane district from October to November 2024. A one-day intensive training workshop was conducted with the 8 VHWs, focusing on the overview of the Boost app, downloading and navigating the app, accessing its syllabus, and utilising visual aids for health education and client screening. The 8 VHWs were provided with mobile data support to ensure continuous connectivity and seamless use of the app. Performance indicators to track the performance of 8 VHWs included the number of clients reached, health education sessions conducted, and number and diversity of health topics covered during health education before and after the app's introduction. Analysis of VHWs performance was analysed 6 months before pilot and after pilot.

Results

There was a 375% increase in VHWs performance on number of clients seen by the 8 VHWs per month from an average of 40 clients for the past 6 months to an average of 150 clients after piloting and using the Boost app. Similarly, there was a 500% increase in the number of health education

sessions conducted per month per VHW from an average of 12 sessions to 60 sessions per VHW after introduction of the app. There was also a 373% increase on the number and diversity of topics delivered health education on by VHWs from 15 topics per month to 56 topics per month. Additionally, VHWs were able to deliver health education on new topics namely Pre-Exposure Prophylaxis (PrEP), family planning, and Post-Exposure Prophylaxis (PEP). The use of mobile technology also attracted more youth and young adults to seek health information from VHWs, enhancing access to vital health information for adolescents and youths who are not an easy group to reach.

Recommendations

Scaling the implementation of Boost app to cover all VHWs in the district and nationally. There should continuous digital literacy training and mobile data support for Village Health Workers (VHWs) are essential. The project to engage youths as digital health champions to enhance uptake, especially for SRHR topics. Sharing lessons learned and mobilizing cross-sectoral partnerships will promote sustainability. Documenting success and aligning with government priorities can attract further funding and ensure the app strengthens community health delivery and adolescent health access in rural Zimbabwe.

Conclusion

The Boost Health App has proven to be a transformative tool in improving the efficiency and effectiveness of VHWs. By enabling VHWs to reach more clients, conduct more health education sessions, and address a wider range of health topics, the app has significantly enhanced VHWs role at community level.