



#### India: Mobiles to Increase Continuation Rates of DMPA

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# Telephonic Follow-up to Reduce Contraceptive Discontinuation

- High rates of discontinuation is a key challenge
- Women need confirmation/reassurance when experiencing the effects
- Providing this support over the telephone is advantageous:
  - To clients: Convenience
  - To implementers: Cost-efficient

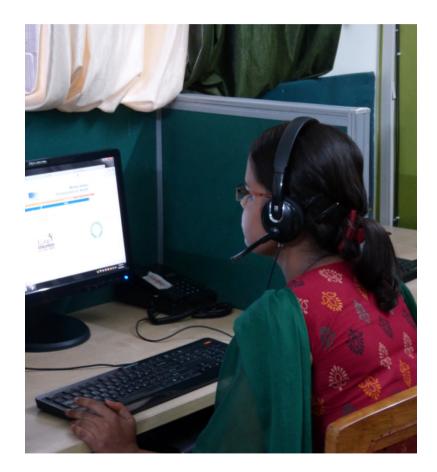


## Pilot Test Among DMPA Adopters

- Call-back to new adopters of DMPA who own mobile phones
  - Consent to receiving calls
- Voice calls preferred over text messages (SMS)
  - Low English literacy

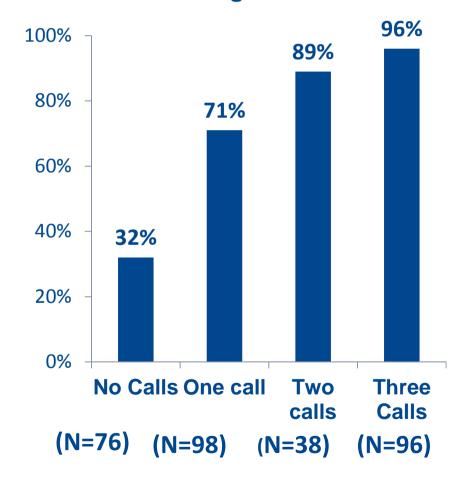
## Health and Agriculture Focused Call Center

- Managed by Indian Society of Health Professionals (ISHP)
  - Small-scale social enterprise
  - Experience in providing telephone-based services in agriculture and health
  - Led by a health professional
- Call center in Lucknow (UP)
- Counselors selected and trained jointly by Abt and ISHP



# Test Shows Clear Dose-Response Relationship

- Four levels of inputs, all prior to 2<sup>nd</sup> dose
  - No call-back
  - One reminder call 15 days prior to 2nd dose
  - Additional counseling call one month after 1st dose
  - Additional counseling call one week after 1st dose
- Continuation to 2<sup>nd</sup> dose confirmed via telephone



#### % continuing to 2<sup>nd</sup> dose

# Scaling-up in Urban Uttar Pradesh

- Triggering automatic registrations
  - Registration of DMPA users through a toll-free number to register
  - Clinic promotion and endorsement
- Scaled-up to cover 1,200 providers in 34 towns of Uttar Pradesh
  - Population: 25 million

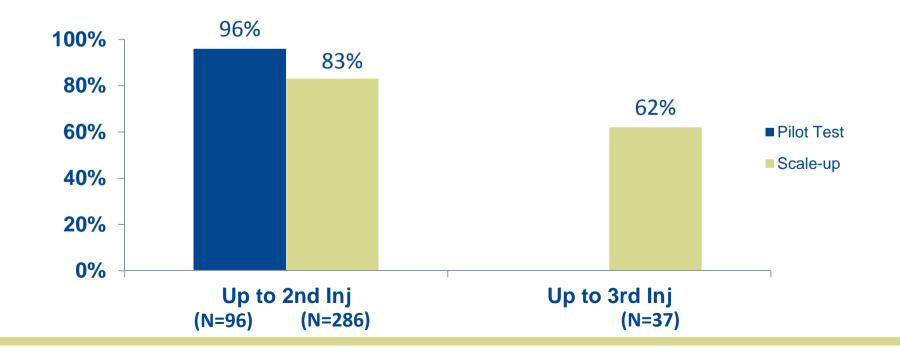


# Call-back Sequence Extended to 1 Year

Call 1: Registration Call	Day 0
Call 2: Follow-up call about side effects	Day 21
<ul> <li>Call 3: Reminder of 2<sup>nd</sup> injection due date</li> </ul>	Day 90
<ul> <li>Call 4: Additional reminder of 2<sup>nd</sup> injection</li> </ul>	
due date	Day 100
<ul> <li>Call 5: Confirm continuation to 2<sup>nd</sup> injection</li> </ul>	Day 104
<ul> <li>Call 5: Reminder of 3<sup>rd</sup> injection due date</li> </ul>	Day 166
<ul> <li>Call 7: Reminder of 4<sup>th</sup> injection due date</li> </ul>	Day 256
<ul> <li>Call 8: Confirm continuation to 4<sup>th</sup> injection</li> </ul>	Day 284

### Early Results: Similar Trends at Scale

- 2<sup>nd</sup> injection continuation rates similar to pilot (3 calls)
- 1<sup>st</sup> year continuation (4<sup>th</sup> injection) likely to be higher with telephonic support than current national average of 23%



#### % new adopters continuing

### Lessons Learned

- Cost for 1 year of follow-up per client: \$5-6
  - Call charges are only 20% of the total cost of operating a helpline
  - Costs will decrease further with improvement in vernacular texting
- Many unsuccessful call-back attempts increase costs, decrease efficiency and impact
  - Nearly half the call-back attempts are unsuccessful (out of service or no answer); requires rescheduling

## **Application in Other Areas**

- To address contraceptive discontinuation: IUD users (SHOPS Jordan); OCPs, IUDs and DMPA in India
- To support treatment adherence: TB (SHOPS India)



- Telephone-based follow-up mechanisms show potential to improve DMPA continuation rates
- Cost-effective and scalable mechanism
- Applicable to other health areas with the similar effectiveness





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