Photo: World Vision/Coumba Betty Diallo

Mauritania

AIM Health Plus

2
digital tools deployed
since **November 2019***

In
Developing or adapting solution
project stage†

90%
complete overall

4,673
beneficiaries reached

22%
children ages 0–18

78%
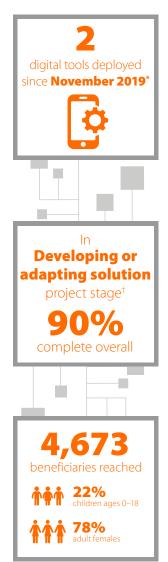adult females

Aligning digital tools to national guidelines

In operation and supported by Irish Aid since 2017, the Access to Infant and Maternal Health Plus Project (AIM Health Plus) addresses the leading causes of maternal and neonatal mortality and improves young child survival and nutritional status across four countries in Africa. In the Guerrou and M'Bagne districts of Mauritania, the AIM Health Plus team has worked with nine health facilities to include a digital health component to support community health worker (CHW) programming for the past several years.

This digital health project provides CHWs with smartphones equipped with a tailored CommCare app to use during their home visits. These digital tools support CHWs who are using the Timed and Targeted Counselling (ttC) approach to promote positive health and nutrition behaviour change among pregnant women and mothers or caregivers of children under 2. The app reminds CHWs to visit homes at the ideal time during pregnancy, infancy and childhood. It also supports CHWs as they conduct counselling sessions, including enabling them to submit community health data to the project's secure cloud-based repository. This data that CHWs gather is then shared with the Ministry of Health and the government's Community Health Committee and is used for managing CHW efforts, planning how to improve the programme and making longer-term strategic decisions. The app also includes local language audio clips to boost comprehension and understanding among CHWs and their clients.

The CommCare app aims to help improve the efficiency of CHW work by helping them to reach more clients in a timely manner. It also helps improve the effectiveness of behaviour change counselling that CHWs offer the families they serve by guiding them on how to structure their visits and offer relevant audio clips to reinforce key messages. Finally, the app helps strengthen the health system by improving utilisation of community-level data.
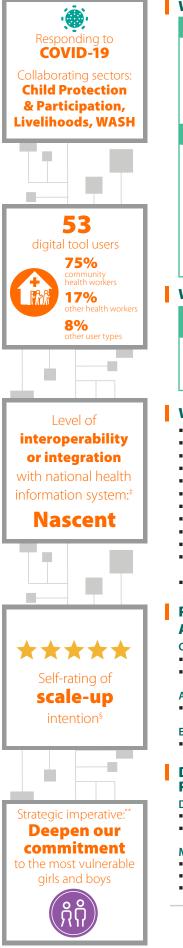

LEARN MORE
about AIM Health Plus

From October 2020 through September 2021, the AIM Health Plus project team in Mauritania made technical updates to the CommCare app, including aligning and validating its content in consultation with Ministry of Health experts. They also added two collaborating health facilities to the programme, bringing the total to nine, and trained the new facilities' staff and CHWs. The project team estimates that 75% of CHWs working in the project areas are using the app.

As the AIM Health Plus project completes its final year, the project team in Mauritania is preparing for a high-level consultation with the Ministry of Health to share recent project refinements that better align with the Mauritanian health system and to discuss how to improve connectivity provided by mobile network operators.

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Responding to
COVID-19

Collaborating sectors:
Child Protection & Participation, Livelihoods, WASH

53
digital tool users

75% community health workers

17% other health workers

8% other user types

Level of **interoperability or integration** with national health information system:‡
Nascent

★★★★★

Self-rating of **scale-up** intention§

Strategic imperative:**
Deepen our commitment to the most vulnerable girls and boys

WHO HEALTH SYSTEM CHALLENGES†† ADDRESSED

Information	Availability	Quality	Acceptability
▪ Insufficient utilisation of data and information ▪ Lack of quality/reliable data	▪ Insufficient supply of services	▪ Inadequate supportive supervision ▪ Insufficient health worker competence ▪ Poor adherence to guidelines ▪ Poor patient experience	▪ Lack of alignment with local norms ▪ Not addressing individual beliefs and practices
Utilisation	**Efficiency**	**Cost**	**Accountability**
▪ Geographic inaccessibility ▪ Loss to follow-up ▪ Low adherence to treatments ▪ Low demand for services	▪ Delayed provision of care ▪ Inadequate access to transportation ▪ Inadequate workflow management ▪ Lack of or inappropriate referrals ▪ Poor planning and coordination	▪ High cost of manual processes	▪ Absence of community feedback mechanism ▪ Inadequate understanding of beneficiary populations ▪ Insufficient patient engagement ▪ Poor accountability between the levels of the health sector ▪ Unaware of service entitlement

WHO DIGITAL HEALTH INTERVENTIONS†† USED

Clients	Healthcare providers	Health system managers	Data services
▪ 1.1 Targeted client communication	▪ 2.1 Client identification and registration ▪ 2.2 Client health records ▪ 2.6 Referral coordination	▪ 3.3 Public health event notification	▪ 4.1 Data collection, management, and use ▪ 4.4 Data exchange and interoperability

WHO HEALTH FOCUS AREAS†

- Adolescent and youth health
- Civil registration and vital statistics
- Cross cutting
- Environmental health
- Infectious diseases (non-vector borne)
- Injury prevention and management
- Maternal health
- Newborn and child health
- Nutrition and metabolic disorders
- Sexual and reproductive health
- Vector-borne diseases (not listed under neglected tropical diseases)
- Water, sanitation and hygiene (WASH)

PROJECT MODELS AND APPROACHES‡‡ USED

CORE
- Community Health Committees (COMM)
- Community Health Workers (CHW)

ADDITIONAL
- Grandmother-inclusive Approach (GMIA)

ENABLING
- Citizen Voice and Action (CVA)

DIGITAL TOOLS AND TECHNOLOGY PARTNERS

DIGITAL TOOLS
- CommCare
- Power BI

MOBILE NETWORK OPERATORS
- Chinguitel
- Mattel
- Moov Mauritel

STAKEHOLDERS

DOMESTIC GOVERNMENT PARTNERS
- Ministry of Health (Ministère de la Santé)
- Community Health Committee (Comite communautaire de la santé)

NON-PROFIT AND NON-GOVERNMENTAL ORGANISATION PARTNER
- Association Terre Espoir pour le Développement (ATED)

WORLD VISION PARTNER
- World Vision Ireland

FUNDING PARTNER
- Irish Aid (Government of Ireland)

PROJECT CONTACTS

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For more information: https://www.wvi.org/digital-health