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The Future of Capacity Building: Technology-enabled Tools

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John Snow, Inc.
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Strong Supply Chains Save Lives



JSI improves health logistics in Africa, Asia, the Caribbean, Eastern Europe, Eurasia, and Latin America.



We strengthen supply chains end-to-end by building systems that connect manufacturers, funders, IT experts, health ministries, pharmacies and communities.



JSI creates sustainable systems
that draw on >30 years of strong
relationships with country
governments, commercial sector,
civil society, academia, and the
donor & multilateral communities.



JSI manages more than 30 SCM projects. We have managed \$3B+ of health procurement experience on 125 SCM projects implemented in >100 countries.



We are passionate about using our public health and supply chain expertise to help our partners eradicate malaria, increase access to contraceptives, improve routine immunization.















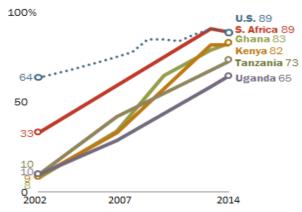




Growth in ICT Facilitates Adoption of New Tools

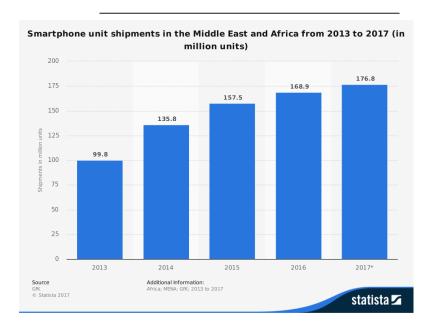
Cell Phone Ownership Surges in Africa

Adults who own a cell phone



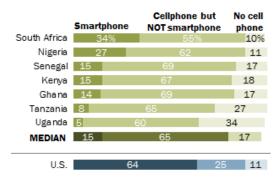
Note: U.S. data from Pew Research Centersurveys. Source: Spring 2014 Global Attitudes survey. Q68.

PEW RESEARCH CENTER



Few Own Smartphones in Africa, But Cell Phones Common

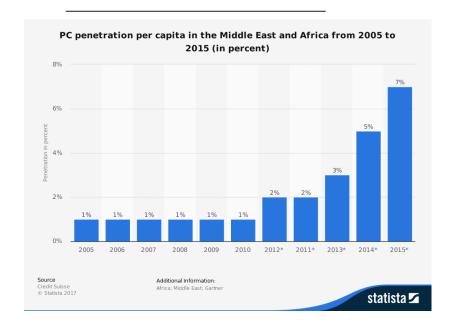
Do you own a cell phone? Is it a smartphone?



Note: Percentages based on total sample, U.S. data from December 2014 Pew Research Center surveys. Median percentage excludes the U.S.

Source: Spring 2014 Global Attitudes survey, 068 & 069.

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Use of Digital Learning Tools in Upper Income Countries

In the US, organizations are increasingly using digital training tools for capacity building

- Corporate investments in e-learning growing 13% per year in the US¹
- 77% of companies in the US use online training tools¹
- Mobile learning and gamification lead e-learning trends²
- Companies move to digital training tools to make training more easily accessible where and when it is needed, reduce training costs, and standardize it



Digital Learning Tools in LMICs

Those same benefits can be available in LMICs with the spread of ICT technology. However, there are no silver bullets.

- The fundamentals still apply
- Different technologies have different uses
 - Computer-based online learning
 - Mobile learning
 - Games
- Learning management systems
- Blended learning
- Measurement



Gaming for Digital Empowerment in Kenya

Why Gaming?



Playing, Learning, Measuring!

- One approach to help health workers acquire or update their supply chain management skills remotely, on their own schedule.
- Gaming is fun and interactive and can be implemented to build a learning community
- Skills can be acquired or refreshed outside of traditional classroom-based trainings at a relatively low cost.
- Gaming linked to social media and other offline actions to promote human interface.

- Web-based platform accessible through mobile phones, tablets, or laptops.
- Partnership between JSI and SNTL
 Publishing, using the yeepa® platform.
- Content agnostic gaming platform, with inbuilt analytical tool to enable real-time measurement of learning as players game continuously.
- Three social, virtual games launched to date on supply chain, contraception and health and wellness

yeepa® offers an Organizational Impact & Measurement Perspective

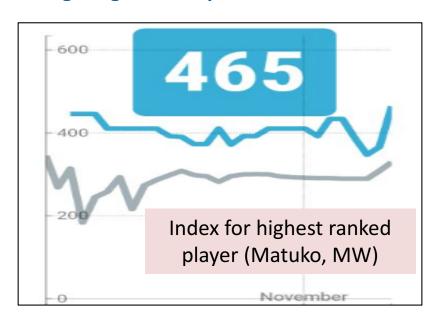
- Why are there performance differences between teams/departments?
- Are investments paying off? Where should we intervene to make a difference?



"Your Choice, Your Future!": Contraception and Reproductive Health Game

- Your Choice, Your Future! aims to promote contraceptive awareness among youth
- Launched October 11th at the Kenya Institute of Mass Communication; 4 other mini launches have been conducted to similar youth-focused groups since
- Over 3500 views of Facebook page

Learning Progress is Represented like a Stock Index





- 385 Users have registered online and have played the questions more than 90,000 times
- The average score for all the users on the platform is 11,014
- Average age of the users on the platform is 26 vears
- 30 winners since launch with a GRAND PRIZE scheduled for early December

YCYF is supported by Reproductive Health Supplies Coalition, UNFPA, Bayer



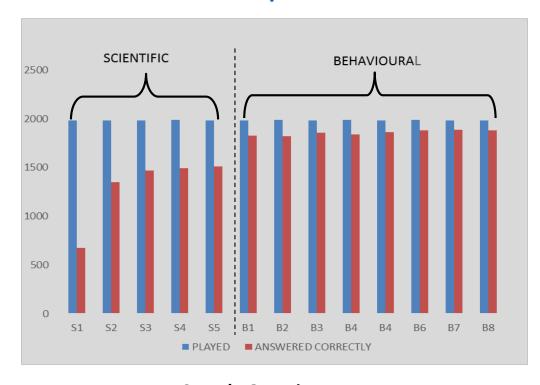
Lessons Learned

- The youth prefer gaming to workshops/seminars
- Incentives (weekly prizes) are important to engage youth and encourage continuous gaming
- Linking gaming with "offline resources" adds value beyond learning (Nurse during launch; Facebook page)



Youth found gaming an engaging fun way to learn

Higher rates of knowledge for behavioral vs scientific questions



Sample Questions

S1: Select the contraceptive method that has the following characteristics; efficacy of 99%, long acting reversible, regimen of 3 or 5 years and is easy to hide?

B2:Can the injectable contraceptive cause a woman to more likely gain weight?



Zambia Computer Based eLMIS Training

Background

- **Target audience**: Ministry of Health facility staff who use the electronic Logistics Management Information System (eLMIS Facility Edition [FE]).
- **Current approach**: Staff receive on the job training (OJT) on the use of eLMIS
- **Challenge**: High staff attrition, high cost of traditional training and need for refresher training









Zambia eLearning Objectives



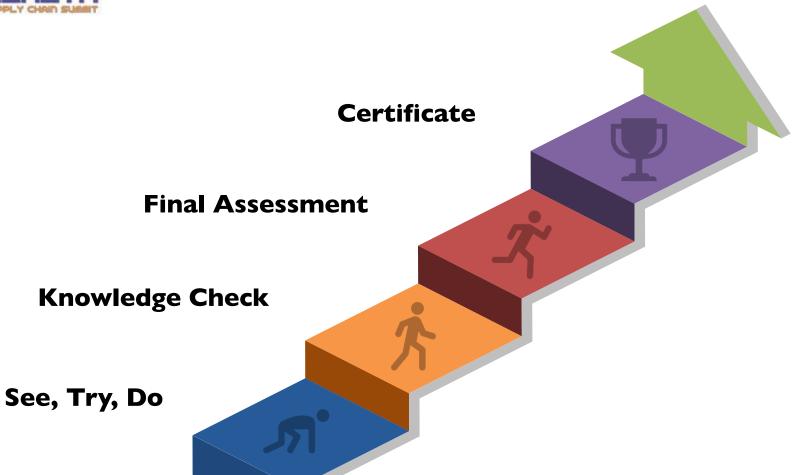








Zambia eLearning Approach

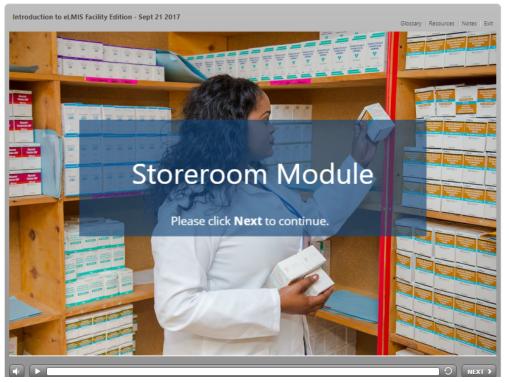




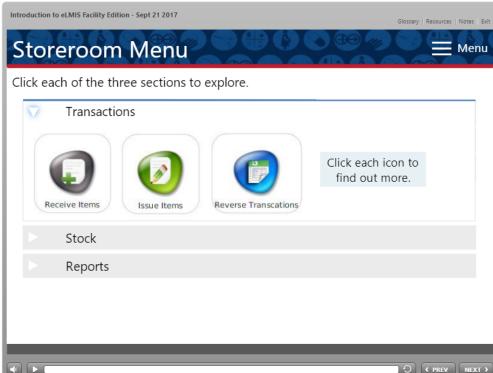


Zambia Computer Based eLMIS Training Examples

Storeroom Module



Transactions





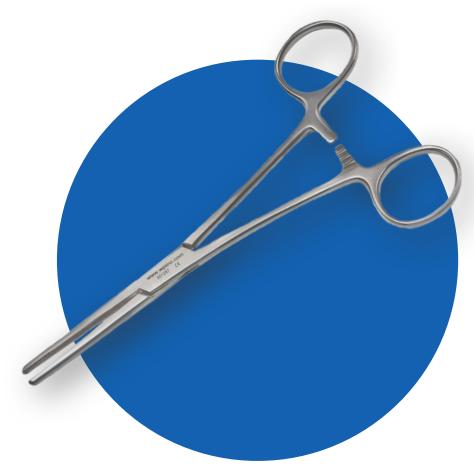






Mobile Learning: VMMC Online Training Hub

- Mobile learning platform that provides classes, resources, and communities of practice to help clinicians advance their skills and knowledge for performing voluntary medical male circumcision (VMMC).
- Mobile course covers the didactic, theoretical VMMC information previously learned through in-person workshops.
- Learners complete and pass this online course before proceeding on to their in-person clinical practicum.





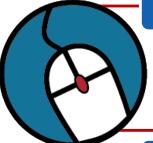






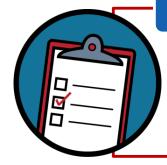
VMMC Mobile Learning Approach





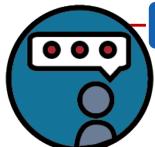
• Learners can use multiple devices such as mobile phones, tablets, and laptops, or desktops to take classes, and download the classes to read offline when internet access is not available.

Learn by doing



• Course provides information through interactive online classes that feature animations, multimedia elements, quizzes, and links to supplemental resources, linked with extensive hands-on experience through in-person surgical training.

Engage with a community



• Learners can connect and collaborate with fellow learners, course moderators, and others in their field through Connect, the site's social collaboration section.



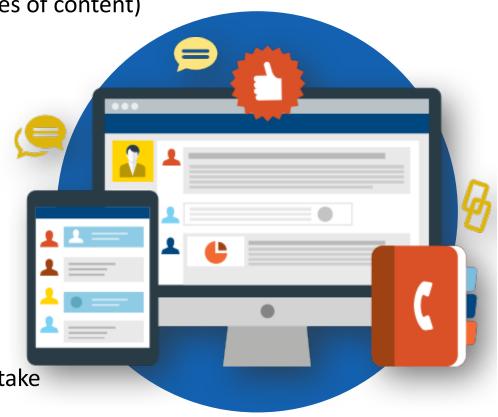






VMMC Mobile Learning Development

- User-centered/mobile first approach
- Content Creation of 5 modules (900+ slides of content)
- Platform requirements and configuration (Cornerstone LMS and app, and mobile module/responsive theming)
- Usability Testing (functionality on mobile devices)
- Production (narration, animation, quizzes, supplemental materials)
- Pilot Testing
- Rollout, implementation, scale up
- Evaluate and modify based on analytics and user feedback to ensure uptake











Successes & Lessons Learned



- Launched in July 2017 with 40 learners and a 95% completion/pass rate.
- Currently enrolling 50+ learners from VMMC programs as we scale up across Africa.
- With each new cohort, user uptake becomes more seamless and efficient as course moderators get more experience using the platform and orienting new learners to the mobile app and course materials.
- The pilot was cut short to accelerate rollout of the course—strongly recommend building in adequate time for the pilot process.
- Keep content length reasonable and succinct; it's easy to create too much content for the learner to digest.











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