eLearning in Maternal and Child Health: The example of IMPACtt

MMS Symposium, 6 November 2012

Christina Biaggi, Swiss Tropical and Public Health Institute
Sabina Matter, Novartis Foundation for Sustainable Development
Overview

- Rationale and history
- Introduction to IMPACtt
- Virtual tour

Field-testing IMPACtt, TTCIH, Ifakara, Tanzania, February 2012
ICATT: Background and rationale

- 10 million children under five die every year, mostly due to preventable and treatable diseases
- **IMCI** (Integrated Management of Childhood Illness) was developed by WHO and UNICEF in the 1990s
  - **Aim:** Rapidly and effectively **reduce child mortality (MDG 4)**
  - **Means:** Improving diagnosis and treatment in **primary healthcare** facilities by focusing on the child as a whole
  - To date, over **100 countries** have adopted IMCI

*Health worker diagnoses child through algorithm in IMCI chart booklet*
ICATT: not just a training tool

- IMCI implementation faces **two major challenges:**
  - Ensuring **adoption** of generic guidelines and **periodical updates** to meet the health needs within a country, and
  - **Scaling up training** of a very large number of health workers.

**ICATT (IMCI Computerized Adaptation and Training Tool)** developed by the World Health Organization, supported by the Novartis Foundation

- ICATT facilitates IMCI **adaptation:**
  - Easy adaptation of guidelines and chart booklet
  - Cost-effective
  - Variety of different training sets can be created (i.e. pre-service and in-service trainings of different cadres)

- ICATT facilitates IMCI **training:**
  - ICATT reduces training costs and time
  - Interactive training (audiovisuals) enhances training outcome
  - ICATT enables distance learning
Global dissemination of ICATT

- Pilots in Tanzania, Peru, Indonesia
- 12 countries completed IMCI adaptation through ICATT
  - Tanzania, Mozambique, South Africa, Peru, Cambodia, Fiji, Indonesia, Malaysia, Philippines, Solomon Islands, Vietnam, Kiribati
- 7 countries implemented ICATT in training
  - Tanzania, South Africa, Peru, Indonesia, Fiji, Philippines, Solomon Islands
- ICATT now also runs on browser-based environment:
  - Countries can easily deploy ICATT training players on intranets/local internets
  - Global access is through [http://online.icatt-training.org/](http://online.icatt-training.org/)
Every day, up to 1,500 women and 10,000 newborn babies die due to complications in pregnancy and childbirth.

Decision in 2011 by WHO and Novartis Foundation to develop an eLearning tool in Maternal and Child Health → MDG 5

- Based on ICATT software
- Collaboration between:
  - World Health Organization
  - Swiss Tropical and Public Health Institute
  - Novartis Foundation for Sustainable Development
eLearning tool comprising 4 courses:
- Antenatal Care
- Labour & Childbirth Care
- Essential Newborn Care
- Postnatal Care

Developed from WHO classroom-based course material

Based on WHO’s IMPAC package of guidelines and tools
IMPACtt – where do we stand?

- Essential Newborn Care: tested in the field
- Antenatal Care: currently being translated into IMPACtt
- Labour & Childbirth Care: development of material
- Postnatal Care: development of material
Selected experiences from the field-testing

- Computer literacy
- Language skills
- Clinical setting
- IMPACtt’s future use

*Field-testing IMPACtt, TTCIH, Ifakara, Tanzania, February 2012*
Virtual tour through IMPACtt - ENC

- Navigation
- Modules and Sessions
- Example Session: Kangaroo Mother Care
Thank you!

For more information:

www.icatt-training.org

Swiss Tropical and Public Health Institute
www.swisstph.ch

Novartis Foundation for Sustainable Development
www.novartisfoundation.org

WHO Department of Maternal, Newborn, Child and Adolescent Health
www.who.int/maternal_child_adolescent/en