

Question:

Recently we wanted to use phones to increase access to information on family planning. It was very expensive. What would you recommend? What has been your experience on cost?

During the HealthEnabled webinar on Common mHealth Questions, Susan Otchere from World Vision posed the question above. As part of our question answering service, HealthEnabled sponsored [Nadi Kaonga](#), an independent mHealth consultant and member of our Expert Network to research an answer on this topic.

Answer:

Sustainable financing models

Sustaining mHealth initiatives has been elusive for many. A recent [report on sustainable financing for mHealth](#) concluded that mHealth models need to find a way to transition from being donor-dependent to having a payer-based model. Who the payer is (or payers are) depends on the type of service being provided, negotiations, collaborations and many more factors. I have listed some resources and considerations below. In addition, the sections that may be of most interest in the aforementioned report are "Demand & Awareness" and "Financial Barriers".

Cost considerations

The Mobiles for Reproductive Health (m4RH) initiative we discussed during the webinar has a [one-pager on cost considerations](#) which highlights the need to consider programming, SMS, short code lease and marketing costs. The considerations provided reminded me of a strategy employed by the Praekelt Foundation in South Africa where they tacked on their content to 'please call me' messages. While this may limit content and deter users (as they may readily dismiss thinking it is spam), such adverts or promotions could be used to help reduce costs. CommCare has a [total cost of ownership tool](#) to help people take into consideration the various hidden or indirect costs which may be of interest, as well.

The 2014 guide "[mHealth Mobile Messaging Toolkit: Considerations When Selecting a Mobile Messaging Platform Vendor](#)" produced by PATH in association with MAMA and mHELP (now HealthEnabled) includes a messaging cost calculator for your SMS / IVR messaging program.

Public Private Partnerships

Having conversations and negotiations with telecommunications (telecoms) providers is recommended. Service delivery organizations that provide crucial health information have been successful in negotiating reduced rates. Telecoms have been supportive of health initiatives and now, some telecoms even provide health service information for demand generation and education and awareness (possibly presenting an opportunity to integrate content within their programs).

Similarly, it is possible to hold conversations with other organizations already utilizing mobile phones to increase access to various services. An agreement could be made to add-on family planning to their existing program.

Selecting your mobile tool

Lastly, there may be other, less expensive means of disseminating your content and generating demand for family planning services. These two reports have frameworks that can help determine what the best technology option may be: [Media Selection in Demand Generation](#) and [mHealth Support Tools for Frontline Health Workers](#). MAMA has a [variety of tools](#) that also touch upon technology and vendor selection.

A Business Case analysis put together by consulting firm DeLoitte shows that using data options to deliver messages to pregnant women and mothers of young children, instead of SMS or USSD shows a dramatic drop in costs. Practically, not all people have access to data services, but a mixed approach that tailors to different user groups also can show dramatic cost reductions.

Scenario – Cost comparisons

Although not always viable based on the target market, data definitely offers the most value for delivering mHealth services

Users	Costing Areas	Only SMS / USSD	Combination	Data only	
350 000	Channel	USSD	R 3.1 mill	R 1.0 mill	
		SMS	R 4.7 mill	R 1.4 mill	
		Data		R 0.3 mill	R 0.5 mill
	Application, Middleware, Database		R 4.3 mill	R 6.5 mill	R 5.5 mill
	Total		R 12.1 m	R 9.2 m	R 6.0 m
650 000	Channel	USSD	R 6.4 mill	R 1.5 mill	
		SMS	R 9.8 mill	R 2.2 mill	
		Data		R 0.7 mill	R 1.0 mill
	Application, Middleware, Database		R 6.4 mill	R 8.0 mill	R 7.7 mill
	Total		R 22.6 m	R 12.4 m	R 8.7 m
1 000 000	Channel	USSD	R 11.0 mill	R 2.0 mill	
		SMS	R 17.2 mill	R 3.1 mill	
		Data		R 1.2 mill	R 1.6 mill
	Application, Middleware, Database		R 7.4 mill	R 9.1 mill	R 8.7 mill
	Total		R 35.6 m	R 15.4 m	R 10.3 m

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Figure 1: DeLoitte's cost comparisons