



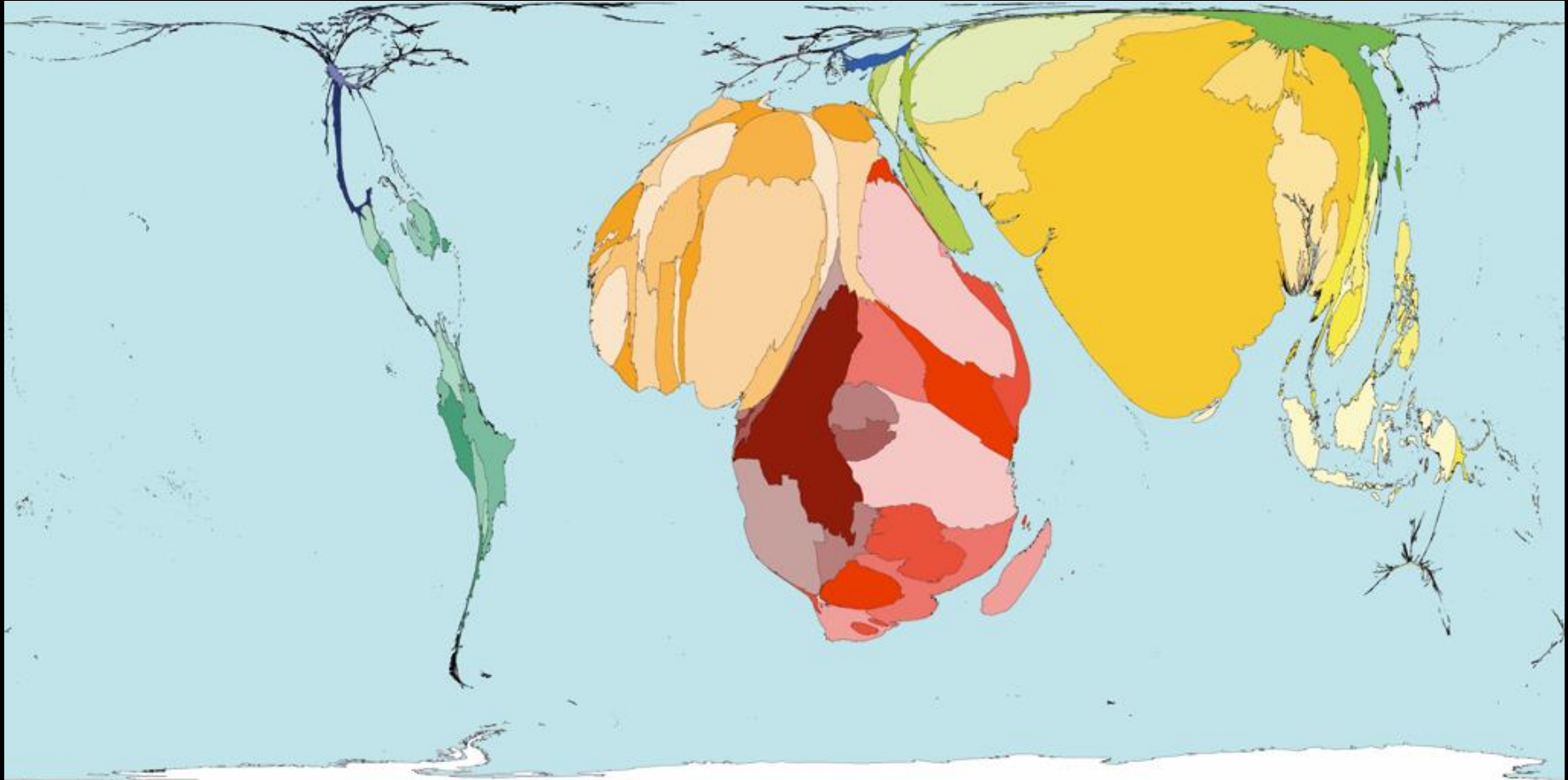
Mobile Video Dissemination for Community Health

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Joint work with Neha Kumar, Anil Mishra, and Richard Anderson



99% of all maternal deaths occur in developing countries



A Cartogram showing the maternal mortality rate for 2000

Community-led Video Education *Projecting Health*

Production



Dissemination



Dissemination strategy reduces the reach of these videos

In this talk

How could we distribute health videos on an offline network of personal mobile phones?



Distribution Channels



Mobile Shop Owners
(MSOs)



ASHAs

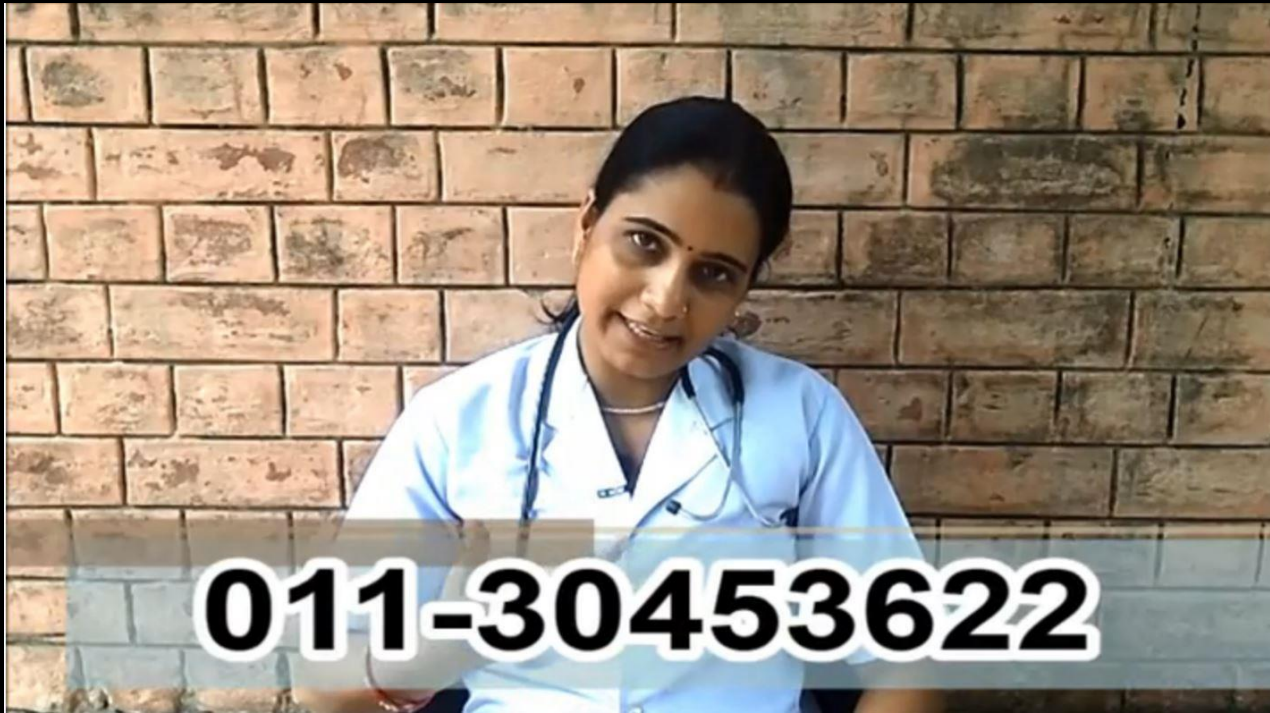


Laptop Owners
(LOs)

Video Tracking Scheme Using Missed Calls and Callbacks

- 3 videos each from 2 blocks
- Edited to begin and end with a plea from a local doctor

If you like this video, please send us a missed call on phone #.

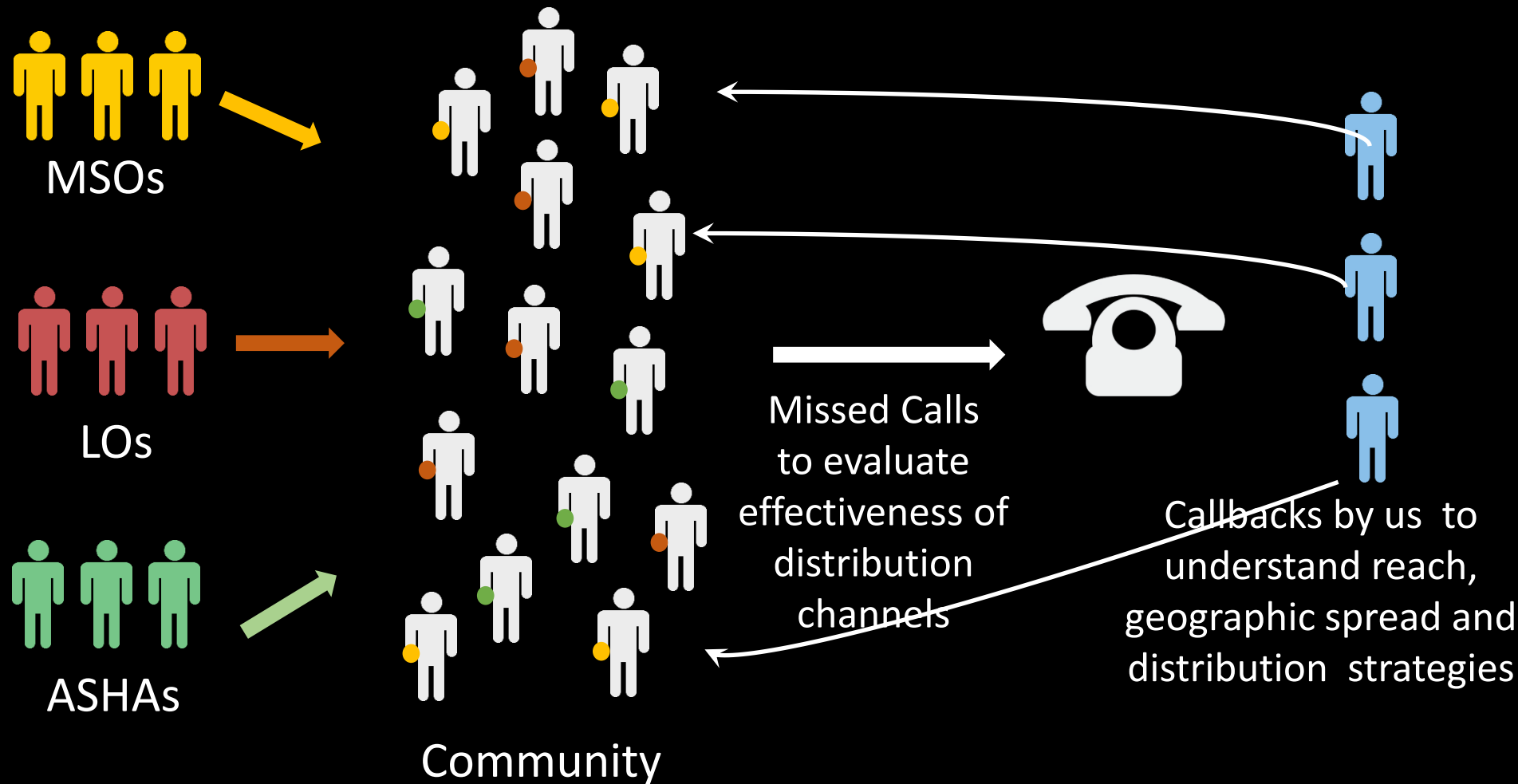


Video Tracking Scheme Using Missed Calls and Callbacks

- 3 videos each from 2 blocks
- Edited to begin and end with a plea from a local doctor
If you like this video, please send us a missed call on phone #.
- Different callback number for each distribution channel

Distribution Channel	Block 1		Block 2	
	Phone #	Participants	Phone #	Participants
MSOs	----- 3618	50	-----3621	45
LOs	-----3619	35	-----3622	36
ASHAs	-----3620	55	-----3623	40

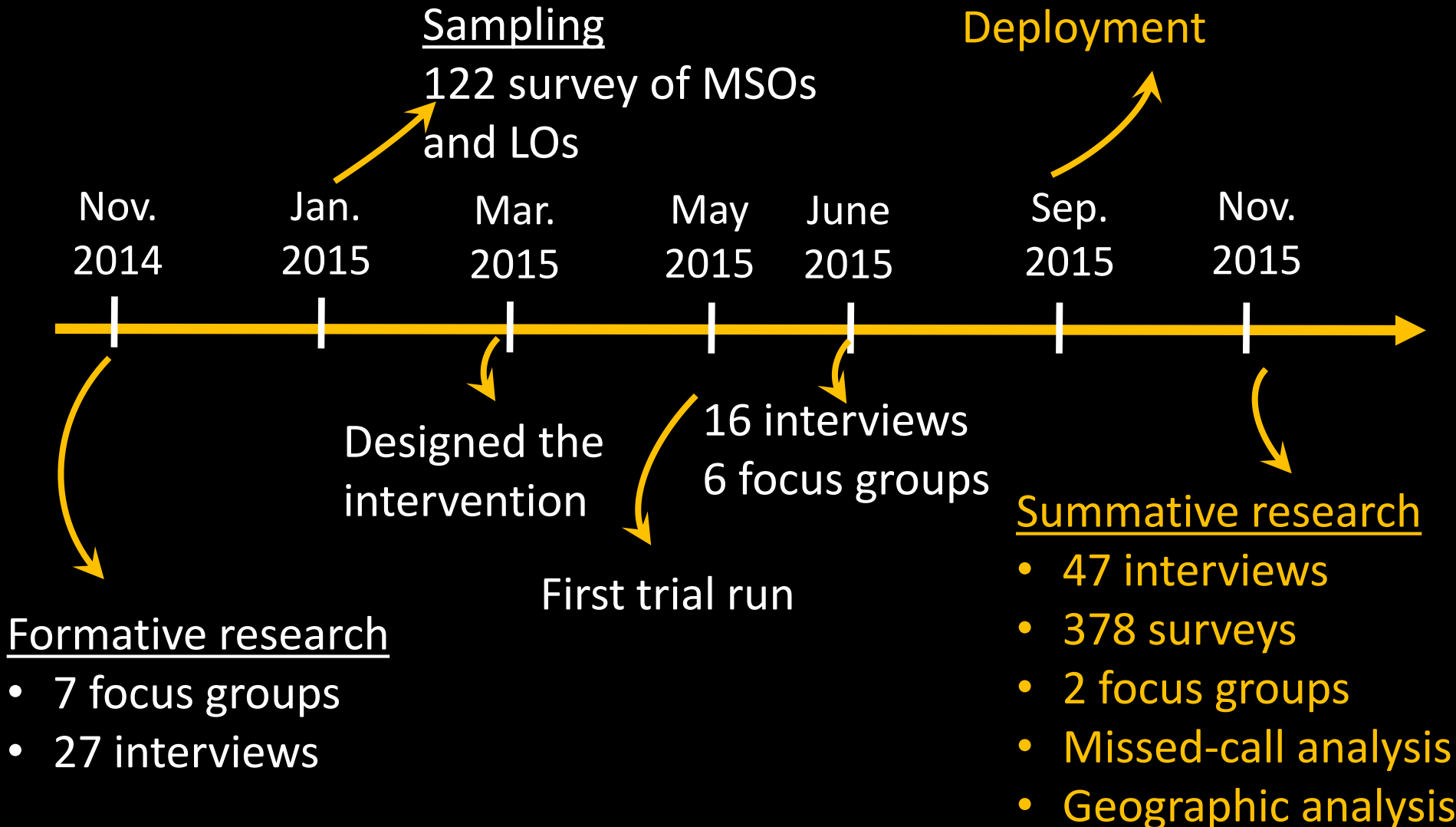
Video Tracking Scheme Using Missed Calls and Callbacks



Seeding the Videos and Training



Mixed-methods Approach

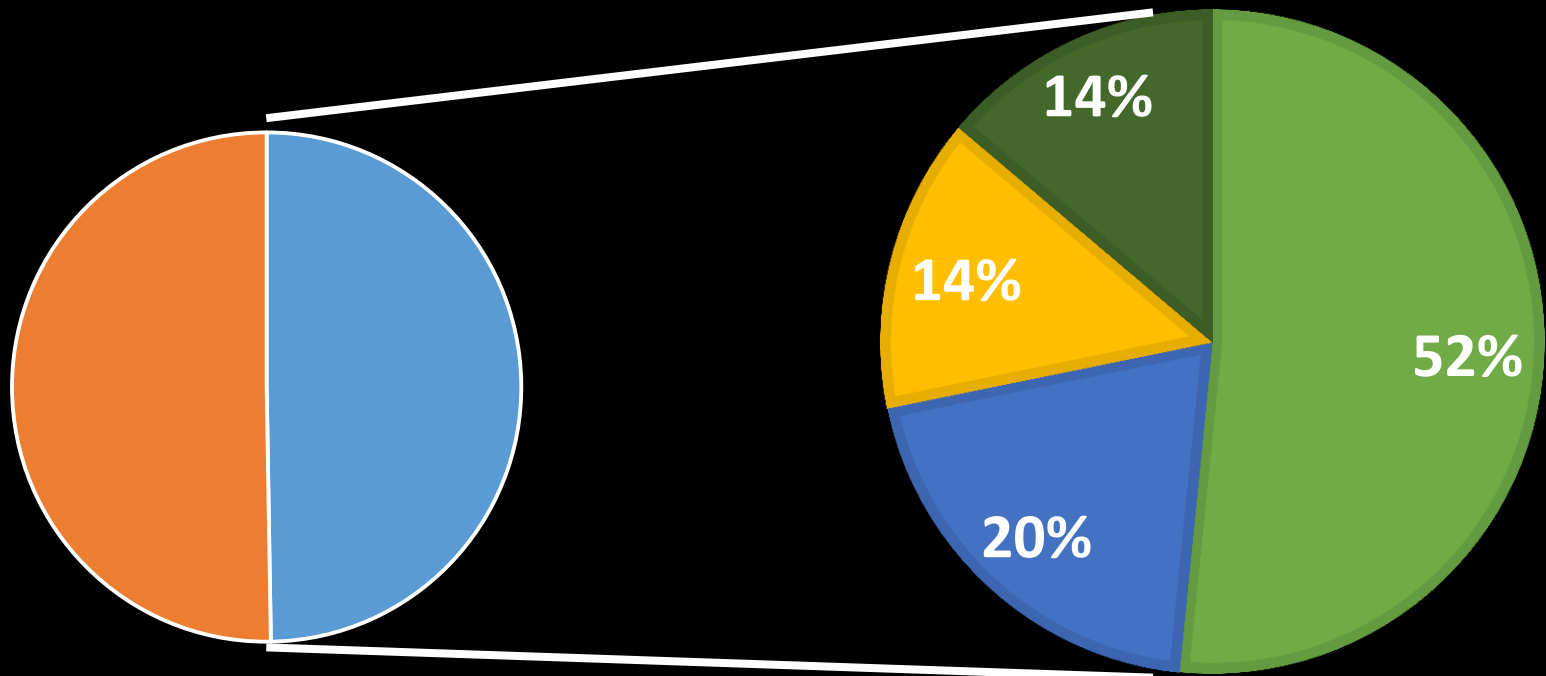


Missed Calls

436 unique missed calls & 378 callbacks

Location	Medium	Unique Calls	Normalized
Block 1	MSO	23	0.5
	LO	36	1
	ASHA	131	2.7
Block 2	MSO	41	1
	LO	84	2.3
	ASHA	121	3.8

Missed Callers



Beneficiaries & family

Others

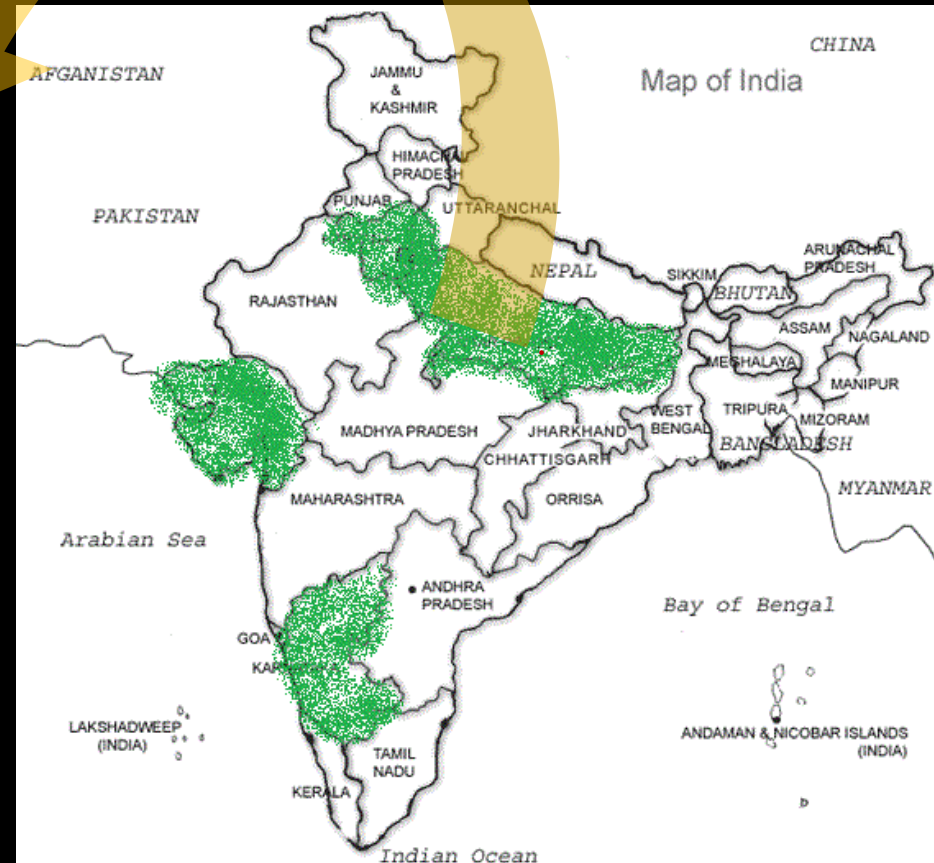
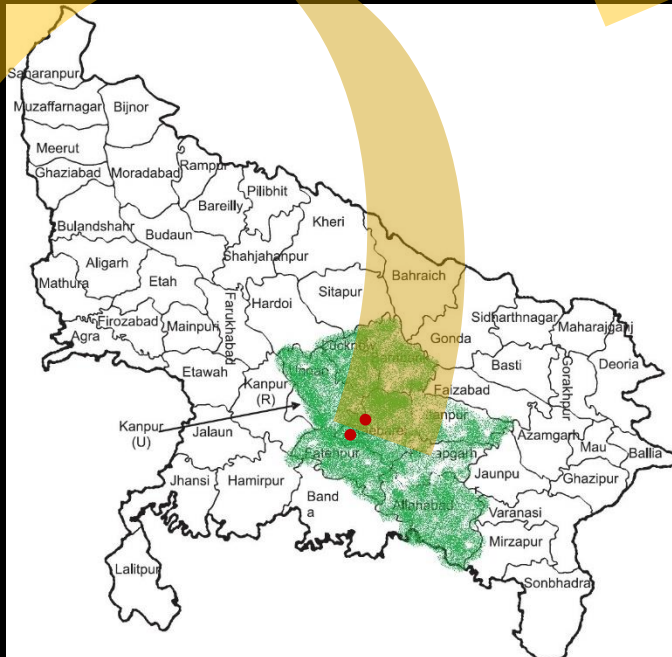
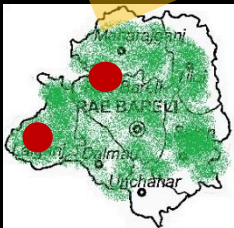
In-laws

Pregnant woman or new mother

Husbands

Women's family

Geographic Spread



Motivation to Distribute Videos

*This is **important for the health** of the mothers and newborn. This is a **humanitarian effort** and we all have to come together. It is impossible for anyone to distribute the videos door-to-door but much easier for me as I can **transfer the videos on phones of customers** by spending an extra two-minutes.*

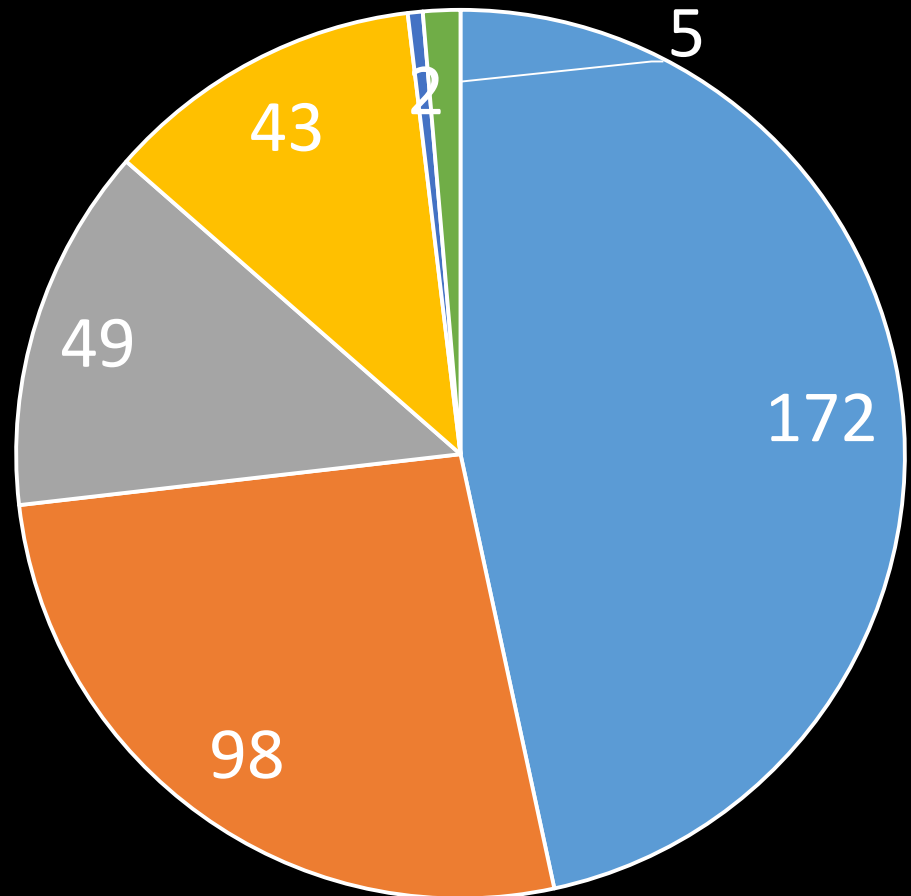
- P1 (MSO)

Distribution Scenarios

- Videos were introduced as “something new, different & useful.”
- MSOs -> customers and family members
- LOs -> door-to-door, social gatherings & screened it in outdoor areas
- ASHAs -> mothers group meetings, health centers & home visits

Technologies for Distribution

- Bluetooth
- Memory card transfer
- Watched on others' phone
- Watched on others' laptop
- USB Drive
- WhatsApp, YouTube



Challenges in Distribution

I borrow my husband's phone to transfer the videos during house visits. He always asks me to come home as soon as possible because he needs the phone. I am tense during the visits and this has compromised the time I spend in house visits.

- ASHA

Many people ask me “Why are you asking me to give a missed call? What do you get?” I ask them to go to the end where the doctor asks people to send a missed call. I tell them that I don't get anything and they can go to the hospital to verify with the doctor.

- MSO

Distribution vs. Viewership

A person with a mobile phone goes to a shop for getting mobile content. If he won't come to my shop, he will go to another shop. If all of us start transferring the videos then he will have no option but to watch them.

- MSO

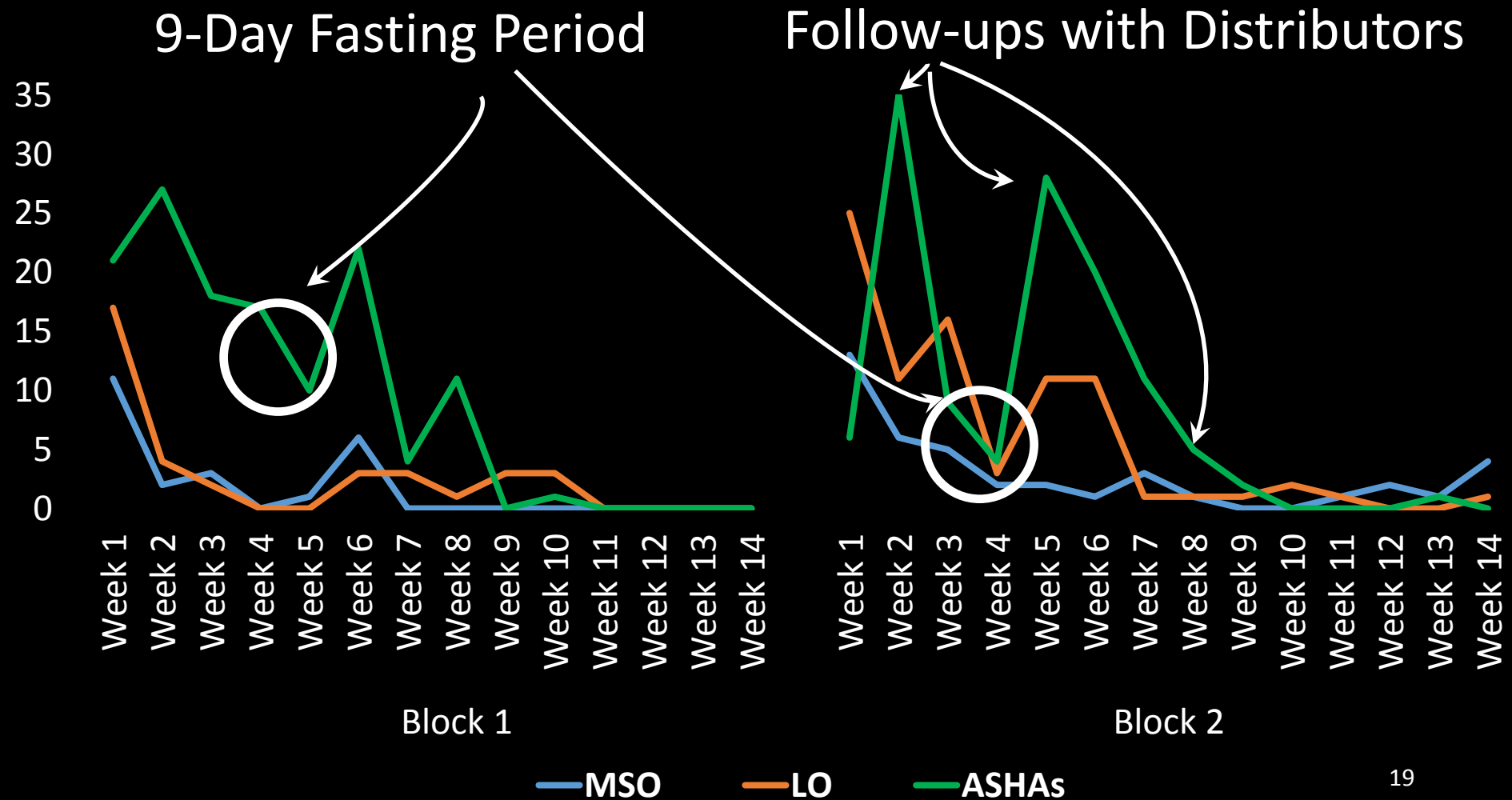
People owe us a lot as we transfer mobile content for free on their phones.

- LO

We are social servants and years of community service make us trustworthy. People respect us and know that they do not have an ulterior motive.

- ASHA

Need for Extrinsic Motivation



Effectiveness of Video Tracking

Sending missed-calls was non-trivial

- Unable to remember the phone number
- Unsure about the questions that will be asked in follow-up call
- Did not have sufficient balance to place even a missed call

Other limitations

- Unable to identify whether they actually watched a video
- Unable to unearth exact distribution by each participant

Conclusion

- Mobile video dissemination in resource-constrained rural settings using three distribution channels comprised of different community actors.
- Methodological contribution by implementing a simple video tracking mechanism comprised of missed calls and callbacks



Thank You!



@adityavash

Extra Slides

Challenges in Video Tracking

Infeasible solutions

- Smartphone application that could monitor and self-report mobile media transfers
- Feature phone application that could use device logging and/or watermarking

Designed a simple measurement technique

1. **Missed calls** to signal that people watched videos
2. **Callbacks** to evaluate the reach and geographic spread of distribution, and understand strategies

Intrdependence & Interdependence

- Involvement of people outside the study
 - One-of-a-kind training was lucrative
 - Wanted to be a part of the movement
 - Wanted to help a friend or family member
- Mixing of distribution channels
 - Participants capitalized on the strengths of other channels

How to disseminate these videos?



You Tube

