



Phase One Findings

E-PC Mobile Phone Technology Project
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Background

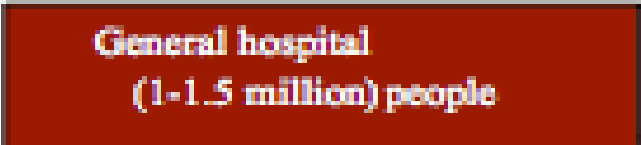
- 103 Million people
- Over 80 languages
- 83% living in rural areas mainly farmers
- Number of new cancers every year approximately 120,000.
- 690,000 patients living with HIV



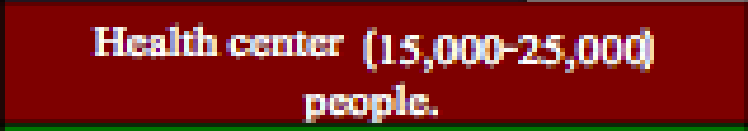
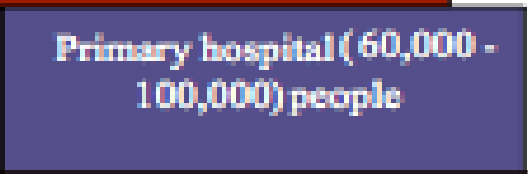
Ethiopian Health Tier System



Tertiary level health care



Secondary level health care



Primary level health care

URBAN

RURAL



Our Focus

The aim of phase 1 was to explore the views and opinions of PC patients and key stakeholders in Ethiopia about the use and acceptability of mobile phone technology.

Participants

| Profession | Total |
|----------------------|-------|
| Doctors | 2 |
| Health Officers | 5 |
| Nurses | 1 |
| Community Volunteers | 5 |
| Financial Officers | 3 |
| Day/Out Patients | 7 |
| Home Care Patients | 5 |

Table 1: Participants at Hospice Ethiopia. Total=28

| Profession | Total |
|-----------------|-------|
| Doctors | 3 |
| Nurses | 7 |
| Out/In Patients | 2 |

Table 2: Participants at Yekatit 12 Medical College Hospital. Total=12

Themes

- Lack of Awareness
- Lack of Understanding about Disease Process
- Lack of Information

Knowing About Their Illness

Their Current Condition

- Community Response
- Rural Patients
- Food and Money

- Present Phone Usage
- Pros and Cons of Using the Technology
- Suggested Uses for Palliative Care

Using Mobile Phone Technology

Pain and other Symptoms

- Total Pain
- Spiritual Care
- Access to Medicines



Lack of Awareness

Most of the time in our country patients do not know about their sickness we have to tell them what kind of sickness they have.'
(Health Officer Hospice Ethiopia).

'We didn't know about palliative care; we didn't know anything when my husband died (about his diagnosis). We didn't know about this and he didn't get any treatment and now thanks to God it is possible.'
(Day Care Patient).

Lack of Awareness

Lack of understanding about disease process:

'first, they need a health officer who can explain about their sickness very well. Next, what kind of pain they are having, for example, the people who have incurable disease, they don't even know...HO

Lack of information:

Well especially in our community as we know there is a lack of information and this lack of information will affect the poor people and the people in need who cannot get this service and without getting the treatment, they need because of lack of information they will pass away'
CV

Their Current Condition

Community Response

They are afraid of the community saying: 'what do they say about me?'" CV

'We need to give good support... so that the community won't reject them'- need to give pain relief, clean wounds, give medicine'. CV

- Acceptance and rejection
- The hidden patient
- The rich patient?

'Mobile phone technology is good for patients who are hiding they can get palliative care'. DCP

Their Current Condition



Their Current Condition Food and Money

- *'if there is nothing in the house, a person won't get treatment without food. They should get treatment by eating, drinking, being welcomed and getting support. Let's say I eat here but the person in my house (the one who is taking care of me) she doesn't have food to eat. He will leave to find a job'.*
DCP

Pain and other symptoms

TOTAL PAIN

- *'The advice needs to be about their pain, how to take care of themselves, they need spiritual support and psychological support.'*
Nurse
- Discussing emotions?

SPIRITUAL CARE

- *'Because I am a health practitioner, I will try to observe their case and try to get them treatment and by coming to the palliative care hub, or by following up their treatments and how they can get permanent palliative care treatment. And by having social or spiritual contacts that are continuous in their life, and also by discussing WITH the spiritual fathers we try to solve their problem and also not only relief the physical pain, but we will also advise them that they can get spiritual and psychological management.'* DR

Pain and other symptoms

ACCESS TO MEDICINES

We need to inform about their medicine, timing, side effects, with a lack of knowledge they might stop their medicine, for example with morphine'. DR

'The information they need to get is about their sickness and how they need to take their medicine , how to get relief from physical pain, how they can get support.' HO.

Using Mobile Phone Technology

PRESENT PHONE USAGE

- *'The applications we have on our phone are more useful than not useful. Sending messages, trying to find a solution for our problems 'googling', searching or finding addresses and searching of other technologies. There are many through Viber, or message or text or Telegram.'* FO
- *'Using a mobile phone has a lot of benefits, it gives a lot of information for those who know how to use it. It has a huge advantage, but this depends on how you use it.'* CV

Using Mobile Phone Technology

PROS AND CONS OF USING THE TECHNOLOGY

I think it's very useful, the undeveloped countries like us it saves time and energy. For example, one health practitioner is seeing a lot of patients. By using mobile phone technology, we can treat a lot of patients, it's very useful, it saves time and energy, therefore it has a big use. For the patients too'. DR

If a person doesn't have a family, it's very difficult for him to use a phone to get treatment'. DCP

Suggested Uses for Palliative Care

General use issues:

- Useful for rural patients
- Help patients who are 'hiding'
- Contact detail information for palliative care professionals
- Where to go to get help
- Information for family members on how to support patients

Suggested Uses for Palliative Care

Uses for patients in pain:

- Recording and keeping morphine diary dosage
- Pain Scale

Uses for spiritual care:

- Spiritual Care contacts

Supporting the use of medicines:

- The use of using videos to explain medicines or support patients in pain or need symptom control
- Support access to medicine with latest information
- How to take medicines
- To be able to record age and weight as many of the medicines are weight-based

Suggested Uses for Palliative Care

Symptom management

- Self-management information
- Symptom management information-especially, vomiting, diarrhoea, breathlessness, wound care.
- Patient education regarding suitable food

Uses for Disease Information:

- Multiple Disease Information e.g. What is cancer? What is HIV?

Other:

- Potentially used to record patients' vital signs
- Not to be used to ask about patients' feeling

Thank you
Any Questions?

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Specification document: Moscow methods

- MUST haves

Software and Technical features

- Daily/ weekly reporting
- Urban population
- User identification: patient or carer
- Online- web based
- Off line functionality
- Ability to review patient data/usage
- Less text more pictures
- Home visit requests
- Morphine usage diary

Specification MUSTS p2

Content

- Symptom assessment and management]
- Medication information
- Dietary advice
- information and support: including contact details
- Spiritual

P3 COULD

- How to videos
- Other cancer and disease information
- Patient self-help/ discussion forum
- Specific data collection for research
- Ability to request visit by HE by patient

Not Needed

- Scratch card/ subscription card
- Commercial Ads
- HelloDr Network
- Vital signs
- No automated alerts to patients