



# MOBILE PHONE SURVEYS FOR RMNCAH&N

## PRELIMINARY RESULTS FROM A LITERATURE REVIEW

FEB 2025



# OUTLINE

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- Introduction and background
- Study objectives and outline
- Preliminary findings
- Conclusion and next steps

# **INTRODUCTION AND BACKGROUND**



# INTRODUCTION

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- In the last two decades, mobile phone surveys have emerged as an increasingly common method for measuring population health both at national and sub-national levels.
- MPS offer a versatile approach to gather data on a range of health metrics and have become increasingly common in low- and middle-income countries (LMICs) due to their cost-effectiveness and logistical simplicity.
- For Reproductive, Maternal, Newborn, Child, and Adolescent Health and Nutrition (RMNCAH&N), mobile phone surveys can be used to estimate key indicators, such as contraceptive prevalence, breastfeeding practices, antenatal care attendance, and vaccination coverage.
- Despite the rise in their acceptability and use, significant questions remain around the representativeness and reliability of mobile phone surveys for RMNCAH&N. Surveys for RMNCAH&N often focus on reproductive-age women and we know that phone surveys can be biased towards male and higher-income respondents.

# **STUDY OBJECTIVES AND OUTLINE**



# STUDY OBJECTIVES

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To answer these questions, we conducted a systematic literature review to explore the use, challenges, and best practices of phone surveys in gathering RMNCH&N data across LMICs:

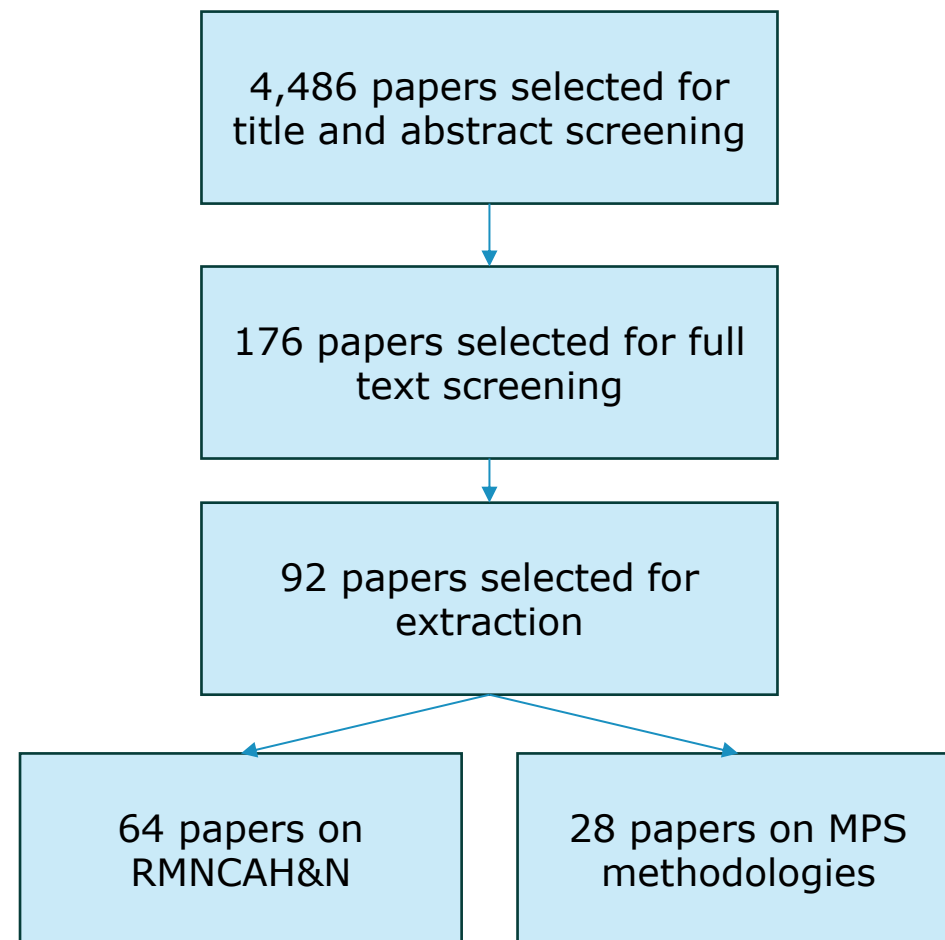
The review followed PRISMA guidelines, searching PubMed and other databases for articles related to phone surveys, RMNCAH&N, and LMICs. This work had two primary objectives:

1. To conduct a comprehensive literature review on the use of phone surveys to measure RMNCAH&N indicators in LMICs, evaluating the scope and potential of phone surveys for collecting health indicators or receipt of RMNCAH&N-related services
1. To assess the extent of evidence on the reliability, validity, and feasibility of phone surveys in capturing health-related data, best practices for implementation, and challenges and best practices in the implementation of health-related phone surveys

# SCREENING SUMMARY

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- **Inclusion criteria** included peer-reviewed articles from within the last 20 years, conducted in LMICs, and which included either:
  - **RMNCAH&N studies:** Surveys conducted via mobile phones and focused on issues related to RMNCH&N, OR
  - **Methodology studies:** Studies that aim to draw conclusions about the methods for conducting mobile phone surveys (as defined above) in LMICs using primary data collection.
- **Exclusion criteria** removed studies that did not collect information on health, were focused on digital interventions, had a primarily text message based approach, or did not provide sufficient information.



# METHODOLOGY

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- The data extraction among RMNCAH&N papers was performed using a standardized extraction form in Covidence
- The extracted data included:
  - Title, country, year, study aims
  - Topic area (RMNCAH&N area, immunization or mortality)
  - Indicator type (prevalence, coverage, knowledge, etc.)
  - Target population
  - Sampling method
  - Survey modality
  - Representativeness
  - Sample size
  - And more...

- +  Title
- +  Country
- +  Year
- +  Study aims
- +  Specific health topic
- +  Location
  - Rural
  - Urban
  - Mixed
  - Unclear/other



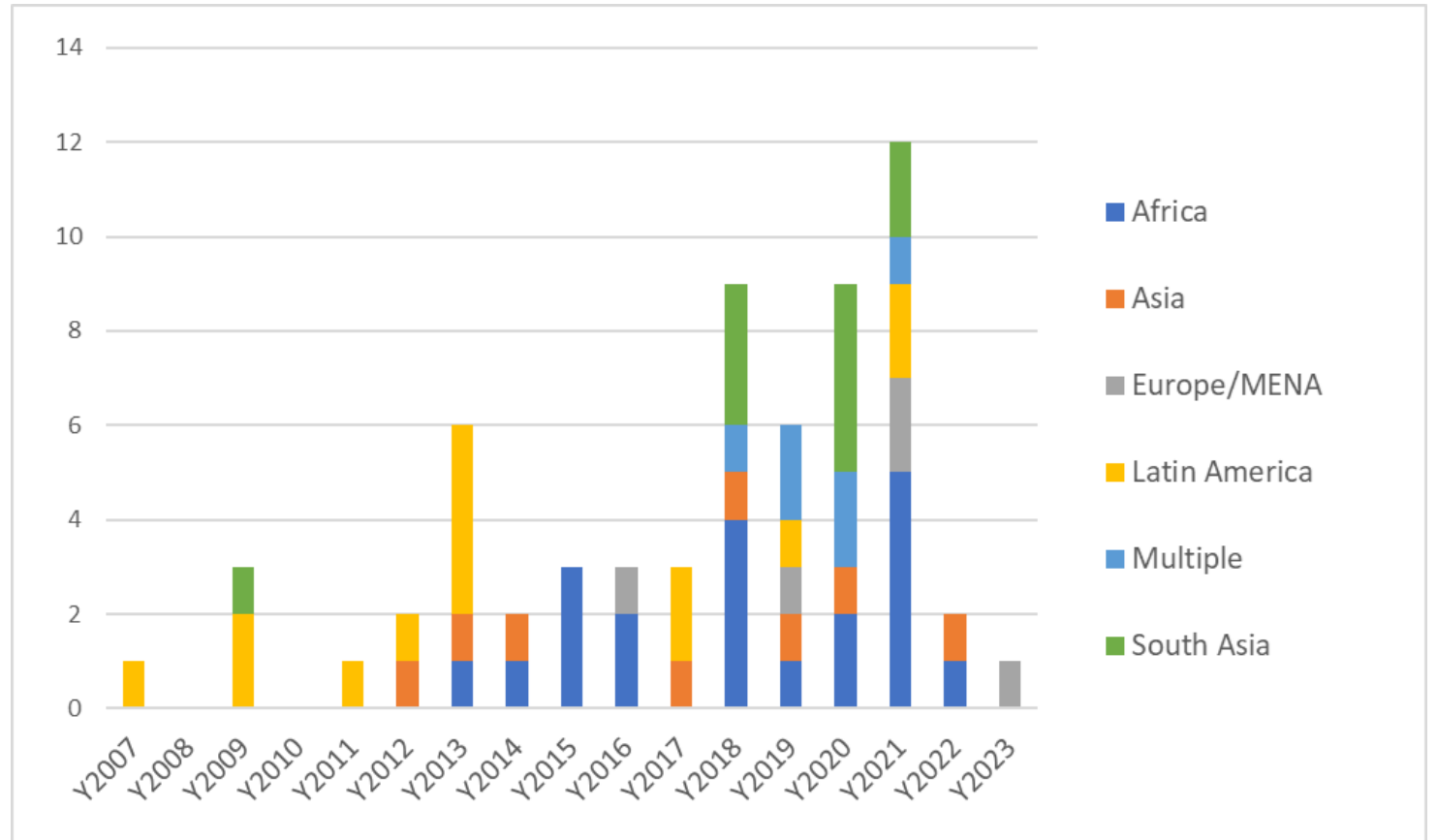
# PRELIMINARY FINDINGS



# FINDINGS

## Studies over time

- The number of mobile phone surveys measuring RMNCAH&N indicators has risen dramatically over the last decade, first in Latin America and now globally
- While the COVID-19 pandemic increased the frequency of mobile phone surveys, the rise in MPS has been evident since at least 2012-2013

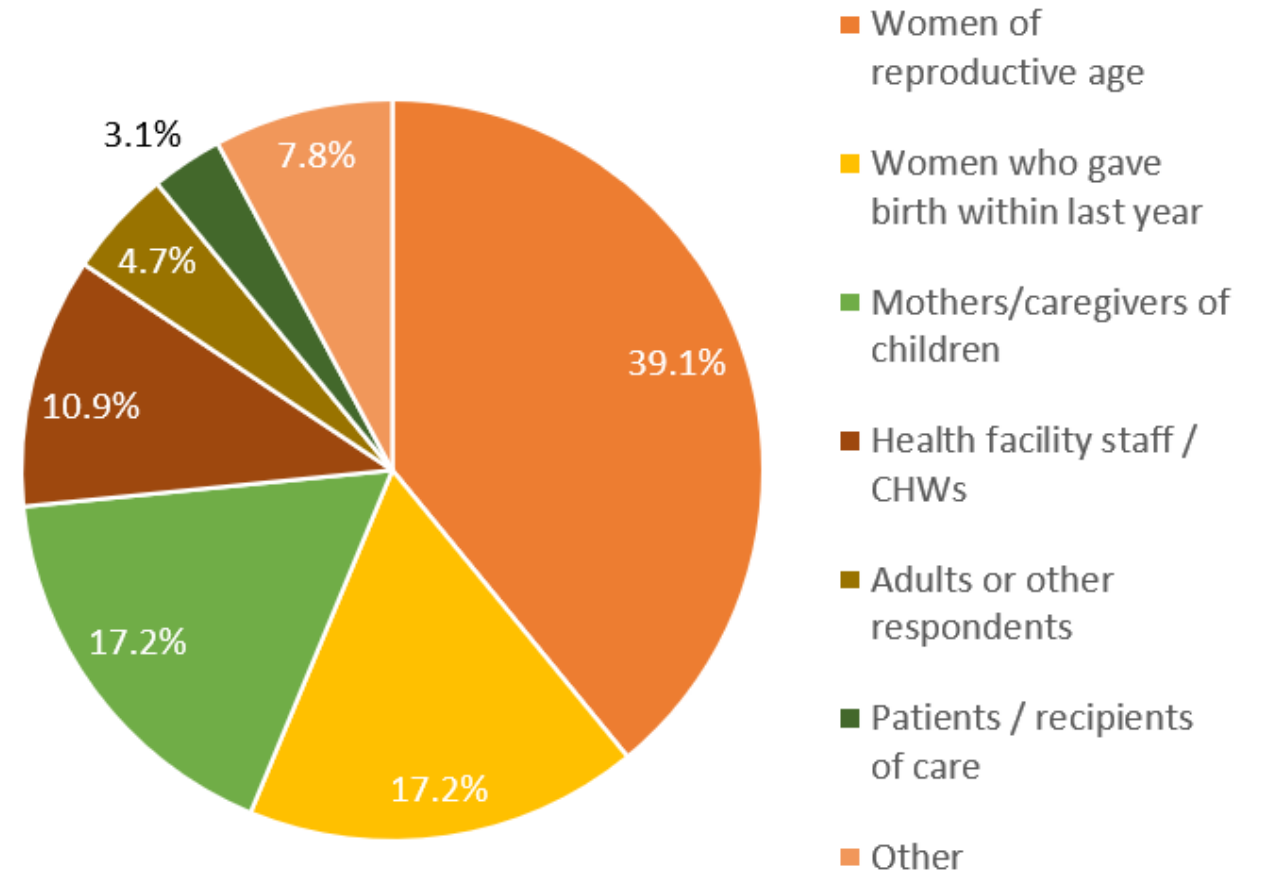


# FINDINGS

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## Target population

- Among the 64 RMNCAH&N papers selected, we found that over half focused on women, either of reproductive age (39.1%) or who gave birth in the last year (17.2%)
- Mothers/caregivers and health facility staff were the next most common category
- Most RMNCAH&N surveys did not start with a population wide focus but instead found specific ways to identify mothers or other relevant groups

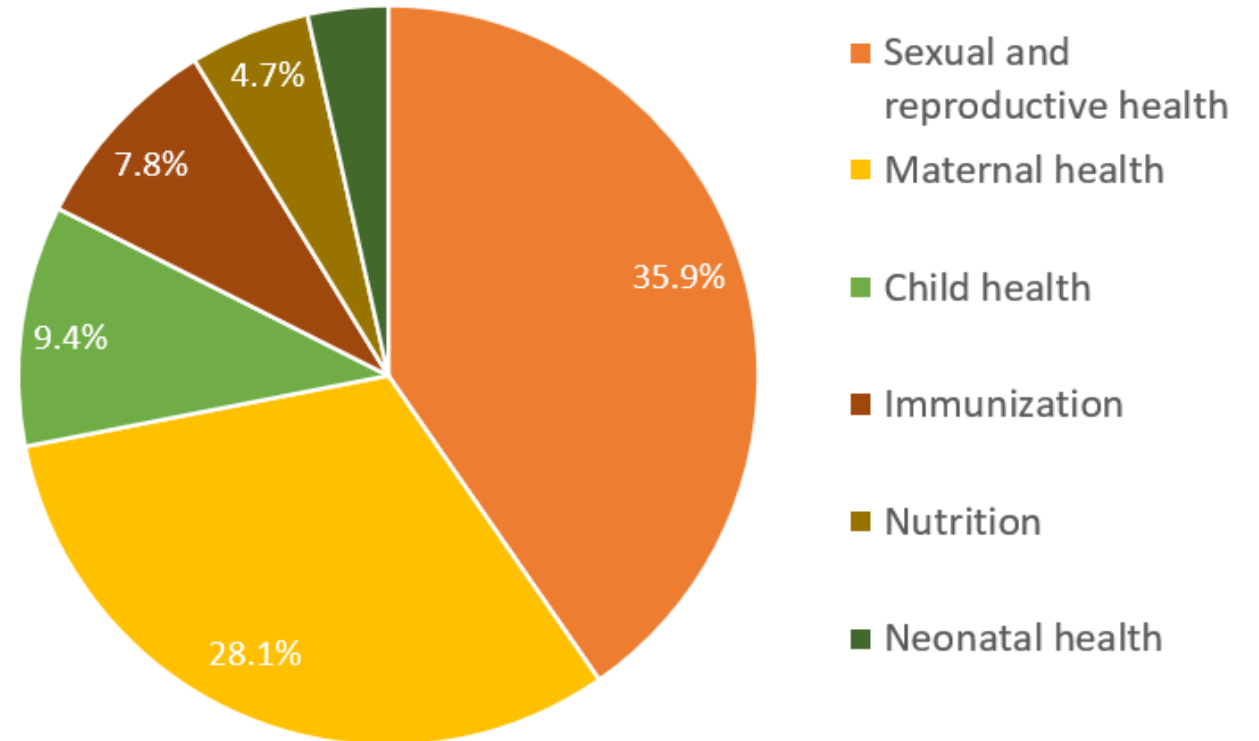


# FINDINGS

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## Health topic

- The predominant topics were sexual and reproductive health (35.9%) and maternal health (28.1%)
- Child health, nutrition, and routine childhood immunizations were much less frequently measured via phone surveys

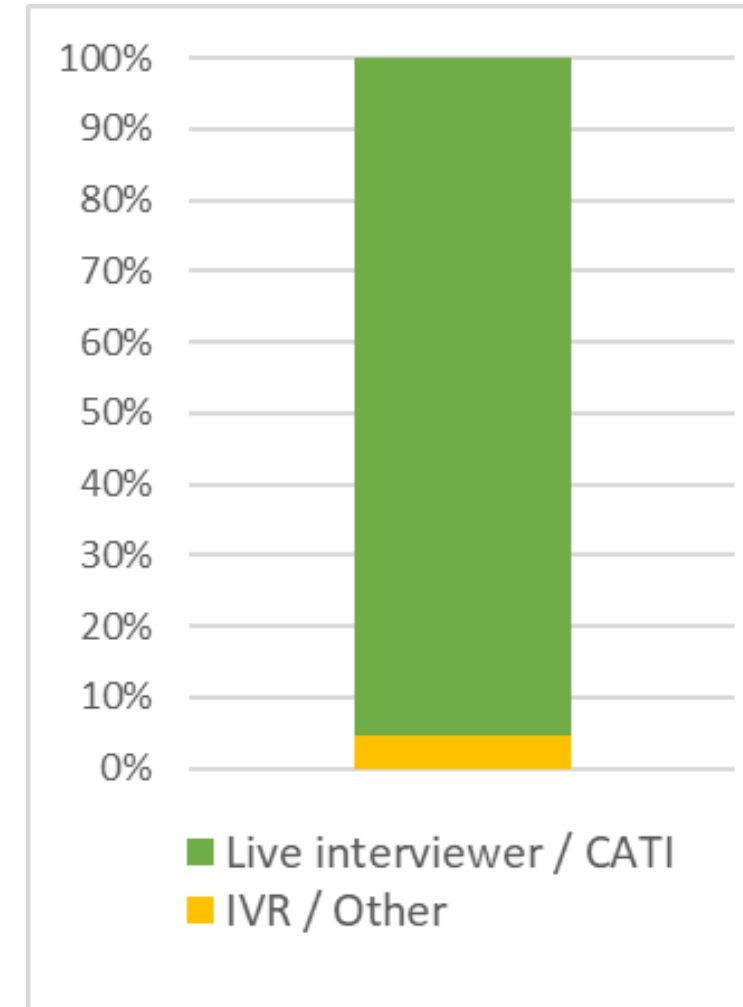
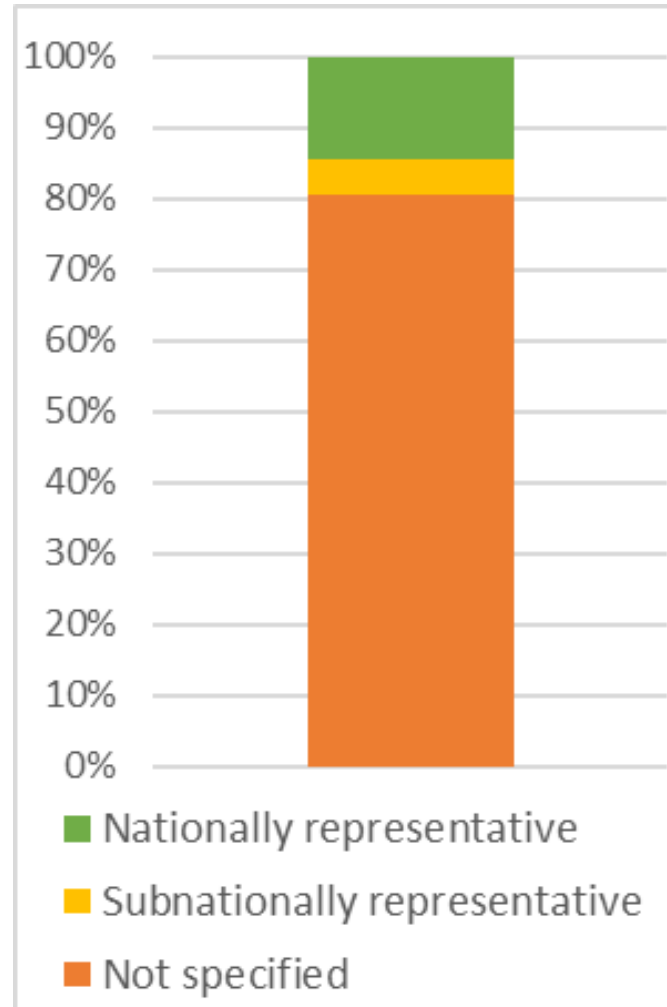


# FINDINGS

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## Representativeness and modality

- A minority of studies were nationally representative (15%) or sub-nationally representative (5%)
- The vast majority of surveys (95%) used a live interviewer or CATI, with IVR used in only a few cases

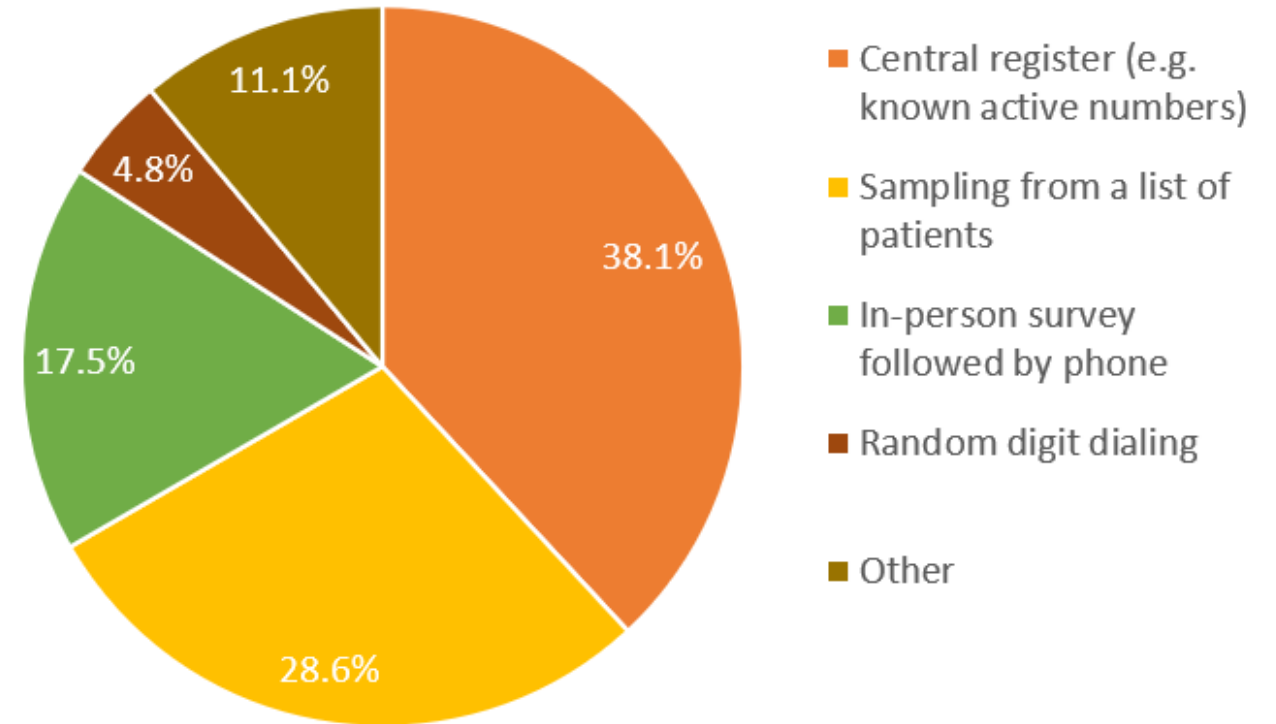


# FINDINGS

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## Sampling method

- Most surveys sampled numbers from a sampling frame, using a variety of frames, e.g.,
  - Lists of active phone numbers from telecom providers
  - Lists of numbers from prior studies
  - Lists of patients
- Random digit dial (RDD) was an uncommon method for RMNCAH&N surveys, potentially due to the specific target group needed



# CONCLUSION AND NEXT STEPS



# DISCUSSION AND NEXT STEPS

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- To our knowledge, our study is the first to document the current extent of mobile phone surveys of RMNCAH&N and to review how these surveys are implemented
- RMNCAH&N mobile phone surveys have 1) increased in frequency over time, 2) focused primarily on maternal and reproductive health, and 3) used a range of sampling frames
- We will continue to analyze the review data including looking at indicator types, and will conduct a narrative review of papers that address methodological questions for MPS
- The goal is to inform the research agenda coming out of this convening, helping provide evidence for some of the topics under discussion