

Impact booster Human-centered design to adapt and inform an integrated chronic disease management program in Uganda using mobile payment services (IMPEDE-CVD)

Project Report

Report by the IMPEDE CVD study team on 31-01-2024, E-Mail: Jonas.wachinger@uniheidelberg.de (Heidelberg Institute of Global Health), johnboscontambara@gmail.com (ACCESS Uganda)

GLOHRA Partner: Charité - Universitätsmedizin Berlin, Germany; Universitätsklinikum Heidelberg, Germany & mTOMADY gGmbh

LMIC Partner: ACCESS Uganda & Makerere University, Uganda

Countries: Uganda & Germany

1. Project Summary

Hypertension is a key risk factor for several cardiovascular diseases, and its prevalence is rapidly increasing in many sub-Saharan African countries, including Uganda. However, long-term availability of antihypertensive medication is often limited and out-of-pocket expenditure is high. In the overarching IMPEDE-CVD project, a team from the African Community Center for Social Sustainability (ACCESS) and Makerere University, Uganda, and the Charité Berlin, the social enterprise mTOMADY, the Technical University Munich, and the Heidelberg Institute of Global Health in Germany have developed a mobile money-based intervention for community-based hypertension medication financing. Building on a human-centered design approach, we have designed the intervention prototype together with clients, including patients, healthcare providers, and other stakeholders, in the Nakaseke district in rural Uganda.



As part of this booster funding, we were able to expand our research team by including professionals from both the social sciences and public health across genders and career stages. We also broadened the clinical and technical expertise of the implementation team by recruiting



community health workers to support prototype rollout, and by partnering with a local enterprise for integrating the mobile platform into telecommunication networks. Additionally, we conducted several outreach and hypertension screening activities in local communities to facilitate linkage to care and increase prototype client base. Finally, we disseminated our approach and preliminary results via national-level activities and events, and organized one dissemination workshop with local and national policymakers and key stakeholders which was broadcasted on national television. Further result dissemination activities are planned once the analysis of intervention pilot-testing data has concluded. We are happy to discuss our experiences regarding the role of diverse research teams, community engagement, and dissemination activities beyond common scientific channels to gather feedback, refine interventions, and facilitate longer-term sustainability and scale-up with GLOHRA members and the broader global health community.

2. List of materials and publications produced

- IMPEDE-CVD protocol publication: http://dx.doi.org/10.2196/46614
- TV-coverage of dissemination workshop: https://www.youtube.com/watch?v=cwzolibyWCc

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