Polio Mobile Money Implementation in Africa

World Health Organization
REGIONAL OFFICE FOR Africa

WHO AFRO Digital Payments Strategy

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GLOBAL CONTEXT

- As part of its mandate, WHO provides technical, operational and logistical support to help the government implement large-scale public health activities, including mass vaccination campaigns to prevent or respond to outbreaks of vaccine-preventable diseases (polio, yellow fever, measles, cholera, etc.). In this context, WHO transfers funds to the Ministry of Health to cover various categories of operational costs, including compensation for beneficiaries, rental of means of transport, fuel, rental of rooms, etc. mainly in cash.

- Recent developments in the international environment in terms of regulations related to the use of cash in humanitarian aid, the overall the operational challenges inherent in cash-based interventions require an evolution of the current model.

- The spread of COVID-19 and other health emergencies such as Ebola in the African region, highlights the urgency to implement contactless digital payment solutions and promote its use by health and community workers who, risking their lives, administer lifesaving vaccines and treatments to our communities.

- In addition, Sub-Saharan Africa occupies a dominant position in digital financial services and mobile money with 469 million accounts (nearly 50% of the global total) and 1.3 billion USD in daily transactions (i.e. 2/3 of the total). worldwide). The sector is experiencing very strong growth with 50 million accounts created in 2019, and a 27.5% growth in transaction amounts during the same period.

- Faced with this observation, the WHO regional office for Africa is committed to introducing the use of digital payments as a specific area of its operational support to the 47 countries in the region. The overall goal is to leverage sub-Saharan Africa's comparative advantage in mobile money to address the challenges listed above. In this context, a letter was sent in 2020 by the Regional Director of WHO to the 47 Ministers of Health of the Africa region to inform them of this initiative.

WHO AFRO is transitioning to digital payment starting with the polio eradication program

With the current cVDPV2 pandemic and its velocity to spread, the WHO is promoting and transitioning to the use of digital payment systems for health interventions across regions. In line with the WHO global strategy on digital health, WHO AFRO in 2020 initiated efforts to digitize payments for polio campaign workers beginning implementation in 14 priority countries.

Polio outbreak response campaigns in the past have been delayed or poorly implemented across African countries due to challenges with sending complete funds to frontline beneficiaries like vaccinators and supervisors implementing campaigns on time.

This posed a threat to the overall Polio eradication effort and thus necessitated implementation of targeted solutions to address identified gaps

WHO AFRO identified specific issues with the payment of campaign workers…

- **Delayed disbursement of funds** to operational levels, resulting from challenges with bank transfer or cash out at local banks
- **Lack of transparency** resulting in leakages and inefficiencies
- **Numerous layers of funds transfer** resulting in bureaucracy and duplicate processes
- These issues led to **demotivated campaign workers and difficulty in hiring and retaining** good campaign workers

… and used these issues to guide the development of a solution with clear objectives

- **Design and implement a digital payment system** to reduce lag time and ensure timely payment of funds to polio campaign frontline workers
- Ensure **direct payment of campaign workers** with little to no leakage of funds
- Build **evidence through research and document processes** to be scaled up to other countries, and other public health interventions

Though the WHO currently implements the Direct Disbursement Mechanism, a more agile approach that makes payments rapidly, in full and conveniently is required to meet the goal of a rapid response to outbreaks in the countries.

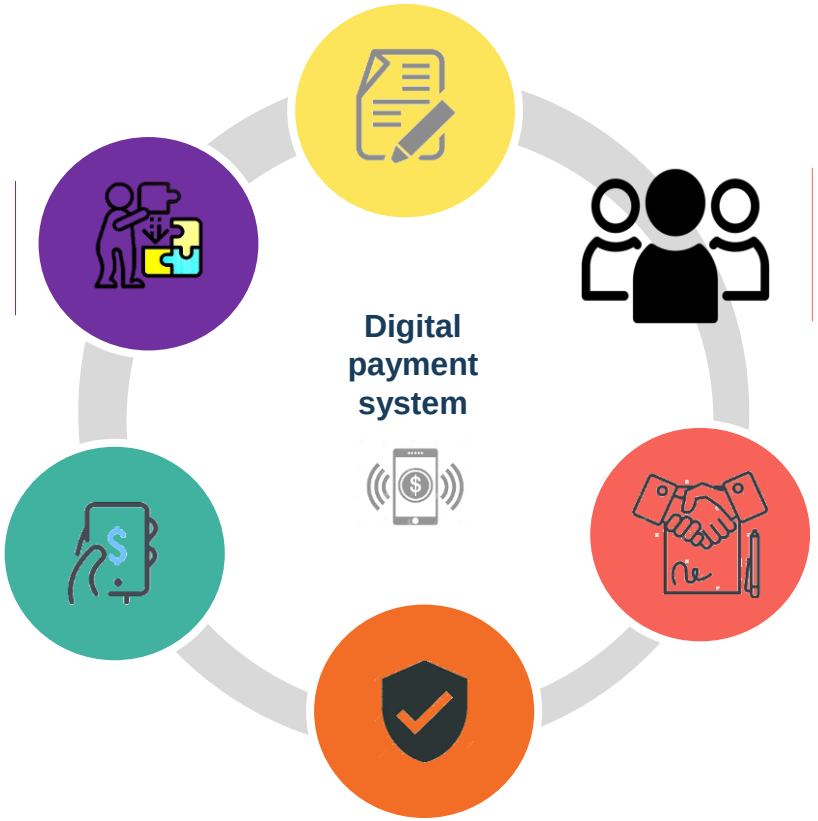
Source: WHO AFRO

Internal

WHO AFRO digital finance team designed a system with clear components to guide implementation in the demonstration countries

Develop & manage beneficiary database and train campaign workers about digital payment

Post campaign worker surveys and continuous improvement



Set up a national task force

Pay health workers

Engage digital payment service providers

Verify campaign workers activities

Source: WHO AFRO Digital Finance Team

Internal

The digital payment system was implemented in three phases in the demonstration countries

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01 Pre-campaign phase

- Conduct advocacy visits to the MoH and scoping of the country
- Engage digital payment service providers
- Set up a national taskforce
- Develop & manage beneficiary database and train campaign workers about digital payment

02 Campaign Implementation

- Report work done by campaign workers daily
- Verify campaign workers activities

03 Post-campaign phase

- Make payments to campaign workers
- Survey campaign workers and make improvements for next campaign
- Follow up on exceptions
- Reconciliation of accounts
- Continuous database maintenance

Source: WHO AFRO

Internal

WHO AFRO has officially signed 34 contracts with MNOs across 15 countries

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COUNTRY	MNO
Burkina Faso	Orange Money, Moov & Yup
Cameroon	MTN & Orange
Ghana	MTN & Vodafone
Liberia	MTN & Orange
Democratic Republic of Congo	Airtel, Vodacom & Orange
Sierra Leone	Africell & Orange
Mali	Orange & Wizall
Gambia	Africell & Qcell
Cote d'Ivoire	MTN & Orange
South Sudan	LEM, Ecobank & Alphabank
Malawi	Airtel& TNM
Republique of Congo	MTN & Airtel
Tanzania	Vodacom & Tigo
Madagascar	Airtel, Mvola & Orange
Botswana	Mascom & Orange

Internal

ACL Robotics tool was used in to manage the payment process

Key Objective:
Provide data analytics services to WCOs within the context of the health workers payments digitization project to ensure that the database contains quality data (completeness, accuracy, validity...) and payments are made to beneficiaries in a rapid and accurate manner in accordance with the agreed upon KPIs

1

Prepare/Collate Data
Prepare the data to be shared as the Attendance Register per District; Collate completed attendance register received from the Districts.

2

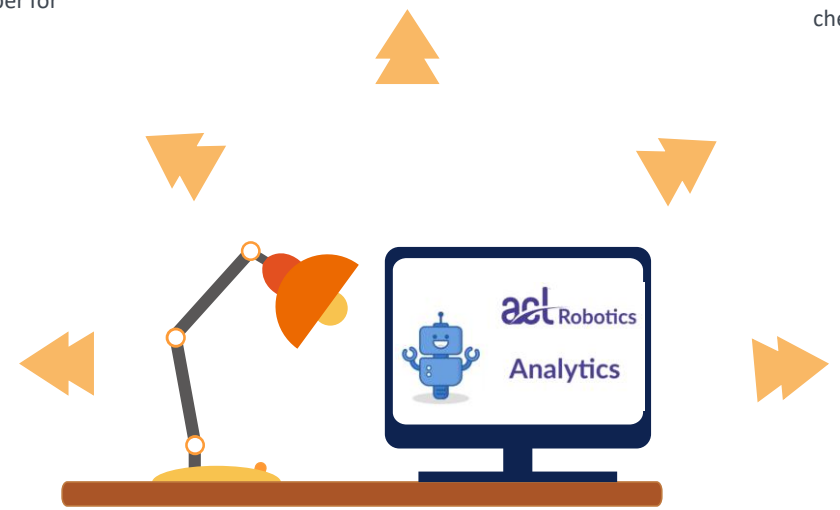
Normalize the data
Extract volunteers who worked; Standardize the workers category ; Clean and verify the telephone number for correctness, etc.

3

Perform Analytic checks
Check for blank critical fields and duplicated data.

4

KYC Check
Send data to the MNOs for KYC Check; Perform Name Match check on the data from KYC.

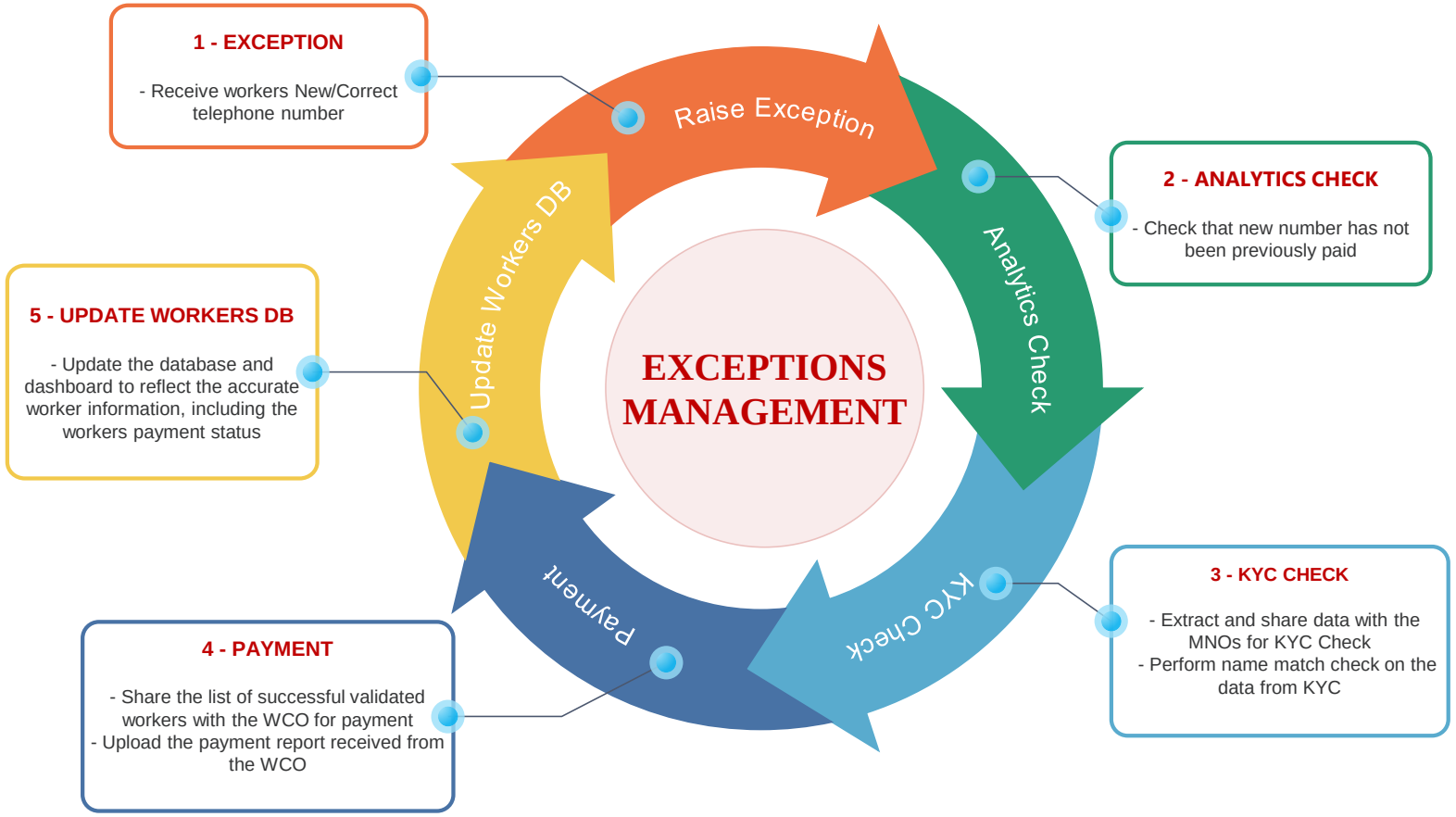


5

Payment & Update DB
Send a list of successfully validated workers with the WCO for payment; Upload the payment report received from the WCO; Update the database and dashboard to reflect the accurate workers information

Internal

Exceptions Management Process



Internal

Power BI interfaces developed to manage and track the data collection and payment process

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Round 4 Polio Vaccination Campaign

Registration & Attendance submission

PAYMENT STATUS

Status	_REGISTRATION	ATTENDANCE	COUNCIL_MONITOR
Submitted	226	226	195
Not Submitted			31

Updated on
28 Dec 2022 at 09:03:34 AM

Category
- ☐ Council
- ☐ Region

REGION: All

COUNCIL: All

Attendance_Status
- ☐ Submitted

LEVEL	REGION	COUNCIL	REGISTRATION	ATTENDANCE	COUNCIL_MONITOR
Council	KASKAZINI PEMBA	WETE DC	Submitted	Submitted	Submitted
Council	NJOMBE	WANGINGOMBE DC	Submitted	Submitted	Submitted
Council	TABORA	UYUI DC	Submitted	Submitted	Submitted
Council	KIGOI				
Council	SHIN				
Council	TABO				
Council	MOR				
Council	MWA				
Council	DAR E				
Council	RUVU				
Council	SONG				
Council	DAR E				

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REGISTRATION & ATTENDANCE

Round 4 Polio Vaccination Campaign - *Payment status*

Updated on 24 Mar 2023 at 3/24/2023 ...

REGION: All | COUNCIL: All | PROVIDER: All | STATUS: All

Search Worker by Phone Number: Search

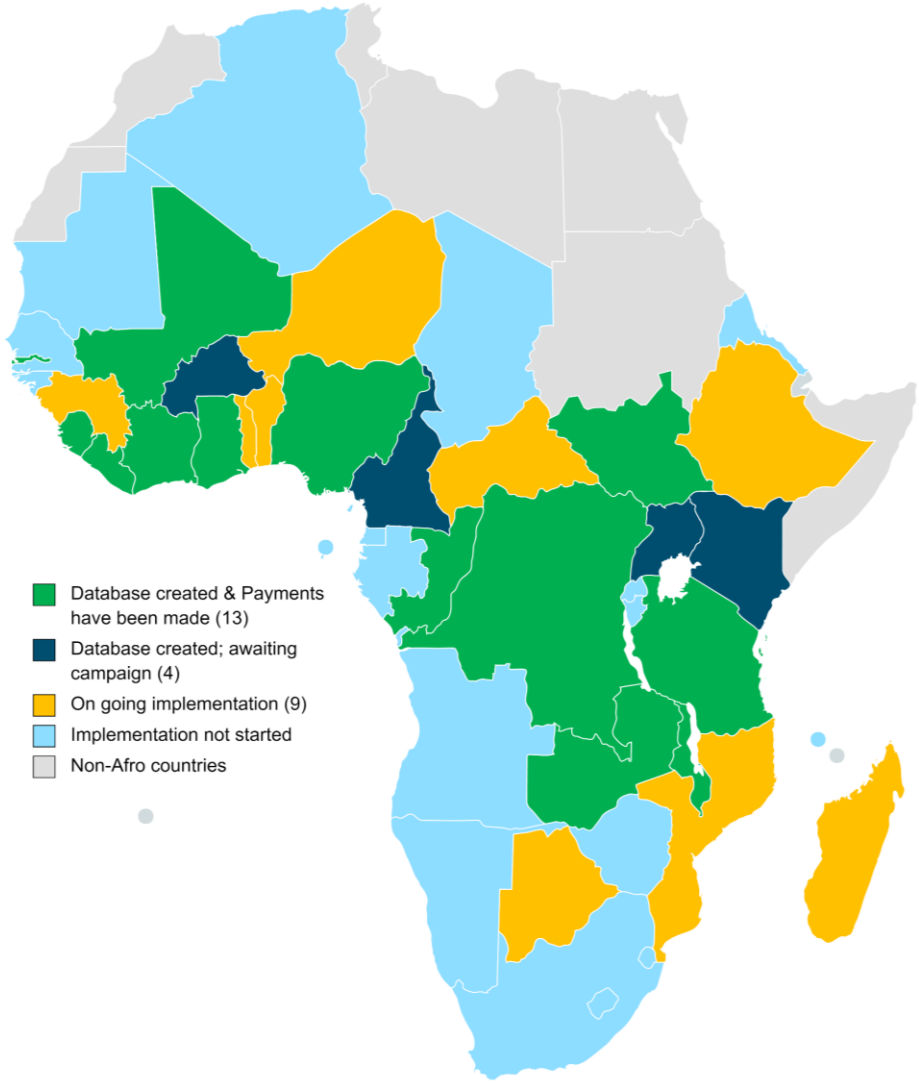
Search Worker by Name: Search

Total Workers =84,412; Cash-out fees=436,337,153; Amount to Pay=16,051,353,651; Workers paid=84,341; Amount Paid=16,040,668,887

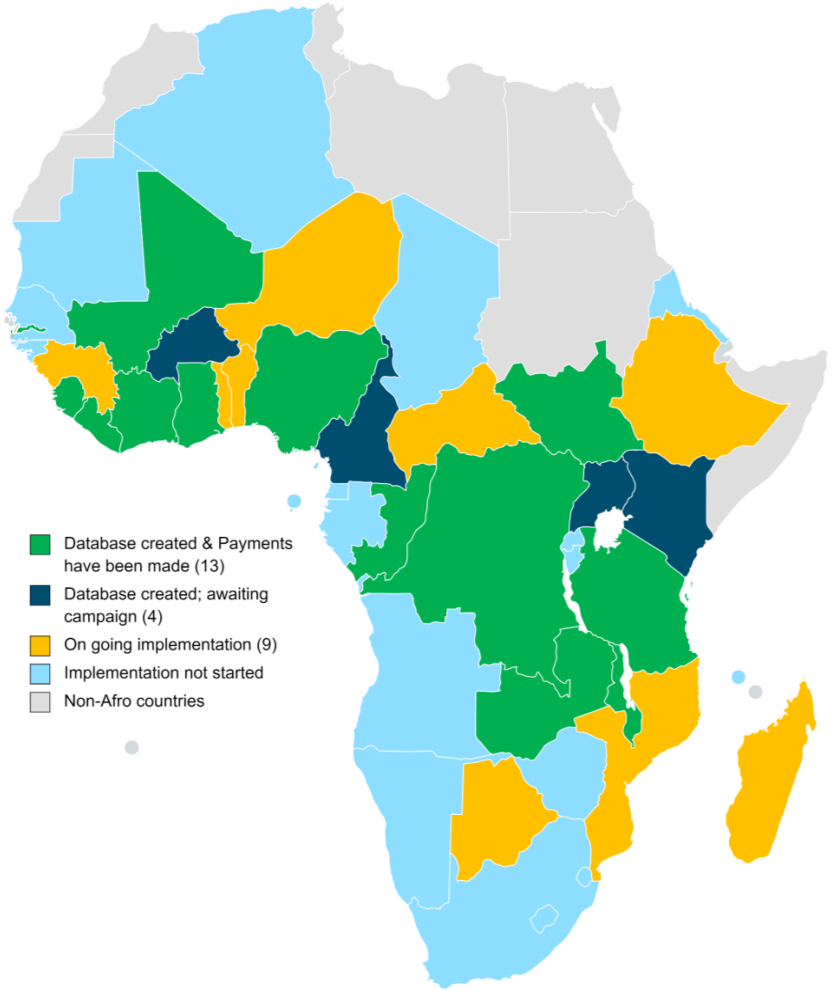
#	REGION	COUNCIL	TITLE	FULLNAME	GENDER	PHONE	PROVIDER	TRAINING	WORKED	AMOUNT	SENT (DATE)	STATUS
1	ARUSHA		DATA MANAGER	TARIMO AGRIPINA	F	0754244868	VODACOM	0	6	367,897	06-Dec-22	Paid
18	ARUSHA		DRIVER (DISTRICT)	KELVIN KELVIN	M	0742114514	VODACOM	0	8	1,051,751	08-Dec-22	Paid
13	ARUSHA		DRIVER (DISTRICT)	LUKAYA DOUGLAS	M	0767418166	VODACOM	0	8	1,051,751	08-Dec-22	Paid
15	ARUSHA		DRIVER (DISTRICT)	MBAJA LEO	M	0756730836	VODACOM	0	8	1,051,751	08-Dec-22	Paid
5	ARUSHA		DRIVER (DISTRICT)	MSUYA HASSAN	M	0766284128	VODACOM	0	8	1,051,751	06-Dec-22	Paid
8	ARUSHA		DRIVER (DISTRICT)	NTENGASI MATATA	M	0785755886	AIRTEL	0	8	1,051,751	06-Dec-22	Paid
16	ARUSHA		DRIVER (DISTRICT)	RAMADHANI HABIBU	M	0753941822	VODACOM	0	8	1,051,751	08-Dec-22	Paid
10	ARUSHA		DRIVER (DISTRICT)	SAFIEL RAMADHANI	M	0746202790	VODACOM	0	8	1,051,751	06-Dec-22	Paid
23	ARUSHA		DRIVER (REGIONAL)	BALTAZARY ADAM	M	0755864280	VODACOM	0	2	134,659	03-Jan-23	Paid
14	ARUSHA		DRIVER (REGIONAL)	BALTAZARY ADAM	M	0755864280	VODACOM	0	8	529,575	21-Dec-22	Paid

Current State of Digital Payments in AFRO (1/2)

- Over **one million workers** have been registered and **+ 577,000 workers paid** via mobile money during polio campaigns since project launched in September 2020.
- Project has been deployed in **18 countries** with payments executed via mobile money in **14 countries** (Côte d'Ivoire, Mali, Ghana, The Gambia, Liberia, Sierra Leone, Congo, South Sudan, Malawi, DRC, Botswana, Zambia, Nigeria and Tanzania).
- Implementation currently ongoing in **7 countries** (Zimbabwe, Togo, Burkina Faso, Madagascar, Benin, Rwanda and Burundi).



Current State of Digital Payments in AFRO (2/2)



#	Countries	Database Size	Beneficiaries Paid via Mobile Money	Impl. Scope	Time to pay 90% of workers
1	Bostwana	2,262	1,982 (R1) – 1,292 (R2)	27 Districts (R1)	-
2	Burkina Faso	84,344	-	-	-
3	Cameroon	77,661	-	-	-
4	Congo	4,573	**1,800** (R1) - **2,773** (R2)	2 Regions	**6d**
5	Côte d'Ivoire	65,437	**19,354** (R1) - **23,822** (R2) -**1,791** (R3) - **7,902** (2022 R1) - **8,061** (2022 R2)	Nationwide (R1) -Nationwide (R2) - 4 districts (R3) - 32 districts (2022 R1) - 32 districts (2022 R2)	**11d** (R1) -**5d** (R2) - **1d** (R3) - **6d** (2022 R1) - **4d** (2022 R2)
6	DR Congo	208,882	**2,872** (R1) - **10,491** (R2) – **15,267** (2023-R1)	5 provinces (R1) - 3 provinces (R2) – 6 provinces (2023-R1	**4d** (R1), **15d** (R2)
7	Gambia	6,784	**1,832** (R1) - **2,098** (R2)	Nationwide	**7d** (R1) - **5d** (R2)
8	Ghana	1,100	**1,100** (R2)	5 districts	**3d**
9	Kenya	40,811	-	-	-
10	Liberia	14,662	**6,460** (R1) - **6,989** (R2)	Nationwide	**10d** (R1) - **6d** (R2)
11	Malawi	21,687	**6,772** (R1) - **10,166** (R2) - **19,287** (R3) - **21,687** (R4)	11 districts (R1) - 17 districts (R2) - 29 districts (R3 & R4)	**5d** (R1), **3d** (R2), **0d** (R3&R4)
12	Mali	53,532	**3,764** (R1 2020) - **53,532** (R2 2020) - **8,086** (2021 R1) - **14,222** (2021 R2)	8 districts (R1 2020) - 24 districts (R2 2020) - 12 districts (2021 R1) - 46 districts (2021 R2)	-
13	Nigeria	165,807	**20,754** (R1) - **44,346** (R2) - **42,526** (R3) - **51,846** (2023 R2)	1 state (R1) - 6 states (R2) - 6 states (R3) - 6 states (2023 R2)	**10d** (R1) - **6d** (R2) - **4d** (R3) - **15d** (2023 R2)
14	Sierra Leone	11,599	**4,103** (R1) - **3,851** (R2) - **1,732** (R3)	8/16 Districts	**17d**
15	South Sudan	7,495	**3,444** (R1)	9/85 Districts	**21d**
16	Tanzania	84,402	**65,683** (R3) - **84,330** (R4)	Nationwide	**7d** (R3), **9d** (R4)
17	Uganda	179,949	-	-	-
18	Zambia	1,031	**978** (R4 WPV) - **246** (R1 NOPV)	Nationwide (R4 WPV) - 4 provinces (R1 NOPV)	**0d**
	Total	**1,032,018**	**577,241**		

Campaign workers accepted Mobile Money and shared their experiences

With the support of 60 Decibels, WHO AFRO surveyed workers post campaign to assess the impact the switch to digital payments had on worker satisfaction....

1,450 +

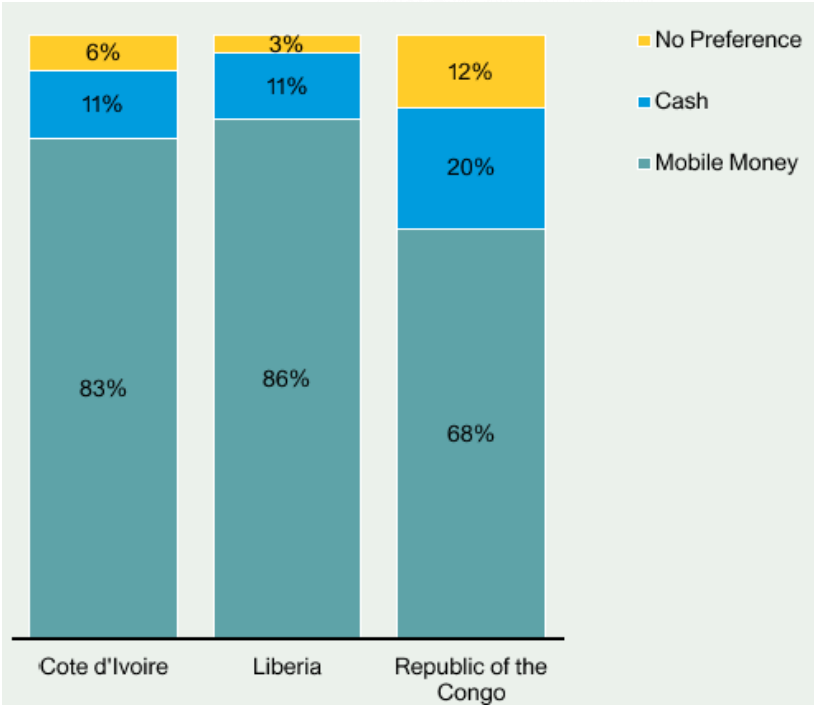
Vaccinators interviewed in:

- Cote d'Ivoire
- Liberia
- Congo

Key Takeaways

- Vaccinators see value in how secure this mode of payment is, and how easy and convenient it is to cash out payment
- Payment timelines are seen as improving over time- with payments taking lesser time in round 2 than in round 1
- Setting their expectations right by improving communication around payment timelines, amount and composition of payments can improve payment experience

Preferred mode of payment



"I found the payment to be quick with mobile money compared to the other campaigns before"

"I got the notification that the money was in my account, and I got it without any problem."

"Mobile money helps me keep the money safe and away from temptation of using it when not necessary."

There were key lessons to learn from implementing Mobile Money in focus countries

- **Engaging the government early on in the project was a good idea**. The Digital Finance Team began advocacy with the Ministry of Health in Cote d'Ivoire and the Democratic Republic of Congo from the design of the database. This encouraged ownership of Mobile Money implementation.

- **Government approvals must be gotten way before implementation.** In Mali, the Commcare app could not be used for campaign workers registration due to data privacy restrictions to store citizens data outside the country

- **Identification and engagement of Mobile Network Operators should be done early on** during the pre-campaign phase of implementation. In Cote d'Ivoire, there was a need to review the Service-level Agreement with Orange to capture confidentiality of data.

- **The use of Mobile Money enabled timely payments.** For example, in Cote d'Ivoire 60% of beneficiaries received payment on the last day of campaigns in round 3

- It is important **build staff capacity, explore approaches for simplifying CommCare or identify alternative capacities** at the subnational level that can work with supervisors to report attendance using CommCare for sustainability purposes

- **Documentation of processes, lessons learned and effectiveness of digital payments is critical to its expansion**. Experiences in Cote d'Ivoire guided implementation in Congo and DRC. A learning agenda will be developed to inform the design and implementation of similar interventions, and provide evidence for advocacy to decision makers

- Mobile Money showed other potential ways it could be used to **strengthen health systems like digitizing the workforce and financial reporting,** thereby reducing the chances of ghost workers, and leakages of funds

Internal

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Thank You.