

Assessing the Role of BornFyne-Prenatal Management System in Improving Data Availability for Malaria Risk Factors in Pregnancy in Cameroon

Armel Tasségnig - MPH(c) 1, Franck Wanda (MD) 1; Valery NGO (MD) 2, Donald Weledji (MSc) 3, Miriam Nkangu (PhD) 2,4
 1- Centre International de Recherches d'Enseignements et de Soins (CIRES) – Akonolinga ;
 2- Health Promotion Alliance Cameroon (HPAC)– Yaounde; 3- Donwel Systems; 4- Buyere Research Institute Ottawa;



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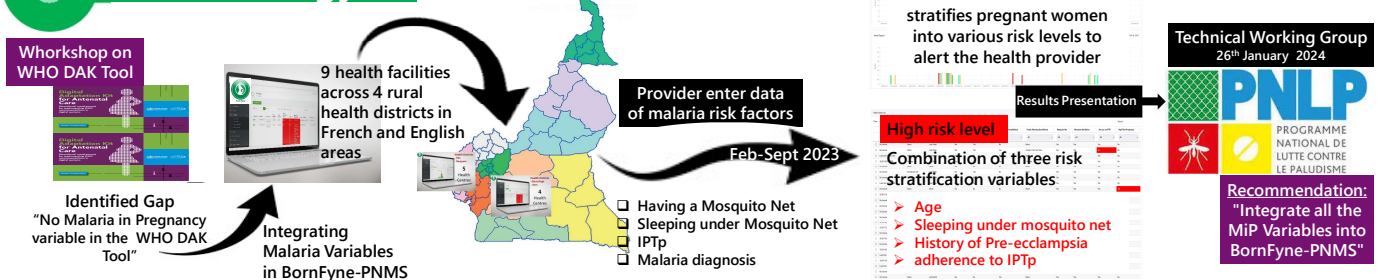
1 Background

Malaria morbidity in pregnancy is still very high in Sub-Saharan Africa especially in Cameroon. Data availability is important to inform interventions for malaria and intervention strategies. However, generating, reliable, actionable, and consistent data to inform malaria intervention and indicators and intervention is still a major issue in Cameroon.

2 Objective

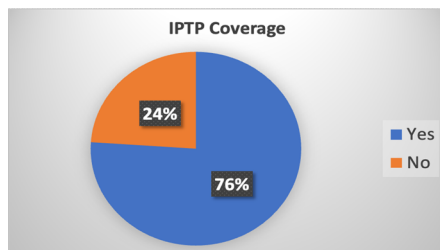
This pilot assessment study demonstrates the role of digital platforms in improving data on malaria prevention and management in pregnancy.

3 Methodology



4 Results

- **438 women** were enrolled across the **9 health facilities**.
- **Mean start month for ANC** by most women based on data collected was **4 months**.
- **81.05%** (355/438) reported to have mosquito net; **10.73%** (47/438) doesn't sleep under MN.
- **62.33%** slept under MN the day before the visit.
- **76.03%** were on IPTp.
- **8%** (35/438) were **high risk pregnancy**.



Graph 1: IPT_p Coverage



Graph 2: High risk pregnancy

5 Conclusion

Despite its High availability, pregnant women start ANC late, due to cost, distance, and quality. Some don't sleep under mosquito net as they have poor access and usage of it. Part of them don't receive IPTp highlighting the need of reinforcing surveillance and follow up; all what is made possible by the digital BornFyne PNMS that send alerts to health providers when there is data missing in patient's files.

BornFyne-PNMS digital platform is one of the first digital platform introduced at health facilities in rural settings to support health providers in using digital platform to deliver antenatal care and improve contact with Pregnant women.

Ongoing discussion with the malaria program in Cameroon for leverages the BornFyne PNMS to improve data collection for Malaria in Pregnancy (MiP) at health facilities during antenatal care.



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mngui058@uottawa.ca

<https://healthpromotionalliance.org>

