

Mobile VA technological advances and ethical priorities

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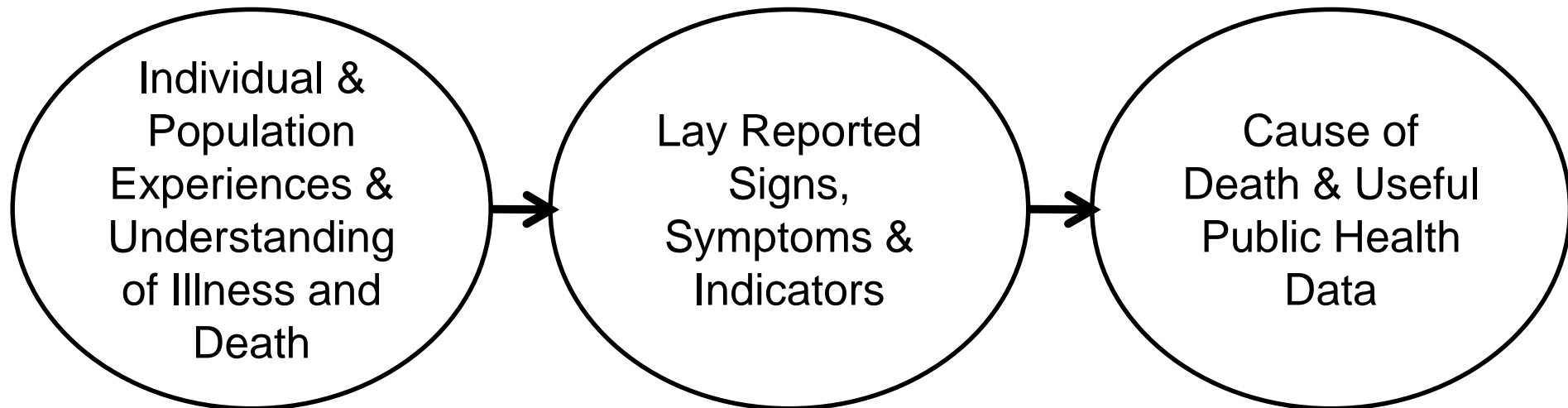


TOMBSTONES



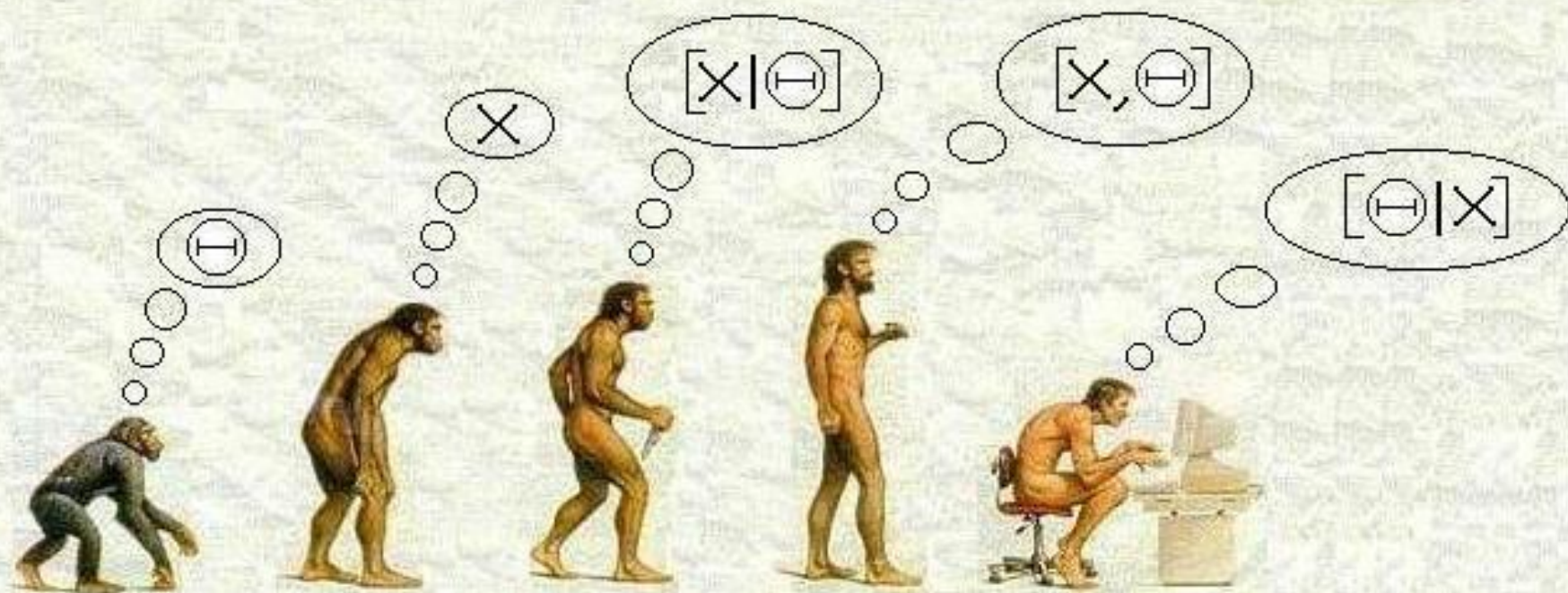








(YET ANOTHER) HISTORY OF LIFE AS WE KNOW IT...



HOMO APRIORIUS **HOMO PRAGMATICUS** **HOMO FREQUENTISTUS** **HOMO SAPIENS** **HOMO BAYESIANIS**

Global Congress on Verbal Autopsy Bali, Indonesia, February 2011

Automated methods perform as well as, and often better than physicians in determining cause of death from VA. They are also quicker, cheaper and more consistent.

CIVIL REGISTRATION
and VITAL STATISTICS
STAKEHOLDERS'
Meeting

SIMPLICITY FEASIBILITY ADAPTABILITY





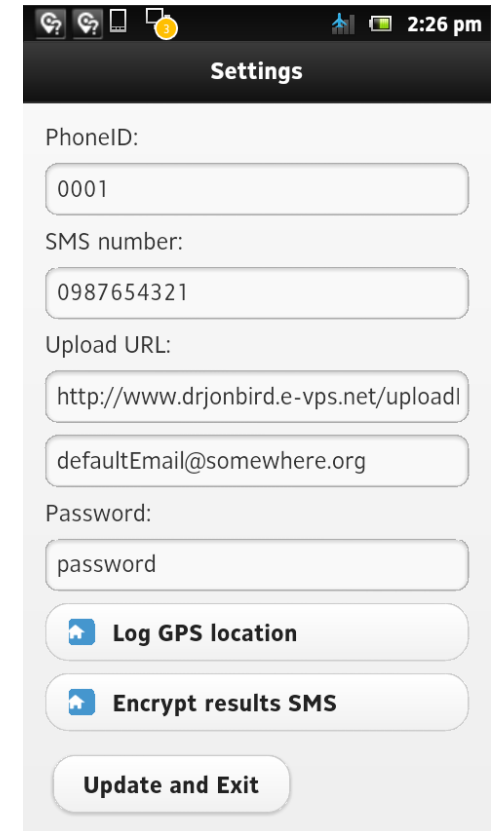
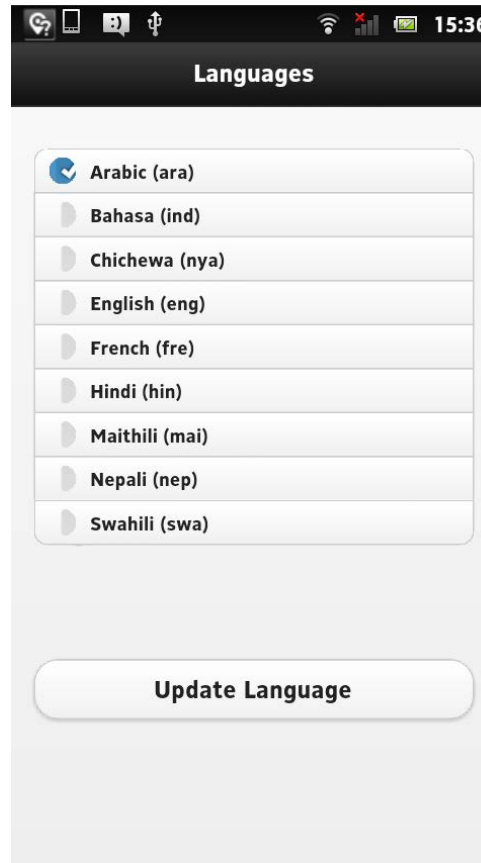
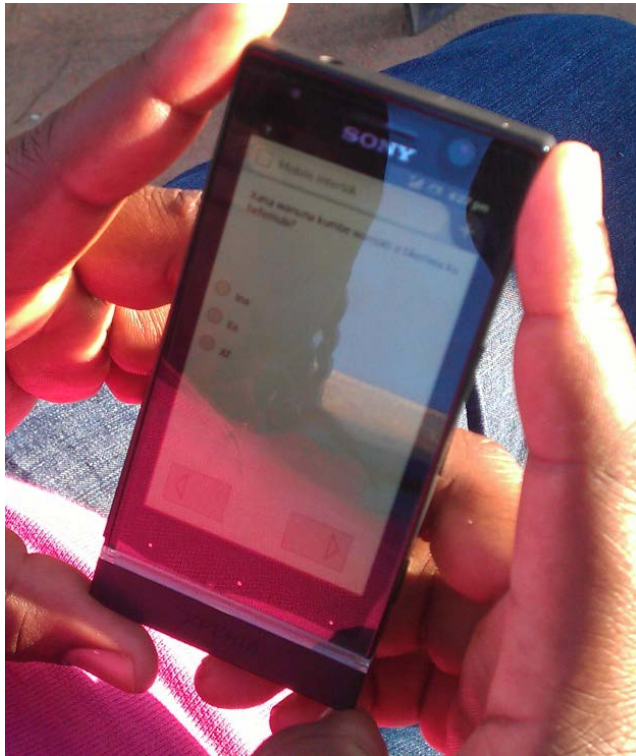
KANGARO PHONE CHARGING

MTN

MTN

SORC

MIVA – Mobile InterVA







OPEN DATA KIT



The Open History



General | Description | Accident/Assault | Illness | Pregnancy | Maternal death | Delivery | Baby Condition | General (> 2) (18-19) | General (all) (20) | General (<5) 20 | Lifestyle | Treatment

Death_ID:

Give the chronology of events that occurred during the illness period (or after the accident) leading to death. In case of special symptoms, ask the respondent to describe or mimic the symptom. Always specify the treatment received and the order in which events occurred.

The deceased experienced diarrhea and vomit after eating food. He was losing power. He consulted a private nurse. He was examined and referred to hospital. He was examined and admitted for treatment. He was released from hospital given a letter to collect tablets at clinic. He visited clinic many times to collect tablets. After treatment diarrhea stopped but vomit continued. Afterwards experienced hot body and difficult breathing. Then taken to a traditional healer. Traditional medicine was given but no improvement. He developed swellings around jaws. His lips change colour into reddish. He complained about headache. He consulted clinic. He was examined and given treatment. Headache was on and off. Difficult breathing and headache became worse then he died.

King et al. *BMC Medical Research Methodology* (2016) 16:13
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BMC Medical Research
Methodology

RESEARCH ARTICLE

Open Access

The quality and diagnostic value of open narratives in verbal autopsy: a mixed-methods analysis of partnered interviews from Malawi



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Abstract

Background: Verbal autopsy (VA), the process of interviewing a deceased's family or caregiver about signs and symptoms leading up to death, employs tools that ask a series of closed questions and can include an open narrative where respondents give an unprompted account of events preceding death. The extent to which an individual interviewer, who generally does not interpret the data, affects the quality of this data, and therefore the assigned cause of death, is poorly documented. We aimed to examine inter-interviewer reliability of open narrative and closed question data gathered during VA interviews.

Methods: During the introduction of VA data collection, as part of a larger study in Mchinji district, Malawi, we conducted partner interviews whereby two interviewers independently recorded open narrative and closed questions during the same interview. Closed questions were collected using a smartphone application (mobile-InterVA) and open narratives using pen and paper. We used mixed methods of analysis to evaluate the differences between recorded responses to open questions and closed questions, causes of death assigned and



Ethical Issues

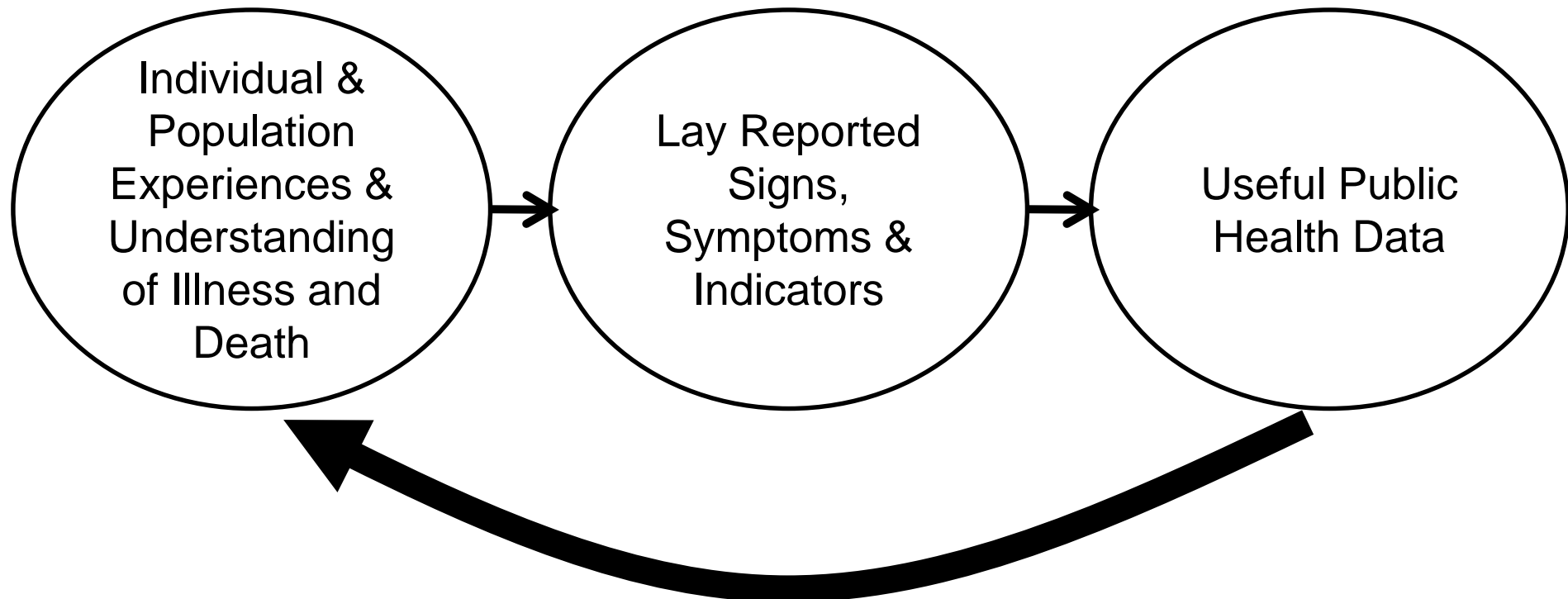


Privacy, consent, expectations, data use, regulation...
Research vs. routine implementation?

Ethical Issues



Privacy, consent, expectations, data use, regulation...
 Research vs. routine implementation?



Ethical Issues

C P
J H



Emotional distress

Varies by age

Repeated exposure to VA

Honour, shame & blame

Confidentiality?

Guilt & regret

Impact on data quality

Expectations of info., advice & service response

“Through people like you we can learn about our child’s death so that the same thing isn’t repeated for the next child” Female, FGD, neonatal death
 “If the cause of death given is upsetting because the person is already dead consider the people behind steps (stressed)” Male GD, adult death



Emerging Challenges

- Legal issues
- New contexts
- Security
 - Phone interviews?
- Co-ordination to avoid repeat interviews



Mobile VAs are...

- Feasible
- The most likely solution to cost-effective scale-up
- A new opportunity for timely health service response and public health intervention
- Starting to happen...so key ethical and operational issues need urgent attention