

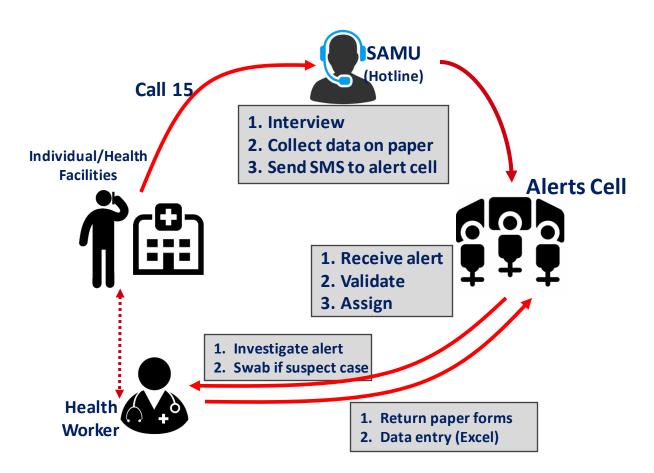


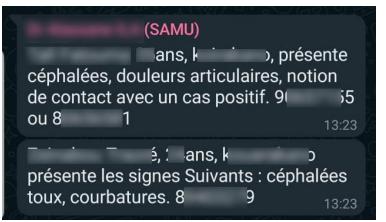


# Alerte Covid-19: an electronic platform for receipt and investigation of Covid-19 alerts in Niger

**Robert Nsaibirni**, Bachir Assao, Natalie Roberts

#### **Context – Earlier in 2020**





Sample SMS Alert from Hotline service to Alert Cell

#### **Inconveniences**

- 1. Paper based
- 2. Un-structured data collection
- 3. Long delays (SAMU -> Alerts Cell -> HW) (up to several days)
- 4. Limited (No) Security and Privacy
- 6. Impossible to ensure effectiveness and exhaustiveness of investigations
- 7. Not easily scaled (decentralized response)
- 8. Late diagnoses



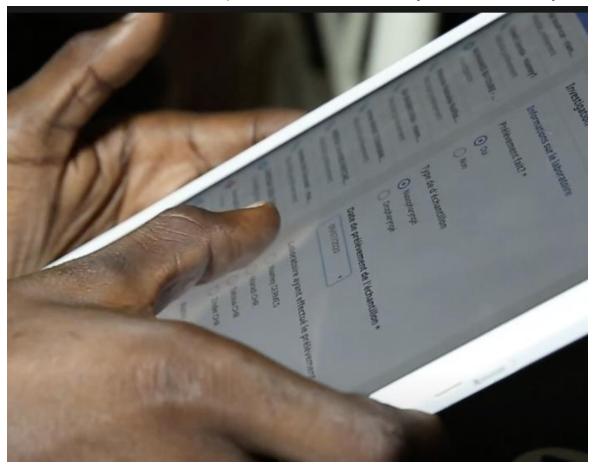


# **Objective**

Develop an **electronic tool** to improve the **receipt** and investigation of Covid-19 alerts in Niger.

- **Collect Structured data**
- **Increase investigations**
- Improve timeliness and completeness

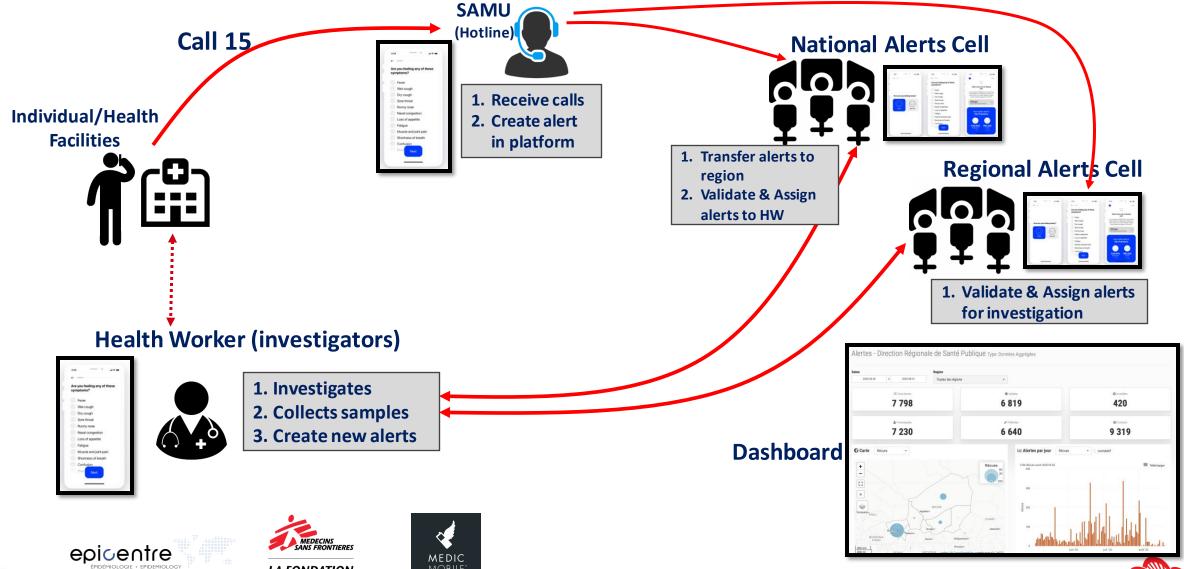
Alert-COVID19-NE (based on the Community Health Toolkit by Medic\*)



\*https://communityhealthtoolkit.org/



# Alert-COVID19-NE – How it works (1/2)











## Alert-COVID19-NE – How it works (2/2)

#### Flexible

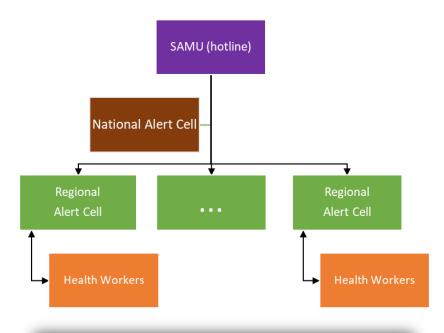
- User-centered
- Custom Org Chart and Workflow
- Adapting to change
- Offline usage

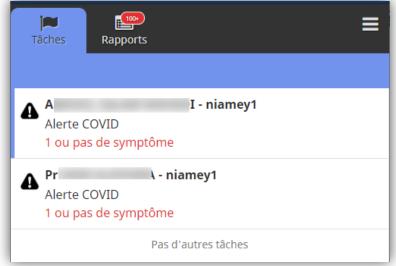
#### Ease of use

- Data driven task orchestration
- Not resource-intensive
- Intuitive

## Security and Privacy

- Access control
- Secured data transfers

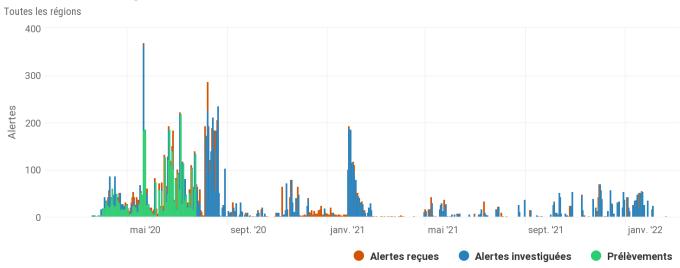




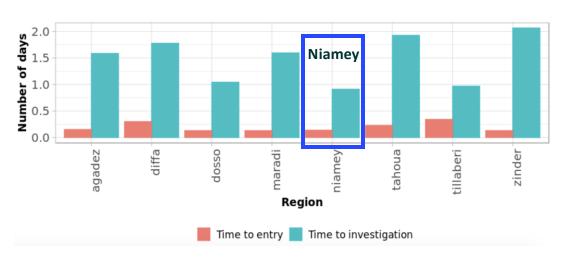


#### Results

#### **Alertes COVID-19 Niger**



## **Timeliness**



#### **Total Alerts**

- 6000 Alerts/day in Hotline\*
- 5% Covid-19 related
- Averagely 35 investigations/day
  - Up to 350 investigations during peak period

## Completeness (May 2020 – March 2022)

- 12,795 alerts received
- 11,535 investigated
- 10,799 samples collected

## Coverage

All 8 regions

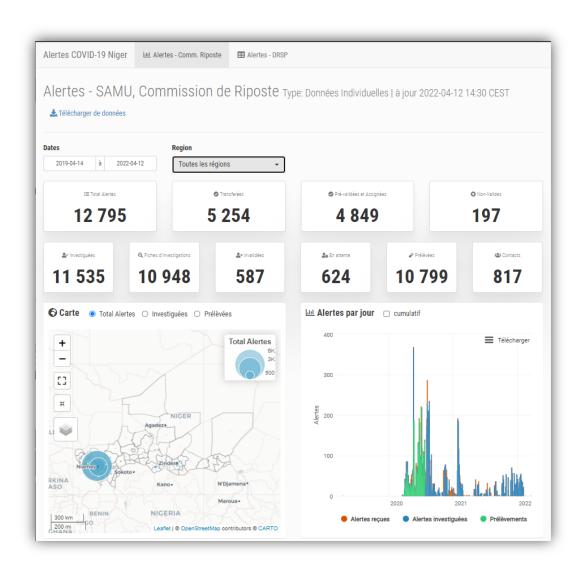


## **Conclusion/Perspectives**

- Implementation Ongoing
- Improved completeness and exhaustiveness of the investigations
- Earlier and more effective response by MoH & MSF

#### **Perspectives**

- Interoperability with national public health information system (DHIS2)
- Include surveillance of other Epidemic
  Prone Diseases (pilot phase ongoing) –
  Alerte-Niger





# **Conclusion/Perspectives – Alerte-Niger**

## **Alerte-Niger**

- Community Events-Based Surveillance
- CHWs and Peripheral Health facilities
- Implementation of Niger's EPD surveillance system

#### REGION **DISTRIC** Reception, Validation Community and Processing of alerts health Worker Reception, Validation and Processing of alerts Integration into dashboard available at the district, regional and national levels Tablet with **NATIONAL** internet access **PERIPHERA** Receives Alerts, Reception, Validation Verifies and validates and Processing of alerts investigations

#### **Pilot**

- Since November 2021
- Maradi Region (frontier with Northern Nigeria)
- 6 health structures/areas
- 3 pathologies
  - Cholera, Meningitis, and Measles



For more information: <a href="https://fondation.msf.fr/fr/projets/alerte-epidemies">https://fondation.msf.fr/fr/projets/alerte-epidemies</a>

EPD: Epidemic Prone Diseases CHW: Community Health Worker



## Thank You!

