





# Digitally-Enhanced Rapid Malaria Testing Using Artificial Intelligence (AI) to Support Quality Control with Community Health Workers in Rwanda

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- In Rwanda, 55% of all uncomplicated malaria cases seen are managed by community healthcare workers (CHWs).<sup>1</sup>
- Quality control tools for monitoring and management of CHW malaria rapid diagnostic test (mRDT) administration, interpretation accuracy, and treatment are **insufficient** and **inconsistent** across Rwanda.<sup>2</sup>

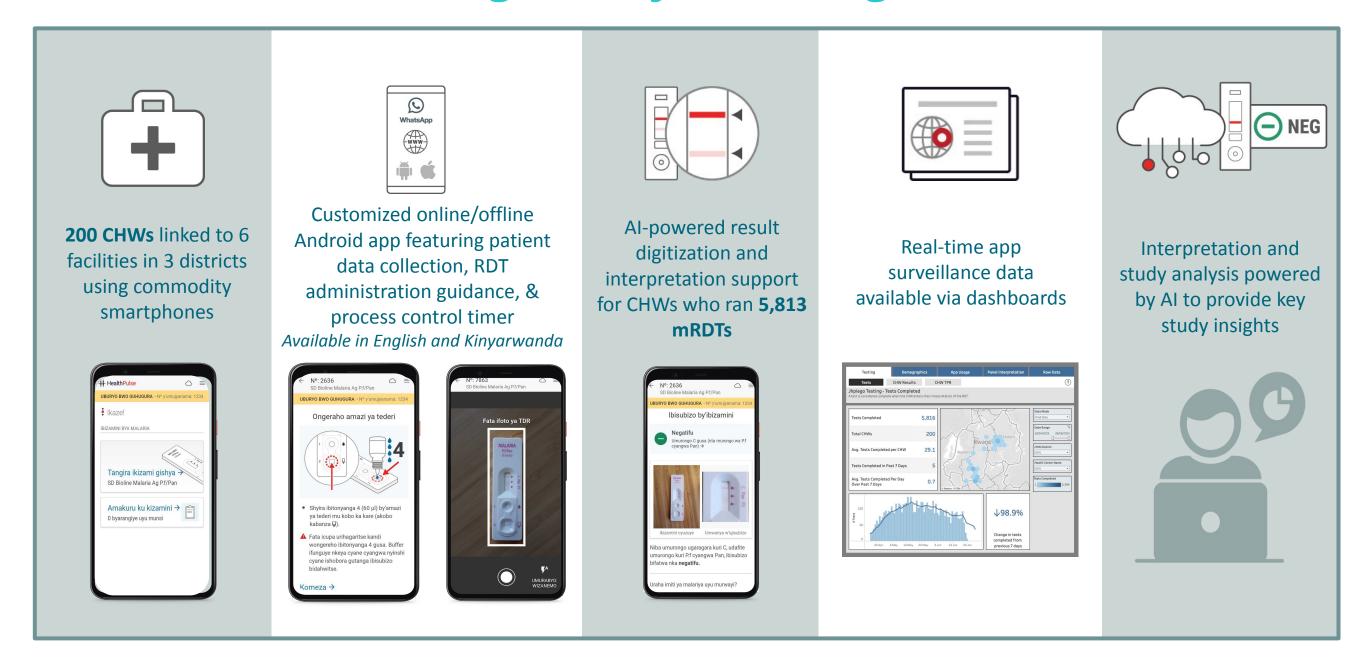
# **Study Goal**

Determine whether it is feasible and effective to introduce a customized mobile app for CHWs as a quality control tool.

## Methods

- 200 established CHWs from across 6 facilities in 3 high malaria burden districts participated in the study using provided Android phones.
- CHWs completed a baseline survey during training, followed by 10 weeks of data collection, and then a final endline survey.
- Mixed methods analysis was conducted for qualitative and quantitative data from the app and baseline/endline surveys.

### CHW Malaria Testing Workflow using HealthPulse Al



#### Conclusion

- The HealthPulse AI app was found to be feasible, usable, effective, and **desired** by CHWs.
- The majority of CHWs expressed confidence in using mobile apps and shared the benefits of having an app with digital instructions for RDTs.
- The study demonstrated usefulness of the app and AI for efficient monitoring and surveillance, targeted supportive supervision, quality control, and as a potential CHW e-learning and training tool.
- Remote monitoring of CHW testing coupled with Al-powered automated review of CHW interpretations identified 9% of CHWs needing support in their testing activities.
- Identifying and supporting only CHWs who need help can be time, cost, and resource effective.

Use of an app and AI for monitoring and quality control can strengthen public health malaria elimination efforts to:

- Enhance mRDT administration quality
- Enable targeted, supportive supervision
- Ensure <u>accuracy</u> of community diagnostic testing

#### Results

HealthPulse AI improved mRDT knowledge, administration adherence, and accurate interpretations.

Survey responses	Baseline	Endline	% change
Knowledge of the proper time required to read the test result after adding blood and buffer	79.9%	97%	+17.1%
Identification of positive results from very faint visible lines	13%	85.2%	+72.2%

#### The HealthPulse Al app was usable by CHWs.

CHWs indicated that:	Endline
The app was very easy to use	93.0%
The app instructions were clear and easy to follow	99.0%
Using the app saved time compared to entering data in paper registers	93.8%

App provided **proof** of CHW activities and **contributions**, built **CHW** confidence, and enhanced community member trust in the testing process and results.

"When I use this smartphone application to conduct RDTs, I feel accompanied by an interactive interface that provides me with clear guidance throughout every step of the process." – CHW, Rwanda

"There were instances when a test turned out negative and the client resisted to believe it, saying we may be lying. When you display the results on smartphones, they readily accept the outcome." – CHW, Rwanda

# Results continued

9% of CHWs were identified as potentially needing support in their day-to-day testing activities based on incorrect mRDT interpretations.

CHWs identified with interpretation accuracy variance vs. reference Al

	Number of CHWs			
Total tests completed by CHW	Accuracy below 85%	Accuracy between 85% - 95%	Accuracy above 95%	
1–10	5	5	14	
11–40	11	48	76	
40+	2	12	26	

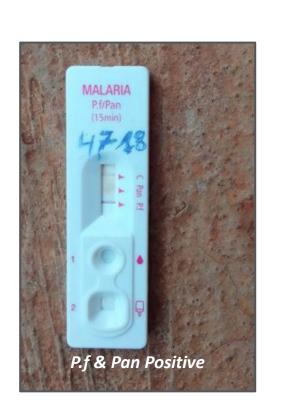
Al exceeded CHW performance, making it a viable monitoring tool

95.5% Al performance vs. reference panel\* Exceeded project target of 90%; reported as a weighted F1 comparing

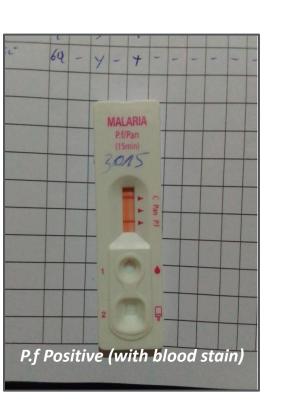
Panel Read and AI results)

94.0% CHW performance vs. reference panel\* (Reported as a weighted F1 comparing Panel Read and CHW results)

Example mRDT AI interpretations



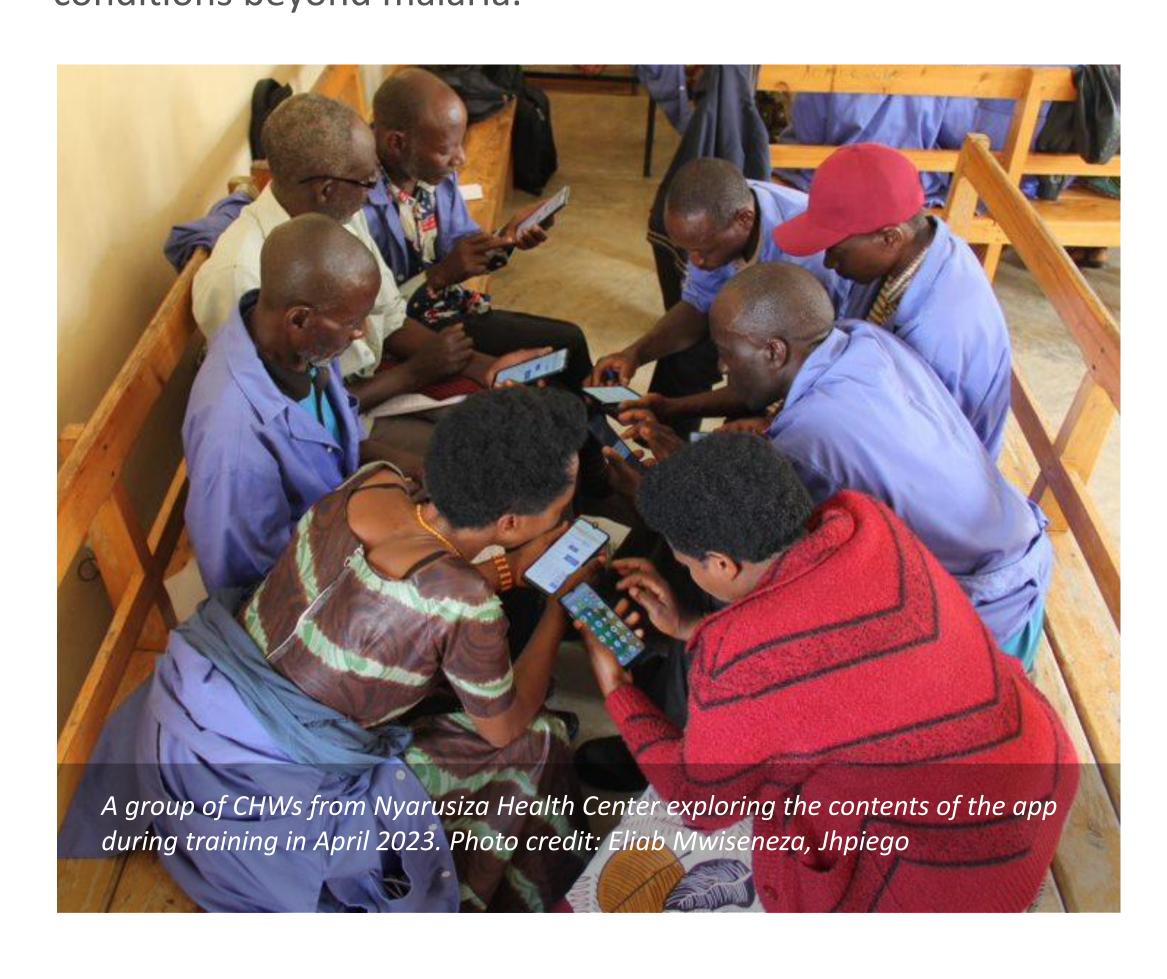






# **Next Steps**

- Pursue opportunities to integrate this AI tool for quality control, monitoring, and targeted supportive supervision into digitization efforts being undertaken by Rwanda and other countries for malaria control programs.
- Reach out to us. Al is available for use at scale and can be integrated into any digital platform, with capacity to support a breadth of use cases and conditions beyond malaria.



- 2. Rwanda Biomedical Centre. 2022. Rwanda Malaria and Neglected Tropical Diseases, Annual Report July 2021-June 2022.
- Republic of Rwanda Ministry of Health. 2023. Rwanda Malaria Programme Mid-Term Review.



