

The Impact of Mobile Health (mHealth) in Maternal Health Services [Letter]

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Dear editor

We read with great interest the article by Kachimanga et al on the impact of the YendaNafe mobile health (mHealth) application in improving maternal health services in rural Malawi.¹ The study presents an insightful evaluation of how mHealth interventions can enhance antenatal care (ANC), facility-based births, and postnatal care (PNC). While the findings highlight promising results in ANC uptake and facility-based births, we believe further discussion is needed on the limitations and scalability of mHealth in maternal health services. Firstly, the study found a significant immediate increase in facility-based births following the introduction of YendaNafe. This aligns with recent research that demonstrates the role of mHealth in encouraging institutional deliveries through timely reminders and digital tracking.² However, the lack of a long-term sustained effect suggests the need for additional behavioral and structural interventions. Future studies should explore whether integrating mHealth with community-based education programs can enhance its long-term impact. Secondly, while the study reports a gradual increase in ANC visits, it notes limited impact on PNC uptake. This is concerning as PNC is essential in reducing maternal and neonatal morbidity and mortality. Barriers to effective PNC utilization, such as cultural beliefs and logistical challenges, have been reported in recent literature.³ Addressing these barriers through targeted mHealth modifications, such as incentivized home visits or AI-driven reminders, may improve adherence to PNC. Lastly, as mHealth interventions become more prevalent, it is imperative to consider their sustainability in low-resource settings. The study underscores that CHWs experienced workflow challenges despite the benefits of digital support. Ensuring that mHealth tools are user-friendly, interoperable with existing health systems, and supported by adequate training will be crucial for their success. In conclusion, Kachimanga et al provide valuable evidence on the potential of mHealth in maternal health services. However, addressing sustainability and the gaps in PNC uptake remains a priority for future research. We advocate for the integration of mHealth with broader health system strengthening strategies to optimize maternal health outcomes.

Disclosure

The authors report no conflicts of interest in this communication.

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