

Integrating Community-Based Digital Interventions in Public Health Nursing: Lessons from Reproductive Health Education

Atefeh Omrani

Faculty of Health Sciences and Wellbeing, School of Nursing and Health Sciences, University of Sunderland in London,
London, United Kingdom

*Corresponding Author Email: Ati.omrani@sunderland.ac.uk

Abstract

Community-based public health nursing increasingly relies on innovative strategies to deliver accessible, patient-centred care, particularly in reproductive health. This article draws from the author's multidisciplinary research, particularly recent digital health projects employing gamification and those addressing fertility support and maternal wellbeing. By applying principles of community assessment, health promotion, and culturally sensitive education, the article explores the implementation and outcomes of digital interventions, such as mobile health platforms and tele-support services, designed for adolescent girls and women in underserved populations. These tools, integrated into public health nursing practice, help bridge gaps in access to care, empower girls and women through health literacy, and enhance nurse-patient partnerships in both community and institutional settings. The article critically evaluates challenges and opportunities in using virtual approaches within public health frameworks and highlights the role of nurses in leading these innovations. Evidence suggests that such interventions improve engagement, reduce stigma, and foster sustainable behavioural change, aligning with the cornerstones of modern public health nursing. This work supports the integration of digital tools into population-based care models and advocates for scalable, nurse-led solutions that address health inequities and strengthen public health systems.

Keywords

Community-based interventions, Digital health, Health literacy, Public health nursing, Reproductive health education, Women's health.

INTRODUCTION

Community-based public health nursing (CBPHN) plays a vital role in promoting health, preventing disease, and addressing the social determinants of health at the grassroots level. Traditionally rooted in outreach and education, CBPHN has evolved to incorporate health promotion strategies tailored to local needs, particularly for vulnerable and less privileged populations [1]. Nurses working in community settings act as trusted connectors between formal healthcare systems and the populations they serve, making them well-positioned to lead innovative interventions.

Reproductive health, particularly for women and adolescents, remains a globally recognised priority, due to its direct impact on maternal and child health, education, and economic development [2]. In many low-resource and rural areas, reproductive health challenges are compounded by limited access to services, cultural stigma, and gender inequality. This makes it a crucial focus area for technological innovation and outreach.

Digital interventions, including mobile health (mHealth) applications, virtual learning platforms, gamified tools, and telehealth services, offer promising avenues to improve accessibility, engagement, and health literacy among less privileged groups [3]. When embedded in community-based care, these tools can support autonomy, improve health outcomes, and promote equity in service delivery [3], [4].

This article explores key lessons from digital interventions

in reproductive health education and highlights their relevance to nursing-led community care. By analysing real-world applications, it provides insights for integrating digital strategies into public health nursing practice.

BACKGROUND AND RATIONALE

This body of work is grounded in a programme of research focused on digital innovations in reproductive health education. The author's recent and ongoing projects have explored the integration of digital tools to address critical health challenges, especially in less privileged populations, with a strong emphasis on community participation, cultural sensitivity, and individual empowerment.

One strand of this research highlights the use of gamification as an innovative digital strategy to enhance user engagement and knowledge retention in health education, particularly among younger audiences. A recent study protocol detailed the development of a culturally tailored, gamified intervention designed to deliver complex health information (e.g., menstruation & puberty) in an interactive and accessible format [5]. Building on this, a subsequent experimental study demonstrated the effectiveness of the gamification intervention in improving learning outcomes and user motivation within a digital health education context [6], a finding further supported by additional studies [7].

In the context of fertility care, a randomized controlled trial investigated the impact of a specialised virtual educational programme on anxiety and perceived pain during

hysterosalpingography, highlighting the role of nurse-led, digitally supported education in reducing patient distress [8]. A complementary study is now focusing on the effect of a different virtual training program on pain perception and anxiety among infertile women undergoing the same procedure [9].

These projects address gaps in traditional service delivery, such as stigma, poor health literacy, and restricted access, by embedding digital support into community-based frameworks [4], [7]. They exemplify how tailored, participatory interventions can extend the reach and relevance of public health nursing, especially in reproductive care settings.

DESIGN AND IMPLEMENTATION OF DIGITAL INTERVENTIONS

Digital interventions in community-based public health nursing have evolved to meet the specific reproductive health needs of diverse populations through innovative, accessible platforms [7]. Key tools include mobile applications designed for health tracking and education, many of which incorporate gamification to enhance user engagement and knowledge retention. For example, interactive games and quizzes embedded within mobile apps have been shown to improve adolescents' and women's understanding of menstrual hygiene, puberty, and sexual health [10].

Another widely adopted tool is the use of WhatsApp groups and other messaging platforms to provide peer support and remote nurse-led teleconsultations [11]. These digital communities offer a space for real-time reproductive health guidance, emotional support, and information exchange, particularly vital for women in less privileged areas [10], [11]. In more clinical and reproductive health contexts, virtual training sessions delivered via video conferencing tools (e.g., Zoom, Microsoft Teams, Google Meet) have empowered women undergoing sensitive procedures, such as hysterosalpingography, by enhancing their awareness and knowledge, thereby reducing anxiety and perceived pain [8], [9].

Nurses and frontline health workers are essential in designing and implementing digital interventions. Their direct patient experience ensures content is clinically accurate, culturally sensitive, linguistically appropriate, and tailored to real-world needs, making the tools more effective and accessible [12]. Participatory design workshops and pilot testing sessions can be used to gather nurses' input and refine features accordingly [12].

Community engagement is facilitated through needs assessments, including focus groups with target users, surveys, and consultation with local stakeholders [10]. These methods help identify digital literacy levels, access to smartphones, and preferred learning styles. As a result, interventions are tailored for maximal relevance, accessibility, inclusivity, and sustained participation [13].

IMPACT AND LESSONS LEARNED

Community-based digital interventions have shown tangible benefits in reproductive health education, particularly when embedded in public health nursing frameworks [8], [9], [13]. Platforms such as gamified mobile applications, WhatsApp-based education groups, and virtual counselling and training sessions have contributed to improved awareness, service uptake, and behavioural outcomes [4]. For example, pervasive games, quizzes and puzzles designed for sexual and reproductive health education among adolescents and adults have been shown to significantly enhance knowledge retention and user engagement [6], [7], [14]. In another study, WhatsApp has been identified as a valuable educational platform, with both learners and nurses reporting improved communication, sustained peer support, and greater comfort discussing sensitive topics [11].

Nurses have reported that digital interactions foster deeper patient trust, particularly in reproductive and sexual health contexts [12]. Service users, both adolescents and adults, frequently express feeling more informed, less isolated, and more confident navigating healthcare systems [6], [13], [14]. These outcomes indicate a move away from traditional, hierarchical care models constrained by distance, location, and time, toward more collaborative and person-centred approaches [10]. Moreover, such digital strategies align with the WHO's digital health guidelines' emphasis on equity, contextual adaptation, and active healthcare professional participation [3]. Beyond increasing health literacy and reducing stigma, community-based digital interventions support early screening, challenge misinformation, and reinforce positive health behaviours in hard-to-reach communities [4], [10].

Enhancing digital health literacy among nurses and embedding it within nursing education curricula is crucial for ensuring cultural relevance and achieving long-term impact, especially in resource-limited and underserved settings, while supporting quality care and effective communication [15]. Continuous professional development in digital skills builds confidence, enabling nurses to use evolving technologies effectively, which supports improved patient outcomes and stronger nurse-patient relationships [11], [15].

CHALLENGES AND CONSIDERATIONS

Despite the promising impact of community-based digital interventions in public health nursing, several challenges must be addressed to ensure their effectiveness and equity. One major barrier is digital literacy; many service users, especially in less privileged or older populations, may lack the skills to navigate digital health tools confidently [16]. Addressing this requires tailored digital literacy programs, community workshops, and user-friendly app designs that accommodate varying skill levels. Similarly, connectivity and access remain significant issues, with rural or low-income communities often experiencing unreliable

internet or limited device availability, exacerbating health disparities [16], [17]. Solutions include expanding affordable broadband infrastructure, providing devices through public health initiatives, and offering offline or low-data digital options to ensure wider reach and engagement [17], [18].

Trust and privacy concerns also pose critical challenges. Reproductive and sexual health topics are highly sensitive, and service users may fear data breaches or stigma, which can deter engagement [8], [13], [14]. To tackle trust and privacy concerns, robust data security, transparent privacy policies, and user anonymity are essential, especially for sensitive health topics [17], [18]. Ensuring inclusivity and accessibility in design, such as language options, culturally and sexually sensitive content, and disability accommodations, is essential for reaching diverse populations [18]. Additionally, the sustainability of digital interventions depends on ongoing funding, technical support, and integration with existing health systems.

A further consideration is the limited digital training available for nurses, many of whom feel underprepared to implement or support these technologies effectively [15] [19]. Public health frameworks must therefore prioritize digital inclusion and embed comprehensive training programs to equip healthcare professionals, including nurses, with the necessary competencies, fostering confidence and competence in digital health delivery [19].

Ethical and safeguarding considerations are particularly important in reproductive and sexual health education, especially when targeting younger populations [18], [20]. Protecting confidentiality, obtaining informed consent, and safeguarding vulnerable users from harm must be rigorously managed to maintain trust and legal compliance [20].

CONCLUSION AND FUTURE DIRECTIONS

Community-based digital interventions have demonstrated significant promise in enhancing public health outcomes, particularly in the domain of reproductive health education. Key lessons highlight that digital tools, when nurse-led, culturally relevant, and embedded within existing care systems, can increase health literacy, reduce stigma, and strengthen nurse-patient relationships [18], [21].

Nurses remain pivotal in the design, delivery, and evaluation of these interventions, not only ensuring clinical accuracy but also fostering trust, accessibility, and contextual appropriateness [12], [22]. Their dual expertise in both care and community engagement uniquely positions them as leaders in digital innovation at the grassroots level.

However, to unlock the full potential of digital health in community nursing, ongoing investment, policy alignment, and research are crucial. This includes funding for sustainable infrastructure, support for digital training within nursing education, and inclusive design frameworks that prioritize equity and ethical safeguards [15], [19].

Future efforts should prioritise scaling successful interventions, integrating them into primary care systems, and co-designing solutions with service users, while

proactively addressing barriers such as digital exclusion and privacy concerns. With appropriate support, nurses can continue to drive forward transformative, technology-enabled public health solutions that are adaptable, inclusive, and impactful across diverse communities.

Acknowledgements

The author would like to thank the participants, community partners, supporting experts and institutions who were involved in the projects discussed in this article. Their collaboration and guidance were invaluable in shaping the design and implementation of the digital interventions discussed in this article.

REFERENCES

- [1] Association of Community Health Nursing Educators (ACHNE), 2025, Community/Public Health Nursing Competencies, Washington, DC. <https://achne.org/aws/ACHNE/pt/sp/links>. [Accessed: Jul. 29, 2025].
- [2] United Nations Population Fund (UNFPA), 2022, State of World Population 2022: Seeing the Unseen – The Case for Action in the Neglected Crisis of Unintended Pregnancy, New York, NY: UNFPA. https://www.unfpa.org/sites/default/files/pub-pdf/EN_SWP2%20report_0.pdf. [Accessed: Aug. 10, 2025].
- [3] World Health Organization, 2019, Recommendations on Digital Interventions for Health System Strengthening, Geneva: WHO. <https://www.who.int/publications/i/item/9789241550505>. [Accessed: Aug. 12, 2025].
- [4] Free, C., Phillips, G., Watson, L., Galli, L., Felix, T., and Edwards, P. et al., 2013, “The effectiveness of mobile-health technologies to improve health care service delivery processes: a systematic review and meta-analysis,” PLoS Med., vol. 10, no. 1, pp. e1001363.
- [5] Nazmi, S., Behmanesh, F., Nikbakht, H.-A., Mehrabi, M., Fili, R., and Omrani, A. et al., 2025, “Gamification for pubertal and menstrual health education in adolescent girls: Study protocol,” J. Educ. Health Promot., vol. 14, p. 140, doi: 10.4103/jehp.jehp_2123_23.
- [6] Nazmi, S., Omrani, A., Behmanesh, F., Nikbakht, H.-A., Mehrabi, M., and Hamzehpour, R., 2025, “Improving pubertal health education for adolescent girls through a gamified learning approach,” J. Pediatr. Adolesc. Gynecol., vol. 38, no. 3, pp. 320–327, doi: 10.1016/j.jpag.2025.01.003.
- [7] Rubio, C., and Besoain, F., 2025, “Pervasive games for sexual health promotion: Scoping literature review,” JMIR Serious Games, vol. 13, p. e58912, doi: 10.2196/58912.
- [8] Daneshfar, Z., Sadatmahalleh, S. J., Hosseini, S. Z., Alhani, F., Ahmadi, F., and Omrani, A., 2024, “A randomized controlled trial on the impact of a specialized training program on anxiety and perceived pain in infertile women undergoing hysterosalpingography,” Sci. Rep., vol. 14, no. 26396, pp. 1–10. <https://www.nature.com/articles/s41598-024-76881-1>.
- [9] Rezaei, Z., Sadatmahalleh, S. H., Daneshfar, Z., Alhani, F., Ahmadi, F., and Omrani, A., 2025, “Evaluating the Impact of Virtual Training on Perceived Pain Intensity and Anxiety

During Hysterosalpingography in Infertile Women: A Randomized Controlled Trial," *BMC Women's Health*, In Press.

[10] Kuwabara, A., Su, S., and Krauss, J., 2019, "Utilizing digital health technologies for patient education in lifestyle medicine," *Am. J. Lifestyle Med.*, vol. 14, no. 2, pp. 137–142, doi: 10.1177/1559827619892547.

[11] Coleman, E., and O'Connor, E., 2019, "The role of WhatsApp® in medical education: a scoping review and instructional design model," *BMC Med. Educ.*, vol. 19, no. 1, Art. no. 279, doi: 10.1186/s12909-019-1706-8.

[12] Bakker, C. J., Wyatt, T. H., Breth, M. C. S., Gao, G., Janeway, L. M., and Lee, M. A., et al., 2023, "Nurses' roles in mHealth app development: Scoping review," *JMIR Nurs.*, vol. 6, e46058, doi: 10.2196/46058.

[13] Ijeoma, A. R., and Komolafe, R., 2025, "Bridging the digital divide in reproductive health: A low-tech, high-impact SRHR education model," presented at the Int. Conf. on Family Planning, Bogota, Colombia, May 2025.

[14] Luo, Q., Zhang, Y., Wang, W., Cui, T., and Li, T., 2024, "mHealth-based gamification interventions among men who have sex with men in the HIV prevention and care continuum: Systematic review and meta-analysis," *JMIR Mhealth Uhealth*, vol. 12, e49509, doi: 10.2196/49509.

[15] Bellamy, E., 2025, "Enhancing digital health fluency in UK nursing education: A curriculum imperative," *Nurse Educ.*, doi: 10.1136/ebnurs-2025-104297.

[16] Kohli, A., and Singh, T., 2024, "Bridging the digital divide in rural areas: Challenges and strategies for universal internet connectivity," in *Addressing B5G and 6G Network Connectivity Issues in Rural Regions*, IGI Global Scientific Publishing, pp. 183–214.

[17] Isakadze, N., Molello, N., MacFarlane, Z., Gao, Y., Spaulding, E. M., and Mensah, Y. C., et al., 2022, "The virtual inclusive digital health intervention design to promote health equity (iDesign) framework for atrial fibrillation: Co-design and development study," *JMIR Hum. Factors*, vol. 9, no. 4, p. e38048, doi: 10.2196/38048.

[18] Wills, E., Mistry, P., and Gowar, C., 2025, "Designing inclusive and trusted digital health services with people and communities," *The King's Fund*, Jan 2025. <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/inclusive-digital-services-people-communities>. [Accessed: Jul. 28, 2025].

[19] Longhini, J., Rossetti, G., and Palese, A., 2024, "Digital health competencies and affecting factors among healthcare professionals: Additional findings from a systematic review," *J. Res. Nurs.*, vol. 29, no. 2, pp. 156–176, doi: 10.1177/17449871241226899.

[20] Susser, D., 2020, "Ethical considerations for digitally targeted public health interventions," *Am. J. Public Health*, vol. 110, no. Suppl 3, pp. S290–S291, doi: 10.2105/AJPH.2020.305758.

[21] Jahnel, T., Pan, C.-C., Pedros Barnils, N., Muellmann, S., Freye, M., Dassow, H., et al., 2024, "Developing and evaluating digital public health interventions using the Digital Public Health Framework DigiPHframe: A framework development study," *J. Med. Internet Res.*, vol. 26, p. e54269, doi: 10.2196/54269.

[22] Cookson, C., 2025, "EU project launched to prepare health workers for a digital future," *Financial Times*, Mar 2025. <https://www.ft.com/content/a56ef5a3-f5d8-446d-ae9b-f503c>

ce20de7 [Accessed: Jul. 29, 2025].