

## BCO-SDC meeting, IICD: Case studies BCO meets SDC

### **Case 1: The use of ICT for Livelihoods in Ecuador: Market information for producers of ecological products**

IICD has been active in livelihoods programs since it start, and is now supporting around 70 projects using ICT to enhance access to markets and information on production technologies. The latest program in this sector has started in Ecuador on the basis of a Roundtable in 2004, in collaboration with SDC and HIVOS, where currently a number of projects are active. The CAMARI project is one example of a project that focuses on the use of ICT for the provision of fair-trade market information to traders and farmers.

#### *Project description*

CAMARI - FEPP markets agricultural products on the domestic and international level sustainably, on the basis of equitable trade to improve living conditions for small producers, with an orientation toward producing and marketing products. This project seeks to enable small indigenous and non-indigenous farmers to market their products, and guarantee increased sales volume by providing information on supply and demand, costs and pricing, and product quality in order to set marketing strategies. This will increase impact on the domestic market by leaving the intermediaries out, who erode farmers' livelihoods.

The communications and information system grants greater access to the local, national and international markets. CAMARI-FEPP's fair trade system operates to facilitate business justice. The organizations that benefited from the project pilot are located in the provinces of Imbabura, Carchi, Cotopaxi, Chimborazo and Bolívar. The goal is to include eight intermediary organizations representing 35 grassroots organizations and 4,300 families.



The project seeks to improve marketing of agricultural, processed and crafts products by small producers in CAMARI - FEPP Afro-Ecuadorian and indigenous small-farmer member organizations. Specific objectives are to enable Afro-Ecuadorian and indigenous small-farmer member organizations to learn about market requirements in order to orient production and marketing. In addition, the project is to establish an information and communication system to link producers with CAMARI, in order to effectively market on the national and international market. The information and communication system for national-level marketing will work through the National CAMARI Website [www.camari.org/EN](http://www.camari.org/EN), and information and communication centers for marketing at CAMARI branch stores.

To operate an information and communication system to help market the products of small-farmer organizations, by:

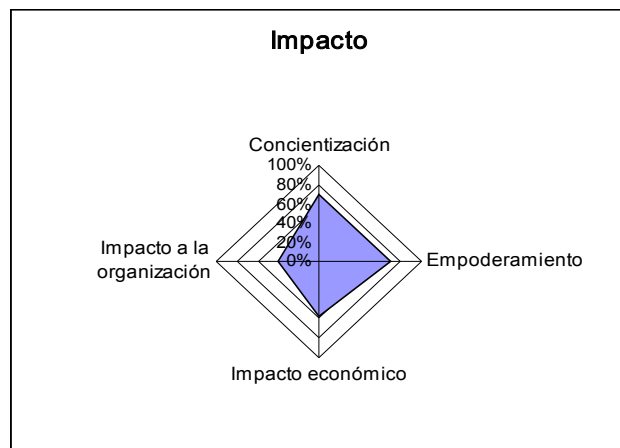
- Information centres of second-tier organizations will operate optimally, under co-management by CAMARI and the respective organizations. Direct beneficiary organizations are expected to subscribe and obtain membership, to receive price and service advantages.
- Training people to be responsible for information and communication in each intermediary organization.

Direct beneficiary organizations of the project will subscribe, obtaining a membership to receive advantages in pricing and service. During the first stage of the project CAMARI and beneficiary organizations will contribute economically to cover fixed expenses. Resources to fund local contributions will come from profits generated by marketing products, and from groups' annual membership fees. By inter-relating information with production and marketing, the cost-benefit advantages gained by small farmers will be their own responsibility. This will enable them to better orient their agricultural activities and to eliminate middlemen who take unfair advantage of their situation to exploit them, often making them feel powerless to deal with the process of getting their products to market at reasonable prices. The project's proposed goals have been set for a five-year period; great undertakings can be achieved by taking small steps.

#### *Development impact and lessons learned*

The first results from the monitoring and evaluation of the impact of the project by farmers and traders participating in the project indicates that the target group comprises a majority of lower and medium- income families. Almost all participants make use of the information provided on a weekly basis, where 35% is using the information on a daily basis. The participants are positive about the project, indicating to have reached their objectives.

The impact of the project on the participating traders and farmers is found high (70%) in terms of increased awareness and empowerment. Also, in the first year already 57% of the participants indicate to have found an economic impact in terms of better access to markets. A trader indicated "I was able to negotiate agriculture products directly con producers, enabling us to reach agreement on prices and conditions." A producer indicates "In the sales of potatoes that



we sent to the East we found better prices that if we would have sold in Ibarra". Other participants indicate as results the increased income for CAMARI, better market prices for the producer and establishment of new business contacts via Internet.

The questionnaires and later focus group has provided a series of suggestions to improve the project:

- While the overall impact of the project is high, still the impact is to be enhanced for participants from rural areas, as it is found that the impact is higher among participants from urbana reas than from rural areas.
- There is found a lack of support of leadership in the farmer associations.
- The information centres need to be better positioned in their are to attract more users.
- There are problems with the technical maintenance of the facilities at the level of information centres, requiring to enhance the technical support.
- More training in themes related to trade and sales.

A video is available to show at the meeting with BCO and SDC, and will be sent to SDC

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## Case 2: The use of ICT for Health care in Tanzania: District Health Management Information System

IICD has increased its participation in ICT for health programmes in various countries, including Mali, Zambia, Uganda and Tanzania. In 2005, a Roundtable was set up in Tanzania by the Ministry of Health and the leading faith-based organisations in Tanzania with support of SDC, Cordaid and IICD. The Roundtable resulted in a series of ICT projects supporting health services, including patient registration, health management, professional development and distance learning. One of the projects is the District Health Management Information System set up since February 2006, set up by the African Inland Church Tanzania.

### *Project description*

The districts in Tanzania are to collect, analyse and utilize reliable data are vital for health workers to provide cost efficient and effective health care to the population. Also, timely and accurate information is crucial for policy makers to be able to make well-informed decisions. Unfortunately, the current situation is far from ideal. Data collected using paper and pencil is prone to transcription errors, loss and damage and takes time to enter into databases, which is another process prone to human error. The quality of health services delivery is constrained by the poor quality and high costs of existing communications services and the lack of access to conventional medical and public health information resources, such as journals. Church Health Institutions have poor access to accurate and timely information and data rarely reach policy makers in time for informed decision making.

The implementation of a District Health Management Information System aims to use ICT in improving the ability to collect, store and analyse accurate health data at the district level to increase service delivery efficiency, increase data accuracy and effectiveness of intervention, increase accountability and better learn about health trends in the district.

The broad objective of the project is to have ICT as a tool for HMIS to enable the City Medical Officer, the African Inland Church Tanzania, Evangelical Lutheran Church Tanzania and Roman Catholic Church as organizations and their partners in Mwanza city to improve its effectiveness and quality of work, managing the key processes efficiently to a level of transforming organization at resources to its highest utility and advantage of delivering Health Services.

The specific objectives in order to achieve the broad objective are:

- Implementation of a District Health Management Information System
- Training of HMIS users
- Awareness raising for other stakeholders and related government personnel
- Capacity building of the project organizations' headquarters
- Installation of Internet Connectivity at AICT, ELCT, RC and CMO.
- Exchange and improved performance.

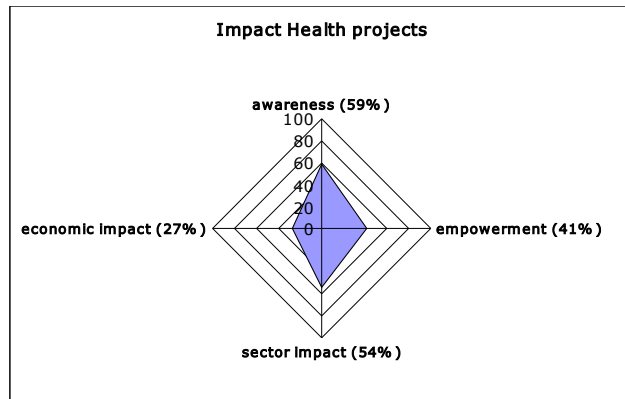
The implementation of the District Health Management Information System will ensure the exchange of more accurate and timely data. These advanced data will ensure improved health care service delivery and informed decision making. The church health institutions directly benefit as the D-HMIS will facilitate the daily processes. Patients will benefit from the project through faster and better health service delivery, policy makers and the Tanzanian nation will benefit as more accurate information will be made available in time for informed decision making.

### *Development impact and lessons learned*

The first monitoring and evaluation results, based on questionnaires and a focus group meeting with doctors, nurses and administrative staff in the participating hospitals indicate that the project is already having positive impacts. Many participate in the project to improve health services through utilizing the computer. Others see in the projects a good opportunity to get more knowledge and more experience in the use of computers in information and communication technology. The majority (87%) use the project daily.

Participants have achieved their goals as evidenced by well kept and easily accessed patients' and other records.

Members are most satisfied with the quality of information and training provided through the project. A participant told: *"This project is more useful to our country; it has made it possible for gathering reliable and accurate reports for planning purposes. I encourage it to be introduced to government also."*



A majority of the users feels more aware and the empowerment score is 41%. It is not strange that the empowerment level is still lower than awareness, as this requires more time and effort. The sector impact at 54% is lower than that of awareness, but much higher than empowerment and economic impacts. It is inspiring to see sector impact in such a short period. The pull up factors includes more customized patient records, and access to infrastructure and connectivity. Eased delivery of health education to the public and wider access to assistance on diagnosis and treatment were left out of the calculation, as they do not apply to these projects.

There are also found issues to improve in the project:

- One important lesson is that the project is active primarily in hospitals in the more urbanized areas. ICT centers are mostly found in urban and not in rural areas. More of them are found in hospitals as opposed to dispensaries. The criterion for selecting pilot study was not clear to some. When deeper analysis is done it is evident that underprivileged areas were considered, but were inhibited by such factors as lack of electricity and a very weak economic situation.
- Participants also pointed out that there are high costs involved in running an ICT project. These include the cost of equipment, infrastructure such as electricity, LAN and connectivity; time, human resources, maintenance and repair and opportunity cost of forgone expenditure on other areas of the hospital. Unless a very clear analysis of costs is done, a health facility entering ICT project might fail to continue after an initial start.
- The respondents to the questionnaire request more computer training.
- Electivity problems need to be addressed to avoid regular fall out of the facilities.
- The participants ask for a better linkage to the government reporting system for periodic reports will have to be worked on.

A video is available to show at the meeting with BCO and SDC, a copy will be sent to SDC, even though a low-quality version is available at [www.iicd.org](http://www.iicd.org).

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