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**Foresight analysis of the 37
variables of Millennia2015 +
Session Women and eHealth
Analyse prospective des 37
variables de Millennia2015 +
Session Femmes et eSanté**

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Salle Vendôme, Ecole des Mines - Paris

Processus de
recherche
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Liège 2008
Paris 2012
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**Session WeHealth –
Christophe Longuet, medical director, the Mérieux foundation -
Women, health and ICTs in Displaced Persons Camps (Draft)**



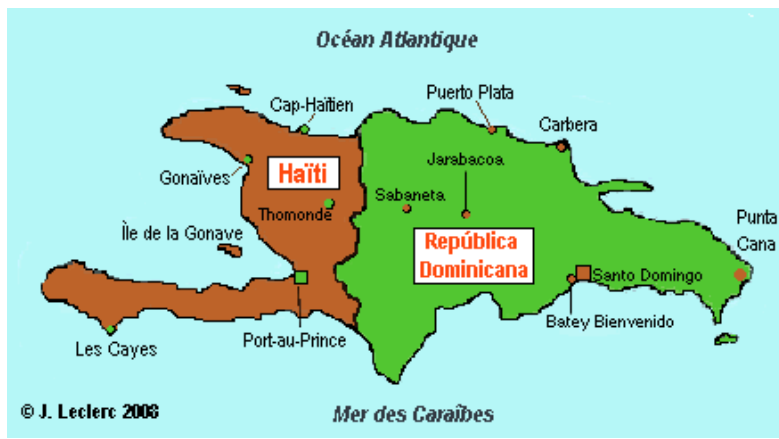
Fondation Mérieux was founded in 1967 by Dr. Charles Merieux, a tribute to his father Marcel Mérieux, a pupil of Louis Pasteur and founder of the Institut Mérieux in 1897. It was state-approved as an independent foundation of public utility in 1976.

Its mission is to strengthen local capacity to reduce the impact of infectious diseases on vulnerable populations. Its work is organized around priorities:

- Strengthening the health infrastructure;
- Training and knowledge sharing;
- Applied research;
- Mother-Child Support.

It is now present in Mali, Cambodia, Laos, Haiti, Madagascar and China.

Haiti and the earthquake



Haiti is a small region. It is bounded on the north by the Atlantic Ocean, on the east by the Dominican Republic, on the south by the Caribbean Sea and on the west by the Windward Strait which separates the island of Cuba.

It is mountainous and very devastated in terms of ecology. I mean the soil is dramatic.

Nearly 10 million people live in Haiti. 55% of men and 50% of women are able to read and write. Haiti is a really poor country, 80% of the population live under the poverty threshold.

The market penetration of the mobile has change dramatically thanks to international company like Digicel (an American company). About 40% of the rural population have a phone. There is a link with poverty I mean the richer you are the more chance you have to access mobile. In the same way, if you live in an urban area, you have more chance to have a mobile phone. In the urban area, 70% of the poorest part of the population has a mobile phone; it is encouraging. 60% uses their mobiles to call family and friend, 10% for business and 30% for service. I don't have statistics for health services.

So now we are talking to earthquake which happened on 12 January 2010. The epicentre was located in the south west at 25 km from Port au Prince. Internet really played a critical role in the first hour, telephone communications were out of service during the earthquake in Port au Prince. The headquarters of the telecom were destroyed, the network was damaged and broken, and the submarine cables were cut. Only Web links have resisted to the shocks, when all the other networks telecommunications had been unusable. Remember that the social network "Twitter" was used by journalist immediately after the earthquake. One hour after we have the information about Haïti.

When the phones have worked again, telecom companies have offered calls to join family. For my personal experience, I was in Madagascar when the earthquake occurred. I call my colleague, Mary. She is an engineer in a technology laboratory. She was in Haiti since more than a year. In the morning we learnt on the news that there was an earthquake. So, we tried to sms, to call without answer but after I try to write an email, she gives an answer ten minutes after. She reassured, all was ok for her. She had spent the night in a car park, it was possible to talk to her but after her phone had no battery. We waited more than one day for having some news. So really Internet was very important for us as it has been for all the people in the world who try to contact Haiti. So the consequences of the earthquake were dramatic. Indeed there

were 230,000 deaths, 300,000 wounded and 4,000 amputees and 1.2 million homeless.

Secondary consequence: the displacement 500,000 people without home, an high emigration in the Dominican Republic and the Caribbean, the United States, Canada, France with the "brain drain" (educated people, teachers, health professionals) very needed in Haiti now. There has been a rise of violence, insecurity, the prisons were destroyed, and the prisoners went out, back to business. Indeed it is the good time for business. There were also health problems; there was an increase in dysentery, typhoid and malaria season rainfall and cholera outbreak.

Foundation Mérieux activities

They are invested in micro credit program. Today, many women benefits of the micro credits, in informal sector like street market. We have also activities children, women again, activities on infection diseases and laboratory.

I want to talk about the GHESKIO which is one of our key partners because they are in charge of the camp. It has been created in 1982. It is the centre of treatment of the HIV, one of the very very early centre of HIV. We support them for bacteriological diagnosis: tuberculosis, cholera but also for their research project on the causes of pneumonia, for the micro credit programs. We support displaced camp which is now called EDH.

In Haiti the closer you are to the sea the poorer you are; I mean the richer are on the top of the mountains.

After the earthquake, 6,000 people were listed, 57% of women and 21% of children aged 0 to 5 years.

As Veronique said the EDH camp is a very sophisticated camp. It is a small camp and of course lot of international support came to help them. They are very well organised.

They have a management committee with 15 people and only 4 women in this committee. They do daily epidemiological survey by using "door to door" system.

They have also a vaccination service, nutrition for pregnant and women that breastfeed and for children from 0 to 5 years. They have also family planning activities with condom distribution, active prevention of domestic violence and sexual abuse, a health section with lavatories and drinking fountains

So, 112 jobs were created for cleanness and safety camp. A primary school and a vocational school for training employment of adolescents have been created.

As I said I have visited the camp and I decided to ask some questions to women before leaving Haiti. I am not able to tell you how many women have mobile phone in the camp. Of course, the way they like to use it, would be professional contact or family, in case of health problem: alerting when suspecting a cholera case or receiving advice about for first aid. They mention also a negative aspect of mobile phone which is harmful waves. For the youngest, they mention that they have access to internet in cyber café, so they have access to information about health in this kind of centre. Poverty and health are very linked.

Use of ICTs to facilitate communication and money transfers

1. On June 2010: The Gates foundation and USAID created the "Mobile Money Initiative" to improve money transfers. It consists in an incentive fund of 10 million dollars to promote financial services via mobile phones in Haiti. This fund will accelerate the distribution of cash assistance by humanitarian agencies to victims of the earthquake. This initiative lays the foundation for more advanced banking services that could help millions of Haitians out of extreme poverty.
2. On November 2010: launch of several products "Tcho Tcho mobile" by Digicel and Scotiabank. It enables Haitians to perform basic banking transactions such as withdrawals, deposits and transfers safely from their mobile phone. They have no need for a traditional bank account.
3. "T-CASH" is a UniBank initiative: these are mobile wallets to strengthen humanitarian aid in making payments and transfers of money in exchange of work programs (cash-for-work). This is the possibility of using these funds to purchase goods electronically from a network of affiliated merchants using their mobile.

Conclusion

Data from the Haitian context confirms that the development of mobile phones has an effect on economic growth and significant positive social benefits. However, a significant proportion of population remains excluded from mobile services because of lack of resources. For those who are isolated, the mobile phones are primarily used to connect them to their families and friends but they have mobile phones expenses to the detriment of food and clothing.

Some evidence suggests, however, that mobile phones can reduce the vulnerability of poor people by facilitating financial transfers and access to information in case of emergency.

Transcription: Hayette Boudene