

Maximizing Information Communication Technologies (ICT) in Developing Countries

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Scenario

The weekly staff meeting at the local Latin American reproductive health NGO had been underway for an hour. Maria Othello introduced item # 6 on the agenda. "I have a letter from our partner organization in Africa asking us to describe how new technologies such as the Internet, CD-ROM, and E-mail, have made an impact on how we provide family planning and reproductive health services to our clients. They also want to know what we need to fully utilize these new technologies, what changes they should make to their web sites, how they could use ITC to keep more regularly in touch with us, and how we are using ITC to benefit our in-country and regional partners. We have been invited to an international conference to talk about this. What should we tell them?"



How do we work in Latin America?



- Large territory to cover
- Language problems
- Cultural differences
- Political problems in some countries
- Religious influence
- Illiteracy rates are high in some countries
- Telephone lines and Internet are not available everywhere
- Computers are not available everywhere
- Part of the people that we need to reach does not know how to use this technology



Poorest areas Brazil are not only located in far away places (measured by a Human Development Index)



Highlights



- Some countries have well-developed telecommunications systems (Brazil, Mexico, Argentina, Chile)
- In Brazil 8,000,000 people use the Internet (5% of the population); expected to be 20 to 30,000,000 in 2004 (total: 160,000,000)
- In Brazil telephone lines cost US\$35 and in the southern part of the country are installed in 48 hours
- Computer prices have gone down
- Internet is available in most of the country (Brazil) and is cheap or free
- Most of the region have stable economies with a positive growth rate
- Most of the countries have stable political systems

Urban development



São Paulo



Belo Horizonte

Rio de Janeiro





Manaus

Even in the Amazon area, there are some cities with all the Urban characteristics





Most of the Amazon area:

- **No roads**
- **Small villages with poor communication**
- **Indians that have their own costumes and language**

Projeto Universidade Solidária - Brazil



- NGO
- Some support from the Brazilian Government
- Happens twice a year (1 month each time)
- University students go to distant cities and villages and try to establish communities and projects

Pólo de Saúde da Família (Family Health Project)

Universidade Federal de Minas Gerais

Tecnologia

Capacitação

Integração



Pólo de Capacitação, Formação e Educação
Permanente de Pessoal para Saúde da Família

Missionaries in the Amazon area



Missionaries have access to 300,000 people on the Amazon area. They do both religious and social work

Favela Rocinha, Rio de Janeiro: 200,000 inhabitants















Rocinha.com - Microsoft Internet Explorer

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Internet

Iniciar | Caixa de... | Microsof... | Corel PH... | AltaVista... | Época O... | A Epide... | Rocin... | 20:14

Two different situations in Brazil



- Urban: poverty, but some infraestrure, some access to Computers, Internet.
- Total access to TV, Radio and Video
- Interior of the country: some areas do not have Internet access and computers. There is some work beeing done by NGOs, Universities and Churches

In common:

- Low income
- Necessity of information
- Prostitution (mostly urban, but common in distant locations where construction work is being done, or in mining locations)
- STD
- Families with large number of children - associated with poverty and ignorance
- Teenager pregnancy
- Child mortality rate

Solution on how to use the Information Communication Technologies

- The concept that has to be addressed is the creation of **COMMUNITIES**, both real and virtual



**Visite nossas
comunidades**

saúde da mulher

How to create a rural community?



 Universidade
Solidária

University students organized by a NGO –
ex: Universidade solidária in Brazil



Missionaries from churches



University students and professors,
in a program developed by Universities



Local governments

Each community with:

- Computer with printer, copy machine, CD-RW
- Internet access (regular phone line or satellite dish – large bandwidth connections are always better for videos)
- Local coordinator (“health agent”; community leader”) trained to use a computer and the Internet



How to do it?

- A community would be created by one of the organizations (ex: Universidade Solidária). They would choose a person to be the local health agent.
- The HA should receive a basic training during the stay of the people from the NGO. If necessary, the HA should travel to a larger city to get a better training .
- The HA would get all the information about the health needs of the women and families of the community, up to 500 families

How to do it (cont.)?

- The information should be put into a database
- Using material downloaded from the Internet, the Health agent would prepare meetings; also, live chats with specialists could happen during these meetings
- Communication with the coordinators using e-mail and ICQ



How to do it (cont.)?

- * The material downloaded would be printed, copied, and saved in CDs written in the local computer
- * The local health agent would heavily use these materials – if a higher income family at the region had a computer, copies of the material would be given to this person using CDs written by the health agent

Who pays the bill?

- Government
- International NGOs
- Universities interested in training their students
- Companies interested in marketing their products and getting tax deductions

