

## **Trip Report**

# **Consultative Meeting with Organizations Working on Electronic Communication Initiatives in Africa**

*Boston, Massachusetts: May 1-2, 1997*

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### **Acronyms**

<b>FPMD</b>	<b>Family Planning Management Development</b>
<b>MSH</b>	<b>Management Sciences for Health</b>
<b>SARA</b>	<b>Support for Analysis and Research in Africa</b>
<b>HHRAA</b>	<b>Health and Human Resources Analysis for Africa</b>
<b>RCT</b>	<b>Randomized Controlled Trial</b>
<b>AED</b>	<b>Academy for Educational Development</b>
<b>TOT</b>	<b>Training of Trainers</b>
<b>CD-ROM</b>	<b>Compact Disc-Read-only Memory</b>

## **Introduction**

Bret Harris and Renuka Bery traveled to Boston May 1-2, 1997 to meet with several organizations to discuss potential areas for collaboration in providing information electronically in Africa. They planned to visit Management Sciences for Health (MSH), whose Family Planning Management Development (FMPD) department is working on an electronic system called the Electronic Resource Center, and SatelLife, an organization pioneering the use of computer-based communications technology to build communities of health care professionals worldwide. In addition, through AFRONETS, a listserv service to which SARA staff members subscribe, Renu and Bret learned about Project Scope, a Boston-based organization that has established community-based telecenters in Africa and scheduled a short visit to learn more about its activities.

## **Trip Activities**

### *Meeting with Project Scope*

We met with Carolyn Manjourides, President of Project Scope, and a friend and colleague of hers, Sosthene Adjibodou, who runs a small-enterprise development company in Benin. Project Scope is a one-woman international organization with a wide variety of initiatives that attempt to match resources with requests for assistance from the field. The activity most interesting to SARA is its attempt to establish telecenters to provide distance education and computer literacy and training within a community, although it was unclear just how far this effort has progressed. Because of the uncertainty surrounding some of Project Scope's activities, and the focus on activities on the community level, Bret and Renu concluded that there was little opportunity for SARA to work effectively with this organization. We provided Project Scope with information about the LearnLink project, in the event that the telecenter idea evolves. Project Scope maintains an ambitious website at: <http://www.projectslope.org>

### *Meeting With Management Sciences for Health*

Bret and Renu met with Thaddeus Thompson, Marjorie Smit, Jim Wolff, Kim Austin, Bea Bezmalinovic, Janice Miller of MSH/FPMD to learn about their Electronic Resource Center (ERC), and to discuss possible collaboration between SARA and MSH to disseminate SARA and HHRAA documents using the ERC.

## **ERC**

The ERC is an information service for users in the family planning and reproductive health sectors. Available as part of the standard e-mail software distributed to all HealthNet subscribers, the ERC is accessible to anyone with an e-mail account.

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## ***Trip Activities***

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The ERC also can be accessed through the Internet via the World Wide Web for those who have real-time Internet access and a browser such as Netscape Navigator or Microsoft Internet Explorer; however, the ERC is designed primarily to address the needs and limitations of users with e-mail access only.

MSH conceived the ERC as a mechanism to disseminate information in a way that puts the power of choice back to the user. It can be viewed as a value-added library: documents are available for viewing and searching, but due to the vast amount of material available via the Internet, the ERC also was designed to act as an information filter. Thus, MSH staff review research and literature on particular topics and repackage it in a form that is suitable for e-mail users. Although MSH might reformat a document for readability in a text-only mode, or create and post a summary of the document, MSH also will post a listing of the available documents, divided by subject matter, that includes the actual address on the Internet where the original document may be found. Using a text retrieval tool developed by SatelLife (discussed later in this report), the interested parties can use these addresses to request actual documents that will be sent to them via e-mail. The idea is to assist e-mail users in locating information that might otherwise take a long time to gather.

An important feature of the ERC is the membership database. Users join the ERC Member Database by registering their name, e-mail address, organization, profession, and areas of expertise, which then makes him or herself available for networking with others who share professional interests. By making it easier for users to find others with similar interests and expertise more easily, MSH hopes that more south-south exchanges will develop. Members also receive MSH's bi-monthly ERC News by e-mail, with the latest information for family planning and health professionals. MSH, with assistance from SatelLife, also is able to track who is using the ERC, and what areas they are accessing. This will give MSH and SatelLife the ability to assess what information people are accessing electronically and what formats are most popular and appropriate for users.

Other features of the ERC are:

- ◆ a calendar of conferences, seminars, and training events; (this is an effort to get contributions from the field and to coordinate all the events into one central location);
- ◆ a forum section, where subscribers can share experiences, post announcements, and ask questions of other users. The ERC contains an archive of past forum activity;

- ◆ a reader contribution section, the “Learning Exchange,” where readers can post their own experiences with project management, or help with the development of future issues of MSH’s publication “The Family Planning Manager.”

In more general discussions of electronic communication tools, we agreed that unless people perceive a need or feel that electronic communication has something to offer them that they cannot get elsewhere, it is a tool that will not be used properly. The ERC is attempting to address this issue by easing people into electronic communication. Although it encourages members to search for their information and communication needs actively, it does not require people to understand the complexities of electronic communication or participate in more complex activities until they need or choose to do so.

### *Opportunities for Collaboration*

SARA and MSH discussed areas of collaboration such as adding SARA-sponsored family planning documents to the ERC—especially those available in French. MSH also expressed interest in creating an “Advocacy/Policy” section in the ERC documents area. The advantage of SARA using the ERC to disseminate documents would be to utilize an existing resource rather than creating a new one in an electronic marketplace that is overburdened with information. Centralizing information helps those with limited Internet access make the most of their resources, as less time is spent searching for and navigating to different information providers. The documents themselves would either be stored here in Washington, and linked to the ERC, or stored at the ERC itself. SARA would have to manage this document area and we expressed reservations about the current capacity to manage this activity. However, it seems an ideal time to explore the possibilities.

One of the most important aspects of this collaboration would be to avoid duplication. As electronic communication is more widely used, an organization’s need to be visible electronically sometimes takes precedence over what users feel they need. Electronic web pages, listservs, conferences, and bulletins are emerging at a fast pace and flooding the marketplace—leaving e-mail users reeling with the weight of information. We discussed the need to educate the users not only about how to use the electronic communication tools, but how to analyze the information that they receive.

We discussed different methods for collaborating at various levels—most of which will have to be explored further. SARA/MSH agreed that a first step would be for SARA to submit to the ERC a SARA document on Family Planning/Reproductive Health that has been translated into French. SARA would work with MSH to prepare this document for this type of electronic distribution. This step would enable

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## *Meeting with SatelLife*

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the two organizations to get acquainted with each others' working styles and limitations as well as help to build trust for future, more complex collaborations.

Another suggestion was to discuss ways that might be appropriate to put the advocacy modules on-line. This is something that would require careful thought and planning, along with appropriate teaching tools that were designed for electronic use, but it is something that we should consider.

The ERC can be accessed at: <http://www.msh.org/fpmd/erc/erc.htm>

## **Meeting with SatelLife**

Our discussions with SatelLife were very exciting. Renu and Bret met with the Executive Director of SatelLife, John Mullaney, and several members of his staff. SatelLife is the organization that started and operates HealthNet, a computer-based telecommunications system that links health care workers around the world. HealthNet provides access to medical information, e-mail connectivity, electronic conferencing, and other services via a network of "nodes" in each country where HealthNet operates (See Annex 2: SatelLife Services). These nodes are electronic distribution centers—computers that relay messages and other data to and from each point in the network, much as a local post office collects and distributes mail. HealthNet has approximately 4,000 subscribers worldwide.

### *Prior SatelLife/SARA Collaboration*

Early in the project, SARA worked with SatelLife to create, produce, and help distribute a directory of HealthNet users. SatelLife indicated that this collaboration influenced the development of their Global Database of Health Professionals. This database not only helps SatelLife track users of its services, but also enables registered users to locate others who share their professional interests and expertise. This directory is linked to and searchable from the ERC Member Database; new ERC members also are automatically added to the SatelLife Global Database.

SARA also contributed documents and summary reports to SatelLife's electronic publications archive, which is distributed to HealthNet nodes so that users can access this information locally, rather than through international e-mail communications.

### *Other SatelLife Activities*

In their recent subcontract with MSH, SatelLife provided technical assistance in developing the ERC. They developed several tools that enable people to access information and web sites using only e-mail. Their tool, "GetWeb" delivers on request the text content of a web page to anyone with an e-mail account, and allows these

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users to search the Internet for information. Although this method of access is time-consuming, it is the first step towards making the Internet available to the vast majority of users who only have access to e-mail. In addition, SatelLife is developing a more sophisticated tool that will enable e-mail users to retrieve and store complete web sites from the Internet on their local computer. Users would then be able to browse these sites on their computer using tools such as Netscape, without having to be actually connected to the Internet.

SatelLife runs several electronic conferences. Each conference is moderated and has a steering committee that helps determine the content of these discussions, and monitors the quality of the information presented. SatelLife sees this management as one answer to the issue of reliability of information and the need for some "quality control." An effort to give structured guidance to users, this can be seen as a stamp of approval to documents produced by reputable organizations and researchers. One issue to consider when providing such a filter is whether the filter constitutes censorship. SatelLife feels that censorship would not be an issue since all users would still be able to get any information from any site. The benefit of the filter would be to direct people to the highest quality, most informative research and information for a wide group of people with common interests, concerns and activities. SatelLife hopes that user needs will soon drive the filtering process.

Another SatelLife service provides access to medical databases at the National Library of Medicine in Washington, D.C. Although direct access to this information is either unavailable or prohibitively expensive, SatelLife allows users to search databases such as MEDLINE, CANCERLIT, and TOXLINE at little or no cost.

### *Future Directions*

SatelLife would like to produce an online publication to encourage in-country researchers to get their information into the public domain, while addressing the issues of quality and reliability of information. This is being done in print with the African Indicus; SatelLife believes this could be done electronically. They are working with the *Cochrane Collaboration*, an initiative whose mandate is to prepare, maintain and disseminate systematic, up-to-date reviews of Randomized Controlled Trials in health care, and, when RCTs are not available, reviews of the most reliable evidence from other sources. (More information on the Cochrane Collaboration can be found on the Internet at: <http://hiru.mcmaster.ca/cochrane/default.htm>). SatelLife is most interested in developing critical appraisal methods that provide a standard for conducting—and criticizing—research. Such an effort would involve a peer review of Africans involved in the field. Starting on a small scale, SatelLife plans to choose four documents and have a team of researchers review the material using the critical appraisal method. This effort would then be evaluated and modified as necessary.

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## *Meeting with SatelLife*

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SatelLife realizes that the landscape of information technology in developing countries is changing rapidly. As more and more people request access to e-mail and the Internet, SatelLife has found its systems operators overloaded and unable to maintain quality connections themselves. At the same time, other means to access the Internet, both commercial and state-controlled, are increasing, so SatelLife has been encouraging new users to subscribe to these local services as they become available. SatelLife plans to make a HealthNet "package" available to these service providers, and working through them, continue to serve the needs of HealthNet subscribers.

Recognizing that training is the most important part of electronic communication, SatelLife is currently seeking funding to develop a regional information training center in Nairobi that will be based in the medical school where the current HealthNet node is located. This training will be structured much like the SARA advocacy training—they would conduct a regional TOT. Those trained will then be able to train users locally.

### *Potential SatelLife/SARA Areas of Collaboration*

We discussed ways to build further on the initial collaboration, by doing research to find the answers to questions that many organizations are asking about electronic dissemination and communication: How is the technology actually being used? By whom? Is technology itself viewed as the solution, or is there a need to focus more upon the content of information? What types of training are most appropriate to the projected end users? The questions we raised and discussed with SatelLife are hardly new, but SatelLife believes that it and SARA are well positioned to explore these issues.

Following are some suggestions for potential collaborative efforts between SARA and SatelLife:

SARA and SatelLife agreed to start by convening a collaborative meeting with organizations working on electronic communication initiatives in Africa. A task order has been drafted and approved that provides for the meeting and a jointly developed position paper on the status of electronic communications initiatives and the needs of users in the field. The meeting would address the issues of:

- ◆ Technology vs content
- ◆ What is the current role of electronic communication in policy making? What role could it play?
- ◆ How do policy makers get information?

- ◆ How do people use information?
- ◆ How can people use these technologies? Are these technologies based on real needs?
- ◆ How can technology hybrids be used more effectively?
- ◆ How can CD-ROM technology be used?

Potential invitees would be from AED's LearnLink, Leland Initiative, World Bank, SatelLife, MSH, and others identified as doing critical work in this area. We feel that due to its commitment to electronic information dissemination and its analytical expertise, SARA is well positioned to host this meeting, and to develop with SatelLife, guidelines for what technology and training is actually needed in the field. The meeting should be small and focused on better understanding common issues and concerns as well as sharing experiences and opportunities for electronic communication as it develops in Africa.

SatelLife maintains a Home Page on the Internet at: <http://www.healthnet.org>

### Conclusion

This trip was fruitful in helping SARA understand the opportunities that exist in electronic communication. As was stressed throughout the meetings, electronic technology is simply one tool that can facilitate a communication process. As much or more emphasis must be given to developing communication skills than to the technology, since without these skills the technology will not be seen as necessary or used. If people do not have a reason to communicate, then all the newest electronic tools will be wasted.

Focusing the electronic communication strategy should be a priority for SARA in the next two years. Although we have pioneered several strategies for using electronic communication more widely with our African partners, there are still several areas that need to be examined. Several opportunities for collaboration with the organizations we visited in Boston might assist SARA in achieving this focus. Moreover, SARA is in a unique position to be able to influence USAID and CAs as well as glean new understanding from experiences with African institutions and users in the field.

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*Appendix A: List of Persons Contacted*

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## Persons Contacted

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*Appendix B: SatelLife Services*

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# HealthNet Services

E-mail

Global Electronic Conferences

ProMED

E-Drug

ProCAARE

ProCOR

AfroNets

Indices

Electronic Publications

HealthNet News

WHO Library Digest for Africa

WHO/AFRO Infodigest

AIDS Bulletin

Child Health Dialogue

Practical Pointers for Primary Care

*and others ...*

BITNIS

Access to NLM

GetWeb

Access to Internet Resources

Global Database of HealthProfessionals

Electronic Directory

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*Appendix C: Task Order No. 383*

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# Health and Human Resources Analysis for Africa

## TASK ORDER No. 383

Date submitted : May 8, 1997

1. **SUBJECT:** Consultative meeting with organizations working on electronic communication initiatives in Africa.

2. **PURPOSE:** The meeting will be held with organizations involved in implementing electronic communication initiatives to discuss and better understand common issues and concerns, experiences and opportunities as electronic implementation efforts increase in Africa. SARA has demonstrated a commitment to introducing electronic communication activities as well as analytical expertise; in an effort to remain at the cutting edge, SARA is particularly well positioned to host this meeting and to help establish guidelines for what is needed in the field. Some of the questions that will be discussed include:

- Technology vs content
- What is the current role of electronic communication in policy making? What role could it play?
- How do policy makers get information?
- How do people use information?
- How can people use these technologies?
- Is the technology based on real needs?
- How can technology hybrids be used more effectively?
- How can CD Rom technology be used?

SARA would host the meeting but not sponsor participation unless some key consultants were identified as vital. Potential invitees would be from AED's LearnLink, Leland Initiative, World Bank, SatelLife, MSH, and others identified as doing critical work in this area.

3. **PRODUCT:** Consultative meeting and a jointly developed and produced position paper on the status of electronic communication initiatives and the needs of users in the field.

4. **SCOPE OF WORK:** Planning meetings. Organizing and hosting the meeting here in Washington. Joint writing of position paper with SatelLife and perhaps others.
5. **LEVEL OF EFFORT:** Staff time to plan the meeting. SARA participation in the meeting, possible need to hire a facilitator for the meeting and provision of staff time or consultants to write the paper.

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Date

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Approved/Technical Officer/HRD

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Date