

Integrated Development Approach for Poverty Reduction in the Sahel

- **Millennium Villages Project**
- **East African Drylands Alliance**
- **Nigeria MDG Scale Up Initiative**
- **Community Health Worker Scale Up**
- **Off-Grid Infrastructure: Shared Solar**

Millennium Villages Project

FIVE CORE INTERVENTIONS:

- **Food production: Agricultural inputs**
- **Access to primary education (school meals, IT)**
- **Access to health care**
- **Access to infrastructure: roads, electricity, telephony and ICTs, safe water and sanitation, irrigation**
- **Business development**

Built on community-led development and local professional management

<http://millenniumvillages.org/>

TARGET SECTORS AND EXAMPLES OF INTERVENTION STRATEGIES

AGRICULTURE

- Fertilizer
- High-yield seeds
- Treadle pumps and supplemental irrigation
- Agricultural extension

EDUCATION

- Construction of high-quality classrooms
- Books and supplies
- Teacher training
- Mid-day meals
- Computers
- Internet connectivity in some schools
- School-to-School program

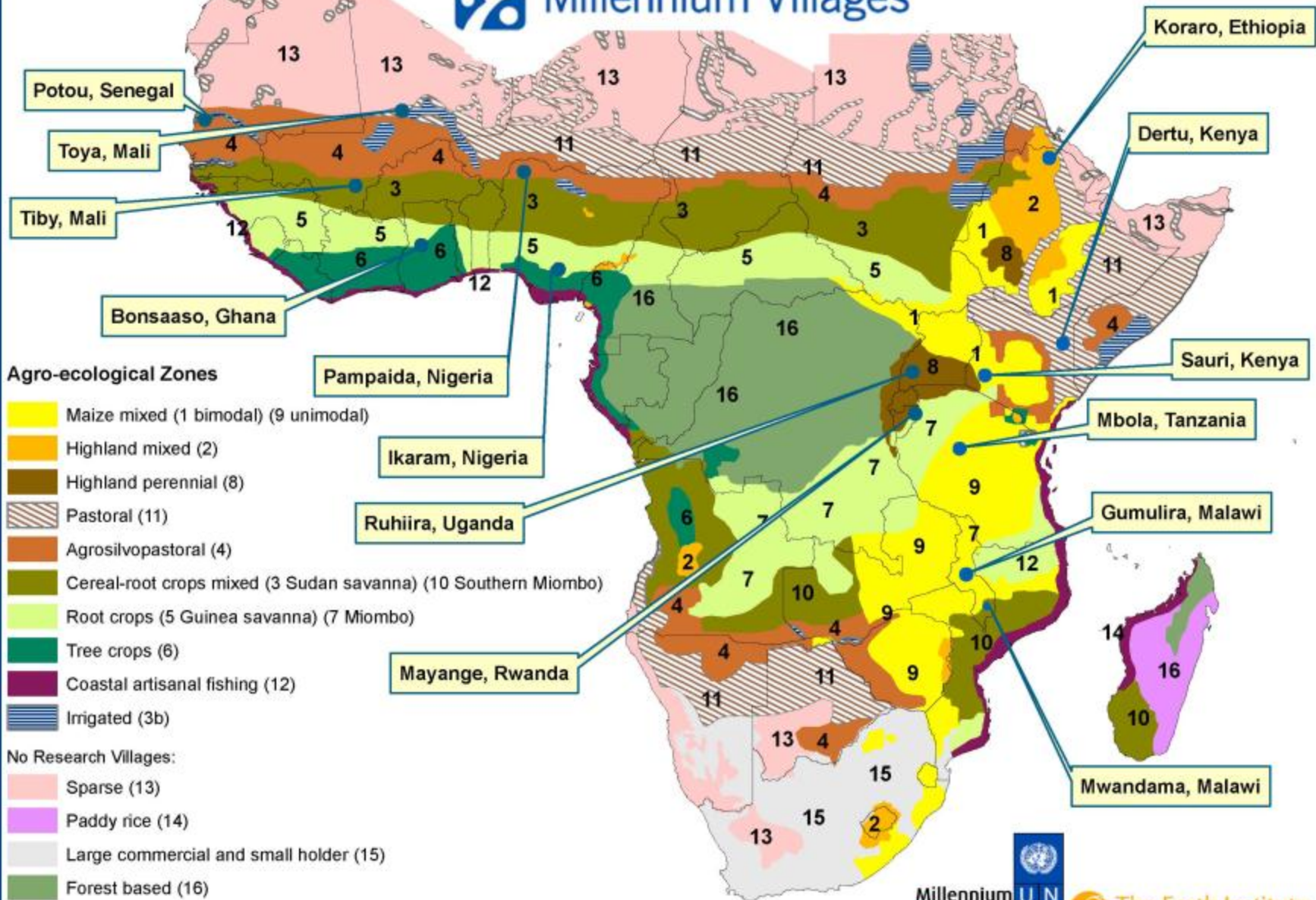
HEALTH

- Construction of clinics (Level 3)
- Upgrading hospitals (Level 4)
- Medical supplies
- Improved staffing and salaries for health workers
- Training of Community Health Workers
- Improving access to family planning services

INFRASTRUCTURE

- Extending cell phone coverage throughout the village
- Internet connectivity in schools, health centers
- Road grading, road construction
- Increasing access to water resources, innovative electrical systems

Millennium Villages



Adapted from Dixon et al. 2001. Farming Systems and Poverty. FAO



Year Three Results*

- **7X** increase in bednet usage
- **60%** reduction in malaria prevalence
- **30%** increase in women giving birth in presence of skilled birth attendant
- More than **2x** increase in staple crop yields
- **35%** reduction in chronic undernutrition among children under 2
- **80%** of children receiving school meals
- **3X** increase in access to safe water
- **7X** increase in access to high quality sanitation facilities
- **20%** increase in school coverage

*represents results after three years of implementation across five initial MV sites in Ghana, Kenya, Malawi, Nigeria and Uganda

Some Challenges of the Drylands of East Africa

- Historic under-representation
- High incidence of poverty, food insecurity & malnutrition
- Very low population density and low service delivery
- Severe infrastructure deficit
- High population growth rates
- Localized insecurity

East African Drylands Alliance

A project in the Horn of Africa to demonstrate that an integrated rural development approach in arid regions can achieve meaningful development gains.

<http://www.earth.columbia.edu/articles/view/2713>

Khor Angar,
Djibouti

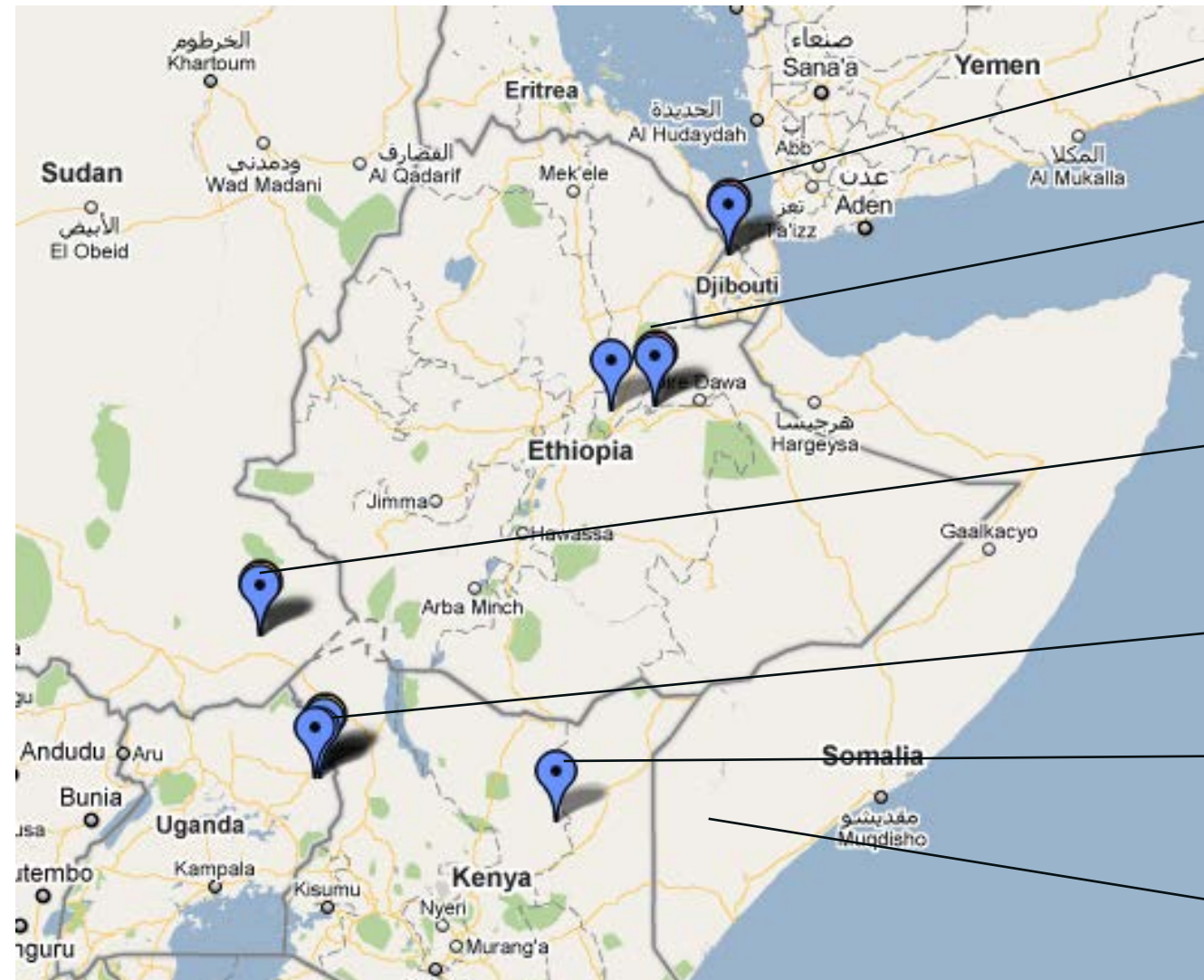
Afdem and Amibara,
Ethiopia

Eastern Equatoria, S.
Sudan (proposed)

Lotome and
Lorengedwat, Uganda

Eresaburu and Eldera,
Kenya

North & South Somalia
(proposed)



Proposed East African Drylands Initiative

Interventions by Sector

Sector(s)	Proposed Interventions
Health	New and improved health facilities; Increased access to drugs and bednets; Mobile clinics; Community Health Workers
Education	New and improved schools (including mobile schools); school meal programs; Availability of supplies; Human resource strengthening
Infrastructure	New and improved roads; Increased mobile connectivity penetration; Access to modern energy
Livestock and Agriculture	Provision of veterinary services; Improved livestock marketing; Availability of seeds and fertilizer; Early warning systems for drought
Water and Sanitation	Access to safe drinking water and basic sanitation; Water points for livestock and irrigation; Construction of dams
Community Development	Community development groups (pastoral, farming, marketing, etc.); Increased inter-community dialogue
Environment	Rehabilitate degraded rangeland; Decreased environmental damage at water sites; Improved land management

The Beneficiaries: Pastoralists, Agro-Pastoralists



Nigeria MDG Scale Up:
The Conditional Grant Scheme for
Local Government Areas (2011)

Nigeria's MDGs Conditional Grants Scheme (CGS): Concept and Local Government Initiative

- **The Conditional Grants Scheme for States was introduced in 2007**
 - **Funded from the Debt-Relief Gains as overseen by the Office of the SSAP-MDGs**
 - **Introduced in response to low implementation rates and poor consultation of Federal Ministries and Agencies with State/Local Government and communities**
 - **In 2011 seeking to engage and support Local Government Areas in achieving the MDGs**

Objective of the CGS Starting in 2007

- Investing in the MDGs at the State &LGA Level and ensuring ownership and sustainability
- Empowering State and Local Government to carry out their constitutional responsibilities
- Promoting improvements in public service delivery
- Encouraging improvements in public expenditure reform,
- Strengthening the partnership between the three tiers of government for national planning

Extending Engagement to LGAs in 2011

- Building on the successes of the State track of the CGS by providing grants for integrated investments focused on specific LGAs
- Responding to observed weaknesses in the service delivery chain that prevent access to essential services
- Empowering LGAs to fulfil their constitutional responsibilities for primary healthcare and education
- Facilitating deeper involvement of communities in local development through Local Government

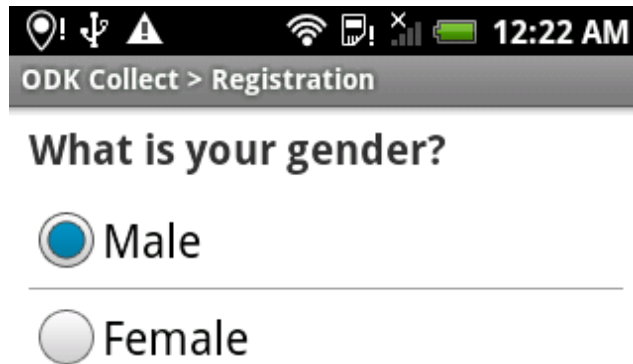
Data Collection in LGAs Using Android Smartphones



GPS Coordinates



Multiple Choice



The image shows a screenshot of a mobile application interface. At the top, there is a status bar with various icons (location, USB, warning, Wi-Fi, signal, battery) and the time 12:22 AM. Below the status bar is a header bar that reads "ODK Collect > Registration". The main content of the screen is a question: "What is your gender?". There are two radio button options: "Male" (which is selected, indicated by a blue dot) and "Female" (which is unselected, indicated by a grey dot). A horizontal line is positioned between the two options.

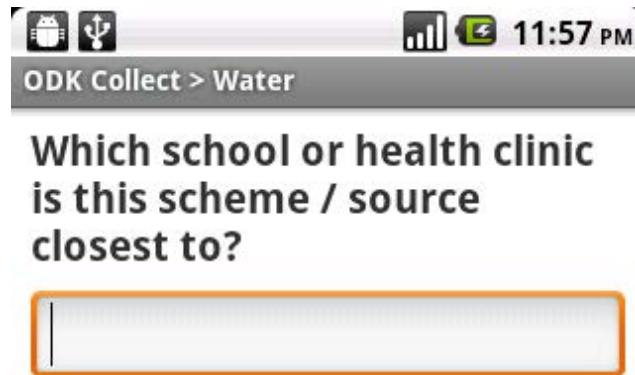
ODK Collect > Registration

What is your gender?

Male

Female

Text



ODK Collect > Water

Which school or health clinic
is this scheme / source
closest to?





Nigeria MDG Scale up Initiative

Quick Needs Assessment: Education

Where we are now

50 primary & secondary schools
180 classrooms
38 potable water sources
135 sanitation facilities
43 Chalkboards
2355 bench/chairs
1827 desks
13202 textbooks and exercise books
428 math textbooks
144 teaching tool sets
67 qualified teachers
343 non-qualified teachers

What's the gap

121 primary & secondary schools to build
665 classrooms to build
64 classrooms to repair
266 potable water sources
718 sanitation facilities to construct
811 chalkboards to purchase
31747 bench/chairs to purchase
32275 desks to purchase
293716 textbooks and exercise books to purchase
33674 math textbooks to purchase
709 teaching tool sets
443 new qualified teachers to hire
343 non-qualified teachers to train

Where we are going

171 primary & secondary schools
853 classrooms
171 potable water sources
853 sanitation facilities
853 Chalkboards
34102 bench/chairs
desks
306918 textbooks and exercise books
34104 math textbooks
853 teaching tool sets
853 qualified teachers

Nigeria MDG Scale Up Initiative

Quick Needs Assessment: Health

Where we are now

22 BHCs
 0 PHCs
 0 referral transportation vehicles
 0 health facilities with water
 0 health facilities with power
 0 health facilities with sanitation
 3 health facilities with essential medicines
 138385 individuals sleeping under insecticide-treated bed nets
 22 facilities equipped with malaria treatment
 15973 children under 5 years routinely immunized
 10 doctors, nurses, midwives, nurse/midwives
 50 community health officers

What's the gap

0 BHCs to construct
 10 PHCs to construct
 4 health facilities needing repair
 8 referral transportation vehicles required
 32 health facilities with water
 32 health facilities with power
 32 health facilities with sanitation
 29 health facilities to be equipped with essential medicines
 3642 insecticide-treated bed nets
 10 facilities to be equipped with malaria treatment
 9790 children under 5 years to be routinely immunized
 90 doctors, nurses, midwives, nurse/midwives to be hired
 145 community health officers to be hired

Where we are going

15 BHCs
 10 PHCs
 8 referral transportation vehicles
 25 health facilities with water
 25 health facilities with power
 25 health facilities with sanitation
 25 health facilities with essential medicines
 145668 people sleeping under insecticide-treated bed nets
 25 facilities equipped with malaria treatment
 25762 children under 5 years routinely immunized
 100 doctors, nurses, midwives, nurse/midwives
 195 community health officers

Health Needs Assessment Miga, Jigawa Nigeria

HEALTH RAPID GAP ANALYSIS (Miga, Jigawa)		
	NUMBER	GAP
Population of the LGA	145668	
Population of LGA <5 years	25762	
Number of wards (est)	7	
FACILITIES PER POPULATION		
BHCs (including Health Posts and Dispensaries) per population (target)	15	
PHCs per population (target)	10	
Existing BHCs	22	
Existing PHCs	0	
Health facilities with maternal health/emergency delivery capacity	1	
Gap (BHCs needing construction)		0
Gap (PHCs needing construction)		10
Gap (total health facilities needing repair)		4
EQUIPMENT/INFRASTRUCTURE		
Emergency referral transportation (target)	7	
Emergency referral transportation (existing)	0	
Gap (emergency referral transportation to be purchased)		7
Healthcare facilities with water (target)	25	
Healthcare facilities with water	0	
Gap (existing healthcare facilities needing water)		22
Gap (new healthcare facilities needing water)		10
Healthcare facilities with power (target)	25	
Healthcare facilities with power	0	
Gap (existing healthcare facilities needing power)		22
Gap (new healthcare facilities needing power)		10
Healthcare facilities with sanitation (target)	25	
Healthcare facilities with sanitation (existing)	0	
Gap (existing healthcare facilities needing sanitation)		22
Gap (new healthcare facilities needing sanitation)		10
DRUGS, VACCINES, AND DIAGNOSTICS		
Health facilities with essential medicines (target)	25	
Health facilities with essential medicines (existing)	3	
Gap (existing healthcare facilities needing medicines)		19
Gap (new healthcare facilities needing medicines)		10

Nigeria Management Information Systems (NMIS)

- Single, easy-to-use, open-source system
- Brings together data from multiple sectors and multiple sources
- Display and visualize
 - See it on the map, see the facility
- Real-time progress
 - Rapid data upload using mobile technologies
 - Facility data + potential for community-level data
- Two-way information flow
 - Feedback to the ground/program managers
- Housed in-country

Nigeria MDG Information System search

Nigeria Mapped Indicators

Nigeria

Select an Indicator above to display it on the map.

States

Kwara	Taraba	Bauchi	Nassarawa
Imo	Ebonyi	Ogun	Enugu
Gombe	Yobe	Ekiti	Plateau
FCT	Rivers	Borno	Akwa Ibom
Adamawa	Katsina	Lagos	Kogi
Kebbi	Kaduna	Abia	Jigawa
Anambra	Zamfara	Cross River	Osun
Kano	Niger	Delta	Ondo
Edo	Sokoto	Bayelsa	Oyo
Benue			



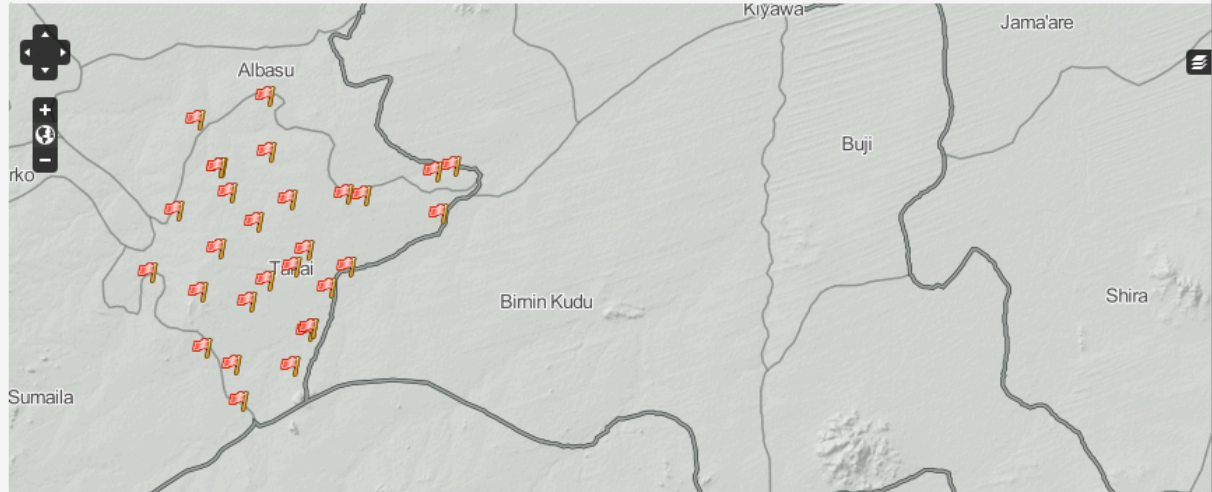
Nigeria MDG Information System

Nigeria > Kano > Takai

Facilities | MDG Indicators

Kano

- Nassarawa
- Rimin Gado
- Ungongo
- Wudil
- Dogwuwa
- Albasu
- Kiru
- Shanono
- Kano Municipal
- Kunchi
- Tofa
- Bichi
- Warawa
- Garko
- Makoda
- Bunkure
- Dawakin Kudu
- Gezawa
- Bebeji
- Ajingi
- Tsanyawa
- Gabasawa
- Minjibir
- Kura
- Takai**
- Bagwai
- Gwarzo
- Rogo
- Karaye
- Garun Mallam
- Sumaila
- Kabo
- Dawakin Tofa
- Kumbotso
- Fagge

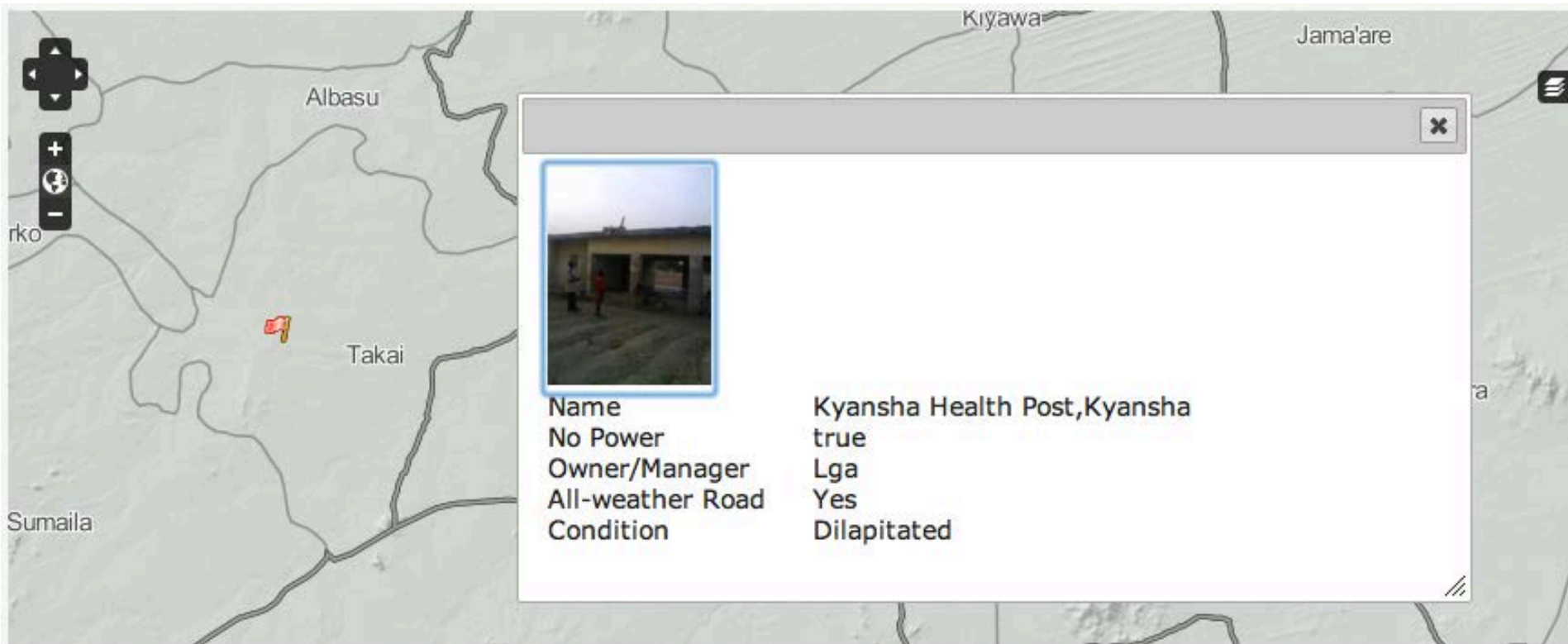


Water (208) | Education (90) | **Health (31)**

Kogo H/ Post	true	Lga	No	Dilapitated
Awazara Health Post	true	Lga	No	Dilapitated
Kyansha Health Post, Kyansha	true	Lga	Yes	Dilapitated
Dispensary	true	Lga	Yes	Poorly Maintained
Karifi Dispensary	true	Lga	Yes	Dilapitated
Fajewa Health Clinic	true	Stategovernment	Yes	Dilapitated
Kacako Dispensary	true	Lga	Yes	Poorly Maintained
Kaniyaka Health Post	true	Lga	Yes	Dilapitated

All weather road access.

- Yes: 22 (70.9%)
- No: 9 (29%)



Name Kyansha Health Post,Kyansha
 No Power true
 Owner/Manager Lga
 All-weather Road Yes
 Condition Dilapitated

Water (208)

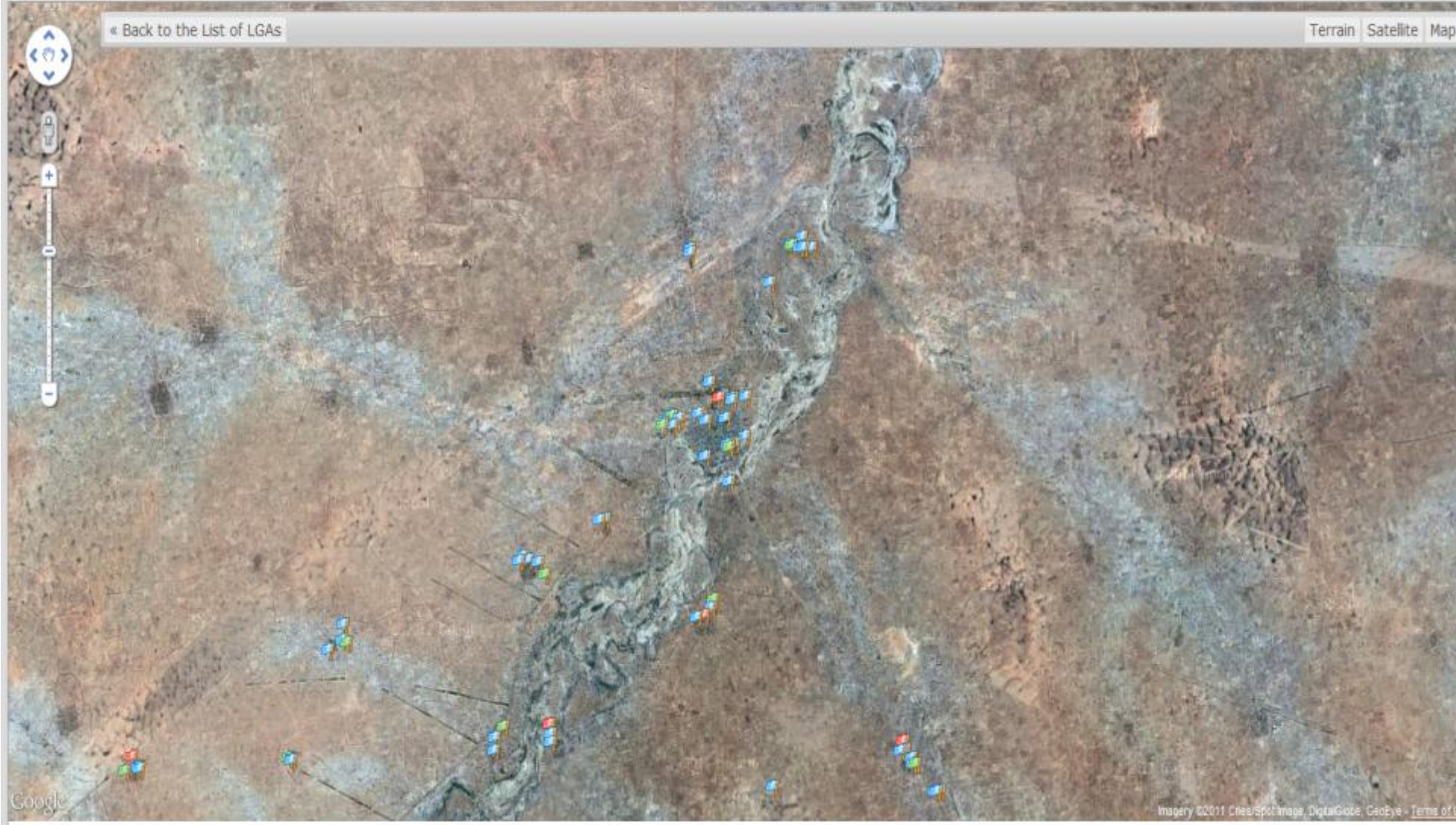
Education (90)

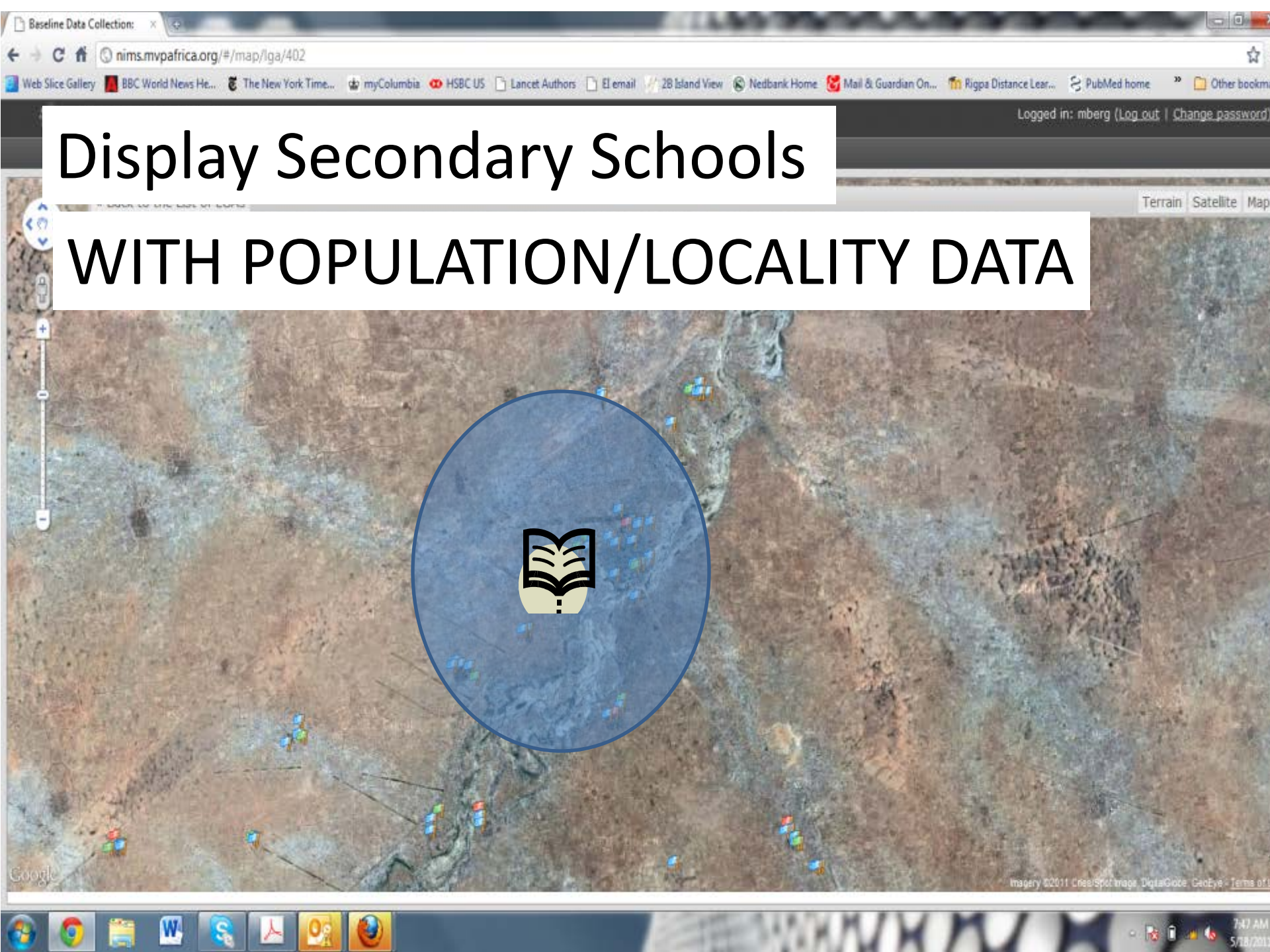
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Kogo H/ Post	true	Lga	No	Dilapitated
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Fajewa Health Clinic	true	Stategovernment	Yes	Dilapitated
Kacako Dispensary	true	Lga	Yes	Poorly Maintained
Kaniyaka Health Post	true	Lga	Yes	Dilapitated

NMIS Database Map View:

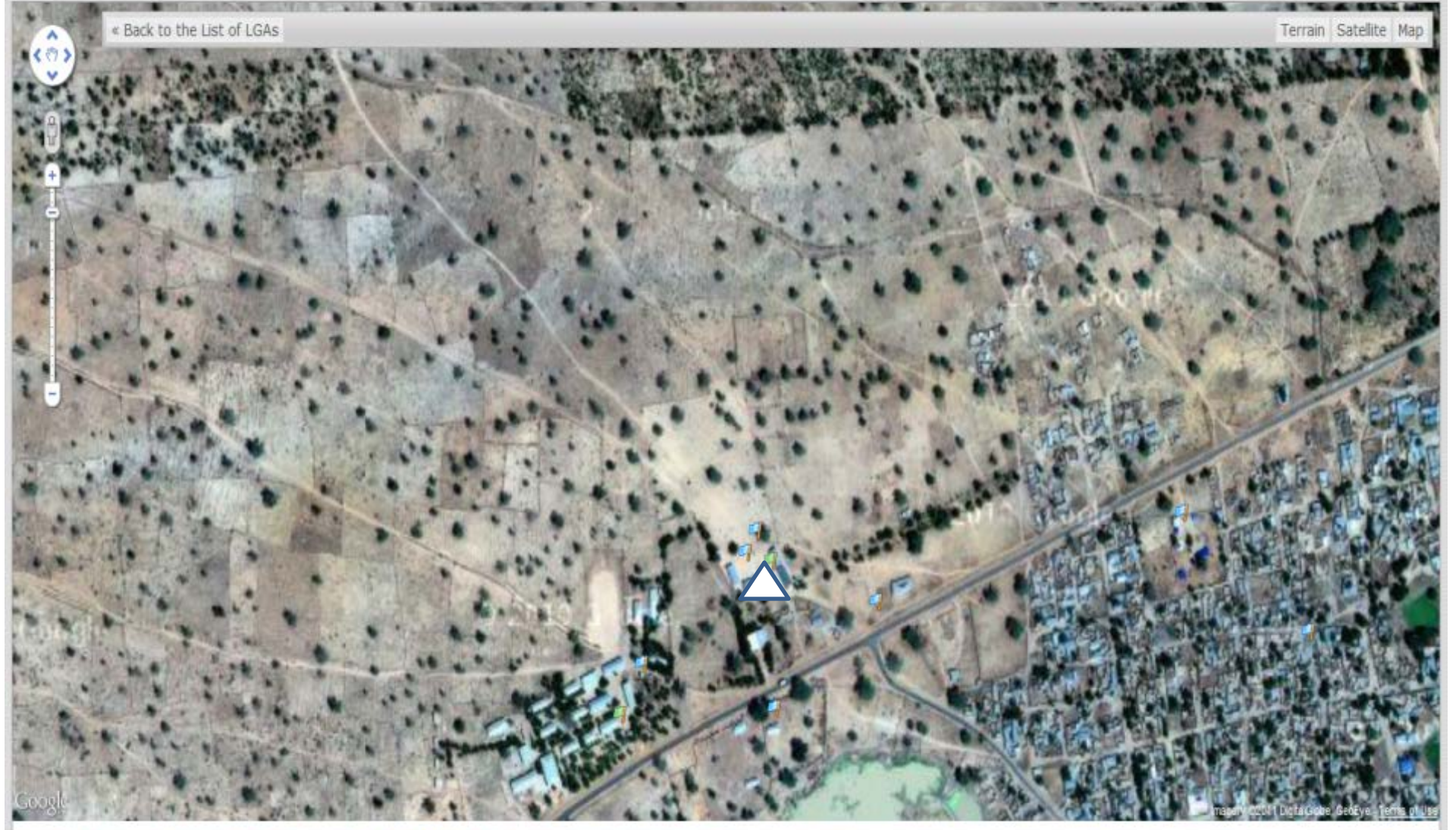
- **Zoom in to the Local Government Area (LGA)**
 - different colored flags indicate where facilities are located
 - green** = schools, **blue** = water points, **red** = health clinics
- **Click on a flag to view data gathered on that facility**
 - in this case we selected a green (school) flag in Kaita LGA in Katsina State
 - click on the icon to see a picture of the facility





Display Secondary Schools


WITH POPULATION/LOCALITY DATA



« Back to the List of LGAs

Terrain Satellite Map

Education



Device ID 354583040520618
 Start Time 2011-03-28T14:09:48.377
 End Time 2011-03-28T16:53:51.326

Research Assistant's Name
Akla Dabara

Photo of Facility
1301317825759.jpg

Geocode of Facility
13.304582834243774 7.788657546043396 444.0 4.0

Zone
Northwest

State
Katsina

LGA
kaita

Ward
Dankam

Community
Dankama

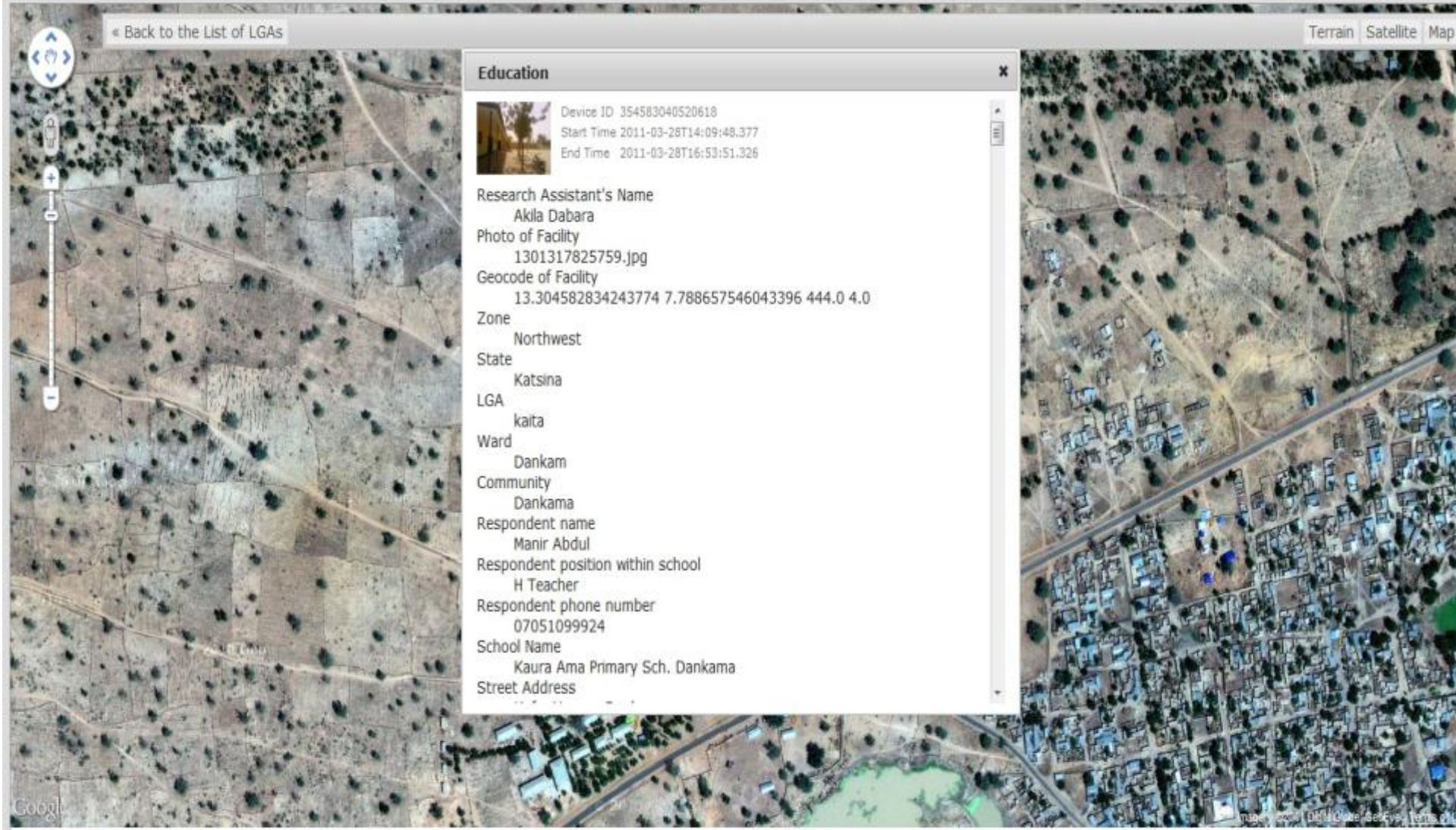
Respondent name
Manir Abdul

Respondent position within school
H Teacher

Respondent phone number
07051099924

School Name
Kaura Ama Primary Sch. Dankama

Street Address



Google



Rapid Scale Up of Primary Health Care Using Community Health Workers

Key Steps for Health Scale-Up:

- **Identify Interventions**
- **Quantitative Targets**
- **Campaign Mode**
- **National Plans**
- **Financing Mechanism (Global Fund, GAVI, others)**
- **Partners and Implementation Management
(UN, countries, regional bodies, companies, NGOs, foundations)**
- **Monitoring, Audits**

Scale-up of CHWs

6 WHO Health System building blocks for the CHW (plus one):

1. Service Delivery – Defining the extension pattern and suite of interventions
2. Health workforce – Determining the profile of a CHW and remuneration/incentives
3. Information Systems – Data for ongoing management and evaluation, mHealth
4. Medicines, Point of Care Diagnostics – Transforming the capabilities of a CHW
5. Financing – Salaries, Motivation and Incentives (backpacks, bikes, uniforms etc)
6. Leadership and Management – Multiple layers of oversight includes community
7. Community Mobilization and Engagement – Foundational and cross cutting

http://millenniumvillages.org/files/2011/06/1mCHW_TechnicalTaskForceReport.pdf

Who are the Community Health Workers?



Literate

Locally-Based

Men and Women

Paid

All Ages

Nominated by Community

Community Health Workers



Health Education and Promotion

Health Surveillance

Case Management

Health Data Collection for Public Health Decision Making

Continuity of Care

Rapid Training

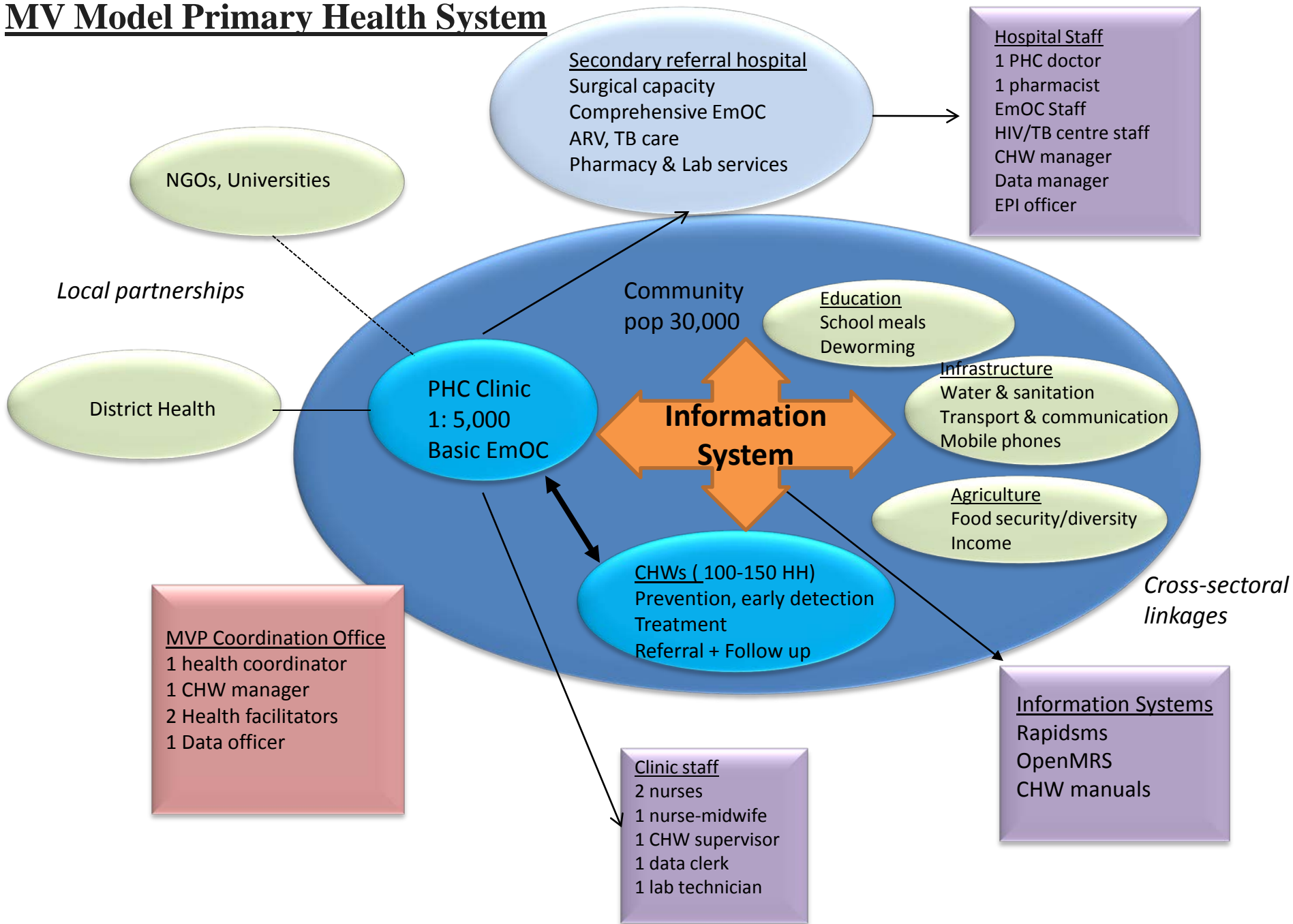
Data-based Decision Making

Supportive supervision

Human Resources management

Operations management and strategic planning

MV Model Primary Health System



5 Goals for CHILDCOUNT+

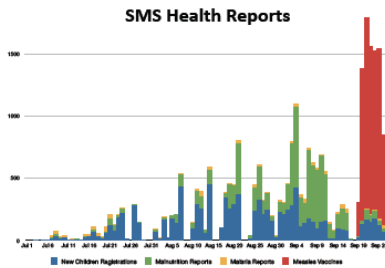
Malaria Rapid Diagnostic Test Report

MRDT +28 Y N D CV

Code Patient ID Positive? (Y/N) Bednet? (Y/N) Symptoms

V = Vomiting, F = Fever, D = Diarrhea
 A = Appetite Loss, CG = Chronic Cough
 CF = Confusion, NR = Non Responsive
 CV = Convulsions, UF = Unable to Feed

MRDT> Child +28, DIALLO Fatima M/13m has MALARIA. Child is less than 3. Please provide 1 tab of Coartem (ACT) twice a day for 3 days.



Monitor for malaria, diarrhea, and pneumonia

Nyawara Clinic

#	PROVIDER	TOTAL CASES	# NEW CASES	MRDT	MUAC	RATE	LAST ACTIVITY
1	Sokenon Wasambo	116	17	10	112.97% (112/116)	92% (128/140)	1 days ago
2	Emily Aoko	81	3	3	76.94% (76/81)	100% (48/48)	1 days ago
3	Josephine Oziro	87	8	0	83.95% (83/87)	86% (53/61)	2 days ago
4	Jacob Ochieng	73	5	1	68.90% (66/73)	100% (35/35)	1 days ago
5	Lawrence Ogogo	55	11	4	3.5% (3/55)	80% (37/46)	1 days ago
6	Salome Abong'o	71	2	1	30.42% (30/71)	94% (16/17)	2 days ago
7	Wycliffe Okoi	116	2	6	118.102% (118/116)	100% (58/59)	1 days ago
8	Peter Ouyanga	99	3	0	86.87% (86/99)	93% (44/47)	1 days ago
9	Godfrey Nyateng	73	4	1	71.97% (71/73)	89% (68/76)	1 days ago
10	Frederick Odhiambo	109	52	0	81.74% (81/109)	100% (166/166)	1 days ago
11	Josephine Mutitu	55	30	3	30.55% (30/55)	89% (114/127)	1 days ago
12	Lilian Okello	65	1	3	68.105% (68/65)	94% (52/55)	2 days ago
13	Marianne Akinyi	107	11	0	88.82% (88/107)	84% (38/45)	1 days ago
Summary		1107		32	82.5% (912/1107)	93% (668/923)	

Record all births and death

Nutrition Screening Report

MUAC +28 105 E V D

CODE Patient ID MUAC (mm) Edema (E/N) Symptoms

V = Vomiting, F = Fever, D = Diarrhea
 A = Appetite Loss, CG = Chronic Cough
 CF = Confusion, NR = Non Responsive
 CV = Convulsions, UF = Unable to Feed

Screen for malnutrition every 90 days

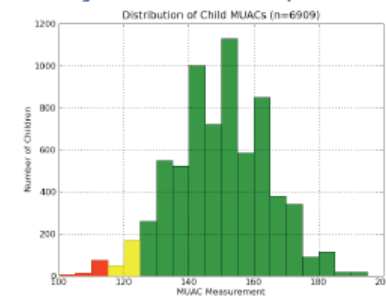


Full child immunization report

MEASLES +452 +5652 +324 +8425

Vaccinated	Eligible	Coverage
7574	8083	94%

MUAC> Child +28 Fatimata Diallo F/13M has SAM+. Please bring child in for IMMEDIATE inpatient care.



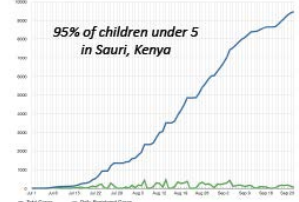
Child Registration

new diallo fatimata f 110408 amie 324245

CODE Last First Gender(M/F) DOB(ddmmyy) Guardian Contact #

PATIENT REGISTERED> +28: DIALLO Fatimata. 4/13M.
 Mother: Amie, Village: Kangaba

Register every child



Anyika: Caroline Atoka

#	NAME	SEX	AGE	MRDT	EDUCATION	STATUS	SYMPTOMS	LAST
1	4836	F	13.00-00	28m		Healthy (13/13m)		21.07
2	3236	F	38.11-07	28m		Healthy (15/13m)		11.08
3	7841	F	06.06-08	32m		Healthy (10/13m)		04.08
4	36389	F	06.06-08	32m		Healthy (10/13m)		04.08
5	17362	F	20.08-08	13m		Healthy (14/13m)		02.08
6	3578	F	11.01-08	06m	CG	Healthy (15/13m)		17.07
7	78669	F	11.07-07	26m		Healthy (14/13m)		04.08
8	52297	F	07.06-08	19m		Healthy (17/13m)		11.08
9	36377	F	13.00-08	04m		Healthy (18/13m)		01.08
10	40342	F	01.10-08	29m		Healthy (18/13m)		01.08
11	22366	F	30.07-08	13m		Healthy (15/13m)		04.08
12	71707	F	20.07-08	19m		Healthy (14/13m)		04.08
13	7780	F	14.09-07	27m		Healthy (17/13m)		04.08
14	7841	F	01.09-08	06m		Healthy (17/13m)		04.08
15	70542	F	09.06-08	17m				04.08

Informal counselling

CHW's



Cluster
Clinics



Structured consultation

District Hospital

Teaching Hospital



Emergency
number



Emergency medical
transport vehicle

Mobile-based Telemedicine Services

OFF-GRID Infrastructure

SharedSolar

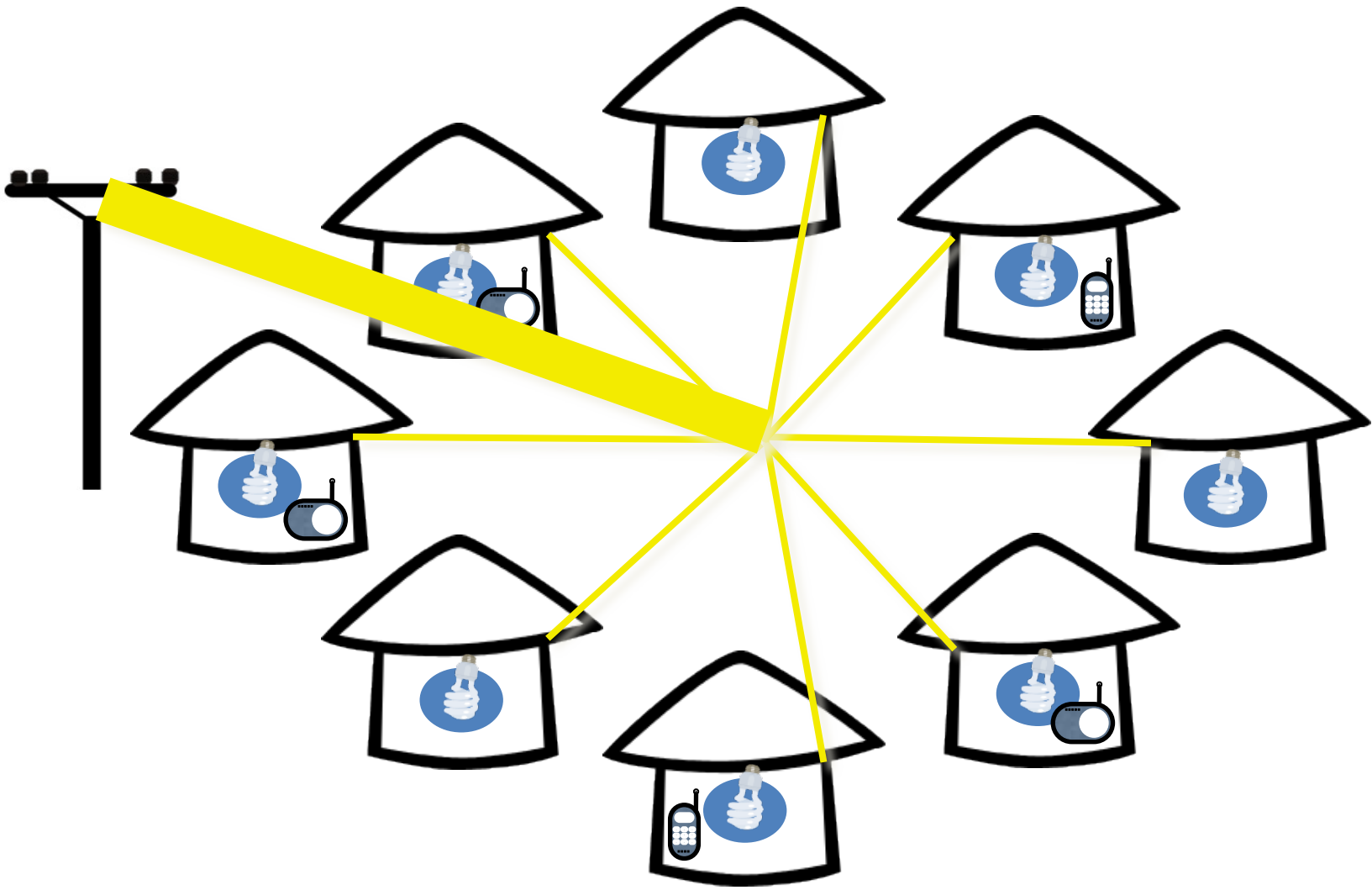
Contributors

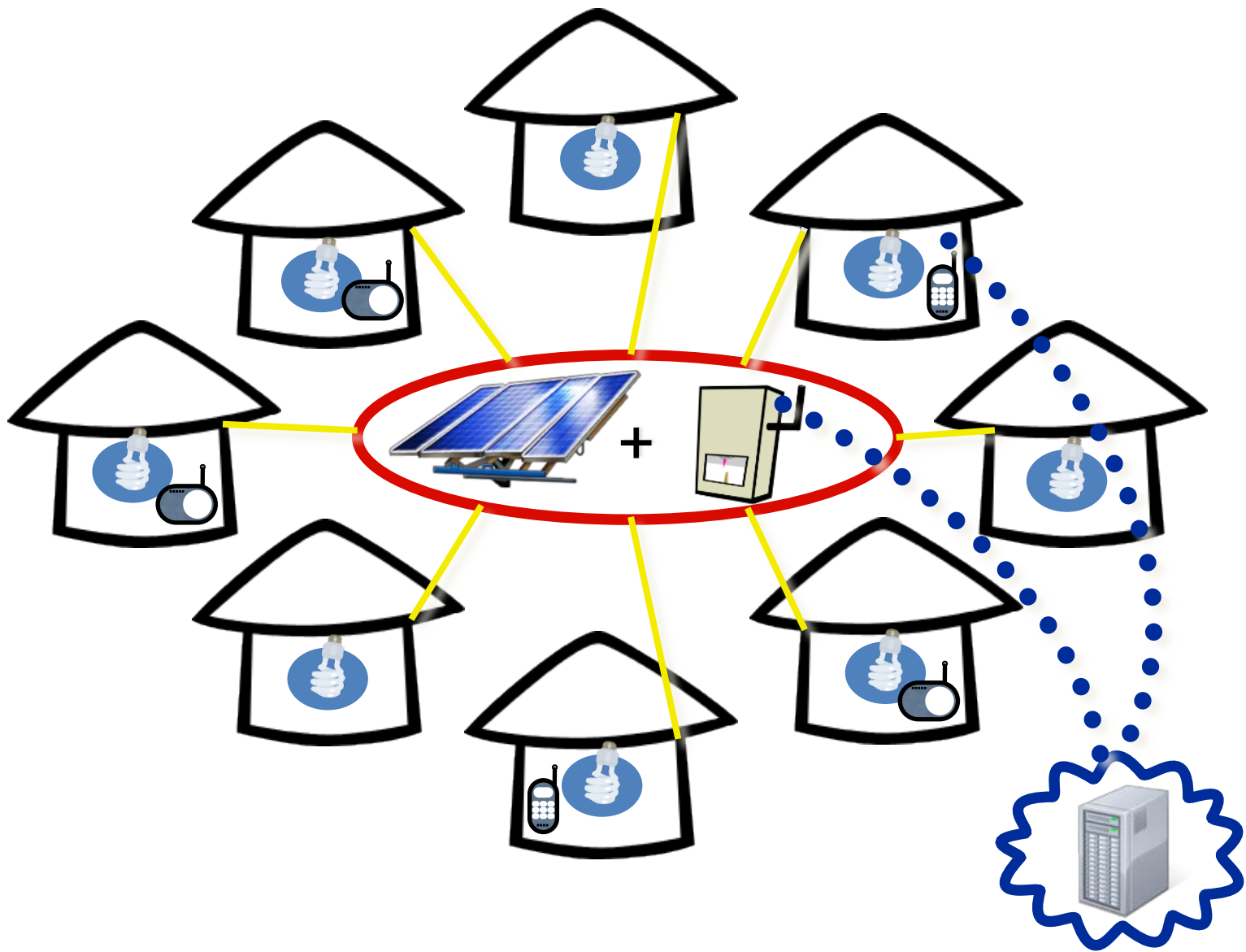
Edwin Atkins, Matt Basinger, Michael Benedict, Eric Brewer, Harrison Chiu, Justin Elszasz, Kate Kennedy Freeman, Emilio Simonet Jiménez, Levi Kingery, Yancheng Li, Achintya Madduri, Scott McNeil, Rajesh Menon, Javier Rosa, FS Rodriguez Sanchez, John Sarik, Daniel Soto, Ivan Willig

Vijay Modi (modi@columbia.edu)

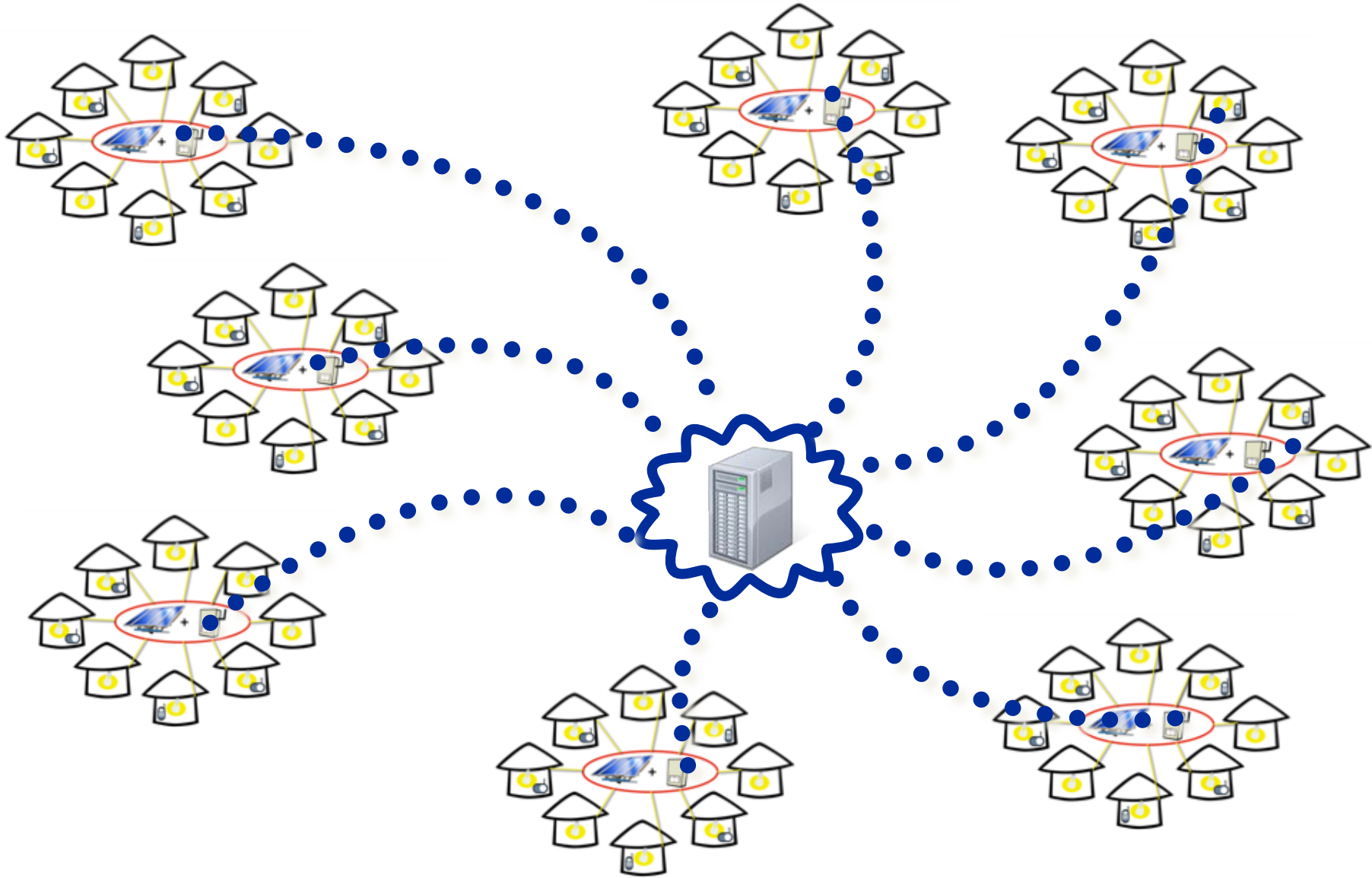
What do the poor pay?

- \$2 to \$8 per month
- **Not consistently-cannot pay every month in one monthly payment**
- For less than 1 kWh equivalent (in form of kerosene, batteries), or $> \$5/\text{kWh}$
- **Our approach: developed a PAY AS YOU GO MODEL with low initial cost to consumer and low transaction costs for payments.**





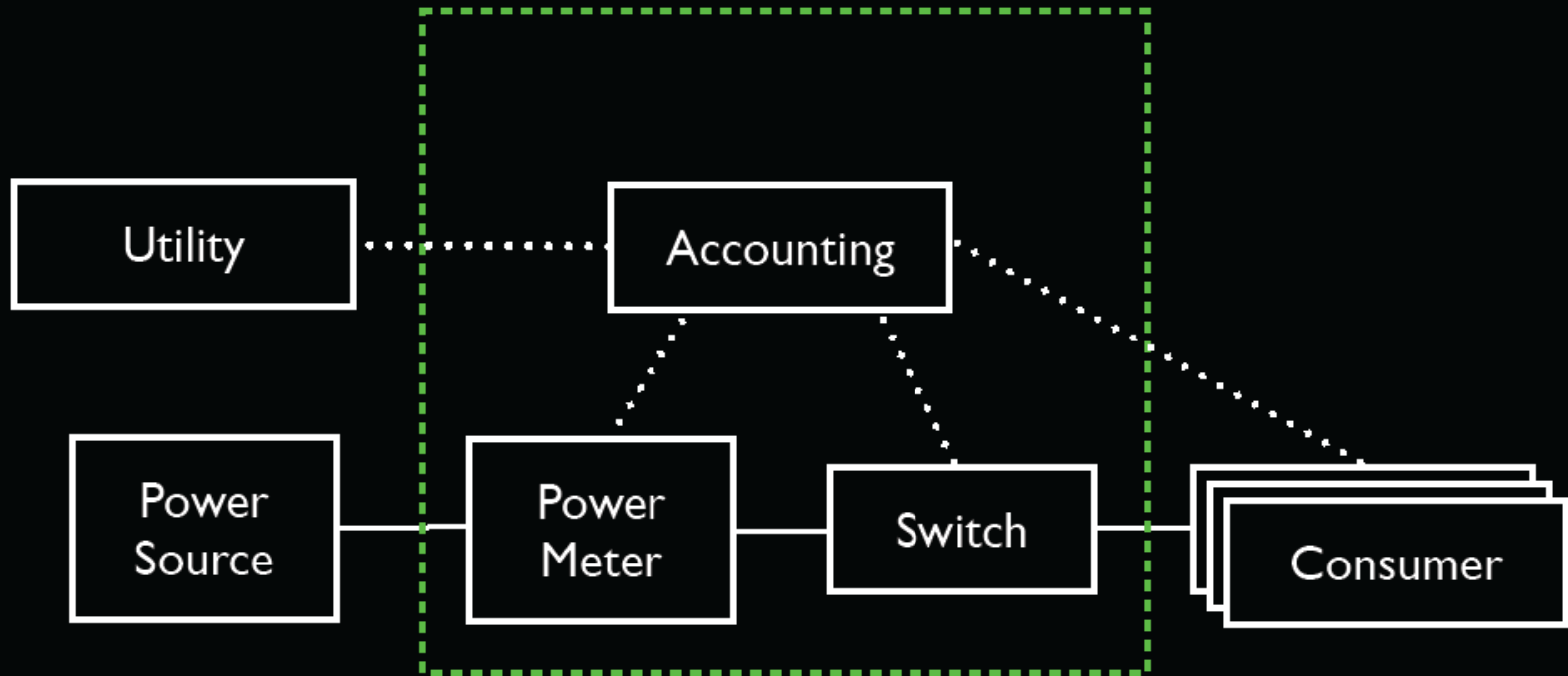
SharedSolar



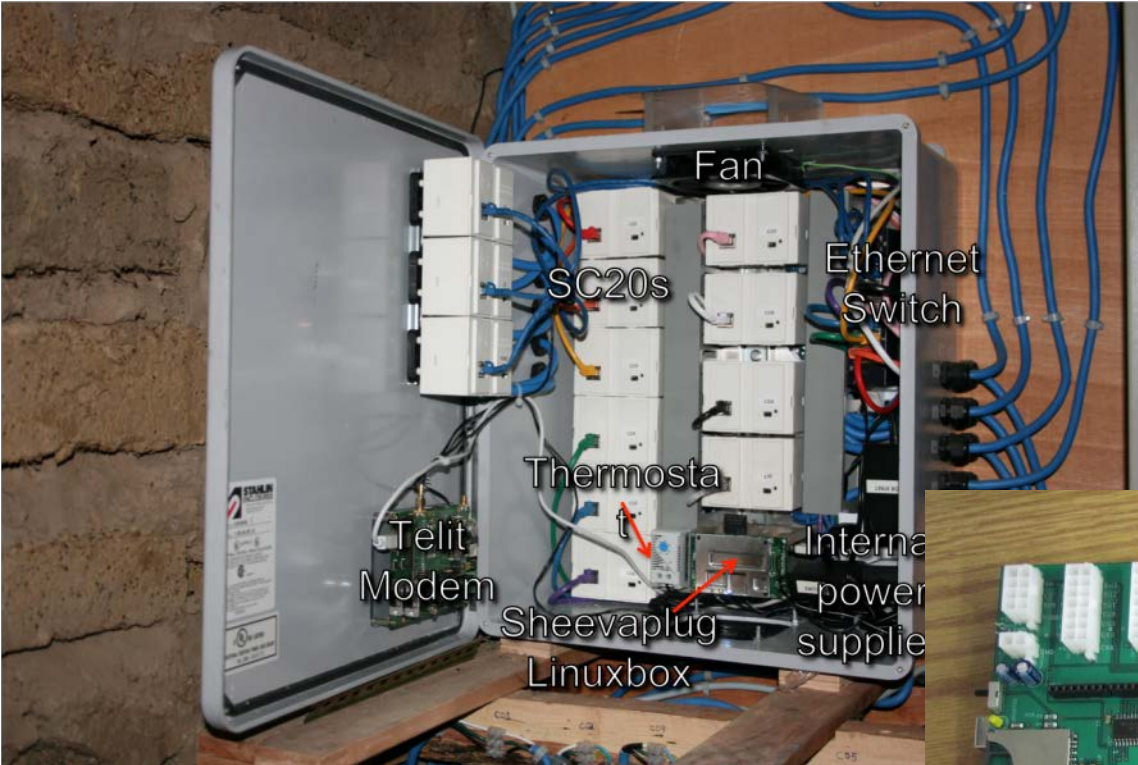
SharedSolar

Architecture

SharedSolar



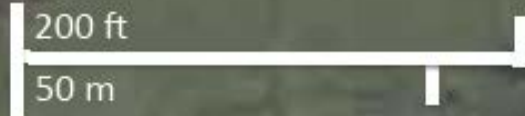
Meter Enclosure





KEY

-  Consumer
-  Manhole
-  Wire/Pipe/Trench
-  Shed



Ruhiira SharedSolar
Distribution Circuit
Sketch

Basinger, 2011-03-23



Scratch Cards for Energy Purchase

Pour autres services, envoyez un SMS au :
0 4 0 1 4 4 4


- 0 .<compte> Pour couper votre ligne
- 1 .<compte> Pour allumer votre ligne
- 2 .<compte> Pour consulter votre solde d'énergie restant
- 3 .<compte> Pour connaître votre consommation (30 derniers jours)
- 4 .<compte> .<téléphone> Pour enregistrer votre numéro de téléphone (pour être prévenu avant les coupures):

Exemple: 4.543210.65789012

TéléTia


Número de Serie 8601 **500 unités**

Pour ajouter du credit:

- 1) Grattez ici pour découvrir votre code de rechargement:

- 2) Envoyez le message suivant par SMS, en remplaçant <compte> par les 6 chiffres de votre numéro de compte et <code> par le code découvert après grattage:
9 .<compte> . <code>
Exemple: 9.543210.17234954168
- 3) Envoyez le message au : 0 4 0 1 4 4 4
Vous recevrez un message de confirmation

Date d'expiration : 1er janvier 2012

SharedSolar



Web Interface

SharedSolar Gateway

Dashboard **Manage**

Manage Home Meters Meter Overview

Hi deeto | Edit profile | Log out

Meter overview page for mall001

Manage meter information Download information Create job

Meter Name
mall001
Meter location
Pole sana, Mali
Meter phone
+22365468008
Meter status
True
Time of last report
TBD



Circuits associated with mall001

Map **Power Graph**

Ip Address	Account	Last Messages	Status	Language	Credit
192.168.1.200	lwn578	Mon May 2 21:03:23 2011	✓	on	
192.168.1.201	lwn754	Mon May 2 21:03:18 2011	✓	fr	84.5
192.168.1.202	lwn246	Mon May 2 21:03:08 2011	✓	fr	305
192.168.1.203	qco749	Mon May 2 21:03:07 2011		fr	6
192.168.1.204	wom276	Mon May 2 21:03:49 2011	✓	fr	67
192.168.1.205	lwn849	Mon May 2 21:03:43 2011		fr	1
192.168.1.208	wl893	Mon May 2 21:03:58 2011	✓	fr	14.5
192.168.1.207	o'd942	Mon May 2 21:03:30 2011		fr	0
192.168.1.206	zlm238	Mon May 2 21:04:06 2011	✓	fr	401.25
192.168.1.209	lwn698	Mon May 2 21:03:59 2011		fr	-0.25
192.168.1.210	lwn628	Mon May 2 21:04:13 2011	✓	fr	487.5
192.168.1.211	ucb247	Mon May 2 21:04:21 2011	✓	fr	397.25
192.168.1.212	qto483	Mon May 2 21:04:27 2011	✓	fr	484.6

SharedSolar Gateway

Dashboard **Manage**

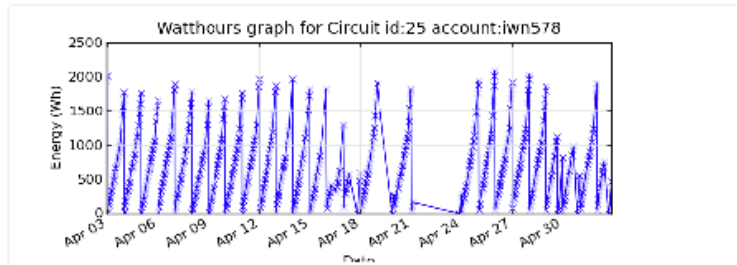
Manage Home Meters Meter Overview

Hi deeto | Edit profile | Log out

Meter overview page for mall001

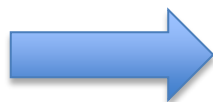
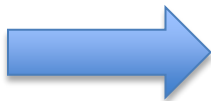
Manage meter information Download information Create job

Meter Name
mall001
Meter location
Pole sana, Mali
Meter phone
+2236488008
Meter status
True
Time of last report
TBD



Circuits associated with mall001

Map **Power Graph**



Where are we deploying pilots of Shared Solar?

- Mali (functioning since two months)
- Strong government interest in Mali
- Uganda (functioning since two weeks)
- Next: Tanzania