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WELL-BODI

AFFORDABLE AND ACCESSIBLE
HEALTHCARE IN SIERRA LEONE





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SIERRA LEONE
HAS ONE OF THE
POOREST
HEALTHCARE
SYSTEMS IN THE
WORLD

THE STATUS OF HEALTHCARE IN THE COUNTRY



LIFE
EXPECTANCY
OF
46 YEARS

136 DOCTORS
FOR A
POPULATION OF
6 MILLION

Majority of
Doctors are
urban based

RANKED
177 OUT OF
186 COUNTRIES
IN THE HUMAN
DEVELOPMENT
INDEX





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SO FAR, EFFORTS FOR IMPROVING HEALTHCARE
HAVE NOT RESULTED IN LONG-TERM,
PERMANENT IMPROVEMENT



GLOBAL EFFORTS FOCUS ON “DISEASE-SPECIFIC FUNDING”



MALARIA

HIV
PREVENTION

INFANT
VACCINATIONS

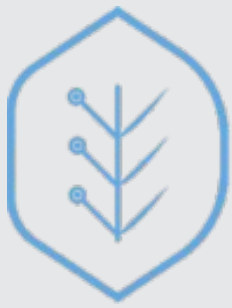


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INSTEAD, INVESTMENTS NEED TO BE MADE IN
IMPROVING THE HEALTHCARE INFRASTRUCTURE
AND IN STREAMLINING THE DELIVERY
OF HEALTHCARE



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SIERRA LEONE HAS A
MOBILE PENETRATION RATE
OF 44%; ONE POSSIBLE
SOLUTION IS INTRODUCING
A NATION-WIDE MOBILE-
BASED HEALTHCARE
INTERVENTION SYSTEM





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AT IDT LABS WE HAVE UNDERTAKEN AN
ITERATIVE, HUMAN CENTERED DESIGN
APPROACH FOR CREATING A MOBILE BASED
HEALTHCARE SOLUTION



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OUR VALUE PROPOSITION: STREAMLINING AFFORDABLE AND QUALITY
MEDICAL SERVICES FOR THE COMMON WEST AFRICAN PERSON VIA A
MOBILE BASED HEALTH CARE PLATFORM

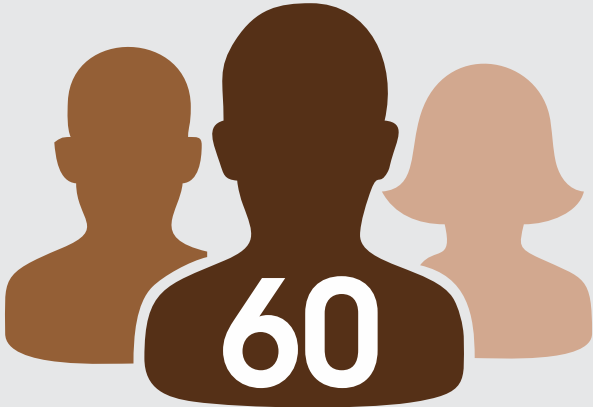


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WE CONDUCTED INTERVIEWS WITH THE COMMON SIERRA
LEONEANS AND MEDICAL CARE PRACTITIONERS IN
SIERRA LEONE TO BETTER UNDERSTAND THEIR
REQUIREMENTS



WE INTERVIEWED A TOTAL OF 87 PEOPLE



Common Sierra Leoneans



17
Pharmacy
Owners

25 earned less than \$100/month
20 earned between \$200-500/month
15 earnings more than \$500/month

10
Medical
Practitioners



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OUR KEY FINDINGS CAN BE DIVIDED INTO 4 THEMES

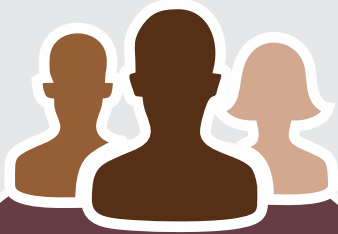
**CURRENT
SITUATION OF
HEALTHCARE
SERVICES**

**PREFERRED
DELIVERY
METHODS FOR
MOBILE BASED
HEALTHCARE
SERVICES**

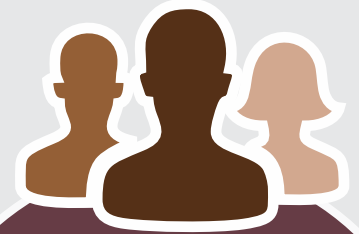
**PREFERRED
PAYMENT
METHODS FOR
MOBILE BASED
HEALTHCARE
SERVICES**

**EXPECTATIONS
FROM THE
MOBILE BASED
HEALTHCARE
SERVICES**

CURRENT SITUATION OF HEALTHCARE SERVICES



36% OF THE COMMON SIERRA LEONEANS VISITED CLINICS LESS THAN ONCE EVERY 3 MONTHS



60% OF THE COMMON SIERRA LEONEANS COULD NOT AFFORD HEALTHCARE SERVICES

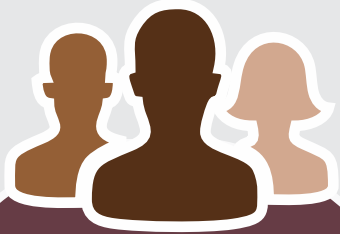


27% OF MEDICAL HEALTH CARE PRACTITIONERS FELT THAT PATIENT'S HAD LITTLE TRUST IN THE HEALTHCARE SERVICE

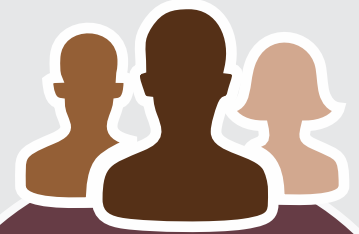


65% OF THE PHARMACISTS WERE NOT SATISFIED WITH THE NUMBER OF CUSTOMERS THEY CURRENTLY HAVE

PREFERRED DELIVERY METHODS FOR MOBILE BASED HEALTHCARE SERVICES



55% OF THE COMMON SIERRA LEONEANS PREFERRED AN INTERACTIVE VOICE RESPONSE BASED SERVICE



26% OF THE COMMON SIERRA LEONEANS PREFERRED AN SMS BASED SERVICE

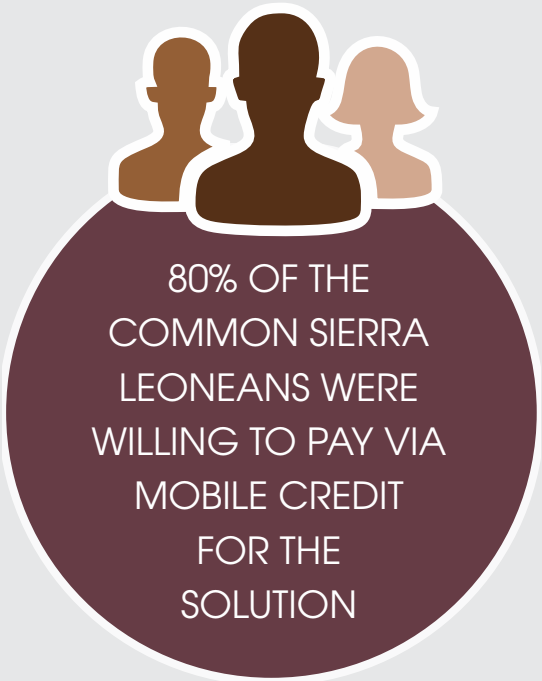


80% OF THE DOCTORS PREFERRED AN INTERACTIVE VOICE RESPONSE BASED SERVICE

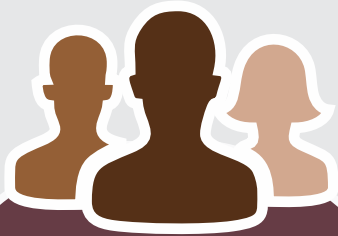


47% OF THE PHARMACISTS PREFERRED AN INTERACTIVE VOICE RESPONSE BASED SERVICE

PREFERRED PAYMENT METHODS FOR MOBILE BASED HEALTHCARE SERVICES



EXPECTATIONS FROM THE MOBILE BASED HEALTHCARE SERVICE



55% OF THE COMMON SIERRA LEONEANS WANT THE SERVICE TO BE EFFICIENT AND ACCURATE



35% OF THE COMMON SIERRA LEONEANS WOULD STOP USING THE SERVICE IF IT IS TOO EXPENSIVE



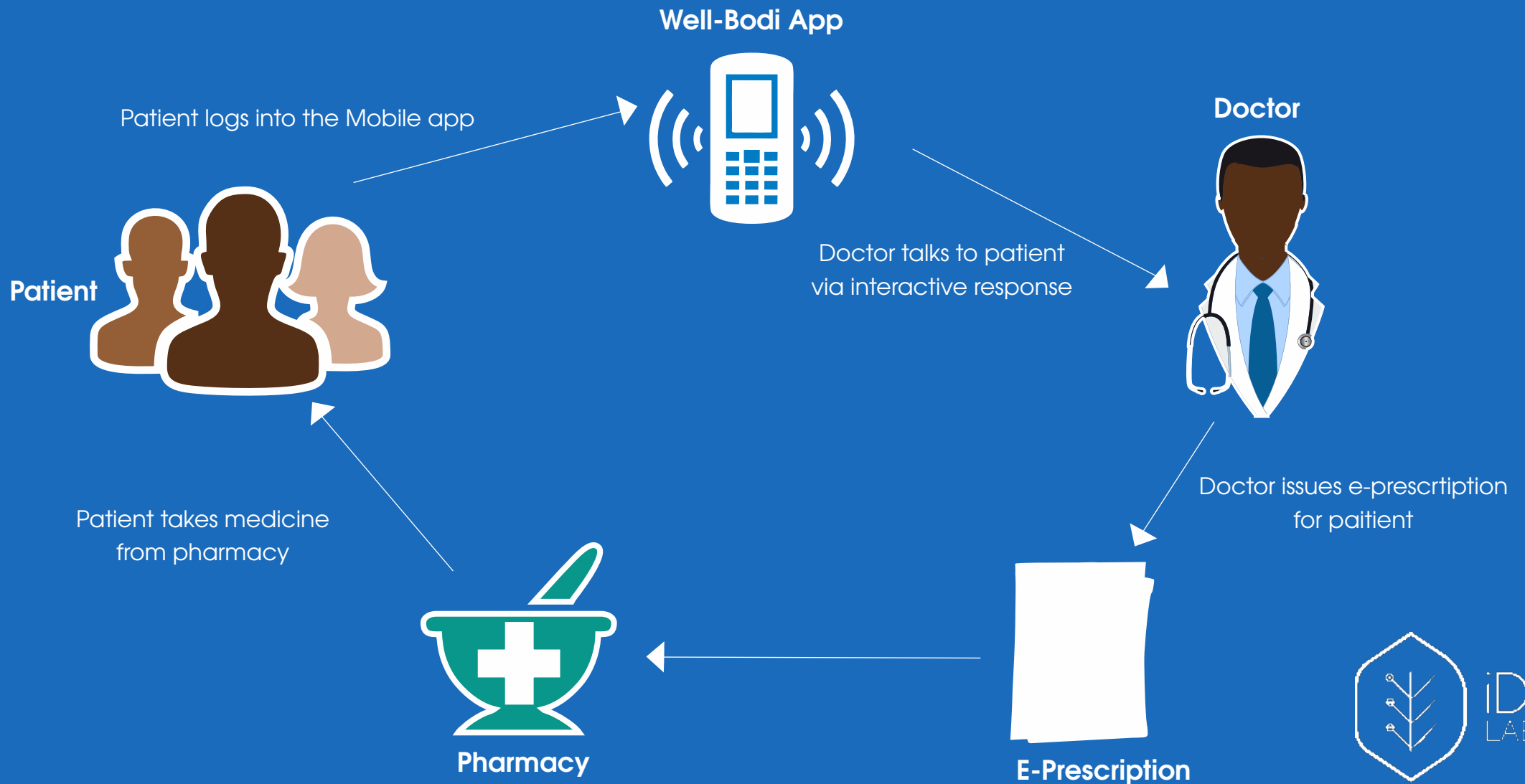
20% OF THE MEDICAL HEALTH CARE PRACTITIONERS PREFER A 40/60 RATIO FOR REVENUE SHARING



35% OF THE PHARMACISTS WOULD STOP USING THE SERVICE IF IT DOES NOT BRING IN ADDITIONAL REVENUE TO THEIR BUSINESS

OUR SOLUTION

AN INTERACTIVE VOICED BASED MOBILE SERVICE FOR LINKING PATIENTS,
DOCTORS AND PHARMACIES TO DELIVER AFFORDABLE AND QUALITY
HEALTHCARE



THE EVIDENCE PLANNING TOOL

ENHANCE-WHAT DOES IT BRING NEW VALUE TO?

- Affordable Healthcare to the common person via competitive pricing
- Better access to healthcare and health information

THIS CHART HIGHLIGHTS THE ENHANCEMENTS, REPLACEMENTS AND POTENTIAL HAZARDS OF OUR IDEA



REPLACE-WHAT DOES IT MAKE LESS DESIRABLE?

- Delays in getting access to affordable and quality healthcare
- High cost of health care services
- Malpractice, corruption, misdiagnosis
- Inadequate healthcare services outside the main urban areas

REUSE-WHAT DOES IT BUILD UPON?

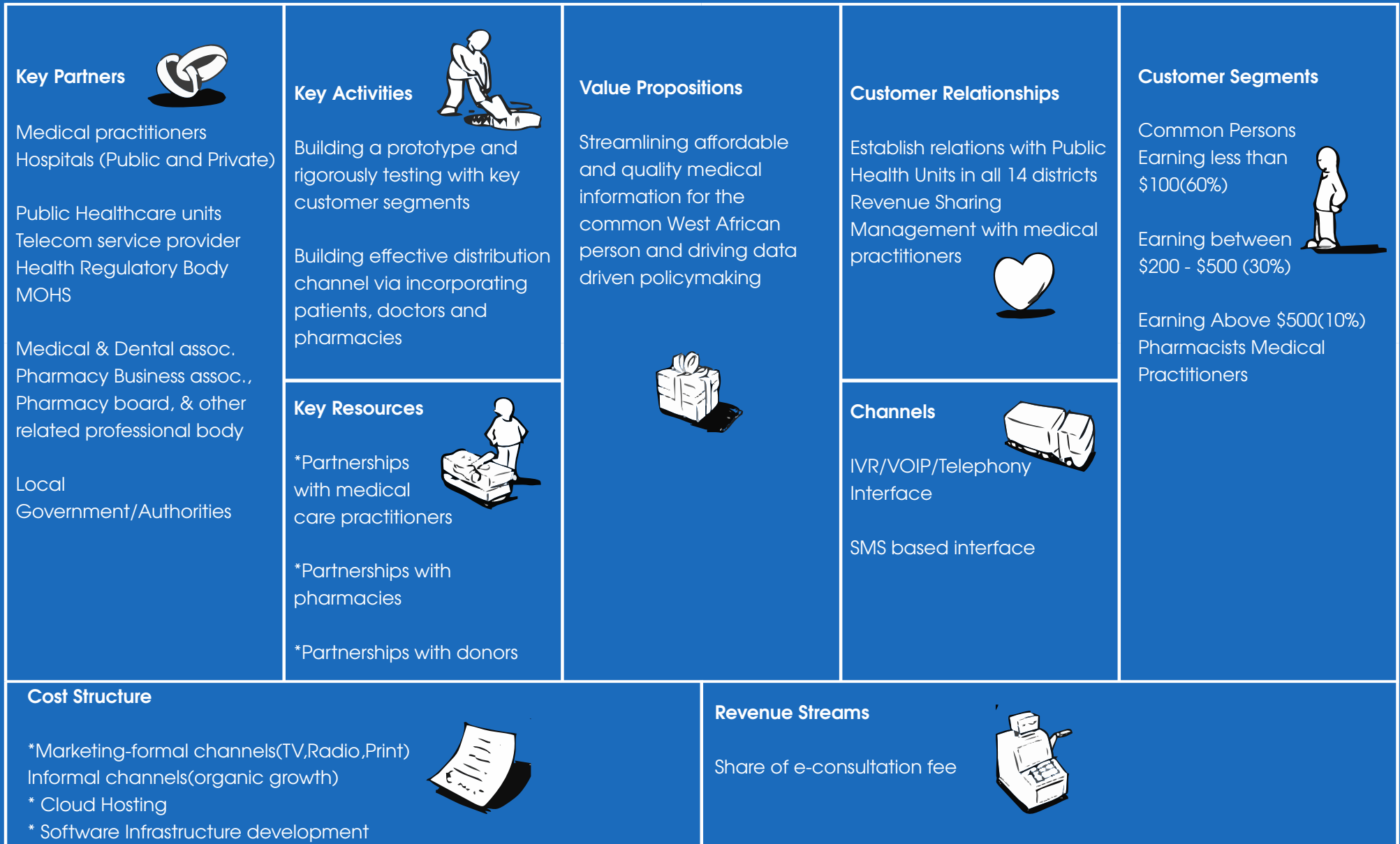
- Utilizing network of doctors and health care practitioners in Sierra Leone
- Using community bonds for driving adaptation of the m-health platform
 - Digital payment platforms
 - Leveraging MNOs

LIMIT-WHAT COULD BE THE NEGATIVE EFFECTS WHEN PUSHED TO THE EXTREME?

- People might not trust the workability of the m-health platform compared to traditional doctors
 - Misdiagnosis of medical ailments
- Reputation risk of the m-health platform from negative behaviour



THE BUSINESS MODEL FOR WELL-BODI





THERE ARE A FEW CRITICAL QUESTIONS THAT WE NEED TO RESOLVE

WHAT SHOULD BE
THE PRICE OF THE
SERVICE?

HOW SHOULD
THE USER
INTERACTION OF
THE APPLICATION
BE DESIGNED?

WHAT
SHOULD BE THE
MODEL FOR
REVENUE SHARING
BETWEEN US AND
THE DOCTORS/
PHARMACISTS?

THE NEXT STEPS

PROTOTYPING
THE APPLICATION
FOR FINALISING THE
USER INTERACTION
DESIGN

BUILDING
PARTNERSHIPS
WITH THE
CONCERNED
STAKEHOLDERS

RUNNING THE
PILOT OF THE
PROJECT FOR TESTING
AND REFINING THE
BUSINESS MODEL

GETTING FUNDS FROM
DONORS/IMPACT
INVESTORS





Streamlining affordable and quality health service and medical information for the common West African person



THANK YOU!

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