Tech in the World
Global health fellowships for tomorrow's leaders in technology

Tech in the World: January Tanzania Pilot Program
Updated: November 27, 2012

Mission: Tech in the World seeks to create world-class opportunities for top computer science students to experience the field of global health. We provide a global, hands-on experience for top computer science students to apply their technical expertise to solve critical issues in the developing world. We seek to develop tomorrow's leaders in technology.

Vision: Tech in the World intends to become a premier fellowship program, recruiting the best computer science students from around the nation, and providing a transformational overseas program in global health or global development.

More information on the mission, vision, background, problem statement, and theory of change can be found on our website at www.techintheworld.org/proposal

Pilot Program

Overview

We are currently planning a 4-week pilot program (Dec 25 - Jan 23) in Dar es Salaam, Tanzania. We have put together a team of 4 top-notch computer science students at Harvard, and we will be partnering with Bienmoyo Foundation and the Association for Private Health Facilities in Tanzania (APHFTA) to improve their electronic medical records for maternal health care. We have also recruited a film student to film a documentary of the experience.

Partners on the Ground

We spent most of September reaching out to potential partners and exploring an opportunity for partnership. After speaking with about 8 potential partners, we closed down our outreach process, evaluated the opportunities, and ultimately decided to work with Bienmoyo and APHFTA.

Bienmoyo is a foundation focused on health through public-private partnerships in the regions of Tanzania and Kenya. In particular, their flagship product is mMaisha (http://bienmoyo.org/mmaisha), a mobile health platform and electronic medical record system deployed in 20+ clinics and with 6000+ registered women (mMaisha currently focuses on maternal health). APHFTA is the largest association of private health clinics in East Africa, with over 500 clinics. We chose to work with Bienmoyo/APHFTA, because they have previously worked with Harvard undergraduates (as well as Wharton and MIT students) and because the Bienmoyo team has significant software product development experience.

Our main point of contact is Lushen Wu, who is the Executive Director for Bienmoyo Foundation and also sits on their Board of Directors. We have obtained letters of commitment from Lushen on behalf of Bienmoyo and Dr. Ogillo, CEO of APHFTA.

Planned Work

There are a number of well-defined projects that we will work on with Bienmoyo and APHFTA:

- Creation of improved membership database (currently based on Excel)

- Overhaul the Continuing Medical Education (CME) module of mMaisha
- Improve overall software architecture; implement best practices

Most of this work will occur in APHFTA's offices in Dar es Salaam, but we also expect to make field visits at clinics in Tanga or Moshi. We will begin our preparation before departure by defining technical specifications, familiarizing ourselves with the codebase, and working on a project together to build teamwork experience.

We recognize that 4 weeks is a short amount of time and that many unexpected delays will occur in a foreign country. Thus, we have taken several measures to ensure a productive program:
1. Lushen, the Executive Director of Bienmoyo, has significant software experience, and developed much of mMaisha himself. He also lives in Dar es Salaam and works closely with APHFTA, so he is able to help us to identify meaningful, well-defined projects that can be completed in a short time.
2. We selected to work with Bienmoyo and APHFTA because they have software deployments in many clinics, and have demonstrated an understanding of how technology is built and deployed.
3. The membership database is already being used, but in the form of Excel, so our new improved version is certain to be adopted, as it serves an existing process. Specifications have also been previously developed for the improved version.
4. A lot of work has been put into the CME module, but it was never completed. APHFTA has had plans to utilize the CME module but has not had the resources to complete its development.

Lodgings
We will be staying at an Econolodge near APHFTA headquarters, which was recommended by APHFTA and Harvard students who had stayed there previously.

Other Pilot Features
Documentary: We are bringing a VES student to create a documentary of the entire experience. He will spend time exploring and interviewing the locals, APHFTA, and employees in the Tanzanian health system. Our purpose is to:
1. Create media to build a brand, visualize the experience, and spread our message after the pilot.
2. Have a student spend additional time researching the context of our work (e.g., the social forces underlying health outcomes) to enhance our cultural learning experience
3. Create internal documentation to evaluate the pilot, learn from mistakes and successes, and serve as a template for future fellowship programs.
Research and Evaluation: We plan on conducting surveys and building metrics software to evaluate the usefulness and usability of all our software. We will also be evaluating both the students' experience and the partners' experience to improve our program for future years.
Professional Mentorship: We will be contacting professionals for mentorship, training, and best practices. The Technical Lead at ZocDoc (NYC Health IT company) has already agreed to be one of our mentors.

Budget:

Item Description	Reference/Notes	Cost
Airfare	Already purchased	$8,000
Visas		$100 x 5 = $500
Total		**$8,500**

Note that APHFTA has generously agreed to cover our costs for housing and food during our stay.

Grants received: Resolution Project grant, October 7, for $1,500 (cannot be used for pilot program); SEAS Nectar Fund, for $2000
Grants submitted: Awesome Foundation, for $1,000 (notified late November)