

CHANGING OIL FILTERS, LIVES

The principles of Transport Resource Management

By Rachel Harrington, Fundraising and Communications Manager, Riders for Health

Photo by Riders for Health

"We have developed the most miraculous tools for dealing with the health of humankind. But the best tools in the world don't make a bit of difference if they don't get out to where they're needed." *Nils Daulaire, CEO and President, Global Health Council*

Billions of dollars are spent each year to produce life-saving drugs and vaccines for the developing world, but how much is invested in actually getting them to the people who need them? Without proper maintenance, even the hardiest of vehicles will quickly break down in the harsh terrain of rural Africa. If no one knows how to change an oil filter, or predict when a replacement tyre will be needed, a \$30,000 vehicle can easily be left to rot for the want of a \$3 part.

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And without motorised transport, the delivery of healthcare is virtually impossible. With their only option being to go by foot, community nurses can spend hours or even days walking between villages. People can wait for months to see a health worker, and the consequences can be devastating. Imagine, for example, being crippled with diarrhoea and a raging fever, and having to walk 30 kilometres to reach a doctor. Or going into labour with your first child, knowing there is no chance of getting any help if things go wrong.

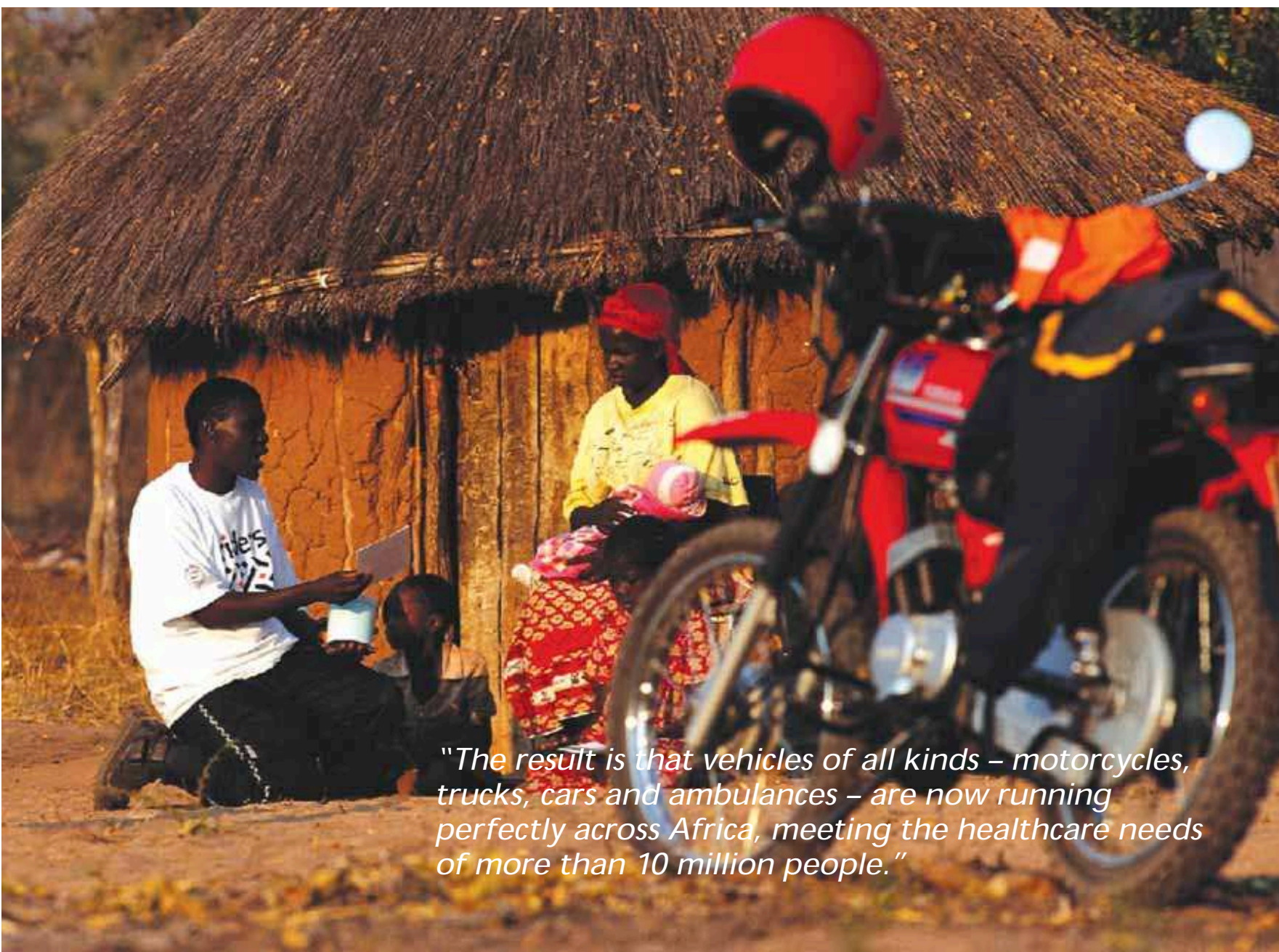
To the founders of Riders for Health – Barry and Andrea Coleman – this was a crazy situation. It was obvious to them that the solution to the 13th century conditions of rural Africa was to use 21st century

technology, properly managed. If Africa had no infrastructure for the preventive maintenance of cars, trucks or motorcycles, they would have to invent one. So that's what they did. In 2007, Riders has a system that is tried, tested and costed, with the potential to transform health delivery in areas of poverty across Africa and elsewhere in the developing world. Transport Resource Management (TRM) is a system for managing the vehicles, people and money involved in the health service delivery operation. It includes training in safe riding and driving skills, road safety techniques, daily preventive maintenance procedures and general fleet management.

Using vehicles costs money. But since the use of vehicles is fundamental to the delivery process, Riders' primary focus has always been to manage this cost effectively and, in so doing, safeguard the benefit to the people reached with healthcare.

It was clear from day one that this would only be possible if health delivery vehicles were serviced to a level where they don't break down. If vehicles are allowed to deteriorate below this level, a substantial cost for repair has to be met without warning. Humanitarian fleets often collapse years before their potential life-span, because repairs prove to be unpredictable and un-affordable. An entire fleet will quickly fail once its vehicles start to need repairs.

In Riders' TRM system, therefore, a network of trained local technicians works with Riders' logisticians to ensure both the timely delivery of replacement parts and



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the correct implementation of maintenance modules (designed to prevent breakdown) at specified intervals. The Riders teams work on an 'outreach' basis, meaning that technicians go to service the vehicles in the locations in which they run. The riders and drivers play their part by using the techniques in which they were trained, and carrying out daily maintenance routines to ensure that the vehicles perform correctly until their next service.

The exact cost of running a vehicle within the TRM system is worked out to the nearest kilometre using the Riders-developed cost-per-km calculator, which takes account of maintenance interventions, replacement tyres, fuel, and management and logistics costs. This way whoever is picking up the bill can see what the actual cost of health service delivery is,

and budget accordingly to create a real and sustainable way of reaching people.

To maintain and enhance the standards set in the Riders system, and to build the vehicle maintenance 'culture', we established the International Academy of Vehicle Management (IAVM) in Harare, Zimbabwe. Since its launch in 2002, over 1000 delegates have trained at the academy.

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The impact of TRM

OC&C, a high-profile international business consultancy, carried out a pro-bono 'due diligence' process on Riders for Health at the end of 2005. Their findings were:

Economic benefits

- > 62% reduction in annual motorcycle fleet maintenance cost per thousand people reached by health workers in Zimbabwe.
- > 24% reduction in annual vehicle maintenance cost per person treated per month by nurses at outreach clinics in the Gambia.

Increased health worker outreach

- > Dramatically increasing the number of health workers that can be kept mobile on an agreed, controlled budget.
- > Mobile health workers reaching more people, and visiting them more frequently.

Health benefits

- > Reliable, predictable mobility enables health workers to diagnose and treat more patients. In 2002, after Riders began operating in the Gambia, there was a 261%, 75% and 55% increase in diagnoses of diarrhoea, acute respiratory infections and malaria respectively.
- > Health workers and community leaders report both a reduction in illness and improved access to healthcare as a result of Riders' work.

Riders facts

- > Riders currently has three programmes operating nationally in the Gambia, Nigeria and Zimbabwe, together with smaller projects in Kenya and Tanzania.
- > Riders works with ministries of health, UN agencies and other NGO's.
- > All our programmes are managed and operated by nationals of the countries in which they are based.
- > Riders manages more than 1200 vehicles, 900 of which are used for direct health delivery.
- > In 2006, Riders enabled over 10 million people across Africa to receive regular healthcare.

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For more information about the training available at the International Academy of Vehicle Management:

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