



Series 7: Programme 5 (of 8) - 'Taking Off'

Health's Angels – Gambia

In Africa the lack of reliable transport is a major problem faced by people on a daily basis. If they want access to services the only option is to walk. In some countries an ambulance provides a vital link to health services – transporting patients, vaccines and life-saving medicines. But in rural Gambia there is little or no mechanised transport, so people die from curable diseases simply because the nearest clinic or hospital is too far away. Now, however, in areas where roads are poor and petrol is expensive, motorbikes are proving the best way for community medics to deliver lifesaving help.

The African Situation

In many African countries people's health is in decline. In Gambia average life expectancy is only 54 years, infant mortality is over 73 per 1000 live births, the incidence of HIV/AIDs is rising and people still suffer from endemic diseases such as malaria and tuberculosis. There is only one doctor for every 6000 people and only 42 health centres. Most villages rely on visits from health teams twice a month for basic healthcare. But people are still hindered by the poor transport infrastructure. Either medical staff find it difficult to travel to the villages, or people walk for miles to reach the medical centres as few have a reliable ambulance.

Rural African communities are often sparsely spread through rough and unforgiving terrain, and even when there are roads, they are pot-holed, slow and dangerous. Conventional vehicles are ill equipped to cope in these rough conditions – they are not robust enough and often expensive to run. When the cost becomes too great, or repairs cannot be carried out due to lack of infrastructure, the useless vehicles are dumped.

Motorcycles can provide an effective alternative to expensive four-wheel drive vehicles, but they are often overlooked. However, for over 20 years Riders for Health has been working to address this problem.



A female technician at work in the Riders workshop at Kanifing, the Gambia.

The Art of Motorcycle Maintenance

In the 1980s the movement that became Riders for Health started within the motorcycle community when they began to raise money for children with difficulties in developing countries. However the co-founders, Barry and Andrea Coleman and Grand Prix racer Randy Mamola, found that donated motorcycles intended for use by the Ministry of Health in Somalia became useless after very short operational lives. They explored motorcycle use and maintenance arrangements in the Gambia and on the basis of this research a new training and management system was established, and this is now used effectively across Africa. Building on the success of this work Riders for Health was registered as an independent UK charity in 1996, focusing solely on transport for health outreach in rural Africa.

Riders for Health

Riders for Health aims to ensure that health services can be delivered reliably and sustainably to rural communities in Africa, by using of two- and four-wheeled vehicles. Their work enables health workers, who can be responsible for up to 20,000 people sparsely spread across remote villages, to travel regularly to each community providing much needed medical support and health education.

Riders for Health works with in-country teams to develop efficient and cost-effective techniques for the management of motorcycles and four wheeled vehicles in harsh or hostile conditions. They have developed advanced training courses to transfer their expert knowledge at the International Academy of Vehicle Management (IAVM). Medical staff and aid workers are offered short courses in vehicle maintenance and specialised driving techniques such as using a stretcher to ensure both the rider and passengers are safe. Other courses are aimed at organisations that want to replicate Riders' successes in vehicle maintenance and system management techniques.

Riders for Health also offers an outreach service, where teams of technicians will visit the locations where the vehicles are based to carry out maintenance work and ensure that replacement parts are fitted on time – before they break. The technicians also train the health workers in basic maintenance and repair, to ensure the vehicles run correctly until their next service.

Now, using their motorcycles, medical staff find it easier to travel to village clinics, where they provide nutritional and healthcare advice to pregnant women, run educational programmes in schools on personal sanitation and sexual health, and distribute mosquito nets to help prevent malaria. If needed they can transport people with serious illnesses back to the medical centres.

One of Riders' outreach technicians carries out maintenance on a health worker's motorcycle. Credit: Riders for Health



Improved reliability



Community health worker Manyo Gibba arrives at a remote village on her Riders-maintained motorcycle. Manyo cares for pregnant women and infants in over a dozen villages – some 15,000 people count on her. Says Manyo: "For the first two years of my job, I did not have a motorcycle. There was no mobility. I used to walk to go and supervise my traditional birth attendants. But now since I've had the motorcycle, I have never failed an appointment with them."

Credit: Riders for Health

As vehicle deterioration will eventually lead to breakdowns, each month all the motorbikes in the Riders for Health fleet are given a mechanical check. This increases the lifespan of the vehicles and reduces expensive repair costs. The high standard of this work has been recognised by the Gambian government. In 2002 an agreement was signed between them, outsourcing all government vehicle management (beginning with the Department of State for Health) to Riders for Health. The World Bank, which lent set-up and running costs as part of its larger Participatory Health, Population and Nutrition Programme, supported this agreement. Through this collaboration Riders for Health have now coordinated the Meningitis campaign, National Immunisation Days and the Measles campaign, and run all the government ambulances in the Gambia.

Other non-governmental organisations also value their work; for example, the World Health Organisation (WHO) renewed its contract with Riders for Health for management of the WHO polio eradication fleet in Nigeria. In 2004 the organisation won the tender to manage UN workshops/vehicles in Nigeria and was asked to manage the transport element of programme for AID Village Clinics in Kenya.

Riders for Health now works across Africa in the Gambia, Zimbabwe, Nigeria and Kenya. These programmes are run wholly by African teams, who ensure that health delivery is not compromised by faulty vehicles – they operate a breakdown-free service. To ensure that the schemes are self sustaining, the teams are able to generate part of their income through private work, allowing money to be ploughed back into the scheme.

New Developments

In Zimbabwe women from rural areas have developed a new community-based vehicle, the Uhuru: Swahili for 'freedom'. The Uhuru is a multi-purpose motorcycle that is cost-effective, lightweight, and extremely sturdy. The design incorporates a sidecar which can carry a stretcher and a pop-up seat that can be used for women who may be in labour. This means emergency cases can be taken from the community to the nearest health centre for immediate treatment, rather than having to walk miles or wait for the next visit from the health worker. For people needing regular hospital treatment the Uhuru acts as an ambulance service, making these appointments possible.



A Rider using a Uhuru to transport a patient.
Credit: Riders for Health

However, the Uhuru has additional benefits. It has a power take-off at the back wheel which, when connected to a pump, can pump over 100 litres of water per minute. This enables villagers to irrigate their fields more easily, and with more efficient irrigation, more cereals and vegetables can be grown. These can then be transported in a trailer attachment and sold in nearby markets, providing a valuable source of income. As the Uhuru is manufactured in Zimbabwe, it is realistically priced, generates local income and helps to maintain a skilled workforce. To use this vehicle effectively, however, requires carefully handling

and maintenance, so it is only supplied as part of a package that includes a week's training in riding and maintenance techniques at the IAVM.



A technician carries out a service on a Ministry of Health vehicle in the Kanifing workshop. Credit: Riders for Health

This vehicle is now being used in other countries, providing reliable and locally available transport. Riders have also expanded their vehicle range to include refrigerated trucks, minivans and ambulances.

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Further Information

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