



Concept Note

Better World South Africa Project

Presented to:
Ford Motor Company

Presented by:
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1. Executive Summary

The Better World South Africa (BWSA) Project is a collaborative program integrating Ford Motor Company vehicles into international social development programs of partner organizations to deliver social services. This project creates a “business-like” model for cohesive, effective global social development.

The vision of the BWSA Project is to provide a lasting tool for social impact through the power of partnerships. The mission of the BWSA Project is to create a multi-sector partnership of organizations that collectively creates, implements, and scales integrated “business-like” models for delivering bundled services to developing communities.

This Concept Note draft was developed by World Vision South Africa, World Vision US, the World Vision Global Centre, Southern Africa Region, and by Professor John Forrer, from the Institute for Corporate Responsibility (ICR) at George Washington University, who serves as a consultant to Ford. This project is guided by Ford’s signature Social Innovation Model for Partnership (SIMPLE) Approach, in which each project contains:

- Bundled service provision through mobility and connectivity technologies through X-Cars
- Sustainable project design through existing operations of partners
- “Franchisable” structure through investment opportunities targeted for the impact investing community

From the field of invited Learning Community partners, Ford and ICR selected World Vision as the prime implementing partner for the 2016 BWSA Pilot. World Vision will receive a donation of two Ford Flexible Response Vehicles (FRV), equipped with flexible technology, and will help to seek funding partners to cover the program costs of this partnership pilot.

World Vision’s international, community development programming model is multi-sectorial. It is an especially rich context of existing programs into which Ford vehicles will be deployed, with bundled services, to support up to four of these sectors, which are also called “buckets” by Ford:

1. Health
2. Child Protection
3. Community Education
4. Water, Sanitation and Hygiene (WASH)

Upon acceptance of World Vision’s Concept Note by Ford and ICR, the Proof of Concept will be further developed to shape the exact structure of this multi-lateral pilot. World Vision will become the owner and end user of the vehicles for the length of this pilot. We anticipate that the pilot will begin in the first quarter of 2016 and run for an estimated 18-24 months.

2. World Vision Overview

World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

World Vision is one of the largest and most respected non-profit humanitarian relief agencies in the world, with an established presence in nearly 100 countries and the support and trust of millions of donors, partners, and volunteers across the globe.

World Vision provides emergency and hunger relief, long-term community development programs, agricultural development assistance and leadership training. The organization also educates the public on poverty and justice-related issues and advocates on behalf of the poor and children in crisis.

A worldwide staff of 46,000 operates throughout Africa, Eastern Europe, the Middle East, Asia and the Americas. The overwhelming majority of our staff are nationals from the countries in which they work. When possible, our programs are carried out with local partners such as community associations and national development groups.

World Vision in South Africa

World Vision began a child sponsorship program in South Africa in 1965 and opened an office in 1967. Currently, over 53,000 children, their families and communities benefit from World Vision's work. In South Africa, World Vision largely focuses on:

- Health - Improving community access to quality health care through educational programs for health care workers and parents
- Health & Advocacy - A focused response to HIV/AIDS through prevention, care and advocacy programming
- Water, Sanitation & Hygiene - Improving access to clean water and sanitation by protecting existing water sources and erecting water tanks
- Food Security & Nutrition - Helping communities improve their nutrition and achieve greater food security by providing seeds, tools and training in agriculture and animal husbandry
- Community Education & Child Protection - Improving community education and literacy skills through training courses and improvement of school, child healthcare, child protection, and gender-based violence
- Livelihoods - Supporting economic development through, micro-finance institutions, business training and skills development for up-coming entrepreneurs.

Child Poverty in South Africa

South Africa has very high rates of child poverty. The South African Child Gauge 2014, published annually by the Children's Institute, University of Cape Town, to monitor progress towards realizing children's rights, paints a sad story for millions of South Africa's children:

- In 2012, 56% of children – over 10 million – lived below the poverty line (R635 per month). Over 70% of children in Limpopo and the Eastern Cape Provinces are poor
- 25% of South Africa's children live far from the primary health care facility they normally use, and over 90% attend the facility closest to their home. In total, 4.7 million children travel more than 30 minutes to reach their usual health care service provider
- Young children are particularly vulnerable to prolonged lack of food, which increases their risk of nutritional deficiencies which may result in stunting. Stunting (or low height-for-age) indicates an ongoing failure to thrive. It is the most common form of malnutrition in South Africa and affects 25% of children under five
- Young children are particularly vulnerable to diseases associated with poor water quality and lack of access to adequate water is closely related to poor sanitation and hygiene. Over six million children live in households that do not have access to water on site. In 2012, 66% of children lived in households with drinking water on site. Only 15% of children living in traditional housing have clean water available on site
- Five million children still use unventilated pit latrines, buckets or open land, despite the state's reiterated goals to provide adequate sanitation to all and to eradicate the bucket system. Children (31%) are more likely than adults (24%) to live in households without adequate sanitation facilities

3. World Vision Flexible Response Vehicle (FRV) Service Delivery in South Africa

World Vision plans to base both vehicles in the Eastern Cape Province, one of the areas of South Africa that struggles with service delivery due to the remote locations of the rural villages where the majority of people live. Vehicle #1 will be based in the Alfred Nzo district in Eastern Cape in Umzimvubu ADP (World Vision US supported) and Vehicle #2 will be based in Mbashe ADP (World Vision US supported) in the Amathole district in Eastern Cape. The main goal of both vehicles will be to improve access to services and promote community education to impact maternal and child health and wellbeing in the Eastern Cape.

It should be noted that both vehicles will service all four sectors (buckets) cited in the Executive Summary: Health; Child Protection; Community Education; Water, Sanitation and Hygiene (WASH).

The following provides a summary on the use of the vehicles:

Flexible Response Vehicle (FRV)

The principle goal of this Flexible Response Vehicle (likely double cab Ranger trucks with high top) will be to improve access to maternal and child health services in the Alfred Nzo District and Amathole District of

Eastern Cape. In partnership with the Department of Health and Department of Social Development it will travel around to various remote villages to act as a mobile clinic and testing service primarily for pregnant women, mothers and young children. The vehicle will also be attached to an emergency number to be able to respond to situations of abuse where victims often have a 72 hour window following a case of rape to make it to a medical service. Overall it will be used for four primary services as outlined below and will be outfitted accordingly to fulfill these purposes:

1. Teaching

- Community education on issues of child health care, child protection and gender based violence to stimulate community conversations and action plans around these issues (vehicle would need to be able to transport and run projector, screen, laptop, sound system and lights)
- The vehicle could also transport books for children to encourage literacy and utilize the projector and laptop for educational videos for children's learning purposes as well.

2. Treatment

- For storing drugs to address ailments that can be treated in the community as the mobile clinic moves around including hypertension, diabetes, asthma, diarrhea (small refrigerator run by vehicle will be required as well as a medical waste system)
- For supporting the nutrition of children under the age of two by ensuring that they are given their full vaccinations, that their growth is monitored and that they are receiving their Vitamin A and deworming supplements every 6 months (equipment such as a weighing scale required as well as the refrigerator to store vaccines)

3. Transport

- For emergency situations including referral situations that may be discovered when the vehicle is running the mobile clinic service. There will also be an emergency number connected to the vehicle so that it can be deployed as a Flexible Response Vehicle

4. Tracking

- For tracking of patient information and referral cases in partnership with the Department of Health systems (equipment will include a chargeable tablet for data entry)
- Vehicle will be equipped with tracking device and GPS device for management of vehicle

The vehicles will also be used for World Vision's every day programming activities including monitoring of children, and support for education, child protection and health programming in the area.

The specifications requested of the vehicles from RMAA are as follows:

- System for projection of videos and PowerPoint presentations: including overhead projector that can run by the vehicle battery, laptop that can run by vehicle battery, and portable screen (either attached to car or that can be stored in vehicle)
- Small refrigeration unit to be run by vehicle
- Tablet for purposes of data collection on maternal and child health to be charged by vehicle
- Closed compartment in the back of truck to store growth monitoring equipment (e.g. weighing scales and height boards)

Water, Sanitation and Hygiene

With the high incidence of diarrhea in our target areas for this project (Umzimvubu ADP and Mbashe ADP) it is critical that this project include a component of Water, Sanitation and Hygiene (WASH). The vehicles will both carry a simple water testing kit that can be used to test water within the different communities to which it travels. It will also carry water purification tablets that can be distributed but also used for awareness raising around the need to boil and purify water. Women's dignity packs (sanitary napkins) will be available for distribution and educational purposes. Hygiene pamphlets for children and families will be available.

Technology in the Vehicles

Lukas Nel, Global Fleet Manager, World Vision International (WVI), has been involved in the early conversations for this project. He also attended a meeting in Johannesburg, South Africa on Thursday, August 13, 2015 with the RMA Group on the Ford campus. RMA does all the custom upfitting for Ford vehicles.

Beginning with the basic standardized WV specification of a double cab truck, RMA would adapt the vehicle to World Vision's specifications based on the consensus articulated in this concept note.

The "technological menu" has been developed to support all four service sectors or buckets and relayed to RMA. Of special concern will be the ability of the FRVs to connect to satellite wireless and be able to upload all collection data even from remote places.

4. Thoughts on This Multi-Lateral Partnership

Ford has completed bi-lateral partnerships in years past and is now convinced that the way forward is most effectively served by a multi-lateral partnership for greater exchange of ideas and greater impact. World Vision South Africa will be inviting several current local partners to join in this pilot. There will be a total of 3-5 partners, including government agencies such as the Department of Health and Department of Social Development, the South Africa police services (Family and Child support unit), other NGOs such as Child line and Gender Based Violence line. Ford and ICR have also approached a few other partners who are awaiting completion of this concept note to see how/if they might participate.

World Vision South Africa has agreed to serve as the Prime for implementation of this pilot, working closely to collaborate with others who bring related interests and other skills to the mix. The strength of this collaboration is the willingness of each partner to learn from others, for the greater social good.

WVSA also intends to include Fort Hare University located in Eastern Cape Province where the pilot will be implemented, so that there may be a Social Media and/or student component. It may also be possible to involve universities from other countries such as ICR at George Washington University, Washington DC.

Sustainability Plan

The sustainability plan will be firmed up throughout the life of the pilot. Two promising possibilities include; a) revenue generating activities; and b) expanded annual operations in South Africa. If necessary,

other funding partners may join in to support the project for years 3 through 5 when this effort becomes a full programming project.

As noted above, the pilot phase of the project will look into ways that the vehicle can generate streams of revenue as it goes about providing these public services through a “business-like” model. Perhaps through transporting of vegetables for various farmers to market, data collection or branding on the vehicle itself.

Some examples of potential revenue generating activities are as follows:

- One corporation operating in South Africa is supporting their own non-profit project whereby women have the opportunity to be trained to sell vitamins and nutritional products to rural and urban communities at a greatly reduced rate. The FRV may take one or two women on weekly runs to their customers and the FRV could collect customer emails. The corporation could potentially pay to have this service supplied.
- Some organizations may be interested in paying for data, collected by an FRV remote sensor as it drives by, perhaps focused on ambient air quality or climate data.

All funds earned from this pilot would be collected and transparently recorded, shared with appropriate partners, and World Vision’s share will be applied toward the total operating budget of this pilot and its subsequent project.

Documenting the Partnership and Project Journey

Because this is an innovative new approach, the Learning Community will arrange to capture learnings along the way in the form of video, photographs, interviews, and narrative journals. It is critical that we document complete “before” and “after” views, plus document the journey of discovery and learnings along the way, especially to contribute to the franchisable nature of the pilot, and to encourage more partner participation.

Ideally, the pilot might be able to deploy student cinematographers inside the University partnership mentioned earlier, or to involve other professionals as part of the broader Learning Community to contribute their time and talent to support this effort.

5. Next Steps

This initial Concept Note provides directional guidance as to where we are headed over the coming months. Several next steps:

1. Socialize this concept with the Learning Community and other potential new partners
2. Begin to refine the concept through the wisdom and consultative assistance of participating partners
3. Refine the Proof of Concept and objectives

4. Secure funding partners and social entrepreneurs to complete the initial pilot budget estimate of \$248,000 over two years

6. Project Budget

Better World South Africa Project Two Year Project		
Budget Line Item		TOTAL
1	Staffing Costs (includes drivers and program staff)	\$ 84,409
2	Program Costs (includes trainings, hand-outs, assessments)	\$ 59,311
3	Vehicle Costs	\$ 64,543
4	Management, Fundraising, and Quality Assurance (for project length)	\$ 39,339
Project Total		\$ 247,603

Invitation

World Vision is honored to be working with Ford, ICR and the Learning Community to serve as the Implementation Lead for this dynamic Pilot in South Africa.

We are confident that the collaboration of motivated partners will strengthen this pilot with greater innovative impact. This impact will be leveraged more broadly throughout the globe in future pilots and projects.

We welcome your participation.

Please consider:

1. Joining the Learning Community (LC) to contribute your creativity, expertise, time and resources
2. Participating in one of the LC's emerging work streams: Communications or Monitoring & Evaluation
3. Partnering with World Vision to implement this pilot, or support it through your service or financial investment

Together, we will make a sustainable difference for the children, families and communities that we serve.

For further information, please contact:
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