

# Michael: Leverage existing tech in developing world

By: [Neil Versel](#) | Dec 6, 2011  24  4  21

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The mHealth Alliance, a project of the United Nations Foundation, the Rockefeller Foundation and the Vodafone Foundation, is probably the most global of all the groups out there promoting mobile health. And the mHealth Summit, which the mHealth Alliance and the Foundation for the National Institutes of Health are staging this week, likely is the most international of mobile health events held in the U.S.

Knowing that, it makes perfect sense that the alliance [turned to Patricia Michael to be its new executive director](#) after founding Executive Director [David Aylward left in May](#). Michael, who started the job just a few weeks ago, has a strong background in international mobile health.

[According to the organization](#), her doctoral studies at the London School of Hygiene and Tropical Medicine included research on how mobile phones factored into public health in Egypt. Michael later was director of strategic application of mobile technology for public health and development at the Center for Global Health and Economic Development at Columbia University's Earth Institute. (She still holds the faculty appointment at Columbia.)

In 2008, Michael was an invited participant in the mobile health segment of the Rockefeller Foundation's Making the Health Connection conferences in Bellagio, Italy. The mHealth Alliance grew out of those conferences.

“Since Bellagio, it's been incredible to see how much activity has happened, how much interest has emerged, and so even with respect to the summit, it's quite visible,” Michael said in an interview with MobiHealthNews. The first summit in 2009 drew less than 500 people. Last year, a little more than 2,000 came out—in part because [one of the keynote speakers was Bill Gates](#). As of Monday morning, more than 3,200 people had registered for the third-annual mHealth Summit in National Harbor, Md., and Gates is nowhere to be found.

“There is this sort of collective interest in looking at mobile technologies as a tool, especially in developing countries, where oftentimes the mobile phone is the only information or communication technology that is reaching people in their communities,” Mechael continued.

As the new executive director, Mechael is using the occasion to spell out a clear vision and strategy for the mHealth Alliance. “Our major goal is to function as an alliance, and link together a collective movement toward the more effective leveraging of mobile technologies to support public health and health system strengthening in developing countries. Our major focus is really looking at low- and middle-income countries and global health,” she said.

The organization also is updating its strategy. “We’re really looking at the ways that we can pull together the global learning within m-health to address issues around the evidence: what do we know that works, how does it work, why does it work, how much does it actually cost to do mobile health, looking at issues of technological interoperability? How do different technologies talk to each other?” Mechael explained.

“There are so many pilots, applications out in use right now, but one of the major challenges right now is that [the field of mobile health] is very fragmented. There’s very little additive impact happening between the technologies,” Mechael continued. “And how do we start to move towards a more standardized approach while still capitalizing on innovation and new things that are going to come up that maybe will help us do things better and more effectively over time?”

Mechael noted that mobile phone access is nearly universal. The world’s population recently hit 7 billion, and there are [at least 5.3 billion mobile phones in use](#), according to the International Telecommunications Union. (Nearly 75 percent of those phone subscriptions are in developing countries.)

“It doesn’t mean that everybody has a phone, but what’s increasingly happening is that most people have access to a phone. Even if I don’t have a phone, but a neighbor has a phone or a family member has a phone, I can still have a mechanism for communication,” Mechael explained.

“I’m oftentimes surprised at how quickly technology adoption happens. I’ll go to meetings in the ministry of health [in a developing country] and everybody has a tablet,” she said. “So it is quite remarkable how quick to adopt technology individuals have become.”

Mechael also knows that much of health communication is done at the caregiver level, particularly in low-resource parts of the world, where health literacy among the populace lags the West. “The reality is that you really have to start with the health, right,” Mechael said.

“You have to really understand what are the health issues or the health challenges that you are trying to address and where can mobile play a role in that. And sometimes the answer to the question is mobile has no role in that, that the infrastructure is not there yet or that applications are not quite there yet for the types of problems that you’re trying to

resolve, and it may make more sense to use paper as your information conduit and then move to electronic versions at higher levels within the system.

“In some situations, it makes sense to look at voice because of literacy issues, in others you can then look at text messaging. In still others, it makes sense to look at [smartphone] technology. But again, you know, it’s really important to start with what is the problem, what are the things that we’re trying to solve, and then look for the most appropriate tool.”

What is important, according to Mechael, is to take advantage of existing technologies and resources rather than trying to reinvent the wheel. “There are movements now to look at what are the multiple information delivery channels that we can leverage. They’re looking at interactive voice recognition systems alongside text messaging alongside work being done on feature phones, which are a little bit more high-functioning,” she reported.

Open source can work particularly well when money is tight. “The reality is that a lot of the tools are already available, so people don’t necessarily have to start over from scratch. ... There are a lot of open-source [interactive voice recognition] systems, open-source text messaging platforms, electronic medical records,” Mechael noted. Android, of course, is an open-source platform, too.

“A lot of the pieces are out there, so one doesn’t need to go far to really understand. Oftentimes I tell people, look at what’s happening within your countries already because there is an emerging critical mass of activity already happening that people really don’t necessarily have to start from scratch.”

<http://mobihealthnews.com/15126/mechael-leverage-existing-tech-in-developinghttp://www.mhealthalliance.org/-world/>

[http://healthunbound.org/top11\\_winners](http://healthunbound.org/top11_winners)

<http://finance.yahoo.com/news/2011-mhealth-summit-opens-record-143000321.html>

NATIONAL HARBOR, Md., Dec. 5, 2011 /PRNewswire/ -- The 2011 mHealth Summit kicked off today with an impressive 3211 attendees from 48 countries and 46 states. The largest mobile health event in the world met attendees with eight keynote addresses, 14 concurrent tracks with 80 sessions, 300 exhibitors, and a series of co-located events.

"Our goal this year was to deliver an event that met the needs of this growing industry," said Richard Scarfo , Director of the mHealth Summit and Director of Strategic Alliance at the Foundation for the NIH. "The mHealth Summit provides a 360 degree view of the state of mobile health today and is a direct result of partnerships and alliances we have engaged in leading up to today."

The significantly expanded summit this year remains focused on both domestic and international issues and includes a well rounded program consisting of 8 keynotes, 4 super sessions, 80 concurrent sessions in 5 themed tracks, corporate spotlights, a broad range of exhibitors, four themed pavilions, and special sessions and co-located events presented by sponsors, affiliates, and partners. The M-Enabling Summit has also co-

located with the mHealth Summit, a focused event on mobile applications and services for senior citizens and persons with disabilities.

"In addition to the record attendance this year, we have seen an increase in panelists and speakers from low-income countries, where a great deal of mobile health programs are already having a positive impact on health outcomes," said Patty Mechael , Executive Director of the mHealth Alliance. "Demonstrating lessons learned and innovations used in low-resource areas is a critical part of advancing mHealth around the world."

This year's keynote speakers are a frontline representation of the critical components represented at the mHealth Summit and include:

- Kathleen Sebelius , Secretary U.S. Department of Health and Human Services
- Eric J. Topol , M.D., Vice Chairman, West Wireless Health Institute
- John Stratton , EVP & COO, Verizon Wireless
- Dr. Regina M. Benjamin , Surgeon General of the United States , U.S. Department of Health & Human Services
- Julius Genachowski , Chairman, Federal Communications Commission
- Dr. Hamadoun Toure , Secretary-General, International Telecommunication Union
- Paul E. Jacobs , Ph.D., Chairman of the Board and CEO, Qualcomm
- Sangita Reddy , Executive Director, Operations, Apollo Hospitals Group

This year, a new aspect of the Summit is its Digital Media Pavilion, sponsored by the Foundation for the NIH and the United Nations Foundation. Located on the exhibit hall floor, the Digital Media Pavilion will feature high-level interviews with speakers, exhibitors, sponsors and mobile health leaders from around the world. In an effort to extend the message of the summit beyond the facility, interviews will be livestreamed from 2:00 to 5:00pm EST on December 5 and 6 and will serve as the hub of the online conversation about the Summit – sharing the Summit's news and events beyond the conference doors.

From mobile medical apps to regulatory policy, text messages to remote diagnoses, the 2011 mHealth Summit will connect providers, innovators, and technology experts with one goal: to expand the reach of innovative mobile technology to provide positive health solutions.

Presented by the FNIH in partnership with the mHealth Alliance, the Healthcare Information and Management Systems Society (HIMSS) and the National Institutes of Health (NIH), the 3<sup>rd</sup>-annual mHealth Summit runs from December 5-7, 2011 at the Gaylord National Resort and Convention Center just outside of Washington, DC .