

## International Forum for Rural Transport and Development (IFRTD)

### Mobility & Health

#### *Messages from the edge: between the urban and RURAL.*

During the last three decades the largest population growth occurs in the far periphery of large cities. Buenos Aires (Argentina), one of the twenty world largest metropolises, has grown even more away from the central city (Ciudad Autónoma de Buenos Aires). An extensive periphery but low in density, a poor service provision and sharp contrast between poor and rich people. Community centers are week, hardly integrated by the railway lines, and its roads aren't passable at all to walk along in every season of the year.

Should we be in the Amazonas jungle or in an island, or even in the middle of nowhere to be isolated? Isn't certainly so. If we take the Highway to go just 50 km. further Buenos Aires' outskirts, we arrived to the new Pilar downtown, the most important area in the metropolitan periphery from the last twenty years on, we'll find big shopping centers, entertainment, many stores, international hotels, and we couldn't possible doubt about we still are in the 'big city', situated on the same Buenos Aires' ground.

As soon as we moved away from the highway or the Pilar downtown, the landscape changes abruptly. We are now in the countryside, among orchards, poultry farms, or simply precarious slums scattered little houses, no pharmacies shops to buy some medicine, no public phone to call an ambulance, no asphalt whatsoever or a simple sidewalks, and no transport at all -- although five thousand people are living there... Children, grown-ups, elderly people share small houses in the middle of the vast *Pampa*. The same happens in General Rodríguez, and we are just 50km far away from the main city (Ciudad Autónoma de Buenos Aires), having no doubt at all that

we are still in urban ground. However, only 7km away from General Rodríguez at the neighborhood called 'Vista Linda', we are once and again in countryside. Town and country live, altogether, on the city edge, and this 'closeness' to the suburbs makes them more vulnerable, because this very position is the factor to hide them.

We wanted to find a way to these communities express themselves, by giving a voice to describe in their own words their situation, and to let them ask for a more effective and integrated approach on existing public services, transports and other basic services such as health.

Buenos Aires is a metropolis well provided with hospitals and centers for Primary Health Care in the neighborhoods (called 'salitas' – coming from the Spanish for 'parlour', *sala*) that provide universal, free and basic attention. The 'salitas' are not only an entrance but also the public service organizers, and we also have to take notice about that the health care system is linked to a network of services provided by the national, state and local government. This holds on the movement of material and human resources (for instance, to vaccinate people). And to work as a coordinated and well articulated system, public health requires an external mobile network (to population) and an internal one (to human and material resources). Here lays its importance.

We propose the use of social networks to reach a wide audience in order to show some real-life stories to the global community. We know those are similar to many other major cities around the world, and because of it, a really big challenge in terms of social and spatial equity. And we also want to present this to the whole community and also those in charge to encourage them to carry out actions in this kind of issue.

We think audiovisual material help community up to visualize by their own eyes the access problems to maternal and child health care and to know how mobility affects them. They have testimony like this mother from the neighborhood called Zelaya: 'to go there, I just walked up, because the bus only goes every one hour'. Another one told us: 'until the people's lining up wasn't finished, you couldn't realize that

wasn't any appointment else (to see the physician)... then, you have to come back another day...'

The necessity to solve daily life problems, such as work and make a living, turns mobility problems (and how they trouble people's life) less important. What people view about this will help people to identify how the situation could be improved, even by little changes in the way of organizing and sharing transportation means to reach health attention -- without any investment or infrastructure changes required. Information is a key element in convert into actually access to health. Communication is also indispensable between health and community workers as well as transport and health policies. Warning people on the radio, children's school or even by mobile phone any schedule changes in the appointment to medical attention or to communicate them of test results already took in the primary health center, save them from unnecessary travels. Or even coordinating schedule, transit and routes of bus to the way to the hospital, as well as took care of health workers mobility, supplies and equipment to 'salitas'. Encourage participation, share experiences and looking for solutions through the Web 2.0 platforms -- like communitarian teleconference centers with access to the Internet, to give people information. These are some ways to 'bring to them' the health service and improve the mobility to that edge the rural and urban sphere.

All messages and testimonial are available at:

<http://www.youtube.com/user/movurbanaysalud>