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- LP Like-minded students have come together to take an ingenious water purification project to the next level, says Stephen Hoare

A group of students from Desautels Faculty of Management, <u>McGill University</u>, Montreal recently won a \$100,000 grant from Grand Challenges Canada to field test an ingenious and low-cost water purification device that could potentially save millions of lives in developing countries.

TD Dr Padma Venkat, Dr Caroline Kisia, Dr Ahmad Firas Khalid and Judith Horrell from McGill University's international Masters in health leadership teamed up to develop a copper coil water purifier after a session where students were asked to talk about issues that were important to them. One student's story of how her potentially life-saving innovation was being starved of development funds in India stirred strong emotions.

It soon emerged that several healthcare professionals on the course not only shared Venkat's passion but had complementary skills that could actually bring the project to fruition. "I was at a stage where my work with small copper coils for water purification had reached a low point," says Venkat, director of the Institute for Ayurveda and Integrative Medicine in Bangalore. "Discussing it in front of my classmates, I was overwhelmed by their response."

The anti-microbial qualities of copper have long been acknowledged and Venkat observed that if a small copper coil was left in a container of water overnight, virtually all harmful bacteria were killed and the water became safe to drink. "My device is simple, it costs only 600 rupees - about £7.50 - and can be easily mass-produced. The coil can be shaped to fit inside any conventional plastic or metal water container - and it lasts a lifetime," says Venkat.

According to the <u>World Health Organization</u>, some 1.1 billion people lack access to an improved water source. "Infectious diarrhoea causes up to 2.2 million deaths per year and most of these are children below the age of five," says Venkat.

"When I heard about Padma's invention, I could immediately see the potential," says Kisia, director of Action Africa Help International (AAH), a Kenya-based water quality NGO. "In Kenya, we have the same need and the same huge problem. Many children dying of diarrhoeal diseases."

Supported and mentored by Leslie Breitner, director of the IMHL programme, the team produced a business plan and proposals for a field trial in Kenya. "My role was to help them with the budget and to read drafts of their business plan. The group found out they had won the award on 1 May. The funding is

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now in place and they're ready to roll," she says.

Funded by the <u>Canadian government</u> to support major innovation in global healthcare, Grand Challenges Canada immediately recognised that, once tested and approved, Venkat's idea would represent the best chance of saving young lives previously lost to diarrhoeal infection.

This mission to boost healthcare in the developing world dovetails with the ethos that underpins McGill's international Masters for health leadership (IMHL). The programme has a cohort of 28 and attracts ambitious healthcare professionals from hospitals, health ministries and NGOs internationally. Students are expected to have 10 years' management experience before applying. "Our mission is the transformation of world healthcare organisations through improving the management of healthcare services at a clinical and a management level," explains Breitner.

Launched by leadership guru Henry Mintzberg in 2006, the IMHL's pedagogy reflects its founder's trenchant and unconventional views. The modular course is divided into "mindsets" beginning with a reflective module related to the self, and progressing through analytical, collaborative and catalytic mindsets - how managers should become agents of change. Modules are taught over 12-day residential programmes at three- to four-month intervals, with the entire programme spread across 15 months.

The combination of the IMHL's unconventional syllabus and its emphasis on self-discovery gave the group of students the boost they needed. "Part of the reason I applied was the opportunity of meeting and studying under Mintzberg," says Kisia. "I've learned a lot about management strategy from him, particularly the need to be flexible and deal with things as they are, rather than adopting a rigid framework."

The dynamics of the student group was a vital factor, as Khalid, a professor of medicine at Ottawa General Hospital, explains. "For me to get into a collaboration I need to have faith. You can do all the research in the world and not get anywhere. With Padma and Caroline coming together. we have potential for ground-breaking research being implemented and reaching the people who need it."

Acting as communications manager, Judith Horrell is keen to raise awareness of the copper coil's benefits. "I'm managing the public engagement of this product. It's not just about getting a device to market, it's about building public awareness. This product is about saving and improving lives," she says.

Over the coming months, the trial in Kenya will be administered by AAH. Two hundred households will take part in a year-long trial and be offered advice on measures they can take to avoid water contamination. Information gathered from households on the incidence of diarrhoea will be cross-referenced with public health data.

The students are already planning ahead. High on their agenda is the possibility of a \$1m grant from Grand Challenges Canada, while the coil could enter production in as little as 18 months.

"By then we expect to see water contamination reduced, the incidence of diarrhoea coming down and hopefully people will be accepting the product.

"Then if all goes to plan we'll have a low-cost product that can be manufactured locally in bulk by community-based businesses. It will be very fulfilling to move my team's research out of the lab and into communities," says Venkat.

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