SOSO CARE

<table>
<thead>
<tr>
<th>Region</th>
<th>Sub-Saharan Africa</th>
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<tbody>
<tr>
<td>Award Scheme</td>
<td>Others</td>
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<tr>
<td>Themes</td>
<td>Waste Management</td>
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<td>Start Year</td>
<td>2019</td>
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<td>Sustainable Development Goals</td>
<td>Goal 2 - End hunger, achieve food security and improved nutrition and promote sustainable agriculture</td>
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Summary

SOSO CARE is a social enterprise low cost insurtech which aims to use recyclable garbage as a financial resource enabling millions of uninsured slum dwellers mostly pregnant women and kids to access micro health insurance and gain points on food stamps.

Background and Objective

Lagos state as a city is densely populated with over 25 million people. About 40% of this population live below poverty line and are found in the urban slums. High population means higher consumption for food and waste generation. It is stated that the city generates over 14,000 metric tons of solid waste daily – about 490 trailer load of waste daily. Waste as a problem affects the public health of millions living in slums, our climate and even our oceans. We figured out that it is best to use a problem to create a solution. So we decided to link waste to health and food stamp. By linking garbage to healthcare access and food stamps we are killing 3 birds with 1 stone as the solution addresses the needs through the following: • Access to healthcare to reduce infant and maternal mortality in these regions • Improving sanitation & environment in slums and • Creating Jobs for the distribution network and waste collectors • Access to food stamps

Actions and Implementation

During our pilot face in July over 90 women donated waste to us to access food and healthcare which validated our work. And since then we have relied on interviews and data collections for our evaluations. We have launched and sailed partnerships with waste management companies to ensure collection points can be used as registration point for health insurance access. And we have started engaging the poor and uneducated about the importance of a health cover as a pull of risk.

Outcomes and Impacts

The outcome and result has been great! As people can now use a less value product to access quality healthcare across Nigeria. The feedbacks have been great as we have received emails asking us to expand to their cities and countries in Africa. Our goal is to provide an inclusive healthcare access for the poorest of the poor who cannot afford to pay for quality healthcare. We have made affordability and accessibility easier mostly for the poor with high incidence of maternal mortality. Soso care does not only transform lives it is also sustainable and can be replicated across cities in Africa and Asia including Indonesia were solid waste is highly generated.

Sustainability and Scalability

Soso care business model is scalable and replicable as we have tested in over 4 states and cities. We hope to raise money to scale fast so that we can move to bigger cities and states like Lagos with over 25 million people and about 30% living in slums and suburbs. While eyeing other African countries and Pakistan since our CTO is from Pakistan.

Innovative Initiative

Currently we are the only Fintech that aim to use garbage to finance healthcare, provide access to micro capital and food stamps which are key problems of the poor that makes us unique. By linking garbage to healthcare access, micro capital and food stamps we are killing 2 birds with 1 stone as the
solution addresses the needs through the following: • Access to healthcare to reduce infant and maternal mortality in these regions • Improving sanitation & environment in slums and • Creating Jobs for the distribution network and waste collectors • Access to food stamps

Resources devoted to delivery

We started with a seed capital of $6500 which covered our technology solution and little payment on logistics and payment of our team who are passionate about our solution. While we have received a grant of about $1000 from Epiafric, We are looking to raise $50,000 to help us scale fast mostly to cities like Lagos as there is a strong need for sensitization and service promotions.

Conclusion

The biggest challenge in these market mostly the area of health insurance is the distribution to ensure it reaches the target audience which is why traditional insurance companies worked with Telecom provided to ensure users can pay with call cards. These failed because the target audience was skeptical. Again the cost on logistics and moving the waste could be high in remote and isolated cities which is where partnership comes in to manage cost to increase effectiveness and efficiency for sustainability.