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**Dialogue Process on Chronic Renal Insufficiency  
Facilitator's Summary  
October 16, 2009**

**1. Background**

On October 15 and 16, 2009, there was a new dialogue meeting in the city of León, convened by the Office of the Compliance Advisor Ombudsman (CAO) of the World Bank Group, with the participation of Nicaragua Sugar Estates Limited (NSEI) and the Asociación Chichigalpa por la Vida (ASOCHIVIDA), for the purpose of finding options towards a solution to the problem of Chronic Renal Insufficiency (CRI).

This meeting is according to the guidelines established in the Dialogue Agreement Framework proposed by the CAO on November 20, 2008, to which NSEL and ASOCHIVIDA have separately adhered. According to point 6 of said Framework Agreement, dialogue meetings shall be centered on, and limited to:

**a) Identifying and addressing the causes of CRI.**

The adherents agree to define, jointly, the criteria and principles necessary to perform a Study that identifies the causes of CRI, whose results shall be transparent and reliable for all and provide feasible solutions.

i) Expected results: An Agreement on the criteria and principles that will guide the Study.

An Agreement to accept the results of the Study and the options for solutions to the problem.

**b) Options to support the local communities where there is a prevalence of CRI.**

Out of good will, and without any legal obligation, the adherents agree to seek ways to relieve the situation of families affected by CRI, involving local resources and State institutions.

i) Expected Result : Relief to the situation of families affected by CRI.

**2. Objective of the meeting**

The dialogue meeting was aimed at having a joint reflection on the degree of progress achieved so far in this process and at seeking solutions to the difficulties that might have arisen in the implementation of decisions.

**3. Joint reflection on the advancement of the process**

The dialogue process has become an effective communication channel between NSEL and ASOCHIVIDA members. The Agreement Framework to which both institutions have adhered establishes dialogue subjects and the main working rules. There have been 6 dialogue roundtables in 8 months and many bilateral and specific group work meetings. NSEL stresses that this is the only dialogue channel the company has and will keep open with its ex-workers.

Although important advances have been made, as described in point 4, it is still possible to advance faster and better. In the last 3 months, the CAO has kept a frequent presence to advance in the implementation of agreements, but there had not been any new dialogue roundtable. After some time without a dialogue



roundtable, there are rumors that disturb the good development of the process. It is also necessary to better communicate the advances, as they are attained. For this purpose it was agreed that in the next edition of El Pailero, there will be a note whose text will be approved by ASOCHIVIDA, NSEL and CAO.

It is worth pointing out that this dialogue process has allowed for the gradual construction of a communication bridge between ASOCHIVIDA and NSEL, which is bearing fruit to find solutions to the problem of CRI. It is important to emphasize the great effort made by the representatives of both organizations to carry on a productive and respectful dialogue. The leaders of ASOCHIVIDA have succeeded in reflecting, at the dialogue roundtable, the most important needs of their bases and communicating the results to the Assembly. The representatives of NSEL have proved that the company has a real interest in knowing the causes of CRI and is ready to cooperate actively to relieve the situation of the affected families.

#### **4. Advances**

Point 6.a of the Agreement Framework: Identify and address the causes of CRI.

The University of Boston (UB), selected by agreement between ASOCHIVIDA and NSEL, after checking the relevant documentation and holding meetings with ASOCHIVIDA and NSEL, completed the advance report on August 24 and informed the CAO on September 3. The report was sent for further revision by experts and their comments are expected by October 25.

The experts are:

- Dean Baker, MD, MPH: Professor of Clinical Medicine. Director of the Center for Occupational and Environmental Health. Chief of the Division of Occupational and Environmental Medicine. Irvine Medicine College, University of California.
  
- Desmond Williams, MD, PhD: Associated Chief of the Epidemiology and Statistics Branch. Diabetes Control Division. Center for Control and Prevention of Illness – Center for Disease Control (CDC) United States.
  
- Miguel Orozco, MD, PhD: Executive Director of the Center for Research and Social Studies on Health, College of Medicine of the National Autonomous University of Nicaragua – Managua.

Point 6.b of the Agreement Framework: Options to support the local communities where there is a prevalence of CRI.

According to the facilitator's summary of April 3, out of good will and without any legal obligation, NSEL shall offer short-term aid to relieve the situation of families affected by CRI, in matters of food, schooling, health and alternative income sources, according to the following detail:

#### Food aid

In April it was agreed that the company would offer support for two years, for an annual amount of U\$S



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300,000 for 1153 heads of family, members of ASOCHIVIDA, which could be extended to a total of U\$S 500,000 per year, for 1800 heads of family.

The difficulty that arose in the implementation of this point lies in the probability that food prices may rise beyond expectations and that one million dollars may not be enough to cover 1800 persons during 24 months. For this reason it is agreed that aid shall be offered to 1800 families for as long as the million dollars committed allows it.

To this effect it is agreed that there will be a meeting in ten months to monitor the projection of food prices. NSEL expresses its willingness to show to CAO the necessary documentation to perform this analysis.

So far, 1688 families are receiving monthly food aid. 40 applications have already been approved. All applications submitted to cover the rest of the places should comply with the requirements.

#### Health aid

With respect to the commitment to complement the supply of medicines and reactives in the health center, we have found some difficulties in the implementation. To buy the medicines and reactives at a convenient price and then distribute them in such a way that they will reach those who need them most, it is necessary to coordinate adequately with the Ministry of Health.

However, although the CAO has gone through several proceedings with MINSAs – including a joint meeting with representatives of ASOCHIVIDA, MINSAs, CAO and NSEL -, so far there has not been any decisive progress.

Both NSEL and ASOCHIVIDA would like to advance faster in this matter and are jointly exploring new options for this aid to be channeled adequately. To this effect, two parallel action paths have been agreed upon: On one hand, NSEL shall explore with ANF the viability of obtaining donations of medicines and reactives from abroad, based on a list prepared by their doctors and shared by Dr. David Silver. NSEL shall confirm, within 20 days, whether this option is viable. This option is meant to serve as relief but does not solve the problem in a sustainable manner. Therefore, joint efforts are agreed to be made before MINSAs and INSS, seeking to reach the highest possible level, so as to ensure a steady supply of medicines.

Also, as agreed, NSEL loaned ultrasound equipment to the Chichigalpa Health Center and hired a radiologist who attends to patients every Saturday.

#### Support for alternative income sources

NSEL has repeatedly expressed its willingness to support families affected by CRI, to access income or job sources that may be sustainable over time and do not imply any indebtedness. NSEL is ready to begin to offer this support through the San Antonio Foundation

ASOCHIVIDA and NSEL again manifest to the CAO the need to count on the help of an expert in new productive undertakings and request that these proceedings are urgently completed, as 6 months have already elapsed since the request was made. CAO expresses its will to advance quickly with the terms of



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reference to hire an expert and expects their comments.

## **5. Next steps**

In CAO's opinion, the next steps in this dialogue process should be oriented towards:

Point 6.a of the Agreement Framework: Identify and address the causes of CRI.

After receiving the comments from the experts, the UB shall have time until November 8 to submit the final report, which shall include the comments received from the experts. CAO shall translate the report into Spanish by November 16, when it shall be distributed to NSEL and ASOCHIVIDA. CAO shall convene a new dialogue roundtable within the week of November 30.

Point 6.b of the Agreement Framework

NSEL shall inform ASOCHIVIDA and CAO on the viability of obtaining an international donation of medicines and reactives.

CAO shall receive comments from ASOCHIVIDA and NSEL on the Terms of Reference for the consultant that shall advise ASOCHIVIDA in the elaboration of projects. Then CAO shall perform the procedure to hire the corresponding consultant, after giving prior information to ASOCHIVIDA AND NSEL.

Juan Dumas  
Dialogue Facilitator