

Targeting Family Planning Services in Yemen: Let the Data Speak!

Abdul Jabbar Ali Al Ghaithi, MD

Health Systems 20/20 Project, Abt Associates Inc.

Mark Landry U.S. Department of State

November 7, 2007



Abt Associates Inc

In collaboration with: | Aga Khan Foundation | BearingPoint | Bitrán y Asociados | BRAC University | Broad Branch Associates | Forum One Communications | RT|International | Tulane University School of Public Health | Training Resources Group

Overview

- Yemen Partners for Health Reform (YPHR)
 USAID-funded Health Systems 20/20 Project
- Family planning services in the Yemen context status, gaps, and targeting
- Data requirements for improving accessibility and equitable distribution of family planning services
- Evidence-based decision-making using GIS-enhanced solutions



Yemen Partners for Health Reform (YPHR)

- Working in five underserved, rural governorates in Yemen
- Enhancing health information as the foundation for better management of health resources and better governance
- Building capacity in health financing, operations and governance
- Strengthening routine immunization and surveillance to prevent disease at a lower cost
- For more information, see http://hs2020.org/section/where_we_work/yemen





Copyright 2007, Abdul Jabbar Ali Al Ghaithi, aalghaithi@yemenphr.com

Family Planning Services in Yemen

- Yemen population expected to reach 38.8 million by 2025—more than triple from 12 million in 1990
- According to WHO, the Yemeni fertility rate is approximately 6.2 children per woman—one of the highest in the world
- Barriers to effective family planning
 - Beliefs: Contraception use and Islam
 - Knowledge: Lack of awareness
 - Health System: Resource constraints
 - Geography: Poor accessibility



Data Requirements for Effective and Efficient Targeting

- Supply: Where are the family planning services coming from now?
 - Distribution & Accessibility
- Demand: Where are the
 - underserved populations?
 - Population dynamics over time
 - Women of child-bearing age



YPHR Actions Taken and Ongoing Support for Better Decision Making

- Conducted comprehensive health facility survey in five USAID-targeted governorates (data instrument, GPS coordinates, digital photographs)
- Synthesized, cleaned, and georeferenced the best available GIS base map data
- Coordinating with Central Statistical Organization on 2004 Census data capturing and analysis
- Building capacity for district, governorate, and national utilization of data through health GIS tools and applications
- Improving transparency and accountability of HIS resources, data sources, and indicators

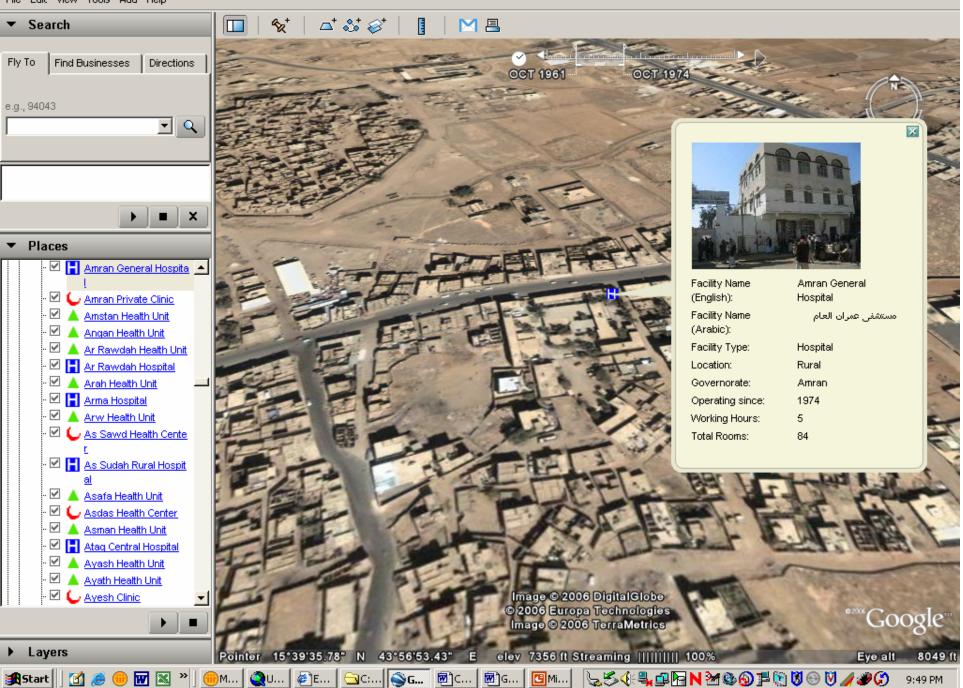
Health Facility Survey

- Hired local Yemeni experts to assist with design and implementation of the survey
- Redesigned survey to incorporate GPS and digital photographs
- Pre-tested survey
- Team leaders from MoPHP; surveyors from governorate/districts
- Data cleaning and compilation
- Data verification
- Tool Development



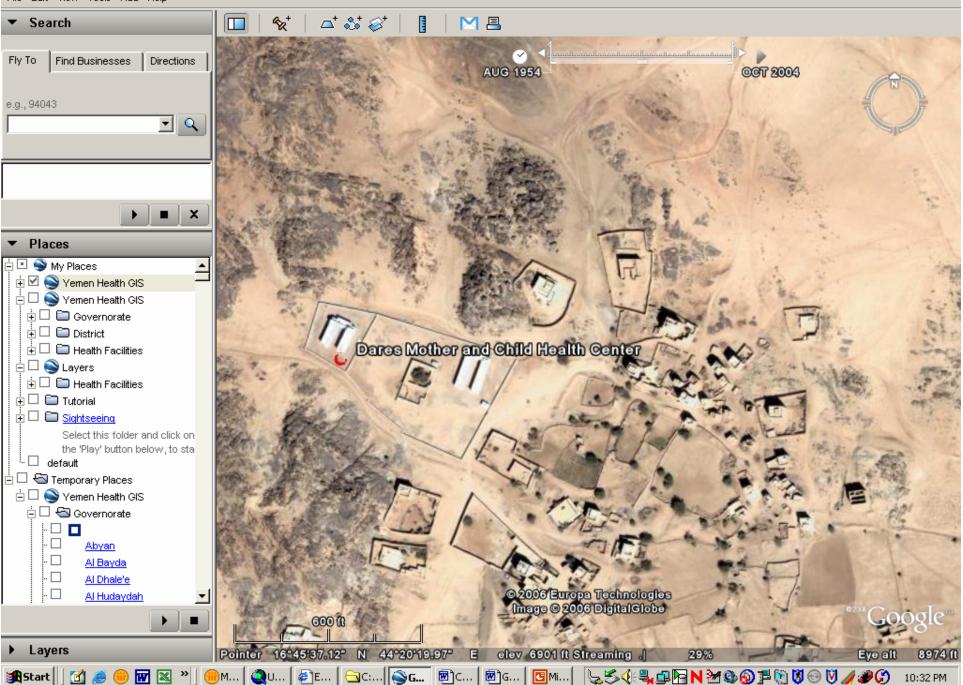
📚 Google Earth

File Edit View Tools Add Help



📚 Google Earth

File Edit View Tools Add Help

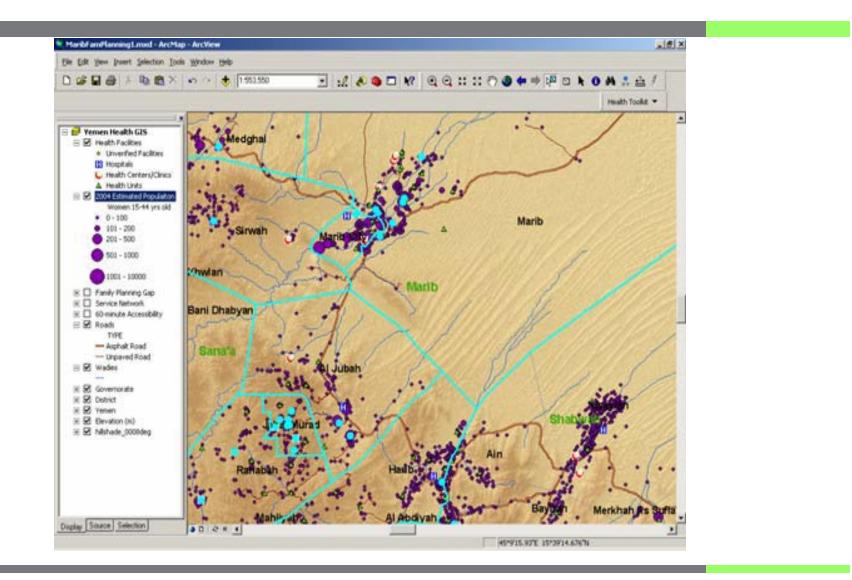


_ 8 ×

Leveraging Data for Governorate-Level Decision Making

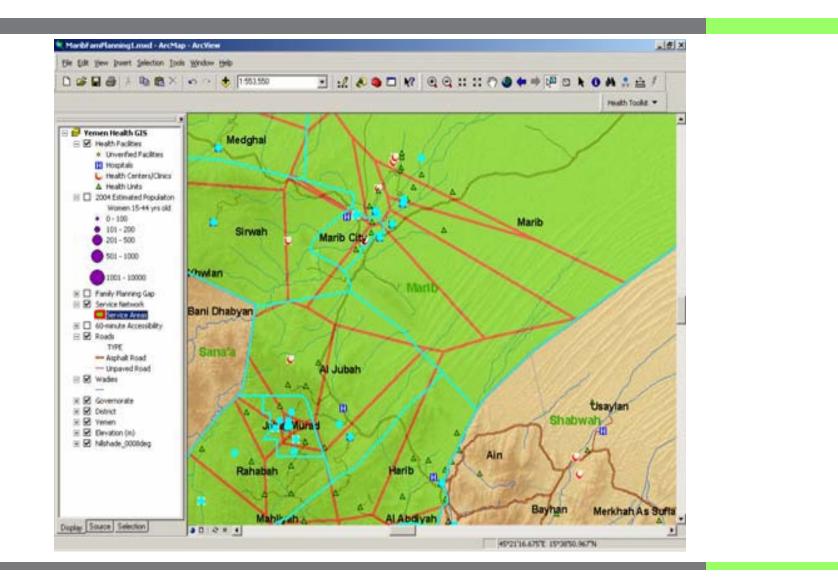
- Simple, elegant, novel eHealth solutions
- Target Audience: Director-General of Health, Health Officials/Managers, Statisticians, Hospital Administrators
- Easy-to-use health care planning, targeting, management, budgeting, evaluation tools in a GIS environment
- Easy-to-understand analyses and visuals
- Basic training, user's manual support, and evaluation

Step 1: Plot settlement populations by size (PURPLE points) and identify health facilities with family planning services with the *Facility Survey Analyzer* tool (LT BLUE points).



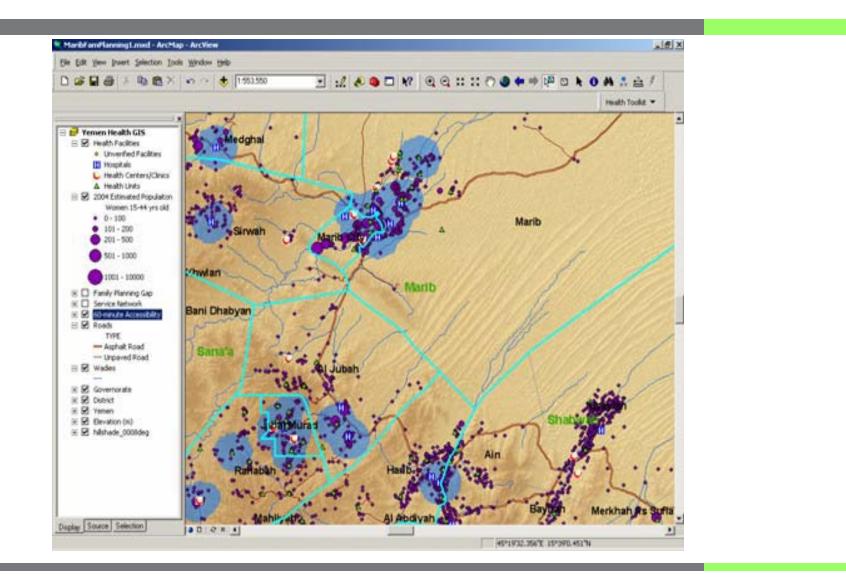
Copyright 2007, Abdul Jabbar Ali Al Ghaithi, aalghaithi@yemenphr.com

Step 2: Analyze the family planning services network by dividing area according to closest proximity to service provider (LT GREEN area) using *Service Network Provider* tool.

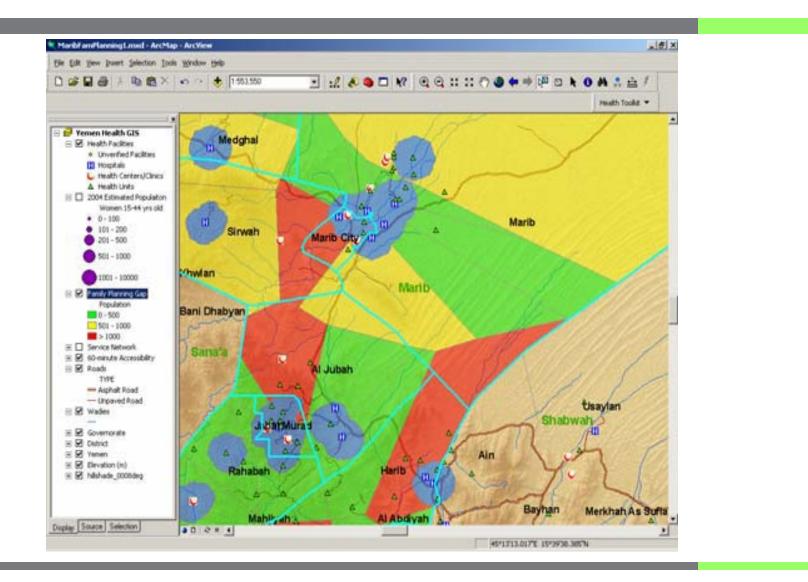


Copyright 2007, Abdul Jabbar Ali Al Ghaithi, aalghaithi@yemenphr.com

Step 3: Analyze 60-minute walking accessibility/coverage area (BLUE) using the *Facility Accessibility Mapper* tool.

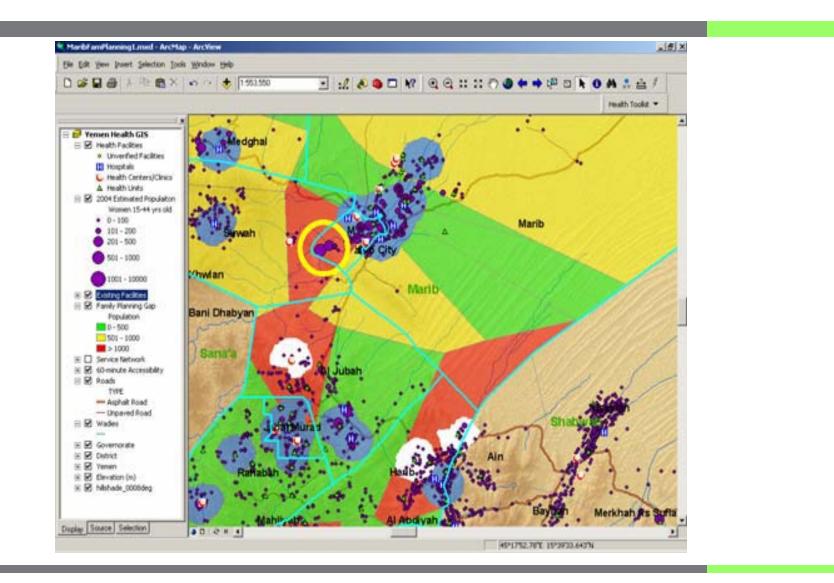


Step 4: Analyze population-weighted gaps in family planning coverage and target prioritized areas or health facilities for intervention (RED vs. YELLOW OR GREEN areas) using the *Healthcare Gap Analyzer*.



Copyright 2007, Abdul Jabbar Ali Al Ghaithi, aalghaithi@yemenphr.com

Step 5: Evaluate family planning gaps compared to an analysis of population distribution (PURPLE), 60-minute accessibility coverage (BLUE), and priority areas (RED).



Copyright 2007, Abdul Jabbar Ali Al Ghaithi, aalghaithi@yemenphr.com

Effective and Efficient Use of Resources and Anticipated Results

- Targeting limited resources
- Avoiding duplication of adequate family planning services coverage area (overlapping BLUE areas)
- Justifying training in facilities employing new family planning service capacity
- Locating priority or underserved rural areas for education campaigns
- Reducing health care costs by allocating and tracking family planning resources while at the same time influencing population dynamics



Thank you

Reports related to this presentation are available at www.healthsystems2020.org



Abt Associates Inc In collaboration with: | Aga Khan Foundation | BearingPoint | Bitrán y Asociados | BRAC University | Broad Branch Associates | Forum One Communications | RT1 International | Tulane University School of Public Health | Training Resources Group