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President's Malaria Initiative

Using GIS and Spatial Analysis to Determine Health Service Delivery Gaps:

Case of Population Density vs. Availability of Services



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GOAL: To improve the health status of all Tanzanians—with an emphasis on women and children in targeted regions











Maternal and Newborn Health (ANC, EmONC, PNC)

Child Health



Malaria (MiP and case management)







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Cross cutting: Gender, Respectful Care Integration, Nutrition and Community engagement and SBCC

Using GIS to improve services delivery



Where was GIS first used EVER?



Cholera outbreak in 1854

Broad Street Region, London

Components of GIS





John Snow

Why GIS in USAID Boresha Afya project?



Gaps

- Unavailable maps (burden, population, etc)
- Some facilities were missing and some wrongly located
- Services provision at facilities
- Proximity of facilities for referral



- Visualize routine and spatial data for decision-making for project and government
- Track progress by looking at pattern change in geography
- Support network of care by identifying service and distance

Implementation



Tools GPS ArcGIS software QGIS software Computers Internet access People



Process Household digitization Population density calculations Review HFR documents Interview on facility services Identify the current wards Mapping of facilities coordinates



Geospatial Analysis Update the shapefiles Analyzing geospatial data Interpolation Overlaying the layers Depict the proximity



Information Use Planning intervention Track indicators Track progress of the program Client referrals

Process: Household Digitization



A temporary team of 30 people used QGIS software

Mapped houses







Overlaid a satellite picture



51 districts were divided among participants



NCEP Grid 229

Grids of 1km² with number of houses were created

Process: Site Verification



- Reviewed facility document
 - Interviewed HMIS focal person to get each facility service information
- Remapped the wrongly located facilities





- Created the facilities map
- Identified current existing wards

 Overlaid the population density and 5 km buffer from facility



Geospatial Analysis

Sample mapping results in Geita

Total number of HF: 159 HF remapped: 29 BEmONC sites: 129 CEmONC sites: 10 PPFP sites: 7 KMC: 2

The map here shows how the health facilities with provided services are located in Geita region





Result: Positivity Rate

Blueish to reddish: increasing malaria positivity rates

Yellow: cutoff point for program intervention.







Result: Where there is availability of PPFP sites, FP uptake is also high.





Information Use: Populated areas with low facility delivery rate, Mara Region

> Result: Highly Populated Places have low facility delivery rates.



Information Use: Risk population



The areas outside the circles are risk populated areas as there is no HF within 5km distance

Challenges

- Internet access during digitization process
- Slow uptake of use of GIS by technical team
- Limited time to digitize all the districts
- Unreached facilities due to geographical challenges



Opportunities

- OpenSRP application tool roll out
- Tablets and smart phone use by CHWs and providers
- Technical areas to use maps during implementations
- Government interest





Thank You

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