



Use of Private Health Facility Census Data to Inform Programs

Douglas Johnson Abt Associates

December 12, 2013



SHOPS is funded by the U.S. Agency for International Development. Abt Associates leads the project in collaboration with Banyan Global Jhpiego Marie Stopes International Monitor Group O'Hanlon Health Consulting

Outline of presentation

- Reasons to conduct private health facility censuses
- Decisions in planning private health facility censuses
- Three examples of census data results

SHOPS private health facility censuses

- Africa
 - Benin
 - Malawi
 - Namibia
 - Nigeria (six states)

- Caribbean
 - Antigua and Barbuda
 - Dominica
 - St. Kitts and Nevis
 - St. Vincent and the Grenadines

Potential users and uses of private health facility census data

Regulators	Gov agencies/ NGOs/donors	Researchers	Professional associations	Providers/ patients
 Increased monitoring capacity 	 Identify potential private partners Identify training and other needs of private facilities 	 Explore role of private facilities in health system Serve as sampling frame 	Identify potential new members	• Find providers for treatment/ referral

Decisions in conducting private health facility censuses

- 1. Which types of facilities should be targeted?
- 2. How should surveyors locate facilities?
- 3. What data should be collected?

Which types of facilities should be targeted?











How should surveyors locate facilities?

- 1. Obtain and merge facility lists
- 2. Use "snowball" sampling to find facilities not included in lists
- 3. Conduct follow up "intensive search" surveys to estimate census error (in dense urban areas)

Intensive search in Lagos

Second more intensive search conducted in 30 (out of 853) randomly selected localities.

Sample Map Used by Surveyors



Results from intensive search in Lagos

Facility type	Facilities found during intensive search/total facilities found	Avg # patients at facilities found during normal surveying	Avg # patients at facilities found during intensive search
All facility types	15%	NA	NA
Clinics	12%	10.2	7.5
Hospital	5%	22.1	13.9
Medical Center	15%	17.7	7.4
Nursing Home	23%	9.6	3.8
Community Pharmacy	30%	49.3	44.6

What data should be collected?

Types of data collected	Examples	Challenges in collecting data
Basic	 Location (GPS) Infrastructure Number of patients by service Services offered Staff by cadre 	 Facilities with poorly kept records may not know patient numbers
Operational	 Prices Revenues Expenses Borrowing Recordkeeping 	 Owners often reluctant to discuss expenses
Quality	 Quizzes Client exit interviews Direct observation Vignette Mystery client 	• Expensive; may not reflect actual practice (quizzes and vignettes) or only capture info on one aspect of quality (mystery clients)
Additional Information	Dual practiceTraining needsIntensive search	Varied

Zinc in Malawi: Identifying training needs by location

Quick Facts on Malawi Census

Variable	Value
Primary objective(s) of census	Assess the size and functioning of private facilities
Areas in which census conducted	All of Malawi
Types of facilities included	All formal, both for-profit and non-profit
Total # of facilities surveyed	763

Zinc in Malawi: Identifying training needs by location



Virtual Caribbean Health Connection: Linking providers to increase efficiency

Quick Facts on Caribbean Census

Variable	Value
Primary objective(s) of census	Assess capacity in private sector
Areas in which census conducted	 Antigua and Barbuda Dominica St. Kitts and Nevis St. Vincent and the Grenadines
Types of facilities included	All private for-profit facilities and NGOs providing HIV services
Total # of facilities surveyed	200

Virtual Caribbean Health Connection: Linking providers to increase efficiency



Networking for a Healthy Caribbean

- vCHC allows providers to:
 - Access and update registry of regional practitioners
 - Identify providers to refer patients
 - Consult on case management
 - Engage in discussion groups and live chats on clinical research and best practices
 - Identify e-learning opportunities

Family planning in Nigeria: Assessing the role of the private sector

Quick Facts on Nigeria Census

Variable	Value
Primary objective(s) of census	 Provide baseline for ongoing impact evaluation Identify facilities to target for training Better understand facilities' training needs
Areas in which census conducted	6 states in Nigeria (Abia, Benue, Edo, Kaduna, Lagos, and Nasarawa)
Types of facilities included	Hospitals, medical centers, clinics, nursing homes, and community pharmacies
Total # of facilities surveyed	5,086

Accuracy of private health facility lists in Lagos



Method availability and patient volume



Reasons for not offering family planning (Lagos only)



Results from mystery clients in Lagos

Category	Question	% of time question was asked
Background	Your age?	
	Are you married?	
	How long have you been married?	
	Do you have children?	92%
Ask client her	Do you want to have more children in the future?	77%
	Does your partner support you in family planning?	
	Are there any family planning methods that you are currently using or have used before?	53%
preferences	Which family planning method would you prefer?	60%
	Are there any family planning methods which you don't wish to use?	10%
	Are there any family planning methods which your husband/partner doesn't wish to use?	13%
	Are you pregnant?	18%
Rule out pregnancy	When was your last menstrual period?	67%
	Have you had unprotected sex since your last menstrual period?	28%
	Do you have any major health problems?	25%
Check for contra-	Are you taking any medications currently or periodically?	9%
indications	Are you allergic to any drugs?	9%
	Do you have heavy periods?	22%

Key takeaways

- Official lists of private facilities/providers often incomplete and inaccurate
- Data from private health facility censuses may be used for a wide variety of purposes
- Design of private health facility censuses should be guided by program objectives





Douglas Johnson douglas_johnson@abtassoc.com

For more information, including public use datasets, visit www.shopsproject.org



SHOPS is funded by the U.S. Agency for International Development. Abt Associates leads the project in collaboration with Banyan Global Jhpiego Marie Stopes International Monitor Group O'Hanlon Health Consulting