



**World Health  
Organization**

# **Geographic accessibility for geo-enabled microplanning for health campaigns + tech demonstration**

**WHO GIS Centre for Health**

# | Outline

- What is geo-enabled microplanning?
- Geographic accessibility modelling for malaria campaigns
- Tool demonstration: AccessMod NextGen
- Geo-enabled microplanning handbook
- Question and answer session (10 minutes)

# WHO GIS Centre for Health

## “Timely and reliable decisions save lives”

Geospatial technology in the form of Geographic Information System (GIS) enables spatial representation of data to support better public health planning and decision-making.

Geospatial data and techniques are also an effective tool to monitor progress and provide a strong basis for policy making to achieve the SDGs and deliver the GPW13 Triple Billion targets.

The medical applications of GIS are numerous, but many countries currently lack the benefits of GIS to strengthen their health information system.

By connecting maps, apps, data and people, WHO GIS Centre for Health (GISC) is dedicated to supporting countries and partners to make informed public health decisions faster and to extend the reach of geospatial information across the Organization.

By continuing to expand its collaboration with partners WHO GIS Centre for Health aims at bridging inequalities within and across countries.

Since August 2020, WHO GIS Centre for Health - a unit of WHO Division of Data, Analytics and Delivery for Impact (DDI), has been focusing on high-impact delivery and supporting relevant topics in the health sector by being part of the COVAX GIS Working Group, initiating an international database ‘WHO Snakebite Information & Data Platform’ for better snakebite management, rolling out a system for surveying excess mortality effectively, and engaging in transfer of knowledge as well as capacity building and advocacy to reach all Member States.

The overarching goal of WHO GIS Centre for Health is to support Member States in the efficient and effective delivery of health care to the entire world population.



## The overarching aim will be met through the following goals:



**Goal 1:** Enable WHO, through its Regional and country offices, to operationalize and scale geospatial data and technologies



**Goal 2:** Foster meaningful partnerships that allow WHO and Member States to use fit-for-purpose GIS supported solutions



**Goal 3:** Establish and maintain a consolidated repository of geospatial data, tools and best practices for effective deployment to priority WHO missions



# Meet the GISC team

Today this team is 42 geospatial experts and allied resources working across 10 time zones from Fiji to Seattle



**Adam**  
Coder, geodatabase specialist



**Ali**  
Monitoring and Evaluation



**Ana**  
GIS specialist, project facilitator



**Anare**  
GIS Specialist



**Anna**  
Spatial biologist



**Annette**  
GIS specialist



**Asela**  
GIS specialist and data expert



**Bodour**  
Project facilitator



**Cam**  
GIS Specialist



**Carlos**  
Geospatial Health Analyst



**Catherine**  
Project facilitator



**Chris**  
Emergency specialist, project facilitator



**Cici**  
Geospatial data scientist



**Daniel**  
GIS server expert



**Deen**  
Statistician



**Denise**  
Monitoring and evaluation



**Gopi**  
GIS Specialist



**Ian**  
GIS specialist



**Inge**  
Training and capacity development specialist



**Jaouad**  
GIS specialist, project facilitator



**Jessie**  
Project facilitator



**Jing**  
Product evangelist



**Jo**  
GIS specialist



**Jon**  
Partnerships



**Julia**  
Geospatial data assistant



**Kshitij**  
Web and IT specialist



**Kt**  
Cartographer



**Lucy**  
Geospatial data assistant



**Marc**  
Project facilitator



**Marissa**  
Administrative support



**Michael**  
Business analyst



**Mojdeh**  
Program support



**Nadika**  
Geospatial Health Analyst



**Nick**  
GIS data and research specialist



**Nim**  
Project facilitator



**Nomsa**  
Business analyst



**Oluwaseun**  
GIS specialist



**Paul**  
GIS Specialist



**Prashant**  
GIS specialist, project facilitator



**Ravi Shankar**  
GIS team lead



**Samuel A.**  
GIS specialist, project facilitator



**Samuel O.**  
GIS Specialist, Project facilitator



**Tamer**  
GIS specialist, project facilitator

# Microplanning team at the GIS Centre for Health



**Ravi Shankar**  
*Head*  
*GIS Centre for Health*



**Chris Jung**  
*Emergency Specialist*  
*Project Facilitator*



**Jo Belanger**  
*GIS Specialist*



**Ana Lourenco**  
*GIS Specialist*  
*Project Facilitator*

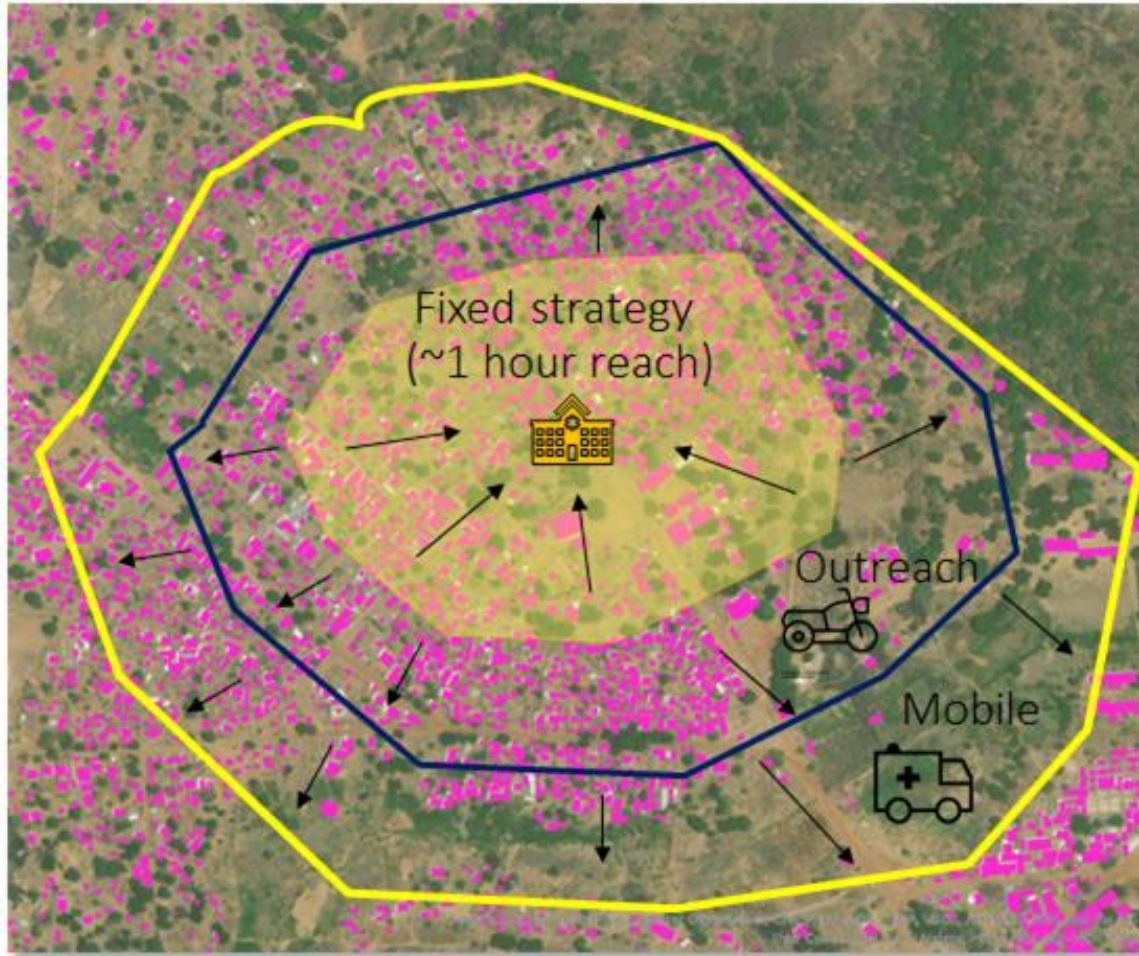


**Denise Ferris**  
*Monitoring & Evaluation*



**Samuel Omara**  
*GIS Specialist, Project Facilitator*

# | What is Geo-enabled Microplanning?



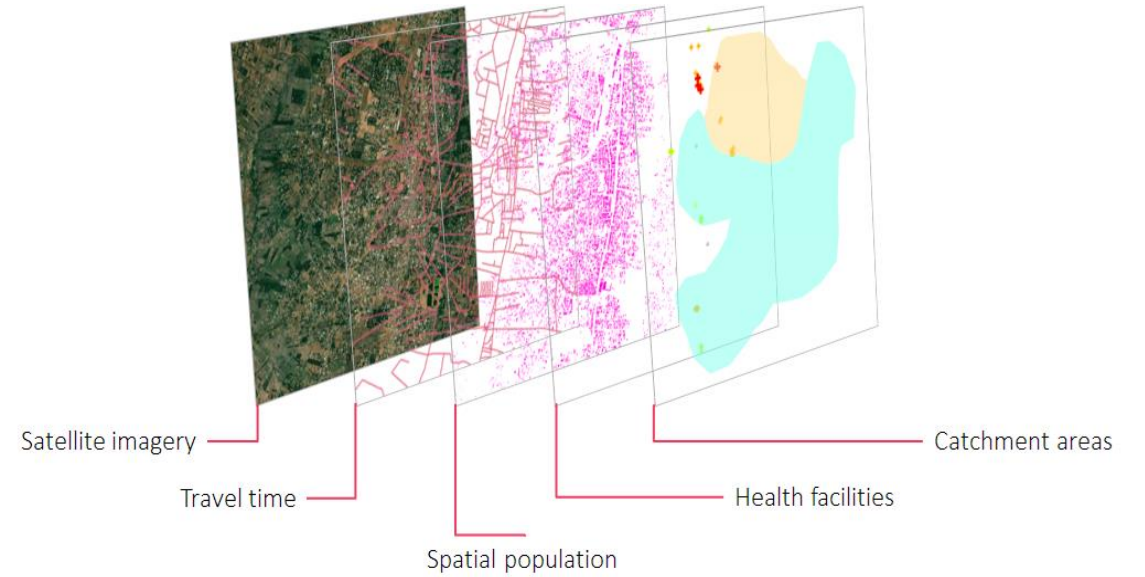
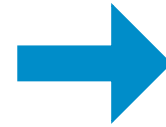
Geo-enabled microplanning involves the use of geospatial data and technologies, including geographic information systems (GIS), to support the planning and monitoring of service delivery at the local level of health facility and health district.

Using spatial data on the location of populations, health resources and the surrounding environment in a GIS environment, digital microplanning can ensure all populations are accounted for, identify gaps in population equitable access to care, and optimize planning for outreach activities to ensure equitability and reach of services.

# Geo-enabled Microplanning



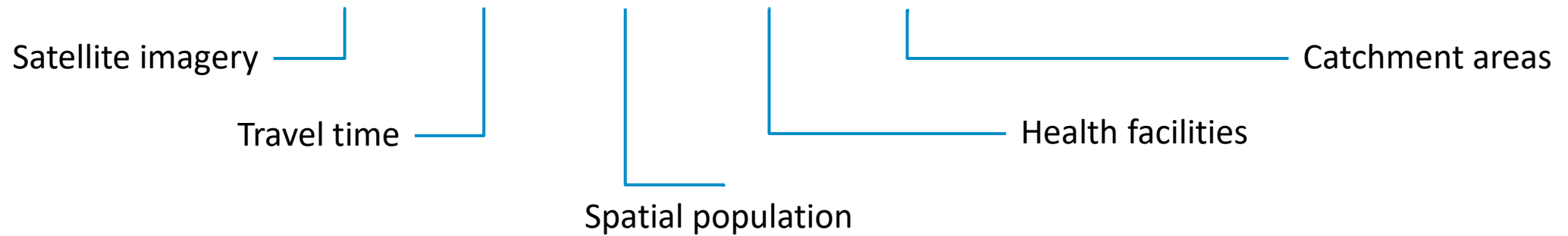
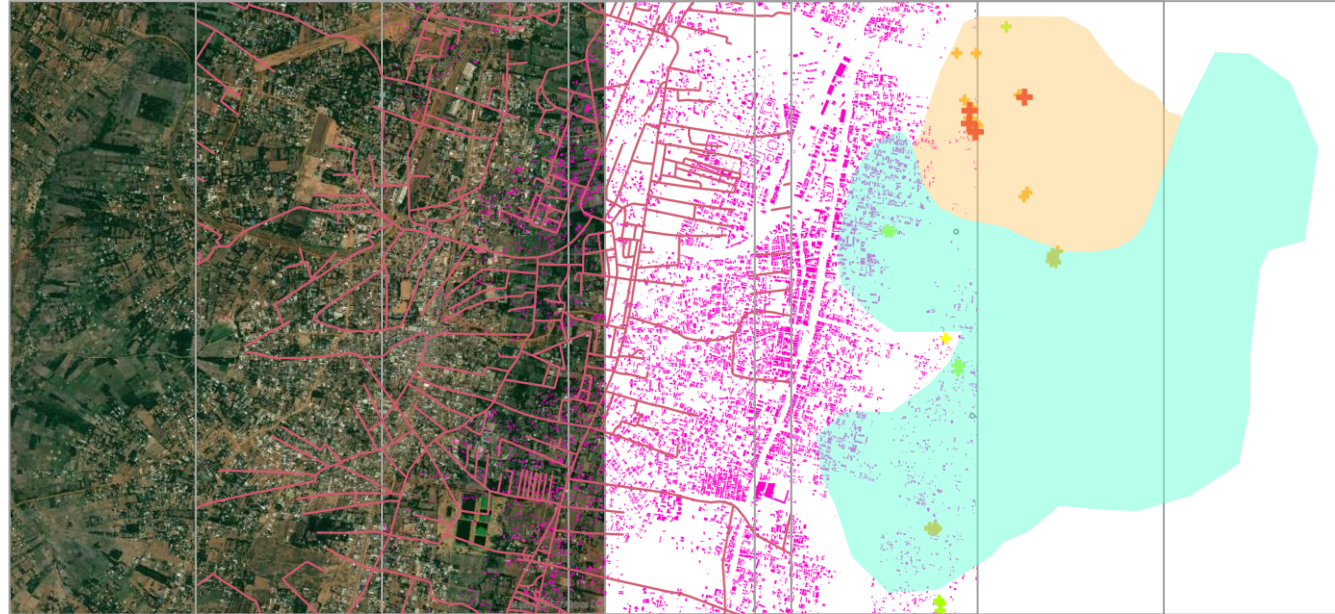
Microplanning using sketch maps and non digital tools



A data-driven and digitally enabled microplan using geospatial data and technologies



# Geospatial data components

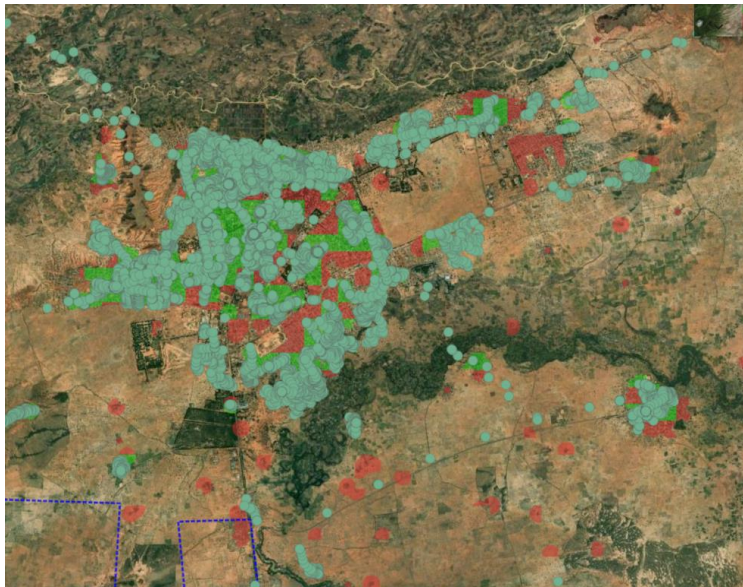




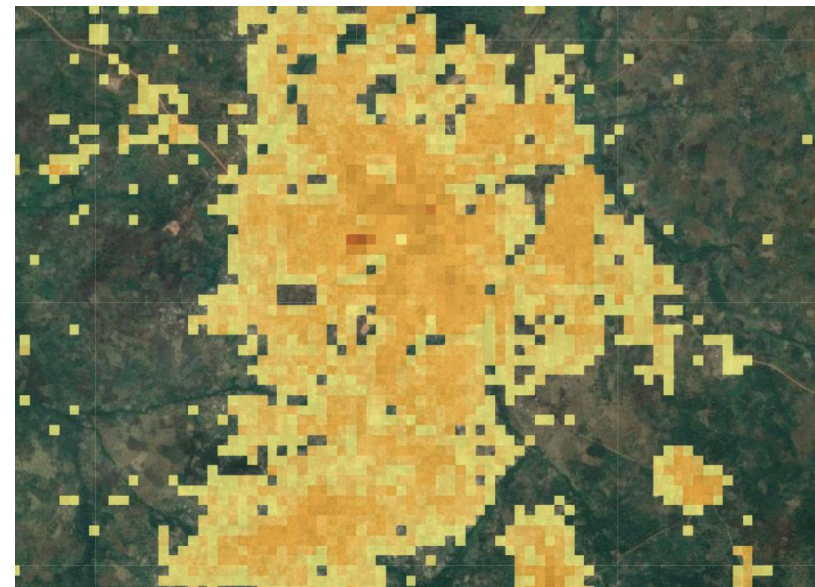
# Population estimation and spatial distribution

In geo-enabled microplanning, population estimation is the use of statistical models, remote sensing datasets and sampled census information to create spatially accurate and precise estimates of population density and distribution.

Population estimates are used to create population denominators for the community to be served.



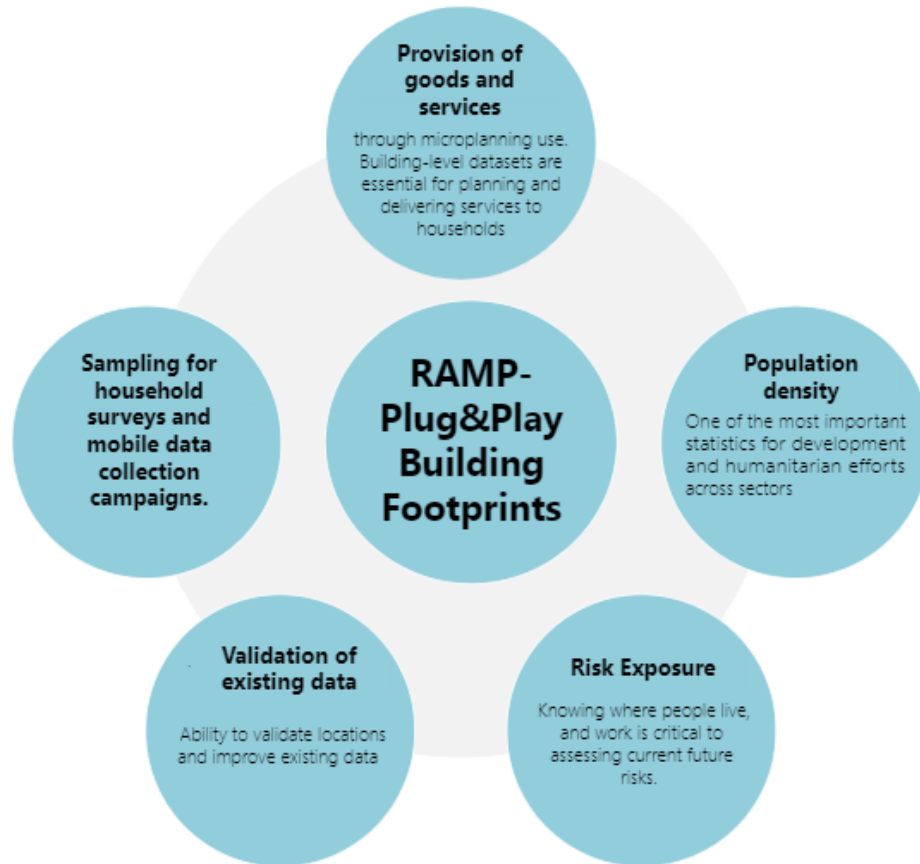
Settlement and Remote sensing data



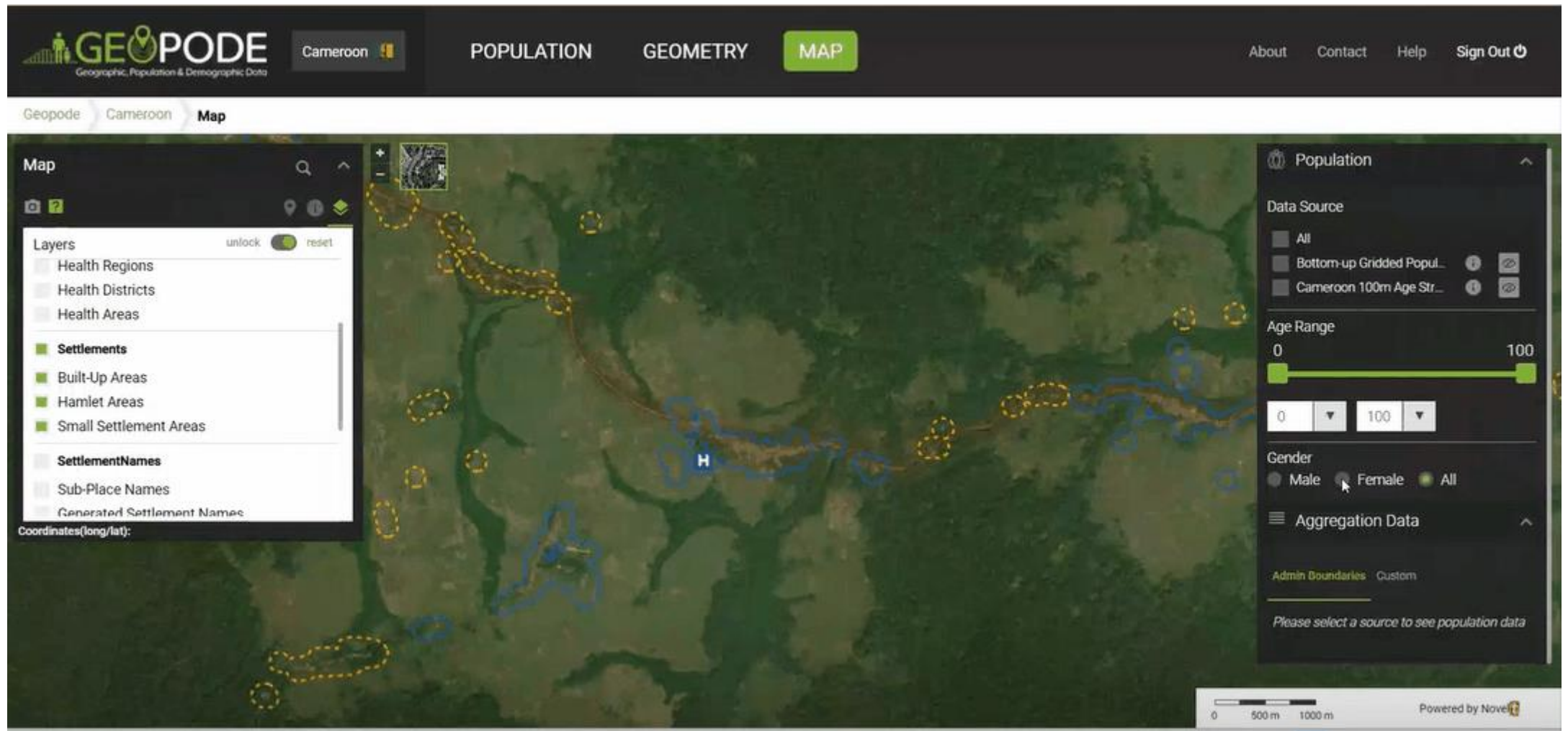
Statistical models

# ABLE – Automated/AI-Assisted Building Layer Extraction

*Provides essential capacity to identify buildings, one pivotal layer to supporting humanitarian response.*

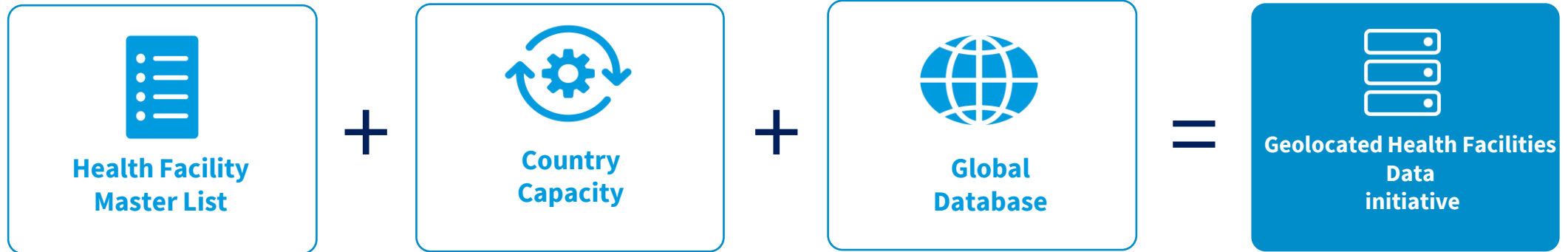


# GeoPoDe



# The Geo-located Health Facility Data (GHFD) Initiative

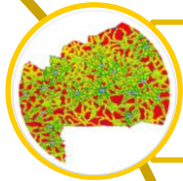
*Offering a georeferenced Health Facility Master List (HFML) per country that is actively maintained, shared by the MoH, and used for health advancement.*





# What is AccessMod?

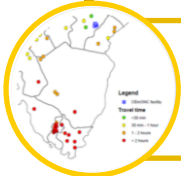
A free, multi-OS, and open-source software combining a set of GIS tools designed to analyze and optimize access to health services and support Universal Health Coverage (UHC)



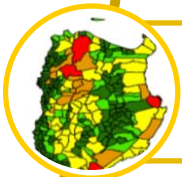
**Accessibility analysis:** Assess how physically accessible existing health services are to the target population



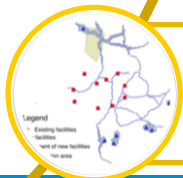
**Geographic coverage analysis:** Assess the target population that would not receive care due to a shortage of capacity



**Referral analysis** Measure travel time and distances between health facilities or supplier/ HF



**Zonal statistics:** values of the population covered for any subnational division of interest



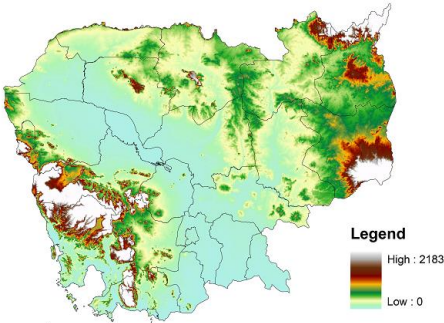
**Scale up analysis** Design and simulate different scenarios to optimize services and coverage

# AccessMod - History

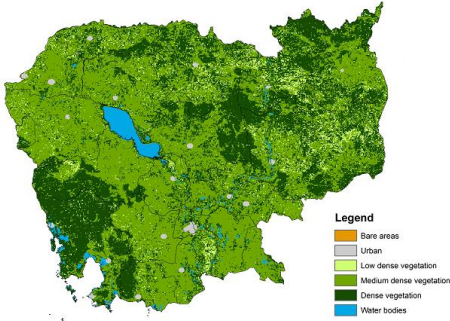
- 2002: Start of the activity in the context of cost-effectiveness analysis (WHO)
- 2003: Need to develop an automated module. First results obtained through the application of the extension developed for ArcView
- 2004: Decision on the name for the extension: AccessMod. First publication based on the use of AccessMod (ESRI health user conference)
- 2005: Release of version 2.1 (isotropic version, ArcView 3.2)
- 2008: Release of version 3.0 (anisotropic version, ArcView 3.2)
- 2012: Release of version 4.0 (extension to ArcGIS)
- 2017: Release of version 5.0 (stand alone version)**
- 2022: Release of version 5.8 (current version)**
- 2022: Next Generation AccessMod online version**

# AccessMod - Input geospatial data

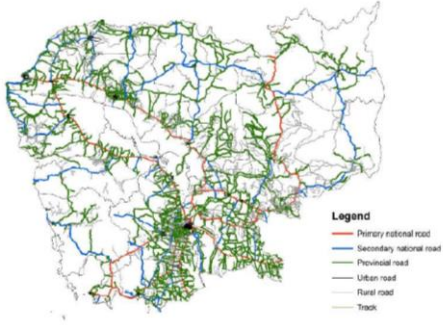
Data used depends on the analysis being conducted



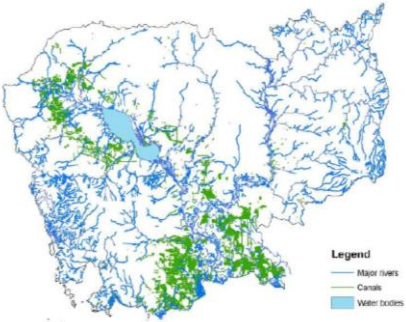
Digital Elevation Model (DEM)



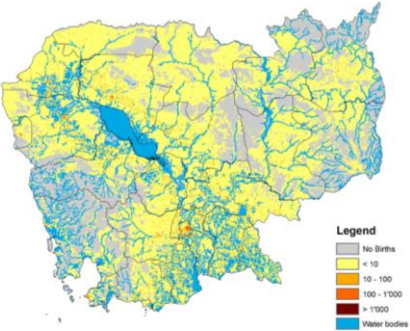
Land cover



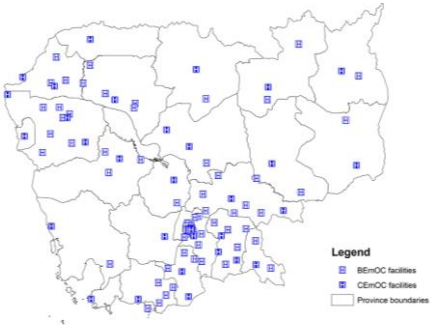
Transport network



Barriers to movement  
- hydric network, special areas



Population



Health facility location

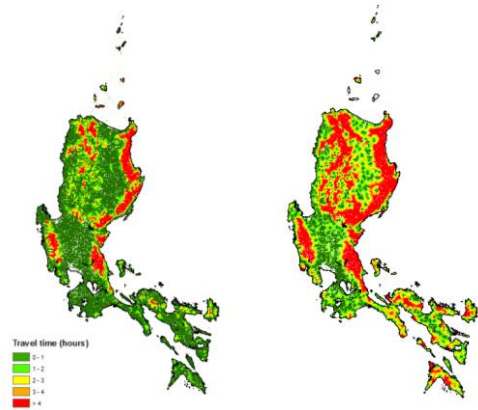


Zones - admin divisions, health areas



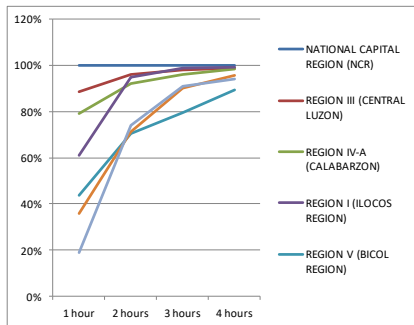
# AccessMod - Outputs

## 1. Travel time distribution grid for different scenarios



Walking + motorized vehicle

Walking



Graphs

## 2. Tables

Zonal statistics				
Population coverage by zone(s) for the selected maximum travel time				
srld	srnc	popTotal	popTravelTime_10	popCoveredPercent_10
1	Vientiane Capital	1720364.49433068	1340198.95304012	77.8620351476
2	Phongsaly	29556.743066138	3016.4778229692	10.2057179108
3	Louangnamtha	100917.86041569	54498.9177328199	54.003243339
4	Oudomxai	158316.67375805	108506.819030214	67.2745416311
5	Bokeo	113146.3122378649	60254.0290370981	53.25319745
6	Loangphabang	353582.041529992	271909.864423914	76.9014912294
7	Houaphan	86108.567878667	43681.6301036328	50.7285527181
8	Kaengboulay	200687.733205235	44248.9190741852	22.0486416222
9	Xiangkhouang	160432.787060149	107902.8637139622	67.2573640944
10	Vientiane	317609.757056013	41913.8031123994	13.19663587
11	Bolikhamsai	255486.91906063	42232.0580978185	16.53002755
12	Khammouan	322686.549637793	165623.593709074	51.32646337
13	Savannakhet	741410.99180588	183617.204834083	24.76591349
14	Salavan	21267.880864075	51599.8306536078	23.7494048
15	Xekong	87676.1031991222	35698.946216125	40.71684862
16	Champasak	730696.97912519	0	0
17	Attapeu	88033.6278716873	54887.048787332	62.34782107
18	Xaisomboun	34350.3091174608	2578.873840289	7.507570982

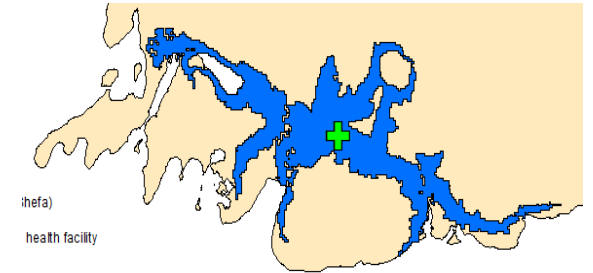
Download

A	B	C	D	E
srld	srnc	popTotal	popTravelTime_10	popCoveredPercent_10
1	Vientiane Capital	1720364.494	1340198.953	77.90203515
2	Phongsaly	29556.74309	3016.477823	10.20571791
3	Louangnamtha	100917.8604	54498.91773	54.00324334
4	Oudomxai	158316.6774	108506.819	67.27454163
5	Bokeo	113146.3122	60254.02903	53.25319745
6	Loangphabang	353582.0415	271909.8644	76.90149123
7	Houaphan	86108.56799	43681.63011	50.72855272
8	Kaengboulay	200687.7332	44248.91907	22.04864162
9	Xiangkhouang	160432.7871	107902.8637	67.25736409
10	Vientiane	317609.7571	41913.80311	13.19663587
11	Bolikhamsai	255486.919	42232.0581	16.53002755
12	Khammouan	322686.5496	165623.5937	51.32646337
13	Savannakhet	741410.9919	183617.2048	24.76591349
14	Salavan	21267.8899	51599.83065	23.7494048
15	Xekong	87676.1032	35698.94622	40.71684862
16	Champasak	730696.9791	0	0
17	Attapeu	88033.62787	54887.04879	62.34782107
18	Xaisomboun	34350.30914	2578.87384	7.50757098

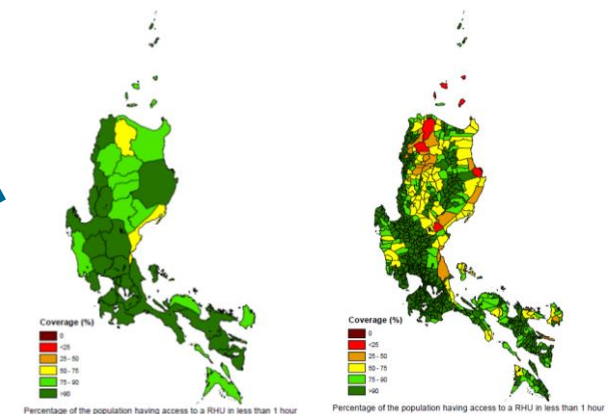
Region Name	1 hour	2 hours	3 hours	4 hours
NATIONAL CAPITAL REGION (NCR)	100%	100%	100%	100%
REGION III (CENTRAL LUZON)	89%	96%	98%	99%
REGION IV-A (CALABARZON)	79%	92%	96%	99%
REGION I (ILOCOS REGION)	61%	95%	99%	99%
REGION V (BICOL REGION)	44%	71%	80%	89%
CORDILLERA ADMINISTRATIVE REGION (CAR)	36%	71%	90%	96%
REGION II (CAGAYAN VALLEY)	19%	74%	91%	94%

Tables

## 3. Extent of catchment areas based on travel time with facilities location



health facility



Maps

# AccessMod NextGen - Advantages

## User Experience

- Simplified & advanced UI
- Collaborative features
- Data visualization
- **Automated data acquisition**

## Cloud Computing

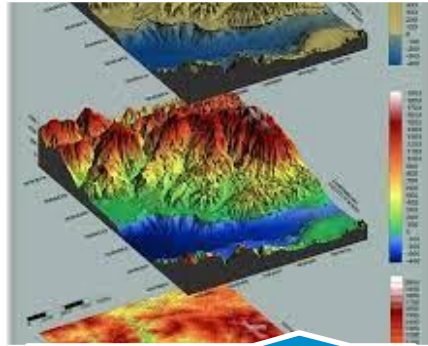
- Automation
- Concurrency
- Scalability

The project is funded and led by the [WHO GIS Centre for Health](https://www.who.int/data/GIS).

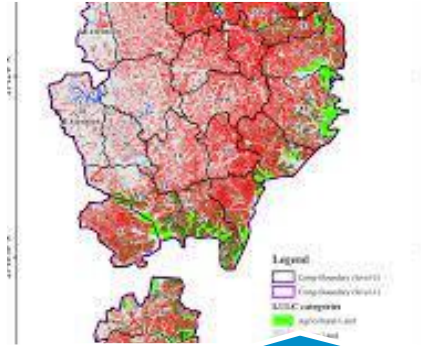
<https://www.who.int/data/GIS>



# AccessMod NextGen - Data Resources



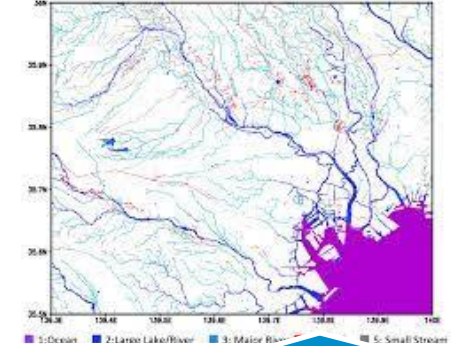
DEM - Shuttle Radar Topographic Mission



Land Use and Land Cover (LULC) maps - Copernicus Global Land Service



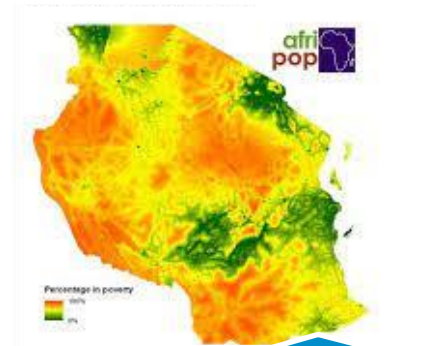
Surface Water - Global Surface Water (GSW) 7



Surface Water - OpenStreetMap (OSM)



Transport Network - OpenStreetMap (OSM)



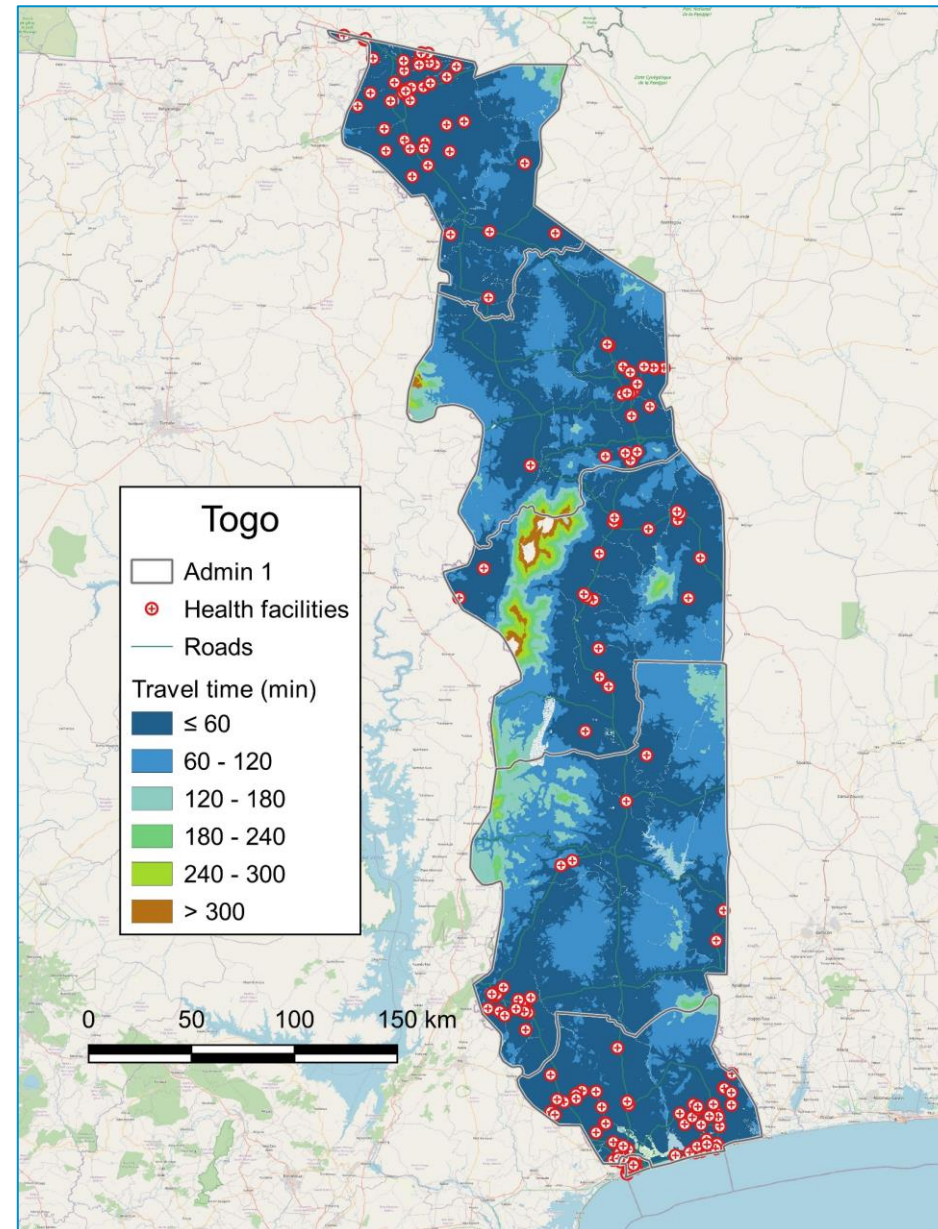
Population Distribution - WorldPop



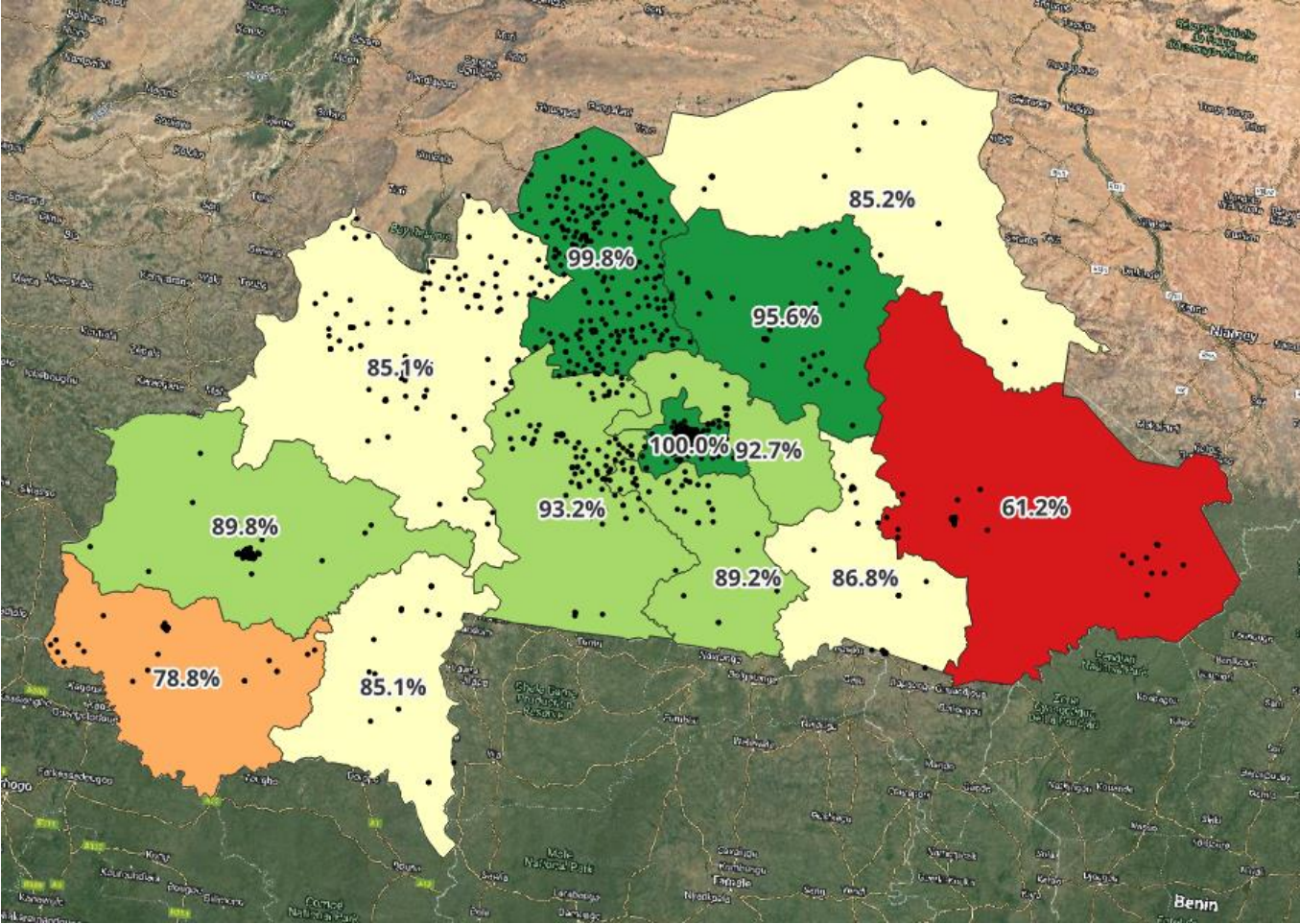
Health Facilities and Services - DHIS2

# AccessMod NextGen - Outcomes (Travel Time)

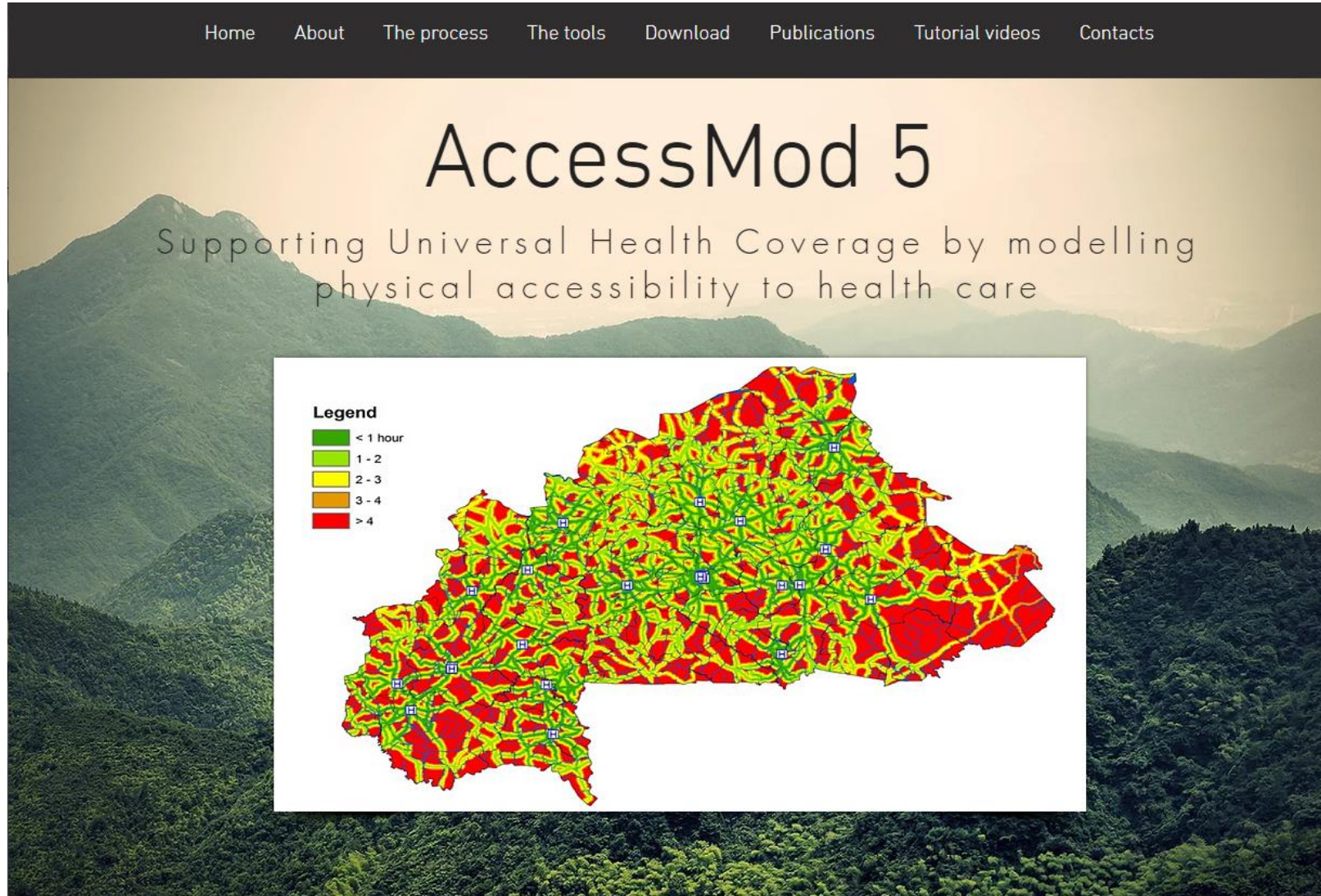
Walking and motorized scenario



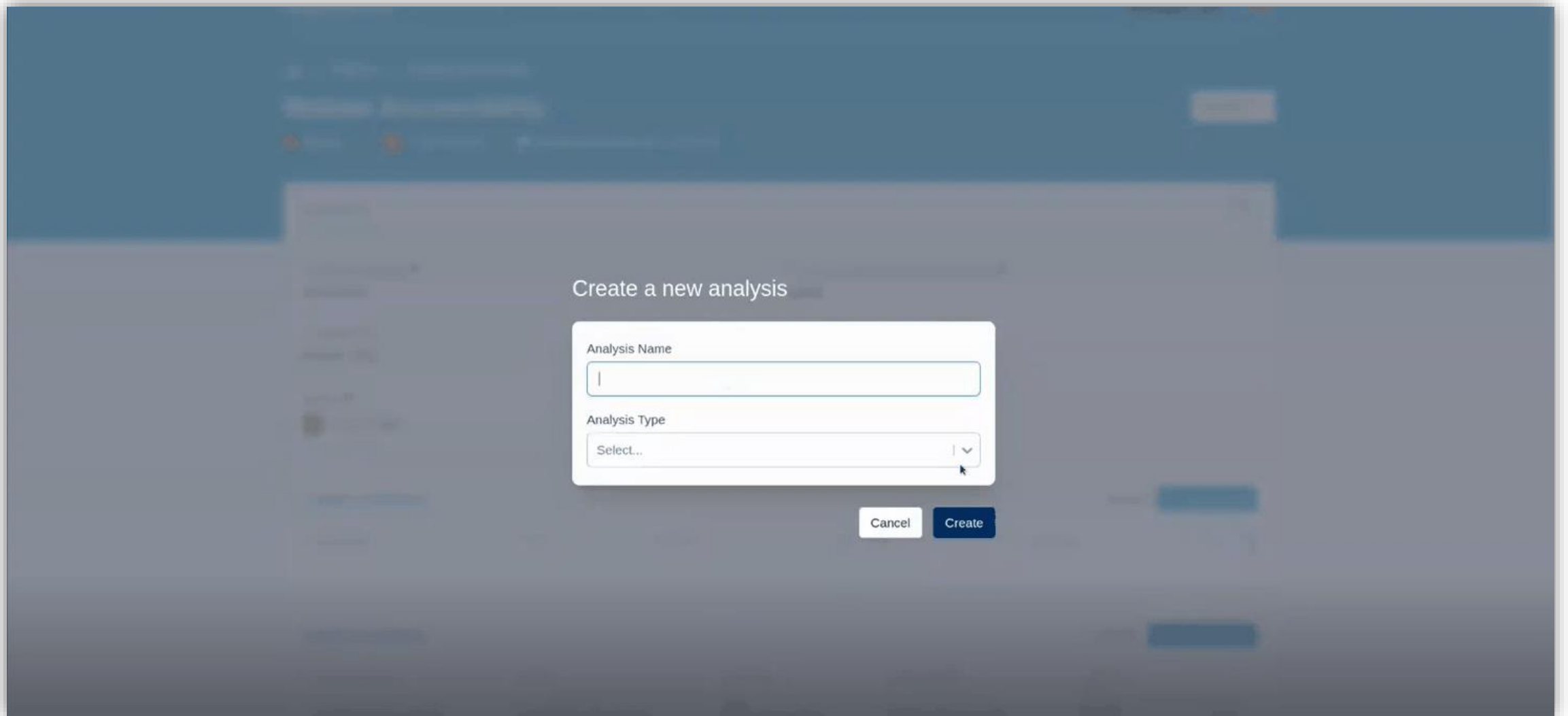
# AccessMod NextGen - Outcomes (zonal statistics)



AccessMod Next-Generation Map - thumbnail percentage population access less than 120 min, Burkina Faso



# | AccessMod NextGeneration - demonstration



# The Geo-enabled Microplanning Handbook

The WHO-UNICEF COVAX GIS Working Group, with support from the Bill & Melinda Gates Foundation, have coordinated the writing of this handbook as a practical guide to help readers develop and implement geo-enabled microplans.

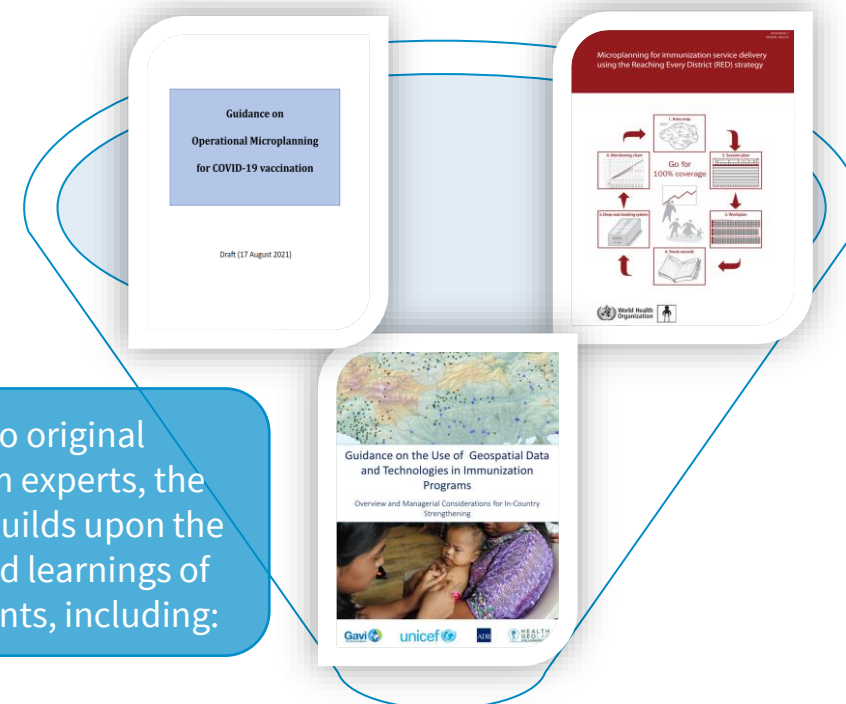
**115 co-authors and reviewers** have contributed their knowledge and expertise to the document since the first workshops began in August 2021.

## Coordinating organizations:

- WHO GIS Centre for Health
- UNICEF
- CDC
- Gavi
- The Global Fund
- World Bank
- DevGlobal Partners
- Health GeoLab Collaborative

...and many participating organizations

In addition to original content from experts, the Handbook builds upon the guidance and learnings of key documents, including:



Geo-enabled  
Microplanning Handbook



# | Handbook Highlights

## Modulated approach for a wide audience

Target audience ranges from programme managers to GIS technical staff.

The Handbook is designed so readers can approach it as a “cookbook” and look for specific applications that suit the needs of their microplan.

## 4 “applications” of geospatial data and technology

1. Geo-referenced health facility master lists
2. Population estimation and distribution
3. **Geographic accessibility, service location and route optimization modelling**
4. Thematic Mapping

## 6 use cases

1. COVAX (Nigeria)
2. Malaria elimination campaign (Cambodia)
3. Routine immunization (India)
4. Polio supplemental immunization (Nigeria)
5. Emergency measles outbreaks (Nigeria)
6. Co-deployment of Malaria interventions ITN + IRS (Zambia)

## Monitoring, evaluation and learning

Call-out boxes and dedicated sections on how to incorporate monitoring, evaluation, and learning (MEL) across a microplan

# E-Learning Course for Geo-enabled microplanning

World Health Organization

Module - 3: Introduction to the Applications of Geospatial Data and Technologies


HELP EXIT

14 of 25

**BENEFITS OF ACCESSIBILITY MODELS IN MICROPLANNING**

The use of hand-drawn maps and reliance on community members for estimated travel times between two points can lead planners to choose suboptimal routing and inaccessible service location points. Geographic accessibility, service location and route optimization models help microplanners to overcome these challenges and:

- Assess service coverage
- Identify the quickest travel routes and optimize resource distribution across areas or routes
- Ensure health service access is more equitable and cost-effective by identifying where to add service delivery points
- Redirect resources or alter supply routes to better serve target populations



Navigation: < PREV NEXT >

9 self-paced modules + 6.5 hours of content

Will be available in English, French, and a third language (TBD)

Content is tagged for specific audiences

Ready in 2-Months - Handbook

| Thank you!