Geo-enabled Microplanning for Immunization in Bangladesh

Geographic Information Systems (GIS) Centre for Health Department of Data and Analytics, DDI

NAME
TITLE, GIS Centre for Health



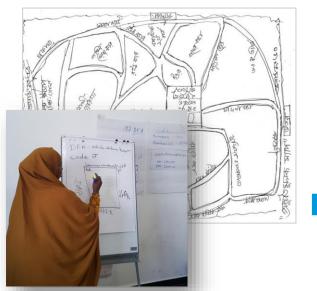
Outline

- What is geo-enabled microplanning?
- Microplanning for Immunization in Bangladesh:
 - Overview
 - Stakeholders and timeline
 - Tools and methodology
 - Best practices and achievements
 - Challenges and opportunities
 - Lessons learned and recommendations
 - Future work
- Q&A



What is a geo-enabled microplan?

In comparison to traditional microplans which use tables and hand-drawn maps, "Geo-enablement" involves the application of geospatial data and technologies to the process.

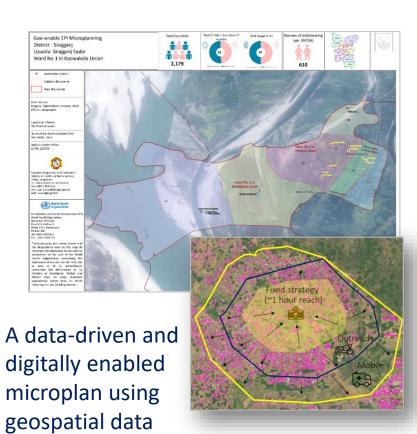








Converting hand-drawn maps into GIS using community knowledge



and technologies

Uses of geo-enabled microplans

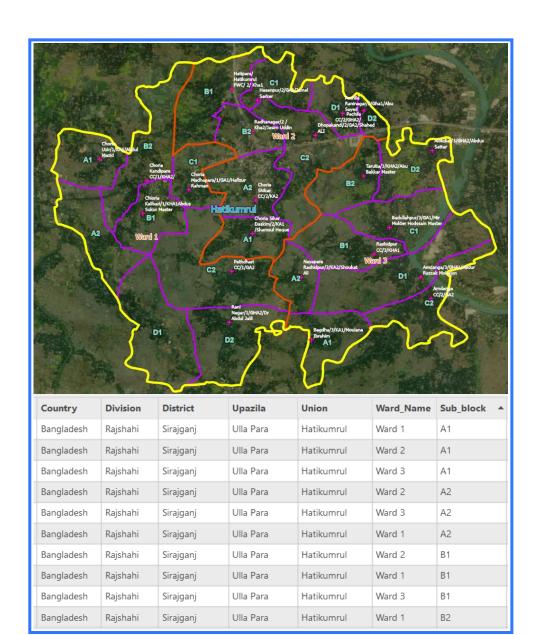
Geo-enabled microplans are used to:

- address gaps in service delivery to reach all members of a community, including under-served and missed populations.
- they improve the timeliness and efficiency of a campaign, leading to higher coverage and protection against preventable diseases.
- Reduce waste and duplication

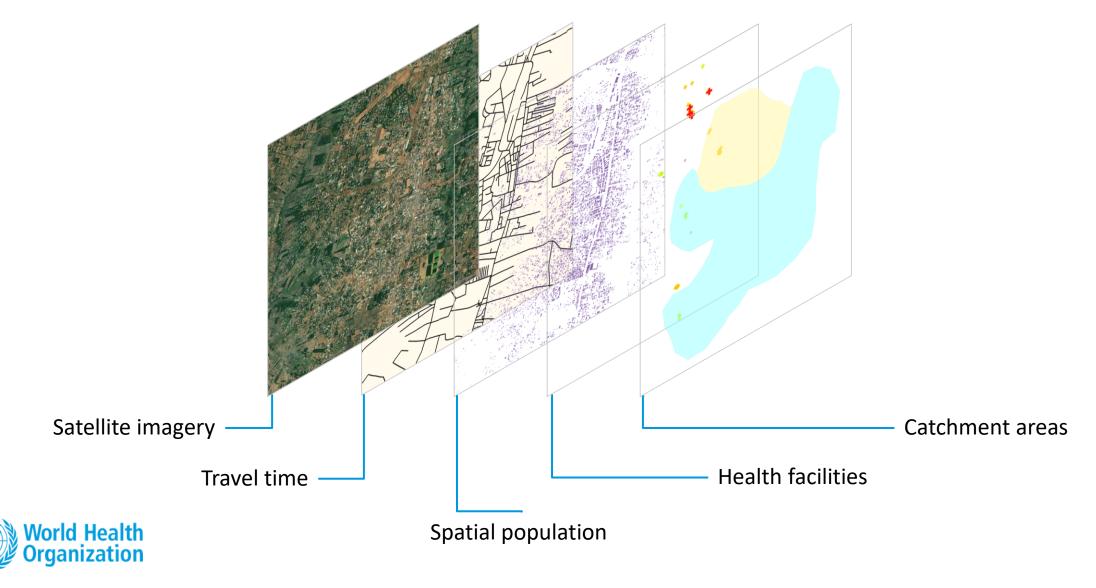
Geo-enabled microplans are:

- A map representation of a programme microplan, comprising:
 - 1. the cartographic component- the map
 - 2. the demographic component the spreadsheet
- An essential tool for identifying and locating where targeted population are on space for programme implementation and for accountability





Geospatial data inputs for microplans



Meet the WHO GIS Centre for Health team



Ali toring and Evaluation



Anare
GIS Specialist



Annette GIS specialist



Asela
GIS specialist and data expert



Bodour Project facilitato



Brian



Cam GIS Specialist



Carlos
ospatial Health Analy



Catherine Project facilitator



Chris
Emergency specialist,



Cici eospatial data scientist



Daniel GIS server experi



Denise

Monitoring and evaluation



Francis



Gédéon GIS specialist



Gopi GIS Specialist



lan S specialist



Jaouad
GIS specialist project facilità



Jing



Jon Partnerships



Julia



Kshitij Web and IT specialist



Kt



Kerry Wong



Luzviminda



Marissa ministrative suppo



Mona
Project facilitate



Nadika
Geospatial Health Analyst



Nomsa Business analysi



Oluwaseu GIS specialist



Paul GIS Specialist



Ravi Shanka GIS team lead



Ryan GIS specialist



Samuel A



Samuel 0
GIS Specialist, Project facilit



Tamer
GIS specialist, project facilitator



Yamiko GIS specialist

What does the GISC do?

with an implementation methodology that combines advocacy, capacity development, service and support, the Centre provides technical assistance and fosters geospatial capacities for Health at all WHO levels through the Country and Regional Offices with Ministries of Health.

Advocacy

Bilateral meetings

Key UN meetings

Mission

Conferences

Events

Presence



Service

Technical Assistance

Maps

Projects

Request

Conceptualization

Definition

Planning

Execution



Capacity Development & Support

Workshops

Training – online, face-to-face

Webinars

Events

Office hours

Mentoring

Missions







Geo-enabled Microplanning for Immunization in Bangladesh

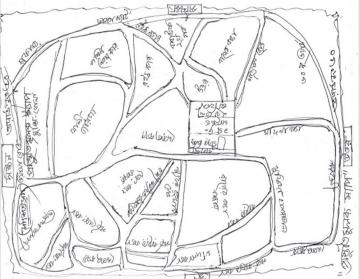


Bangladesh GIS Mapping & Microplanning **Activities**

Objectives:

- To build capacity on foundational GIS mapping and digital microplanning
- To implement and generate GIS microplan granular data and tools in piloted two districts (19 Upazilas and 2 City corporations) for GIS based mapping and microplanning
- To scale up GIS-based mapping and microplanning in all Districts and City Corporation in support of the country EPI programme implementation

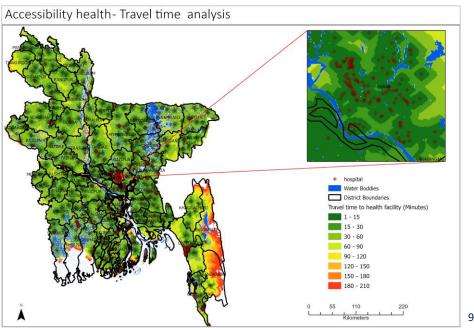






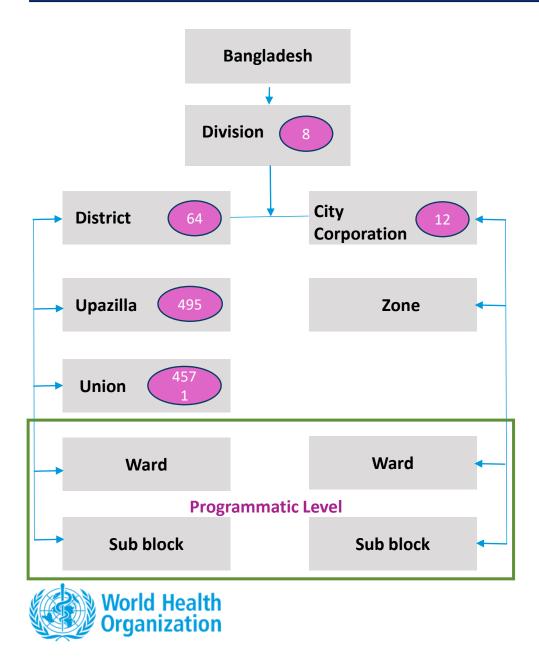
Hand drawn sketch by Health Assistant

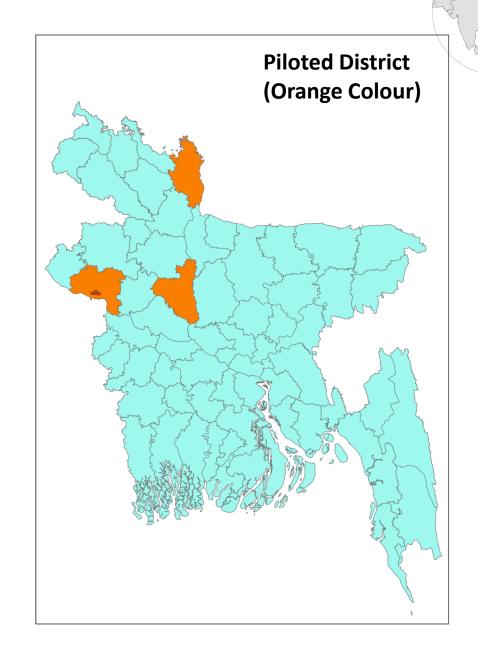






Bangladesh Admin Hierarchy / EPI Programme





GIS Microplan Workshop Stakeholders Participants



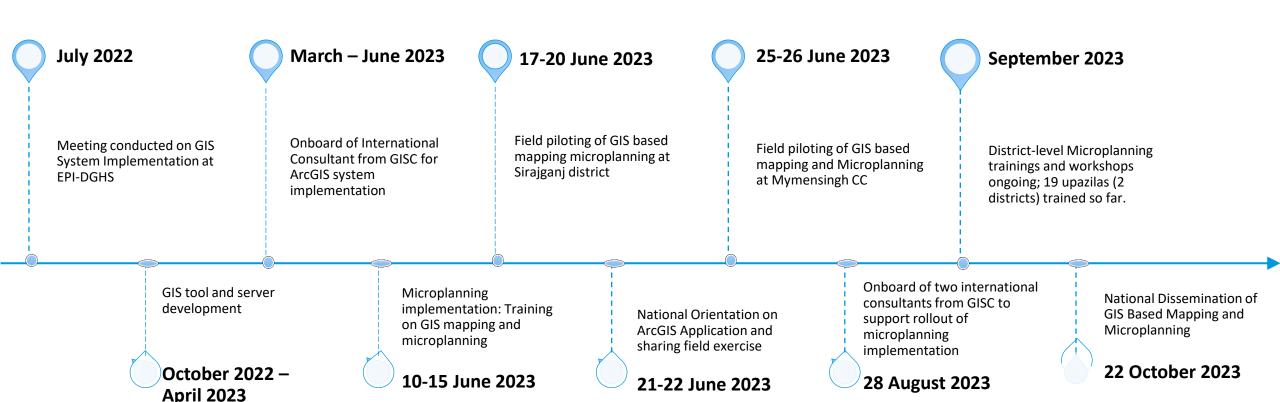
Breakdown of participants of the GIS Microplan Workshop in Rajshahi City Corporation and Sirajganj District

S/N	Stakeholder	Rajshahi CC, Sirajganj & Kurigram	Total
1	GIS Experts (GIS Centre HQ)	3	3
2	SIMOs, Data Managers and other WCO staff trained (WHO, Bangladesh)	64	64
3	Health Assistant (Ministry of Local Government)	630	630
4	Supervisors and other Senior MoH (MoH, EPI)	15	15
			712



Geo-enabled Microplanning Support for Bangladesh July 2022 to October 2023







Geo-enabling Microplanning Workshop Exercise

1 Scope & Planning

Define the area of extent and the type of campaign

Basemap

Collect & prepare basemap using satellite & contextual information

3 Workshop

Run a workshop with the field supervisors identifying their existing areas Field validation

Field validation on the digitized microplan boundaries for quality check and control

Mainstream

Using digitized microplan boundaries for operational planning, post campaign monitoring & resource allocation





DEFINE THE SCOPE

- Determine the area to be covered (AOI)
- Identify the type of campaign
- Evaluate capacity of the country/district to carry out the exercise.
- Calculate the budget for the project
- Plan for phasing of the project

VACCINATION CAMPAIGN TYPE

- Door to door
- Fixed post
- Transit plan or cross border vaccination
- Hit and run strategy

SATELLITE IMAGERY & ALLIED DATA

- Determine the availability of highresolution satellite imagery
- Supplement with OpenStreetMap or Google Streetmap for thematic maps

BASEMAP PREPARATION

- Producing map atlas and map book
- Printing the maps
- For fixed post campaigns, add the information on location of facilities and their categories
- For the cross-border strategy, add the information on the cross-border movement

MICROPLANNING WORKSHOP

- Invite the field vaccination teams and health officials for the workshop.
- Encourage them to bring their existing microplans
- Train the data managers on the digitization process
- If the number of teams is large, stagger the team presence in the workshop

DIGITIZATION

- Densify the base map with information given by the campaign teams' hand drawn microplans.
- During the workshop, employ a continuous qualitycheck process to verify the digitized results.
- Revisit results and calibrate based on the quality check, then continue the digitization process.

FIELD VISIT

- Pick random areas in the field to do the field validation
- Plan the logistics of the travel in advance
- Complete this check until results match the level of expectations specified at the beginning.
- Think of an accurately mapped area as a process that can be replicated and scaled to other areas.

POSSIBLE OUTCOMES

- Redistribution of the teams' areas
- Finding unvisited areas
- Identify overlapping areas between teams
- Cross validating the population count
- Accountability and transparency

MAINSTREAM

- The success of the microplanning exercise is judged by the level of usage of the digitized boundaries in the day-to-day workflow
- Integrating the digitized boundaries and satellite maps in the operational plans
- Expand the microplanning exercise to other areas
- Print relevant maps and paste it in each health center
- Use the boundaries for IM and other post campaign activities

PERSONNEL & RESOURCES

- · Country team lead, stakeholders
- Programme team (immunization, malaria, consultants, etc.)
- HQ RO country support team
- Core Mapping team

Based on the AOI and the capacity of the country, run the project in phases

PERSONNEL & RESOURCES

- Core Mapping team
- Project focal point
- Satellite imagery, plotters & stationary

Refine the AOI depending on the availability of imagery

PERSONNEL & RESOURCES

- Data managers, Core Mapping team
- Campaign team, field workers or team leads & health officials
- HQ RO country support team Extend the workshop until the
- outcomes of the digitization results are satisfactory

PERSONNEL & RESOURCES

- Core Mapping team
- Campaign team, field workers or team leads, health officials, and drivers
- HQ RO country support team

Improve the microplan boundaries based on the field inputs



Rajshahi GIS Mapping & Microplanning Workshop

□ Completed:

- 1. 300 Sub-block Polygons, 30 Wards Polygons & 6 Zone Polygon created.
- 2. 300 Vaccination Center Points mapped with Location Information (GPS)
- 3. 30 Wards boundary and 6 Zone boundary
- 4. EPI Digital Microplanning Dashboard



Geo-enable EPI Microplanning District: Rajshahi

City Corporation: Rajshahi

Ward 07













Supervisor's Name | Mobile Israfil Hossain 101877769098

Name of the Health Assistant (HA): Fatema Khatun | Golam Rakib | Nahid Mahmud | Nilufa Evasmin | Sabina Ak Shamima Rahman

Mobile number of HA 01304525962 | 01719209365 01714460406 [01723592036 01718745857 | 0171947658

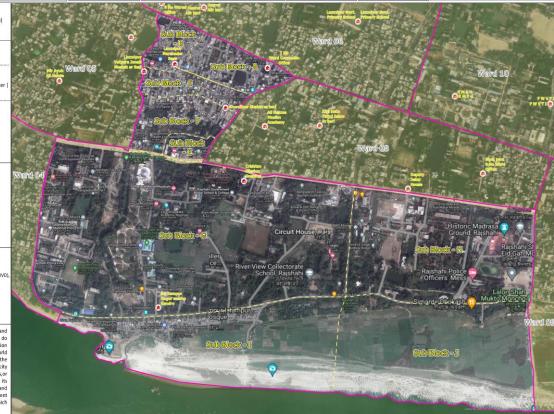


nistry of Health and Family Welfare, Dhaka, Bangladesh Tel: +880-2-9880530, 8821910-0 Email: pm.epi.esd@ld.dghs.gov.bd Web: www.dghs.gov.bd



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The boundaries and names shown and the designations used on this map do whatsoever on the part of the World approximate border lines for which



Rajshahi, Kurigram & Sirajganj Districts GIS Mapping & Microplanning Workshop







GIS Mapping & Microplan Workshop in all the 19 Upazila and 1 City Corporation



Average of 30 SIMOs & Data Managers Trained and Contributed to mapping workshop



Mapped features include catchment boundaries and Vaccination centers



Data Validation exercise conducted at the end of the Workshop

GIS Mapping & Microplanning Workshop













GIS Mapping & Microplanning Workshop















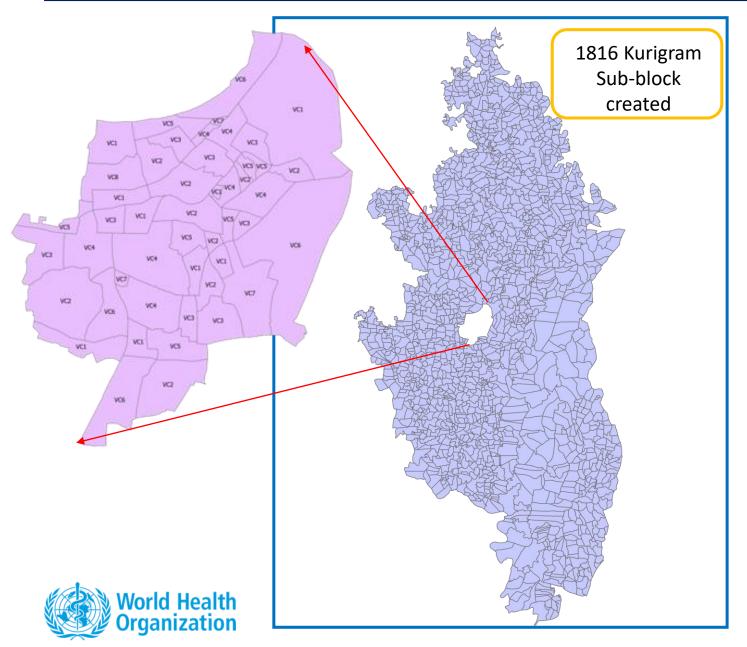
GIS Mapping & Microplanning Workshop Summary Report

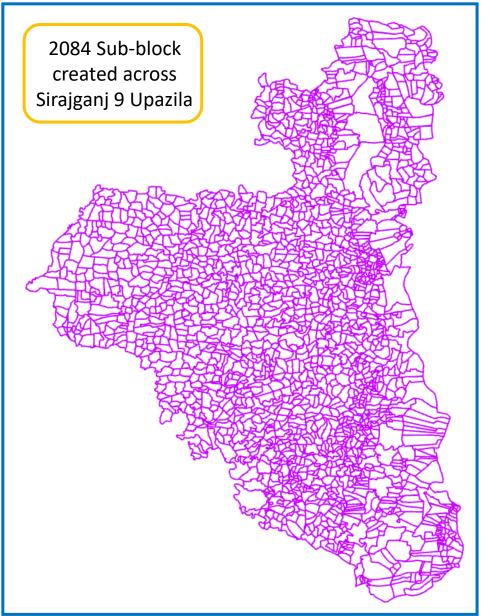
Summary Report

GIS & Microplanning Activities in Bangladesh (Sirajganj, Kurigram & Rajshahi CC) Sept Oct 2023

Distirct / City Corporation	Upazila	Union / Zone	Ward	Sub block	Vaccination Center
Sirajganj	9	88	280	2084	2104
Kurigram	10	75	235	1816	1818
Rajshahi City Corporation		6	30	300	170
Total	19	169	545	4200	4092

GIS Mapping & Microplanning Workshop Sub blocks





Challenges & Opportunities with Adopting Geo-enabled Microplan Innovation

The use or adoption of Geospatial innovation to strengthen health systems, including planning for improved health coverage is driven by access to data, the availability of quality, granular geospatial datasets and resource personnel. Most of the time, this combination is difficult to have in low and middle-income countries.

Challenges:

- Unavailability and inaccessibility of quality, core geospatial data types (layers) that are "fit for a particular use"
- Familiarity and prior use of geospatial data for public health decision making
- Need to strengthen political buy-in and motivation to enhance decision making urgency
- Involvement of all stakeholders with well-defined roles and responsibilities to coordinate and complement existing efforts in advancing geospatial innovation use.

Opportunities:

- Granular programmatic (catchment) geospatial data was developed for the piloted districts.
- As part of the workshop, Field staff; SIMOs from WHO, Health Assistants from the Health Local Authorities and their Supervisors from MoH were trained in the use of GIS technology including reading and understanding maps.
 They also contributed immensely to the geospatial data development.
- The findings with the introduction of Geospatial approach to EPI strengthened engagement and commitment the Government decision makers, this provided an opportunity for further brainstorming and the need for urgent solutions to identified programmatic issues.

Lesson Learned and Recommendations

Lessons learned of digitalization and "geo-enablement

- Improved implementation and monitoring of campaigns
- Improved understanding of ground realities for stakeholders and national level programmes
- Improved coverage of hard-to-reach areas
- Reduce silos across teams
- Increase capacity of health workers and staff at all levels
- Gateway for digitalization in other work areas
- Efficient vaccine and vaccine storage management

Recommendations

- Scale up of the microplanning across the country
- Sustainability and maintenance of data
- Regular assessment of boundaries to ensure coverage, population distribution

Next Steps

- Cascaded training by WHO Bangladesh and ministry for continued microplanning
- Scale up of Geo-enabled microplanning process across the country

GISC Resources for geo-enabled microplanning



Geolocated Health Facilities Data Initiative (GHFD)

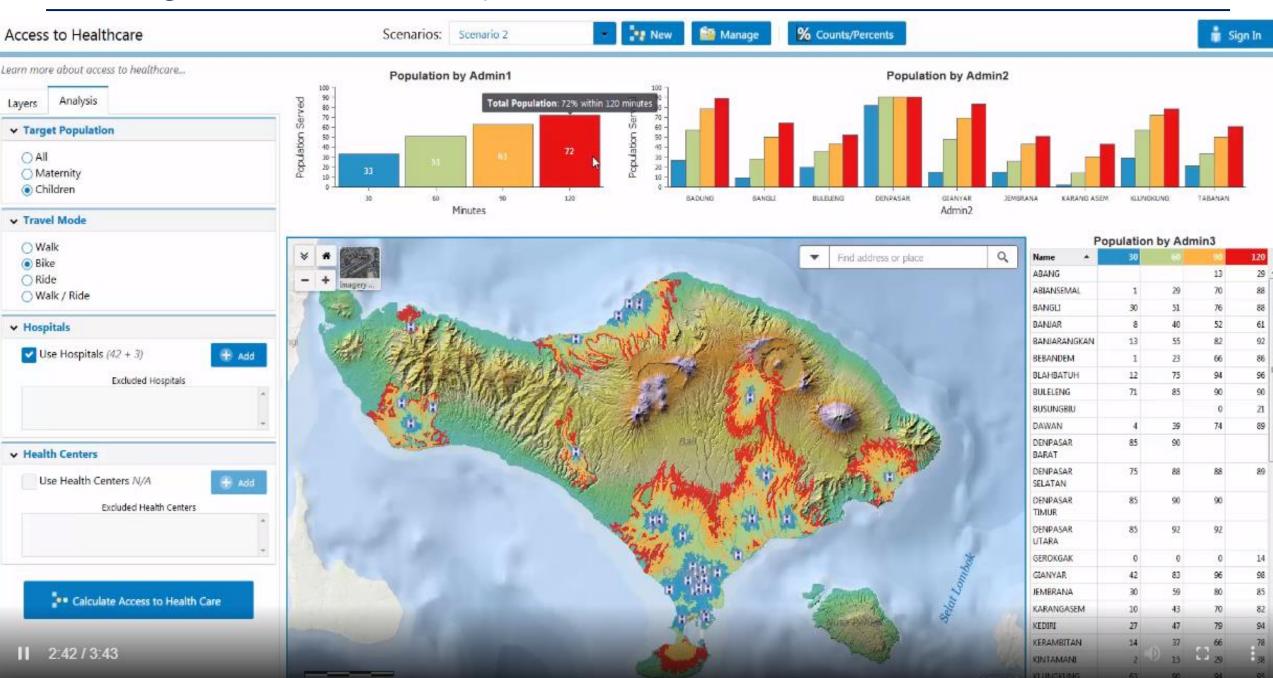
The GHFD initiative serves to:

- Goal: The **Ministries of Health (MOH)** are in a position to maintain, regularly update, and use the master list of health facilities for their respective countries.
- Mission: Strengthen the technical capacity of MOHs across levels to ensure the availability, quality, accessibility, and use
 of HFMLs.
- Establish a global repository that points to country lists that are managed and maintained by the MOH.



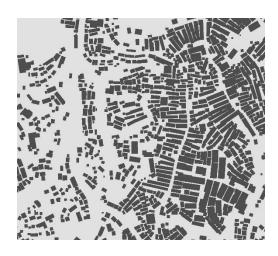


Modelling healthcare accessibility with AccessMod



ML/AI- tools: ABLE (AUTOMATED BUILDING LAYER EXTRACTION TOOL)

REPLICABLE AI FOR MICROPLANNING



Provides essential capacity to identify buildings; a pivotal layer to supporting humanitarian response

S FOOTPRINT

Provision of Goods and Services

Essential for planning and delivering services to households



Population Density

Important statistics for development and humanitarian efforts



Sampling

For household surveys and mobile data collection campaigns



Data validation

Ability to validate locations and improve existing data



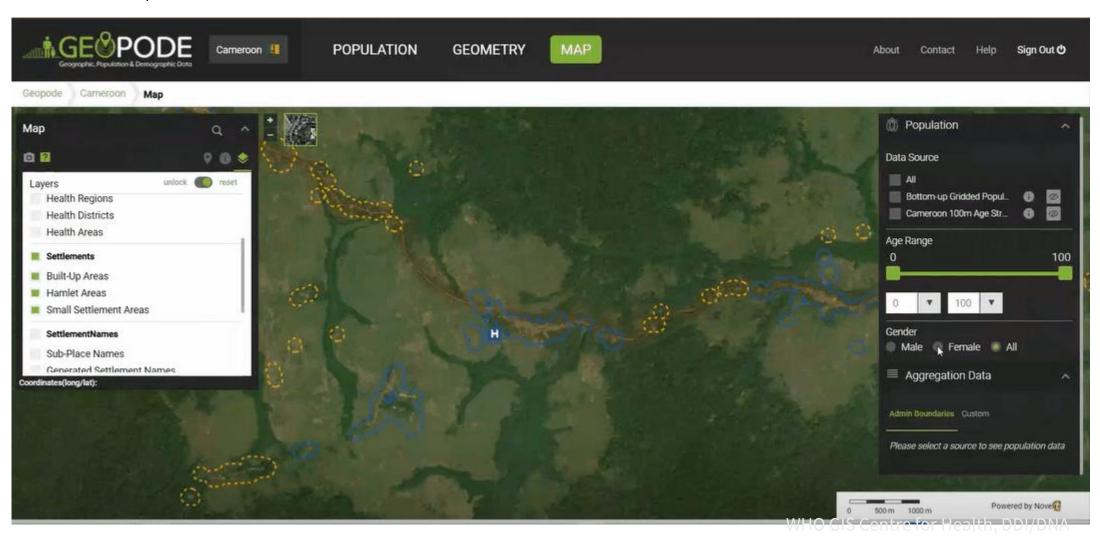
Risk Exposure

Knowing where people live and work is critical to assessing risks



GeoPoDe

GeoPoDe (Geographic, Population and Demographic Data) is a tool to access geospatial data such as administrative boundaries, population and settlement areas on an interactive map viewer.



Geo-enabled Microplanning Handbook

Webinar/Panel discussion on Tuesday 15 November

Geo-enabled microplanning is the application of geospatial data and technologies to improve last-mile decision-making, ensuring that health services reach every corner of a community. Geographic information systems (GIS) enable microplanners to reach more households more efficiently, sustainably and equitably. The Geo-enabled Microplanning Handbook is a step-by-step resource to designing, planning, implementing, and sustaining a geo-enabled microplan, crowd-sourced from expert authors in the field and facilitated by the WHO-UNICEF COVAX GIS Working Group.

Join the GIS Centre for Health on Tuesday 15 November from 2-3.30 pm CET for a special webinar on the Geo-enabled Microplanning Handbook, featuring a panel discussion with WHO co-authors and champions from the Immunization, Vaccines and Biologicals team, and the Polio teams from the Regional Offices for Africa and the Eastern Mediterranean.

WHO GIS Centre for Health

Division of Data, Analytics and Delivery for Impact

⊕ www.who.int/data/gis ❷ gissupport@who.int





E-Learning Course for Geo-enabled microplanning



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

HELP EXIT

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BENEFITS OF ACCESSIBILITY MODELS IN MICROPLANNING

14 of 25

MENU

OPTIMIZATION MODELLING – AN OVERVIEW

BENEFITS OF ACCESSIBILITY MODELS

IN MICROPI ANNING

USE OF GEOGRAPHIC ACCESSIBILITY, SERVICE LOCATION AND ROUTE OPTIMIZATION MODELLING

PRODUCT OF MODELLING APPROACHES – EXAMPLE

THEMATIC MAPS - AN OVERVIEW

THEMATIC MAPS – VISUALIZING DATA

BENEFITS OF USING THEMATIC MAPS IN MICROPLANNING

USE OF POPULATION ESTIMATION AND SPATIAL DISTRIBUTION

KNOWLEDGE CHECK QUESTIONS

KNOWLEDGE CHECK - 1

INDMEDICE CHECK A

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



10 self-paced modules + 6.5 hours of content

Will be available in English and French

Content bifurcated for different users (technical or program managers)









NEXT >

Thank you!

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