

## Assessing Health Needs and Capacity of Health Facilities

In rural remote settings, the community health “needs” may seem so daunting that it is difficult to know how to proceed and prioritize. Prior to the actual on the ground assessment, the desktop evaluation should reveal the nature and extent of any government programs/facilities that may be present in the geographical areas of interest. In-country meetings with the relevant Ministry of Health officials are advisable; however, “ground truthing” is essential as facilities may exist only on paper and lack staffing and regular support.

The following questions should help frame the general boundaries of the community situation. These questions are not comprehensive but simply a general screening methodology. Questions must always be tailored to fit with the local context. There may be questions that do not make much sense for a specific setting and others that need to be added to cover specific characteristics of the local context.

Participation of the community in determining the issues most prevalent and of concern to them is critical, and the assessment can be efficiently done by meeting any available community leaders and any available health care workers who serve the community. If time allows, getting the community to engage with the assessment team or company to establish a baseline and corresponding community priorities will be key to the company’s development of a strategic community investment in the area of health.

The first step is to assess the general resources and circumstances around health and health-seeking behaviors in the community as well as the quantity and quality of health resources and facilities.



	Risks	Key Questions	Assessment
<b>Demand for services</b>	<ul style="list-style-type: none"> <li>Cultural norms may influence the type of health care that is demanded</li> </ul>	What are the major health challenges in the communities?	
	<ul style="list-style-type: none"> <li>Traditional gender roles may limit women's access to healthcare</li> </ul>	Who makes health care decisions?	
		Can women access services on their own?	
		What is the perceived quality of local health services?	
		What is the role of traditional medicine?	
		What is the prevailing health of the community? What are the most common health issues/diseases?	
		Does the company maintain clinical/medical facilities? Are they just for workers or for community members as well?	
		Have there been any government programs?	
		Has there been any activity by NGOs?	
		Are there any religious institutions in the community that provide health services?	
	Are there any established maternal services? Where do most women deliver-home, clinic, hospital?		



Structure of health services	<ul style="list-style-type: none"> <li>Overburdened health services due to lack of professional staffing and training</li> </ul>	What is the catchment area of the health facility?	
	<ul style="list-style-type: none"> <li>No housing for workers</li> </ul>	How referrals made and what are the referral patterns?	
	<ul style="list-style-type: none"> <li>No operations and maintenance (O&amp;M) support for the clinics/hospitals</li> </ul>	Is there a national health insurance scheme? If so, are the communities using it?	
	<ul style="list-style-type: none"> <li>There is a tendency to build bricks and mortar but must look at underlying health and disease issues and identify impactful activities</li> </ul>	What is the availability of services in...?	
		- Primary health	
		- Emergency care	
		- Maternal health care	
		- Child health care (including vaccination)	
		- Nutrition	
		- HIV/AIDS	
	- Tuberculosis		
	- Malaria or other major vector diseases		
	How many facilities are there-hospital, clinics, etc?		
	Presence of other health actors (e.g. NGOs) in the region		



<b>Accessibility of services</b>	<ul style="list-style-type: none"> <li>The inability for staff and community members to access health services locally and at a reasonable price can lead to adverse health outcomes</li> </ul>	Are there any services in the local community?	
	<ul style="list-style-type: none"> <li>Staff and community members who have to travel long distances to access healthcare may have to miss work leading to loss of productivity and income</li> </ul>	Where do community members go for health care? Hospital, clinic, etc?	
		Are there fees for the services? How much?	
		How long does it take to get to a facility? Is there regular transport if it's a great distance?	
		Are there affordability concerns?	
		Does the company maintain clinical/medical facilities? Are they just for workers or for community members as well?	
		Have there been any government programs?	
		Has there been any activity by NGOs?	
		Are there any religious institutions in the community that provide health services?	
		Are there any established maternal services? Where do most women deliver-home, clinic, hospital?	
<b>Access to information and education</b>	<ul style="list-style-type: none"> <li>Lack of accurate and consistent information may result in the propagation of myths and misconceptions</li> </ul>	Do health promotion/education activities take place in the communities including bed net supplies?	
		Are there any health outreach programs being conducted in the community?	
		Are there any women's clubs?	
		Are there any central gathering spots for the community where information could be disseminated?	
		Does the company have any type of health education/information outreach efforts for its staff and/or communities?	

<b>Capacity of Health Facility</b>	<ul style="list-style-type: none"> <li>Staff vacancy rates of 50% or more are very typical</li> </ul>	How many doctors and nurses are on staff and do they live in or near the community?	
	<ul style="list-style-type: none"> <li>Quality of services may be an issue</li> </ul>	Number of patients that are treated in the health facility	
		Number and type of staff that are employed at the health facility	
		Functionality of available equipment	
		Laboratory services	
		Drug supply and availability of supplies from local shops	
		Energy and water supply in the health facility	
		Disposal of waste in the health facility (solid human waste, medical waste, etc.)	
<b>Health Facility Statistics</b>	<ul style="list-style-type: none"> <li>Quality of services may be an issue</li> </ul>	Basic diagnostic categories and overall facility statistics	
	<ul style="list-style-type: none"> <li>If the facility is unable to provide some estimation of these statistics, it may be an indication that their information and management systems are weak or non-existent</li> </ul>	Basis of making a diagnosis- syndromic versus laboratory confirmed	
		Presence or absence of rapid diagnostic tests, especially for malaria	
		What is the burden of non-communicable diseases such as diabetes, respiratory diseases and heart disease?	
		Level of accidents and injuries	
		Nutritional statistics in children	
		Vaccination status of children	
		Number of antenatal visits per pregnancy	
		Delivery statistics and place of delivery	
		Number of maternal deaths documented	
	Ability to perform HIV/AIDS VCT services		

Once a general baseline understanding has been achieved concerning the accessibility of health services and information, some of the specific issues covered in an environmental health area framework should be assessed. For a generic household survey questionnaire that can be used to get some of the information needed, please see the module *Generic Household Survey: Rapid Assessment* which provides a framework for conducting informal household surveys that can provide some of the information listed below.

A useful tool to help visualize the community and its assets and liabilities from a health perspective is to make a ground plot of the location of houses (for part of the assessment of the community), latrines and trash sites/burn pits (for better waste and trash management), open bodies of water (for vector control), and location and types of water sources (for water management) and other health issues that can be mapped. This can be done in partnership with the community and can become a planning tool and tool for communicating with the community and other stakeholders.

The baseline burden of disease assessment should provide objective information that can guide rational health decision making. Based on well documented and published studies, the broad outlines of what the “true” community needs are likely to be readily predicted, for example, a focus on maternal and childhood (MCH) services. MCH services are likely to provide the greatest cost-benefit value; however, in terms of direct project related causation impact analysis, MCH services are unlikely to be a major consideration. This paradox exists because projects typically do not necessarily negatively change the baseline maternal and childhood disease dynamic in communities.

In reality, projects that increase employment opportunities, particularly for women, are likely to improve MCH outcomes as a function of rising incomes. Similarly, a variety of social determinants will change in association with a major industrial project and the speed of change from infectious to non-communicable diseases can be astonishingly rapid. This change in the social determinants of health profile is likely to be quite mixed with significant positives such as improved incomes and nutritional outcomes in children, and well known negatives such as increases in alcohol and smoking rates.

These observations all indicate that the project impact profile will be complex. A critical observation is the need for projects to separate impact mitigation from community outreach driven by corporate social responsibility/philanthropy considerations. The baseline data can help guide this analysis and inform company planning.

## **Additional Resources**

To reference the complete modules on Health Needs and Services Capacity, see the IFC/NewField’s series of rapid assessment health modules.

IFC/NewField’s module *Generic Household Survey: Rapid Assessment*

For health impact as a result of in-migration, see IFC’s *In-Migration Handbook*

*Introduction to Health Impact Assessment*, International Finance Corporation

*Good Practice Guidance on Health Impact Assessment*, International Council on Mining and Metals

*Strategic Community Investment: A Good Practice Handbook for Companies Doing Business in Emerging Markets*