

Mobility & Health

An International Networked Research Programme

Sharing the Results from Asia

World Bank, June 2008



Swiss Tropical Institute
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Objectives

24 case studies in Latin America (7), Asia (7) and Africa (10) all with the aim:

- To increase the understanding of the impacts of rural mobility constraints on access to (maternal) health of poor people, including vulnerable groups
- To develop an advocacy programme to sensitise the health & transport sector to mobility and health issues



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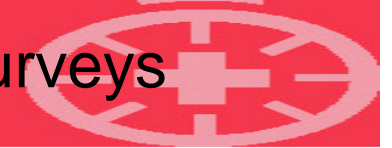
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Status

- First drafts were shared at Networked Research Forum, aligned with Global Forum for Health Research in Beijing in October 2007.
- 24 final reports have been submitted early 2008
- Cross-regional thematic coverage focusing on maternal health, such as impact of rural roads, impact of IMTs, impact of water transport



- IFRTD-pioneered networked research:
 - Researchers are networked through workshops, discussion groups and interactive web site
 - Analytical framework was designed through participatory methods in regional workshops
 - Peer support throughout research
 - First drafts were reviewed in Beijing by both core group and researchers
- Combination of qualitative and quantitative methods
 - Focus Group Discussions, Access Audits, Surveys



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Studies in Asia

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- 7 studies:
 - Impact of rural roads on access to health care
 - Nepal: District Roads Support Programme
 - India: Prime Minister's Rural Roads Programme (Rajasthan)
 - Indonesia: Rural roads programme Flores
 - Impact of local infrastructure on access to health care
 - Nepal: Helvetas Trail Bridges and Practical Action Tuins
 - Impact of IMTs on access to health care
 - Nepal: Practical Action
 - Rural Access and Health for People with Disabilities:
 - India: Leonard Cheshire Disability
 - Health care access for riverine communities (Bangladesh)



Preliminary Results

Impact of Rural Roads (India, Nepal & Indonesia):

- IFRTD's raison d'être still stands: ROADS ARE NOT ENOUGH!
- Communities preferred reliable transport services over all-weather roads.
- Strong link between reliable transport services and visits to health facilities especially ANC



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Preliminary Results

Impact of Rural Roads (India, Nepal & Indonesia):

- The main link between good rural roads and maternal health is that health workers do more outreach and awareness raising.
- Rural roads network has resulted in more options for health services with preference for higher level health facility.



Preliminary Results

Impact of Local Infrastructure (Trail bridges and improved river crossings):

- Main impact is time savings
- Health workers do outreach on primary health, immunisations and maternal health awareness
- Bringing health services closer to communities
- Better supply chains for local 'pharmacy'



Preliminary Results

Impact of IMTs on access to health care (Nepal):

- Impact of bicycle ambulance mixed.
- Only good for short distances (up to 5 kms.)
- Level of comfort is biggest barrier for usage.



Preliminary Results

Rural access to health services for PWDs:

- In three states in India rural access to health for PWDs is non-existent.
- Even if required by law, rural health facilities are not accessible.
- Even if required by law, transport services are not accessible.
- Transport operators refuse PWDs.
- Most PWDs in these rural areas don't travel.



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Preliminary Results

General findings:

- Even with good roads and reliable and affordable transport services, 'first delay' is critical.
- Cultural preference for home births in remote rural areas where awareness was low.
- In ante-natal and post-natal care, distance, time and affordability play a key role. This is not the case in emergencies.



Preliminary Results

General findings:

- Transport operators over-charge in case of emergencies.
- Lack of privacy on transport services was listed as barrier for women to travel especially in emergencies.
- Little to no coordination between transport and health sectors.



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Recommendations

- Invest in ICTs in rural communities to improve access to information and services.
- More awareness raising in rural remote areas on health issues. Need to do more research on 'first delay'.
- Incentives for appropriate transport services
- Better integrated planning between health and transport.



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Next steps

- Reports are currently analysed by core group
- Key learning and knowledge from each study will be extracted, categorised and published in a book (launch early 2009, working title 'Bridging the Gap')
- All case studies will be available through www.mobilityandhealth.org
- Regional workshops organised in Nepal, South Africa and Guatemala to develop advocacy plans



A man in traditional attire, including a colorful headwrap and a light-colored shirt, is seen from the side, carrying a large, empty woven basket on his back. He is holding a long wooden pole in his right hand. The background is a lush, green, hilly landscape under a clear blue sky. The text is overlaid on the image.

Thank you

www.ifrtd.org

www.mobilityandhealth.org

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