

INTEGRATION POPULATION AND GENDER INTO DEVELOPMENT PLANNING IN HEALTH CARE

(cont.)

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Example: The shortcomings and main reasons for the social inequality in health care

- (1) The financial resources are mainly allocated to the hospitals, to which the poor people have less chance to access than the rich, other than the local health care establishments
- (2) The public expenses on health care sector are mainly for the medical treatment other than medical prevention.
- (3) The infrastructure, medical equipments as well as the professional skills of medical staff at the upper-level hospitals are all better than that of the local ones; at the same time, the service fees are also higher. On the contrary, due to limited investment, at many local health care establishments, the infrastructure and medical equipments are poor, the competent staff is limited and the quality of the medical examination and treatment service is very low.
- (4) The allocation structure of the medical staff is unsuitable for the demand of the people and not basing on the characteristics of the disease model.

Step 6. Analyzing the interdisciplinary factors which have impacts on the difference in children's health

Income, food and foodstuff consumption, education level, using of drinkable water, sanitation situation, housing characteristics, the convenience of transportation, information and environment, etc

Regional difference on the factors related to the children's health, 1997-1998

Region	Food	Calorie	Education	Living water	Toilet	Housing	Means of transport	Fuel
Northern mountainous	1.069	1.939	5,6	1,3	3,9	37,78	12,6	2,03
Red River Delta	1.256	2.365	6,8	21,1	19,1	34,35	17,8	6,02
North Central region	1.057	1.851	6,2	6,3	8,5	22,53	14,4	2,47
South Central Region	1.076	2.130	5,1	14,7	20,1	16,06	27,1	11,43
Central Highland	933	1.819	3,8	0,2	3,9	33,85	31,3	2,04
South-east region	1.555	3.633	6,3	36,9	55,5	25,10	52,0	49,48
Mekong Delta	1.129	2.202	4,5	13,6	7,8	20,13	15,6	11,97
Nationwide	1.146	2.266	5,6	10,5	16,7	27,15	24,1	12,07

Step 7. Define the subjects

=> To define the right subjects, we must answer the questions of **Who**, **where** and the **seriousness level** of the problem

For example:

Who? Pregnant women, newborn baby, children under 5 years old in poor households

Where? Rural and mountainous areas and Central Highland region

Seriousness level: The fatality rate of newborn baby in the Central Highland region is 1.75 times higher than the average rate of the nation and 2.73 times higher than the South-east region

Step 8

- Certifying the situation with the local communities.

Step 9

- Using the population statistics to calculate the numbers of affected people
 - For example: Numbers of malnourished children
 - * 0-4 year old population is 7,145,000 people
 - The malnourished ratio of children under 5 years old is 33.8%
 - Numbers of malnourished children are 2,415,000

Step 10. Defining the problems and subjects of concern

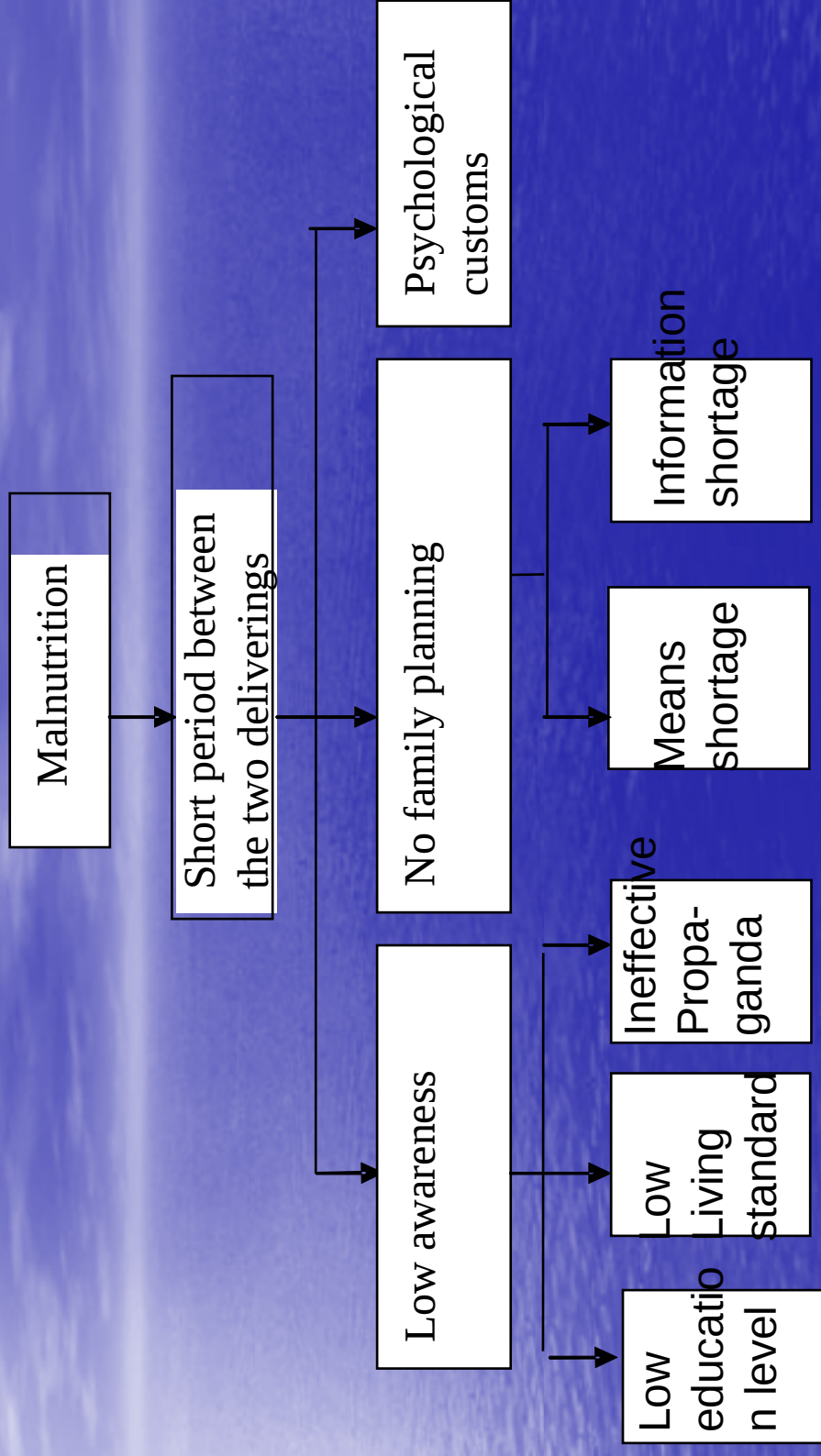
Choosing the problems/reasons basing on the following standards:

- The seriousness or the urgency of the problem.
- Numbers of affected people are at high level.
- Can be improvable.
- The impacts are related to other problems.

Situation analysis

- After the situation analysis, we need to confirm
 - Contents:
 - Reconfirm the subjects of concern
 - Define the difficulties of such subjects
 - Define the cause-effect relation of such difficulties
 - Describe such cause-effect relation in graph form (problem tree)

Example on the problem tree



II. Building the objectives/norms

Method of defining the objectives of the plan
on ensuring the equality in health care
*(example on the regional difference on
the fatality rate of children under 5 years
old)*

Learning objectives

To understand the method of defining the objectives/norms for the equality in health care within the planning period

Definition

- . *Aim* is a general statement on desired result(s).
- . *Objective* is a more specific statement on the desired result(s).
- . *Norm* is the specific quantitative results which are expected to achieve within a specific time framework

For example

Problem: The difference on the children's health situation

Aim: Equality in children health care

Objective: To improve the difference in health care for the newborn baby and children

Norm: To reduce the fatality rate of children under 5 years old in the Central Highland region from 108% (2000) down to 61.6% (2005) and 37% (2010) and in other regions as well

Viewpoints in defining the objectives of reducing the regional difference

1. Defining the level of objective : Basing on the national standard for all regions or the less developed regions must reach at least the national average level or the level of the medium developed regions.
2. Method of achieving the objective : The objective of shortening the regional difference while all regions are improved (the less developed or disadvantaged regions shall enjoy faster reduction while other regions will continue to be improved).

Viewpoints in defining the objectives of reducing the regional difference

3. Grading the objectives and determining the time to achieve the objective. Main objective should be achieved first. The first period may have faster improvement pace than the following periods.
4. Defining the order and priority groups : The objective of attaining the equality in health care through fast reducing for the group of poor people, people in the rural and remote areas and people of ethnic groups, etc.
5. Resources : the resources from the state budget should be reasonably allocated; mobilizing the resources by diversification; defining the decisive resources and the supplementary resources.

Objective/norm

1. The objective of reducing the difference on children's health

- Reducing the difference on the fatality rate of children under 5 years old
- Reducing the difference on the fatality rate of children under 1 year old
- Reducing the difference on the ratio of catching popular diseases of children under 5 years old
- Reducing the difference on the malnutrition ratio of children under 5 years old (in height and weight).
- Reducing the difference on the ratio of premature newborn baby, etc.
- Ensuring 100% of children to enjoy expansive vaccination etc

Method of defining the objective

There are various ways of defining the norm:

1. The norm on equality in health care is represented in form of *improving the ratio* of an indicator in the most disadvantaged group of region or group of people compared to that of the most advantaged one.
2. Method of approach by reducing the regional difference (best and worst; worst and national average, etc)

Method of defining the objective (cont.)

Defining different objective for different regions in the correlation with other regions and the national average can be done by one or the combination of the following methods:

1. Extrapolation method

- *Simple extrapolation* : What was the changing trend in the past, assuming the same intensity in the future.
- *Analytical extrapolation* : By analyzing the influencing factors, advantages, difficulties, determination and commitment, mobilization of the resources, etc to fasten or down the intensity.

Method of defining the objective (cont.)

2. Comparative method – similarity

With this method, we can use the norm of the advanced regions or nations which have similar conditions as the objective of the planning period. The chosen territories for application can be:

- Various regions in a country
- Different countries in the region and in the world

Method of defining the objective (cont.)

3. Multi-factor analysis method

- We can use the quantitative model to define the impacts of each factor to a certain subject.
- The use of this method requires a system of specific and detailed information and data in the time sequence with results of experimental surveys to calculate necessary parameters.

1 Method of approach no.1 : Defining the objective by shortening the difference between the most developed region and the least developed region

1. Calculation of intermediary norm
 - Calculating the planned difference
 - Calculating the annual average reduction in the planning period
 - Calculating the difference for each planned year

2. Calculating the fatality rate of children under 5 years old in the planning year for the least developed region

(a) Calculation of PAR indicator

- For example: the fatality rate of children under 5 years old in the Central Highland region is 108.1‰, in the Red River Delta is 43.7‰
- The PAR value shows the difference on the fatality rate of children under 5 years old in the Central Highland region and the Red River Delta as follows

$$\begin{aligned} & \text{PAR} \\ & (\text{Fatality rate of children 5}) = \frac{108.1 - 43.7}{108.1} = 0.5957 \end{aligned}$$

1. Calculation of intermediary indicator (cont.)

ii) Calculation of PAR indicator in the planning year

$$PARKH_{(2005)} = 0.5957 \times (100\% - 40\%) = 0.3574$$

(iii) Calculating the reduction in PAR indicator in the planning period

$$PARTN_{(2000)} - PARTH_{(2005)}$$

$$R_{Ave} = \frac{\quad}{n} = 0.0477$$

1. Calculation of intermediary indicator (cont.)

(iv) Calculating PAR indicator for each year of the planning period

$$PARTN_t = PARTN_{t-1} - RTB$$

$$PARTN_{2001} = 0.5957 - 0.0477 = 0.5480$$

$$PARTN_{2002} = 0.5480 - 0.0477 = 0.5003$$

$$PARTN_{2003} = 0.5003 - 0.0477 = 0.4526$$

$$PARTN_{2004} = 0.4526 - 0.0477 = 0.4049$$

$$PARTN_{2005} = 0.4049 - 0.0477 = 0.3572$$

2. Calculation of fatality rate of children under 5 years old in the planning year

Mdbsh

$$\text{MTN}_{,t} = \frac{\text{Mdbsh}}{\text{Mdbsh} - \text{MTN}_{,t}} \quad \text{if } \text{MTN}_{,t} - \text{Mdbsh} > 0$$

(1)

$$1 - \text{PARTN}_{,t}$$

Mdbsh

$$\text{TCDVNTN}_{,t} = \frac{\text{Mdbsh}}{\text{Mdbsh} - \text{MTN}_{,t}} \quad \text{if } \text{MTN}_{,t} - \text{Mdbsh} < 0$$

(2)

$$1 + \text{PARTN}_{,t}$$

Calculation results

$$\text{MTN}_{2001} = 96.7\%$$

$$\text{MTN}_{2002} = 87.5\%$$

$$\text{MTN}_{2003} = 79.8\%$$

$$\text{MTN}_{2004} = 73.4\%$$

$$\text{MTN}_{2005} = 68.0\%$$

Method of approach no.2

*Improving the norm of the least developed region by
comparing with the national average level*

It was estimated that by 2005 M(Children<5) in the Central Highland region reduced from 108.1 ‰ (2000) down to 61.6‰ in 2005 and 37‰ in 2010 (the national average for the first year 2000).

1. Calculation of the intermediary indicator

(i) Calculating the increase (decrease) rate of the norm

$$R = (T_c / T_o)^{1/n} - 1$$

R : The average increase rate a year

T_c : Objective of the planning year

T_o : Objective of the first year

n : length of the planning period (in this case, n=5)

$$R = (61.6/108.1)^{1/5} - 1 = - 0.1064$$

1. Calculation of the intermediary indicator

(ii) Calculating the objective value of each planning year

$$T_t = T_{t-1} \times (1 + R)$$

T_t : Objective of the planning year

For example: The fatality rates of children under 5 years old in the Central Highland region in the planning years are as follows

$$T_{2001} = 108.1 \times (1 - 0.1064) = 96.6 \%$$

$$T_{2002} = 96.6 \times (1 - 0.1064) = 86.3 \%$$

$$T_{2003} = 86.3 \times (1 - 0.1064) = 77.1 \%$$

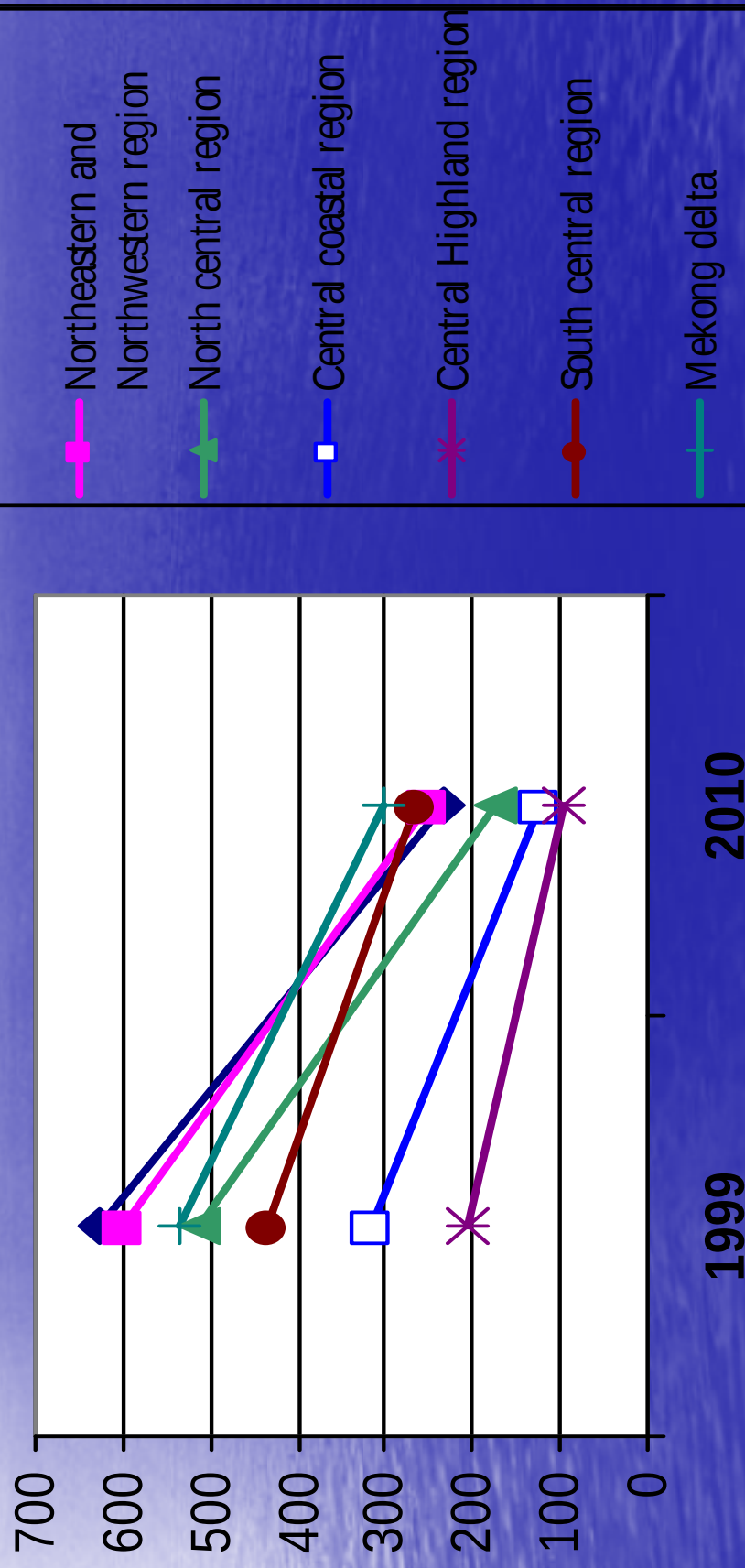
$$T_{2004} = 77.1 \times (1 - 0.1064) = 68.9 \%$$

$$T_{2005} = 61.6\%$$

2. Method of forecasting the national average objective

- $T_{cn} = (1/P_n * \sum P_{i,n} * T_{i,n}) * 1000$
- In which:
- T_{cn} : National objective
- P_n : Total numbers of children under 5 in year n nationwide
- P_{in} : Total numbers of children under 5 in year n in region i
- i : Regional indicator (i = 8)

Chart 6: Necessary changes in the numbers of malnourished children under 5 years old to obtain the national objective in 2010
(thousands of children)



IV. Building policies and solutions

Integration of Population and Gender in building policies and solutions

Objective of the lesson

- To know the method of defining and determining the problems and solutions in the planning period.
- To understand the theoretical method for each solution
- To know how to calculate the norms
- To understand the method of forecasting to calculate the demand on
 - + infrastructure
 - + medical human resources
 - + financial resources for health care sector

Definition of policy/solution

- * *Policy is the instructive principle through which the Government/Department/Branch or an organization can build their own programs and activities*
 - * **Solution/strategic planning** is an action or activity done to achieve the proposed aim and objective
-

Requirements for the policy, solution

- Appropriate
- Consistent
- Influential

Defining and determining problems

From the results of the situation analysis, we can define the causes/impacts

- The difference on the provision, usage and possibility of access to medical and health care services
- The difference among regions on the quality of the medical services, especially the human resources and the medical equipments at the local establishments
- The regional difference on the financial investment
- The regional difference on other population and socio-economic factors

Defining the policies

- Policy on Promotion of medical prevention other than medical treatment
 - Policy on Socialization of health care sector
 - Policy on Insurance, hospital fees
 - Policy concerning medicines used in medical treatment
 - etc.

For example

Policy: Preventive health care (medical prevention other than medical treatment)

Solution/Strategic planning:

Promoting the initial health care

Solution/norm

Solution on medical and health care development with the view to reduce the difference on:

- Strengthening the possibility of accessing to medical services
- Strengthening the quality of the medical services
- Increasing the ratio of pregnant women who enjoy 3 or more times of examination
- Preventing malnutrition and improving the health: preventing anaemia in pregnant women
- Ensuring that pregnant women are injected against tetanus
- Increasing the fertility rate at medical establishments at which the baby will be cared for by the medical staff
- Upgrading the commune medical centres and medical equipments, providing medicines, living water, electricity,

Solution/norm (cont.)

The interdisciplinary solution (interdisciplinary objectives)

- Reducing the fertility rate and implementing family planning
- Improving the condition and consumption structure
- Improving the living standard
- Improving the education level of the women
- Increasing the income of the households
- Improving the infrastructure, especially at commune level.

Theoretical data for the solution on the provision and use of medical and health care services

- 1. Increase in the numbers of health care services with higher quality (thanks to competent medical staff)*
- 2. Increase in the qualified human resources at the grassroots level*

Increase in the numbers of health care services with higher quality (thanks to competent medical staff)

1. Reducing the difference on the average visit per capita by competent staff

2. Reducting the difference on numbers of deliverings which are attended by the medical staff.

For example, the theoretical data for the solution on the provision and use of medical and initial health care service for children to reduce the difference on fatality rate of children under 5 years old

It is estimated that the two decisive norms to reduce the difference on the fatality rate of children under 5 years old are

- *1. Reducing the difference on the numbers of average visit per capita by competent staff*
- *2 .Reducing the difference on the numbers of delivering which are attended by medical staff.*

Methods :

1. *Estimate the number of health check in medical center.*

Step1. Evaluate inter-expenses: estimate the number of health check/ person

Step 2. Evaluate total demand and the number of health check in the medical center all over the country.

Step 3. Evaluate the total number of health check in medical center (basic social services) all over the country during the periods of plan.

Step 4. Evaluate and distribute the increase of the number of health check in medical center all over the country : common increase, increase in population, enhance social equality.

Methods of evaluation.

1. Estimate the number of health check / person

Define the solution index to decrease the gap among provinces and death rate of children below 5 years old.

Evaluation methods

2. Estimate of total number of health check per year (Q)

$$Q = N \times P$$

N – The number of health check/ person

P - Population

Evaluation methods

3. Analysis the rate of increase of health check regarding:

- Population increase
- Due to decrease the gap among locations

Evaluation method

**Solution in development human resource with
medical qualification**

Evaluation method

1. The number of health check.
2. Productivity of Medical worker

Evaluation method

Demand of labor in medical sector:

$Q(t)$

$$L_{\text{worker}}(t) = \frac{\quad}{\quad}$$

$W(t)$

$L_{\text{worker}}(t)$: Demand of worker per year (t)

$Q(t)$: The amount of work need to be done per year (t)

$W(t)$: Productivity

Sample matrix

General aim	Subjective index	Resource for evaluation	Subjunctive
Foreseeable aim	Subjective index	Resource for evaluation	Subjunctive
Output	Subjective index	Resource for evaluation	Subjunctive
Activities	Input	Budget	Basis condition

IV. Integration Population and Gender

**Setting up program/ projects
/investment/ budget proposal**

Learning objectives

1. Understand contents and methods of defining program/ projects related to integration
2. Understand contents and methods in building investment program/ budget proposal related to integration.

Definition of program/ projects

Policy: Prevention is better than treatment Strategy:
Promotion health care in first stages

Program 1: Vaccinated program

Projects:
- Supporting Medical center
-Disease prevention

Program 2: Birth health care.

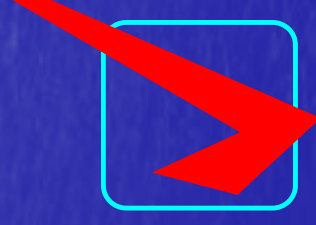
Projects:- Communication promotion in birth health care
- Enhance the quality of birth health care in commune
- It is better that mother feed their babies by their own milk.

Project ?

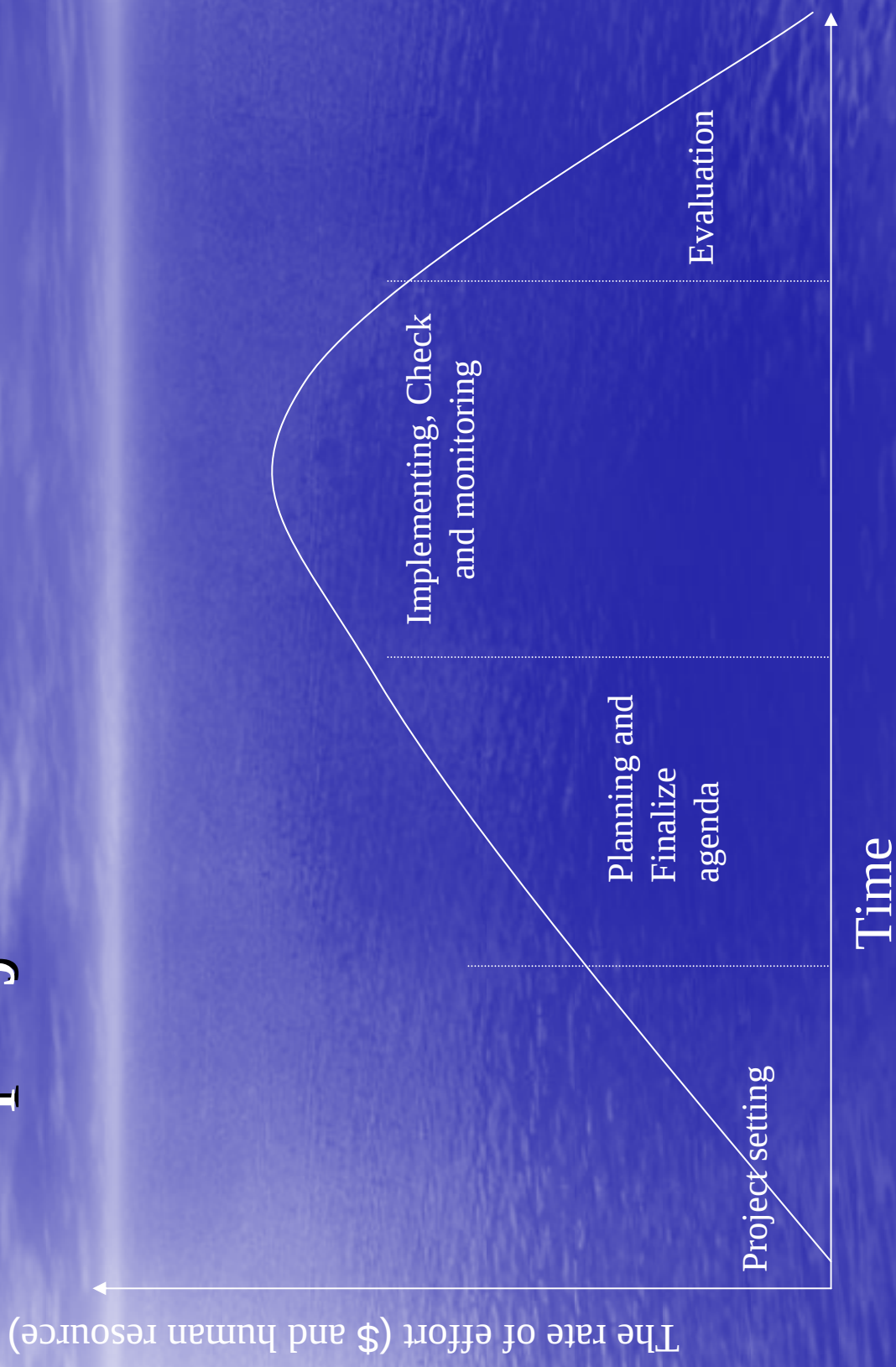


A collection of logical different activities
in the structure to meet targets with the
specific support . Projects:

- *Goal*
- *Temporary*
- *Unique*
- *System*

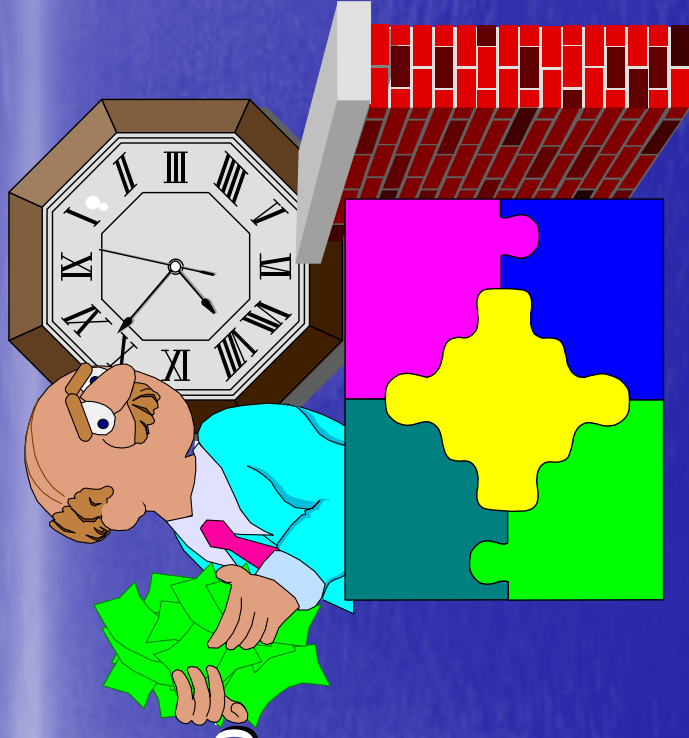


Cycle of project



4 main factors

- What is output?
- Which target does the output
- Cost ?
- Time ?



Integration Population- Development into project planning

- Step 1: Define the goal (general goal, middle term goal, goals for each activity);
- Step 2: Define appropriate activities to meet the target
- Step 3: Define the demand of resource and connection / mobilization of inputs to run.
- Step4: Finalize the activities agenda, distribution and monitoring.

Step 1. Setting the goal of projects

- Circumstance analysis
- Aim: Find out issues needed to be solved
 - + Which groups are the most impacted?
 - + Quantity of groups ?
 - + Location, ethnic minorities, male or female

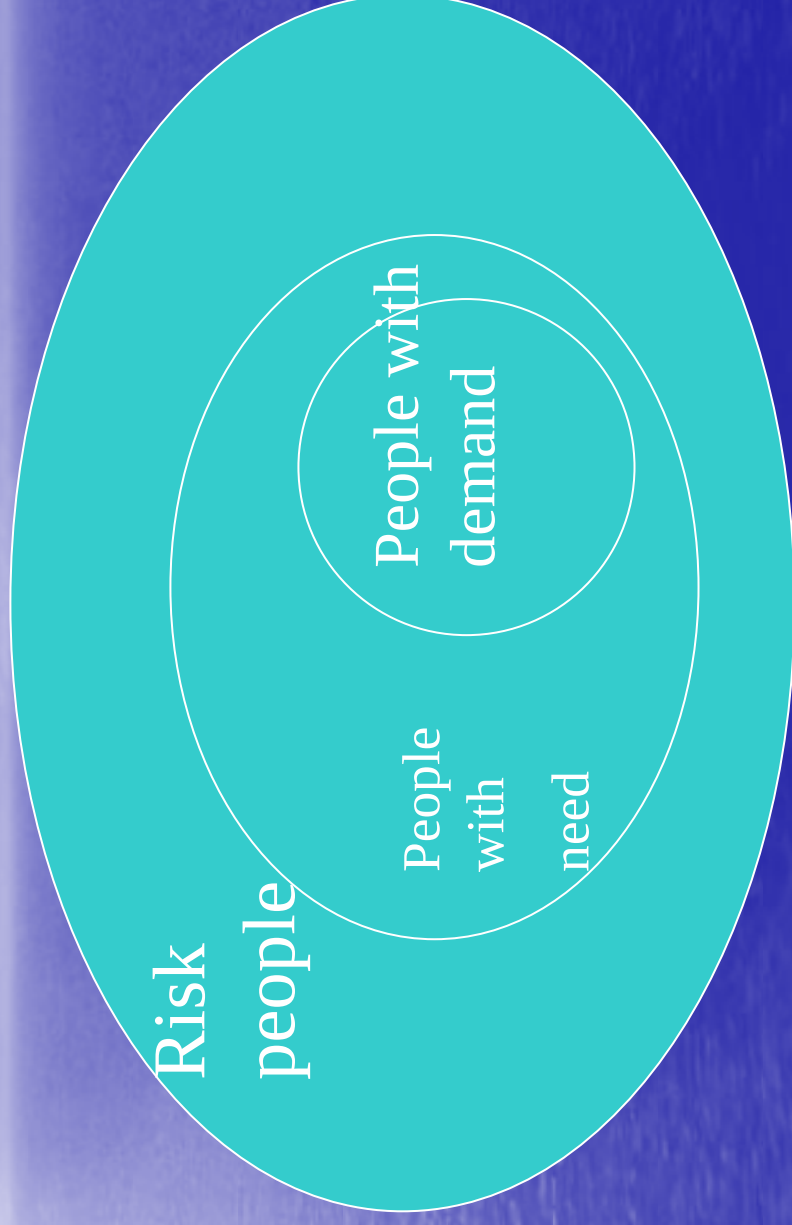
Aim of project?

Integration Population in building Investment program

Standards:

- Urgent/serious issues should be taken
- Impacts of program /projects
- Possibility of projects
- Output of projects
- Environment impacts
- Community 's capacities of accessing

Receiver



Define the receiver

- Risk people: low income, low nutrition, bad health.
- People with need: getting serious problem of low nutrition
- People with demand: need the project resource : children of low nutrition,

Define the receiver

Example: Compulsory vaccination

Receiver : Children 0 - 4; women aged 15-49
(especially pregnant women or woman taking
care children below 5 years, low income family,
located in remote area.

The receiver

- Direct receiver : directly get the resource of projects.
- Indirect receiver: are end-user getting resource (wide-spreading).

Example: teach children how to decorate a bowl of soup

Step 2. Design activities and coordinate to ensure the quality.

After defining the issues :

1. Explore the main issues
 - + Why it happen?
 - + Which is the main factor?
2. Build activities and define the expected results
3. Define the relationship between cause – fact activities and the outputs .

Example: Define the relationship between Family planning, prevention of low nutrition

Cause and fact

- Question: Does the project widespread the impacts ?(Impact of wide-spreading)- to develop
- But, some project has bad impact on other group – to improve
- Rule: Project has good impacts on the receiver but no bad impacts on the other groups

Example: Program to decrease the gap of the rate of below 5 year child death

1. Program/ Projects

Enhance providing and usage of health care service and child health in poor area- Improve the quality of health clinic in communes of poor area.

- Training and ensuring human resource for health care clinic in poor areas

Activities

- Compulsory vaccination
- Enhance capacities of communication of increasing health check; increase the number of birth giving in health clinic
- Increase the service of treatment for children in infection hospitals



Locations

- Questions : location selection?
 - The highest risk
 - The biggest number of impacted people
 - People without capacity of finance
 - Remote and poor area...



Integration Population- Development into budget investment



- Define the demand of capitals for program/projects regarding the number of children below 5 years old and the population in each location.
- Distribution of budget to meet the demand in terms of each characteristics (not distribution of average but living standard of location)
 - Inter sector to integrate in building planning and capitals

Solution

1. Program

- For children below 5 years old
- Communication of birth health prevention, sex education and nutrition
- Food sanitation security
- Build in remote and poor area
- Infrastructure
- Vocational education

Learning objectives

- 1. To understand the integration of Population-Development in the implementation of the plan
- 2 . To understand the integration of Population-Development to supervise the implementation of plan/program/project
- 3. To understand the integration of Population-Development to evaluate the implementation of plan/program/project

Integrating Population-Development in the Implementation of Plan

- Participation of residents
- Framework and system to act
- Connect with organization and government
- Define obstacles

Integration of Population-Development to supervise the implementation of the plan

- To supervise the process and results of the implementation to see whether the plan is put in the right place or for the right beneficiaries
- To supervise whether the program is assigned to suitable people or they can obtain the appropriate objective
- The validity of the supervision
- To supervise the objectives/norms/solutions
- To supervise the implementation schedule

Integration of Population-Development to evaluate the implementation of the plan

- + To evaluate the impacts of the project: general and specific impacts
 - Whether the program/project is carried out according to the schedule and basing on the budget plan
 - Whether the program/project can reach the beneficiaries; if not, why? Any changes needed?
- + To evaluate whether the indicators are suitable or not?
- + To evaluate whether the results and direct and indirect impacts have caused bad consequence or not?



Thank you very much
for your attention