DODWA HEALTH RESEARCH CENTRE
OUTLINE

• Background
• Objectives and Focus for 2009
• Completed and current projects
• DDHSS
• Linkages
• Collaborations
Objectives of the center

• To take part in identifying and carrying out priority research to help address policy, planning and implementation needs of the GHS.

• To build multi disciplinary capacity within the research centre to provide technical support and conduct Implementation Research
Objectives of the center

• To build capacity in finding effective solutions and implementation alternatives to identified need and problems.

• To disseminate results of research findings to key people, policy makers and anyone responsible for health care in a meaningful way.

• Be a Resource Centre for building capacity in applied Social Science Research

• Have a functioning DSS and be part of the INDEPTH Network
Research Capacity

- Medical Anthropology
- Epidemiology
- Demography and Population studies
- Population and Field based Epidemiology
- Medical Statistics
- Applied Health Social Science
- Public Health
- Basic Sciences
- Social Sciences
Priority Research Areas

• **Malaria**
  – Home based care for malaria
  – INESS
  – Involvement of private sector in health care delivery (Chemical Sellers)

• **Social Protection**
  – Health Insurance
  – Conditional Cash Transfers for Pregnant women

• **Cost of care**
  – TB
  – Malaria

• **Pregnancy Registry**
Completed Projects

• Continuous quality Improvement for health care *
• Deployment of Rectal Artesunate *
• Male Involvement in family planning
• HIV and stigma
• Malaria and access to health care
• Design and Implementation of MHIS*
• Community perceptions on Community Health Insurance scheme
• Perceptions on and acceptability of Artesunate Amoduaquine
• Impact of the use of Rapid Diagnostic tests in the management of Malaria in public Health facilities*
Current Projects

- INDEPTH Effectiveness and Safety Studies
- Use of RDT in chemical shops
- Monitoring and Evaluating the impact of the ILO Global Social Trust conditional cash transfer pilot
- Pregnancy Registry
- TB Surveillance
- Flu surveillance
DHDSS

• First attempt at baseline 2003
• Baseline started in 2005
• Round1 data collection in 2006
• Bi annual data collection
• Events picked each round are
• Add on modules
• Annual updates on SES
• Housing Structures Digitally mapped
### Demography

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>HDSS surveillance pop</td>
<td>108,334</td>
</tr>
<tr>
<td>Surveillance area</td>
<td>1,528.9/sq km</td>
</tr>
<tr>
<td>Population density</td>
<td>70.9/ sq km</td>
</tr>
<tr>
<td>Households</td>
<td>22,360 in 376 communities</td>
</tr>
<tr>
<td>Sex ratio</td>
<td>87 males: 100 females</td>
</tr>
<tr>
<td>Household size</td>
<td>4.8</td>
</tr>
</tbody>
</table>
## Demography -2

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants</td>
<td>2.1%</td>
</tr>
<tr>
<td>&lt; 5 yrs</td>
<td>13%</td>
</tr>
<tr>
<td>Females 15 - 49 yrs</td>
<td>26.9%</td>
</tr>
<tr>
<td>Dependency ratio</td>
<td>79% (2008)</td>
</tr>
<tr>
<td></td>
<td>and 78.6% (2009)</td>
</tr>
<tr>
<td>Female headed households</td>
<td>39.7%</td>
</tr>
</tbody>
</table>
DHDSS Population Pyramid by Age and Sex,

39% being less than 15 years. the number of children born in the last five years has declined compared to the number born 10 years ago.
Total Fertility Rates by Year, DHDSS

Year 2006: 3.21
Year 2007: 3.29
Year 2008: 2.99
Year 2009: 2.42
AGE-SPECIFIC FERTILITY RATES BY YEAR, DHDSS

Age Specific Fertility Rates (ASFR) by Year

NB: The continuous rise in ASFR among the age group 15-19 (Teenage pregnancy)
Results - A map with significant clusters - Dodowa
Trends in Households’ Poverty levels

Poverty levels by year, DHDSS, 2010

Utilities - Water

Trends in Access to Portable Water, DHDSS, 2010

<table>
<thead>
<tr>
<th>Year</th>
<th>Proportion of households</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>68.5</td>
</tr>
<tr>
<td>2007</td>
<td>69.0</td>
</tr>
<tr>
<td>2008</td>
<td>74.0</td>
</tr>
<tr>
<td>2009</td>
<td>80.9</td>
</tr>
</tbody>
</table>
Utilities – Electricity Connectivity

Households Without Electricity Connection to the National Grid by Year, DHDSS 2010

Year 2006: 52.0
Year 2007: 50.0
Year 2008: 47.0
Year 2009: 38.1
IPT

Pregnant women who received at least one IPT, DHDSS

Year 2006: 53.6%
Year 2007: 51.7%
Year 2008: 61.0%
Year 2009: 64.0%
Bednet and ITN usage among Pregnant women by year, DHDSS, 2010

Bednet and ITN usage among Pregnant women by year, DHDSS, 2010

<table>
<thead>
<tr>
<th>Year</th>
<th>Bednet</th>
<th>ITN</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>49.7</td>
<td>39.3</td>
</tr>
<tr>
<td>2007</td>
<td>50.8</td>
<td>55.2</td>
</tr>
<tr>
<td>2008</td>
<td>50.4</td>
<td>51.5</td>
</tr>
<tr>
<td>2009</td>
<td>48.6</td>
<td>56.2</td>
</tr>
</tbody>
</table>
Insurance Registration

- Increased from 33.3% in 2007, 49.8% in 2008 and to 59.7% in 2009
- Non Registered households
  - Lack of Money: 34.4% in 2008 to 68.8 in 2009
  - Sub standard drugs: 5.2% in 2008 to 4.4 in 2009
  - Attitude of staff: 3.3% in 2008 to 1.5 in 2009
INDEPTH WORKING GROUPS

- Mortality Clustering
- Urbanization and Migration
- Social Autopsy
- TB
- Hrweb
- Mortality Monograph
- INESS
- Cost of Illness
Links with DHMT

• Data for planning
• Home visits by CHN
• Targeted Distribution of bednets
• Zoning of the district for interventions
• Implementation Research
Links with Local Government

- House numbering
- Issuance of Birth Certificates
- Biometric Picture ID for community and facility data linkage
- Poverty Targeting
- Health Insurance Registration
- Official Issuer of house numbers
Collaboration

- Ghana Health Service
- Ministry of Local Government
- INDEPTH Network
- School of Public Health University of Ghana
- LSHTM
- ILO
- CDC
- WHO
- Dutch Government
THANK YOU