

NEEDS ASSESSMENTS FOR EMERGENCY OBSTETRIC AND NEWBORN CARE

Access to emergency obstetric and newborn care (EmONC) has helped to ensure that pregnancy and childbirth are no longer major threats to the lives of women and newborns in high-income countries. In most low- and middle-income countries this is not the case; health systems still fail to provide widespread access to these life-saving services. EmONC Needs Assessments produce evidence needed to strengthen health systems, improve access to EmONC, and save the lives of mothers and newborns worldwide.

Ministries of Health and other government agencies work with the Averting Maternal Death and Disability Program (AMDD) and United Nations (UN) agencies to carry out EmONC Needs Assessments that evaluate how well and to what extent the health system is providing EmONC.

These Needs Assessments provide details about gaps or problems in availability of EmONC services. These data are a first and critical step to improving equitable access to EmONC and to strengthening the overall health system, as they are the foundation of a rigorous planning process.

A practical tool to strengthen access

The Needs Assessment process and tools developed by AMDD and its UN partners help countries strategize concrete actions to improve the availability, accessibility, and quality of EmONC. The Needs Assessment is an extremely practical planning and monitoring tool that helps governments understand what is really happening inside health facilities: it looks beyond official policies and norms, and focuses on actual facility functioning.

Needs Assessments are surveys of health facilities (including health centers and hospitals) throughout a given country. Results can answer questions such as:

- Are there enough facilities providing EmONC?
- Do facilities have adequate numbers of health workers with the right mix of skills? Do facilities have essential equipment, drugs, and supplies?
- Are women with obstetric complications using the facilities?
- What is the quality of the service?

Needs Assessments at a glance:

- Facility-based, cross-sectional studies that are usually national in scope
- Timeline: 8 -18 months
- Scope of data collection: infrastructure, human resources, equipment, drugs and supplies, service statistics, case reviews, and provider interviews relating to EmONC and maternal and reproductive health
- Results used for planning and health systems strengthening at all levels

The Needs Assessment uses a set of 10 adaptable data collection instruments – also called modules – that assess:

- national policies and context
- interviews with providers regarding facility infrastructure, supplies and equipment, human resources, facility services, and provider knowledge and competency
- reviews of medical registers, and
- reviews of records on cesarean deliveries, partograms, and maternal deaths.

To complement these data collection instruments, AMDD has developed a set of guides for study facilitators, data collection trainers, data collectors, and data analysts.

Most Needs Assessments are national in scope, and survey all upper-level and some or all lower-level facilities. Depending on the scale of the study and available country resources, the process – from planning to the final report – usually takes between eight and 18 months. Needs Assessments often involve a variety of stakeholders, from Ministry of Health officials to professional societies.

“Without access to family planning, skilled birth attendants, and EmONC, no significant reduction in maternal and newborn mortality will occur. Needs Assessments foster district-level, participatory, and rights-based information gathering and planning to make access equitable and sustainable.”

-Koye Oyerinde, Columbia University professor and team leader for Needs Assessments at AMDD

AMDD and the Needs Assessment process

Since 1999, AMDD has provided technical expertise in developing the EmONC Needs Assessment tools and methodology. Upon request, AMDD works with Ministries of Health and other government agencies and UN country partners from the very beginning of the process – from shaping Needs Assessment methodology to training data collectors, analyzing data, writing and disseminating reports, and planning post-Needs Assessment action to improve equitable access to EmONC services.

Needs Assessments have been conducted in over 50 countries throughout Africa, Latin America, Asia, and the Middle East. Reports from assessments conducted in Cambodia, Ethiopia, Haiti, and Madagascar have recently been published.

Needs Assessments collect data used to calculate the EmOC Indicators. Developed by UNICEF, UNFPA, WHO, and AMDD to help describe a facility's capacity to treat obstetric emergencies, the EmOC Indicators are centered on a set of life-saving medical interventions called signal functions. With more than a decade of use, the EmOC Indicators have proven essential to program planners and managers.

You can find detailed information on the critical role that the EmOC Indicators play in the Needs Assessment process in *Monitoring emergency obstetric care: A handbook*, available online at: www.amddprogram.org



How Needs Assessment results make a difference

National and district health officials use the Needs Assessment data to guide policy, planning, and budgeting to strengthen the health system and improve EmONC services. For example, the Needs Assessment data may show unacceptably low levels of EmONC availability in certain areas of the country and identify areas within the health system that require strengthening in order to focus attention and resources. Data can also be used to establish baseline values for measuring progress toward improving services.

At the national policy level, government officials can assign higher priority to emergency services for women

and newborns and increase training opportunities for midwives and other cadres of health professionals. Governments can also use Needs Assessments to redesign their Health Information Management System to better capture EmONC data and operationalize national health strategies.

Results: Ethiopia

In Ethiopia, the 2008 Needs Assessment revealed that an inadequate water supply was in part preventing facilities from providing quality EmONC. In response, UNICEF committed funding to provide all facilities with water. UNFPA took a closer look at human resource data and is now working with the government to provide equipment to facilities that have skilled personnel. National data are being mapped to determine optimal ambulance placement.

Results: Angola

A 2007 Needs Assessment in Angola showed that certain regions had a much lower maternal death rate from eclampsia, an obstetric complication. Further investigation led Angola to determine that these areas had better access to the anticonvulsant magnesium sulfate.

Why has AMDD focused on Needs Assessments?

When AMDD began in 1999, there was less global consensus on the strategies for reducing maternal and newborn death. AMDD became an early advocate of EmONC. Today, most agree that access to EmONC, family planning, and skilled attendance at birth are essential strategies.

Along with this ground-breaking shift in thinking came the need to assess the ability of health systems to deliver EmONC; few guidelines or tools existed. Building on previous work at Columbia University, AMDD developed the EmONC Needs Assessment Toolkit. This, along with other practical and adaptable tools, helped to evaluate the current state of EmONC in countries and define the path forward.

AMDD and its UN partners continue to refine and improve the EmONC Needs Assessments. Today the world increasingly recognizes that the value of Needs Assessments extends beyond EmONC and helps to improve many other parts of a country's health system.

After AMDD's first five years, a 2004 Gates Foundation-sponsored evaluation had this to say about our Needs Assessment work: *"The Needs Assessments were instrumental in convincing governments and donors to incorporate EmONC into national health programs."*

The Averting Maternal Death and Disability Program (AMDD) is based in the Mailman School of Public Health at Columbia University in New York City. We help to strengthen health systems to provide emergency care for all women experiencing life-threatening obstetric complications. We conduct research and policy analysis, provide technical expertise, and advocate for solutions that reduce maternal and newborn mortality and morbidity.

For more information and access to Needs Assessment resources, please visit www.amddprogram.org