



## Emergency Transport Scheme (ETS) in Adamawa State, Nigeria (Formative Research and Baseline Study)

**Project Location:** 16 of 21 Local Government Areas (LGAs) in Adamawa State, Nigeria

**Project Start Date:** (Overall ETS Project = July 2013)  
Formative Research = October 2013  
Baseline Study = August 2014

**Project Duration:** (Overall ETS Project = 5 years)  
Formative Research = 3 weeks (field work only)  
Baseline Study (field work only) = 2 weeks

- Step 3: Choosing Data Collection Method
  - This stage involved in-depth interviews with key informants.
- Step 4: Developing Instrument(s)
  - The questionnaire and the maps of each Local Government Area (LGA) visited.
- Step 5: Recruiting Participants
- Step 6: Collecting Data
- Step 7: Analysing and Reporting Findings

**Introduction:** With funding from Comic Relief and in partnership with Society for Family Health (SFH), Transaid was contracted to implement an Emergency Transport Scheme (ETS) in Adamawa State. The ETS aims to provide affordable, accessible, safe, and timely means of transport for pregnant women during labour or obstetric emergencies by taking them to the nearest health facility using an existing, functioning and well-organised transport system as provided by the National Union of Road Transport Workers (NURTW). It focuses on changing community's attitudes towards accessing healthcare and advocates and positively encourages taxi drivers to be seen as 'life savers' within the rural villages. It is expected that women seeking maternal healthcare reach facilities in a more stable health condition than those who deliver at home or reach health facilities through other means of transport available to them.

This case study details two of the initial stages of the project; the formative research and the baseline study. The formative research aimed to:

- Detail contextual data from Adamawa State's LGAs in order to support the planning and execution of the emergency transport scheme activities
- Sensitise stakeholders about the potential for an Emergency Transport System in Adamawa State.

The purpose of the baseline study was to:

- Provide information on selected indicators of maternal health and transport to be monitored across the project's life span and evaluated at its end
- Monitor trends and changes in behaviour that influence women's health-seeking behaviours and improvement in maternal health, especially with reference to transport
- Identify information gaps which may be further explored using qualitative surveys

**Methodology:** The formative research field work was completed across 21 LGAs between 21<sup>st</sup> October and 3<sup>rd</sup> November 2013. Information was collected through discussions and interviews with the relevant stakeholders. The general methodology for the research was split into seven main steps:

- Step 1: Analysing Information Gaps
- Step 2: Writing Research Questions

The information gathered during the formative research helped to build most of the assumptions that informed the baseline protocol and the list of key indicators therein.

For the baseline study, field work began in August 2014 and data entry was carried out between August and September. Data cleansing and analysis was carried out between November 2014 and March 2015.

Prior to the researchers' visits to the LGAs for the survey, criteria were provided for the baseline study during four days training. Among these were criteria for the selection of primary health care (PHCs) centres, selection of primary sampling units (PSUs) or communities, and women and head of households eligible for interviews.

In each LGA, meetings were held with the Executive Secretaries of the PHCs and the LGA Branch Chairmen and/or Secretaries of the National Union of Road Transport Workers (NURTW). The objective of the meetings was to seek the support and guidance of these officers in selecting the appropriate PSUs and PHCs that were farthest from the LGA based on the criteria for PHC selection and the distances respectively.

Meetings were also held with the Chairmen of Ward Development Committees (WDCs) to secure their buy-in and cooperation from community members. Systematic sampling techniques were used in the selection of the households.

**Output:** The formative research provided an overview of the emergency transport situation in Adamawa State, in particular at the rural level, as well as providing a good opportunity to sensitise the NURTW officials and other relevant stakeholders about the potential implementation of the ETS in Adamawa State.

Key findings included:

- There are two key transport sector stakeholders in the State, the NURTW and the National Commercial Tricycle

and Motorcycle Riders and Owners Association of Nigeria (NATOMORAS)

- Only a small number of communities were identified as being inaccessible by car during normal weather conditions. However, in certain areas, up to 70% of the communities were identified as being inaccessible during wet conditions
- The average transport cost to move between locations in Adamawa State ranges from 50-2000 Naira per passenger (approx. GBP70p-£6.80). In emergency situations, the cost of such transport can range from 300-8000 Naira (approx. GBP£1-£27). The lower prices tend to be in the urban areas and the price becomes higher the further into the rural areas you travel.

The baseline research provided key information about health and transport seeking behaviours among rural women in child bearing age (13 – 49) and Head of Households.

The implementation strategy benefited largely from the information and analysis conducted during the research phase. The results from the baseline study were as follows:

- 81.8% of rural women who had given birth in the past 12 months delivered at home, the majority assisted by a Traditional Birth Attendants (TBAs) – 16.5% delivered at a health facility
- 33% visited the health facility when experiencing a complication during pregnancy and 17% visited the health facility when experiencing a complication post-partum
- Women gave different reasons for not delivering at a health facility, including the facility being too far from home (34%); cost of transport (7%); ‘no need’ for delivering at a health facility (23%) and preference for home delivery (23%).
- During an emergency, the vast majority of respondents (circa 85%) utilise motorcycles to be transported to health facilities
- The average cost of transport to the closest health facility is circa Naira 740 (approx. GBP£2.50); during an emergency the majority of respondents had to pay immediately (81% HoH and 73% women)
- For 46% of respondents, organising transport takes no longer than 30 minutes, but for 34% it takes between 30 minutes and 1 hour
- The largest proportion of respondents (38%) take between 30 minutes and one hour to travel to the most appropriate health facility and for a sizeable amount of individuals (31%) it takes between one and two hours

**Conclusion:** This formative research was important to establish the appropriateness of the transport solution and the existing situation on the ground. It also supported the development of a set of indicators used for the baseline study. Overall, the results of the baseline survey demonstrate how women prefer to give birth, how they behave in an obstetric emergency and what type of transport they may be able to access. The study also offers an overview of household income levels and the level of preparedness for normal delivery.

The findings from the baseline study reinforce the need for addressing the delay in seeking health care hence the project design should take in great consideration community engagement activities to promote health seeking behaviours at health facilities. In areas where rural communities are scattered and often a long way from health facilities, the conventional health system emergency transport (e.g. ambulances) is frequently under-resourced and unable to cope with the demand. One solution is to implement an alternative emergency transport system, using already established transport; in the case of this project, commercial taxi drivers from the NURTW. The recommended next step is to repeat a similar survey at the end of the ETS project, and to analyse any change between baseline and endline indicators, after adjusting for important contextual factors.

**Tools Utilised:** ETS Formative Research Training Manual, Formative Research Questionnaire, Baseline Surveys on awareness and maternal health, SPSS (Statistical Package for the Social Sciences).

**Partners:** Society for Family Health (SFH), National Union of Road Transport Workers (NURTW). Funded by Comic Relief.

#### About Transaid:

Transaid is an international UK development charity that aims to reduce poverty and improve livelihoods across Africa and the developing world through creating better transport. Transaid was founded by Save the Children and the Chartered Institute of Logistics and Transport. Our Patron is HRH The Princess Royal. Transaid specializes in the following:

- Building the capacity of public health authorities to provide effective, safe and cost efficient transport management systems to promote equitable access to primary health care services.
- Developing and improving logistics and supply chain systems to enhance the delivery of medicines, equipment and relief services to vulnerable communities.
- Promoting effective partnerships to support and enhance community participation in developing sustainable transport solutions in rural areas.
- Developing and delivering transport and logistics training and qualifications for public and private sector operators.

Transaid has the capacity and reach to lead projects throughout the developing world, but is equally capable of providing niche technical assistance to large scale health systems strengthening projects. Transaid maintains strong relationships with a number of leading international organizations including donor agencies such as DfID, DANIDA and USAID, and implementing organizations such as Health Partners International, Options Consulting, John Snow Inc. and Management Sciences for Health.

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