



## Abstract

Information support is considered essential to efficient management of services. Even though health related data have been collected over a long period in Sri Lanka, a national Health Information System (HIS) encompassing all aspects of the health care delivery system evolved only in the early eighties. In keeping with the above, the well established family health services which included family planning developed its information system, from the field level to national level. With decentralization of the health system, further changes in the HIS were thought to be appropriate to support management of health services at the district level.

This study was undertaken to identify the strengths and weaknesses in the present HIS for Family Planning (FP) with a view to studying the use of information as a management tool in the FP program, at the divisional and sub divisional levels.

The records and returns available in the HIS include a wide range of information that could be used for management of FP services. However, their use at divisional and sub divisional (peripheral) levels were limited. The need to improve the quality of field level record keeping was identified. Even though the records were mainly used for transmitting data to the central level, the records have hidden potential to be used as management tools especially for improving supervision on quality aspects of care.

An opinion survey was carried out to obtain the view of program managers and the field staff on the usefulness of information on service availability, quality of care, supervision work at PHC level, knowledge and attitudes of service providers & clients and special

activities carried out to improve family planning services. In general, a high percentage of personnel expressed the need for information on the above to middle level managers (Medical Officer of Health (MOHs) and Medical Officer, Maternal & Child Health (MOMCHs) and to the national level, Family Health Bureau. Many did not consider that such information would be useful at the provincial/ regional level administrators who are responsible for implementation of the FP program.

Focus group discussions, non participant observations and self administered questionnaires were used to assess the extent of use and the ability of the field staff to use the available information at the peripheral level. Observations made through all these approaches were similar and pointed to the inadequate knowledge to use the data and the inadequate use of the data.

A quasi-experimental design was used to implement some modifications to the HIS at peripheral level. Five (5) different interventions were identified based on the findings of the first part of the study. The interventions were implemented in selected areas of the Gampaha district in the Western Province and a control area was selected from the Kurunegala district situated in the North Western Province.

The interventions were: training program for all health workers in all five areas (A-E); introduction of evaluation formats to be used at monthly conferences (area B); introduction of a self assessment checklist to PHMs (area C); all these three components (area D) and introduction of a modified field record (area E).

A self-assessment checklist was used to introduce the concept of “potential unmet need” to identify clients/potential clients from the PHMs Eligible Families Register. Evaluation formats were introduced to improve use of data for analysis of the FP situation at divisional and sub divisional levels. Training on the use and interpretation of data was carried out in all the intervention areas. A modified Family Planning Field Record was introduced with a view to improving the quality of record keeping with emphasis on information related to quality of care.

Introduction of the evaluation format along with the educational program was the most effective intervention, which enhanced the use and improved the knowledge for use of information at the peripheral level. The modified field record improved the quality of record keeping. These findings highlight the need for educational programs to be linked with activities in which the knowledge could be applied.

Most of the interventions studied did not need additional resources, hence the need to consider the feasibility of introducing similar programs and follow up for a longer period than was done during this study, to assess the sustainability.