rATA national representative survey deployment

ORGANIZING rATA

RATA Master training | Arne H Eide
## rATA Deployment

### KEY STEPS

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Lesson: ORGANIZING rATA

• Objective: To go through, learn about and discuss a range of different elements of organising data collection in countries

• Outcomes:
  • Make qualified and strategic decisions about organization of rATA in country
  • Draft and finalize the National Development Plan
  • National training: Enumerators' insight important for motivation, conduct, ethics

• Reference; Global Deployment Plan
FIVE PILLARS OF A REPRESENTATIVE HOUSEHOLD SURVEY

- Methodology & Methods
- Organizing
- Training
- Data Collection
- Follow up
KEY ELEMENTS IN rATA ORGANIZATION

WHO

MoH

Stakeholders

National Data Coordinator

Key Actors in Country

rATA

Data Collection Team
National Data Coordinator

- Participate in the master training curriculum (virtual)
- Obtain necessary official clearance and (ethical) approvals for rATA survey deployment in the country
- Develop rATA data collection work plan (NDP)
- Conduct necessary adaptation and testing to the survey prior to data collection
- Lead the design of the in-country survey enumerator training workshop
- Organize and deliver the workshop in country for all enumerators to acquire the necessary knowledge and skills to conduct the data collection in the field
- Arrange logistics (transportation, accommodation, etc) for enumerators to conduct data collection in the field.
- Provide guidance and support to the enumerators during field data collection
- Monitor process and ensure timely delivery of data with the quantity and quality according to the workplan
- Obtain government review and clearance of publishing the rATA survey data and findings in the GReAT
- Use the data to develop a national AT access factsheet.
WHO; HQ/RO/CO/GDC

- Global co-operation on assistive technology (GATE)
- The GATE initiative has one overall goal: to improve access to high-quality affordable assistive products globally.
- Global Report on effective access to Assistive Technology (GReAT)
- GATE Team/GDC
- Data collection: rATA and ATA-C*
- GATE Team/Global Data Coordinator to provide support to NDC/country teams throughout the implementation of rATA
  - training
  - materials
  - in-country training
  - continuous follow-up before and during data collection
  - data analyses
  - data back to countries
  - follow-up after GReAT

*a tool to collect in-depth information on a country’s capacity to procure and provide assistive technology

To achieve its goal, the GATE initiative is focusing on five interlinked areas (5P):
- people, policy, products, provision and personnel
Ministry of Health

- Project owner in country – WHO contract partner
- Formal approval/policy
- Resources
- Appointment of NDC
- Utilization of data at national level
- Application of results
KEY ACTORS IN COUNTRY

• Ministry of Health
• Central Statistical Office
• Ethical Review Board, Approval Authority
• Other relevant ministries
• Research Group/Agency
CENTRAL STATISTICAL OFFICE

- Key actor in data collection, analyses and reporting
- Responsible for censuses
- National sampling frame weights
- Analyses at national level
- Expert support to rATA in country
STAKEHOLDERS

- Disabled People's Organizations
- Non-Governmental Organizations
- AP Service Providers
- AP Producers
- Health Service Providers
- Rehabilitation Service Providers
- International Organizations
IMPORTANCE OF STAKEHOLDERS

- Knowledge
- Experience
- Representing interests
- Support
- Follow-up
- Utilization of results
STAKEHOLDER MEETING

- Invite key stakeholders (20-30)
- Duration: One day
- Demonstrate support and importance
- Present objectives – provide some background to AP/AT e.g. rATA concept note, rATA Questionnaire
- Time for feedback on rATA, follow-up and utilization of results
DISABLED PEOPLE'S ORGANISATIONS

- Expertise on AT in context
- Experiences valuable for understanding results
- Ensure legitimacy of rATA
- Utilization of results
RESEARCH GROUP/AGENCY

- Experience with national, representative surveys
- Handle logistics in a complex data collection
- Access to a pool of qualified enumerators
- Analyses at country level
FINDING THE BALANCE IN COUNTRY

- COMPETENCE
- EXPERIENCE
- ABILITY TO DELIVER ON TIME
- ESTABLISHED WORKING RELATIONSHIPS
- COSTS
- CONTEXT SPECIFICS
rATA ORGANIZATION (In country)

- Different models – adapt to context
- Reporting lines within MoH
- Steering Committee
- Reference Group
- rATA Team – ensuring support to NDC (resources and expertise)
rATA organization

- Ministry of Health
- WHO Country Office (CO)
- WHO Regional Office (RO)
- WHO headquarters/GDC
- Reference Group
- NDC team
- Data Collection team
rATA ORGANIZATION (In the field)

DATA COLLECTION TEAM

(Whatsapp)

Research Agency

NDC

DATA COLLECTION TEAMS:
ONE SUPERVISOR
5 – 7 ENUMERATORS
Data Collection Teams

NDC

SUPERVISOR

ENUMERATOR
INVolVing InDIvIduAls wIth dISAbIliTIES

- Steering committee/Reference group
- Supervisors & enumerators
- Consultative process (DPOs): Interpretation of results, input to policy processes, setting priorities and formulating targets
UTILISATION OF RESULTS

• Influencing awareness at different levels; decision makers, service providers, private businesses/industry, general population

• Influencing policy; stakeholder dialogue

• Identify targets for policy and service provision

• Development of services
TELE-rATA

- Tele-rATA is a version of rATA adapted to telephone interviewing
- Tele-rATA was developed to enable remote interviewing where physical interviews are not feasible because of, for example, resource constraints, transportation difficulties or communicable diseases
- Tele-rATA is intended for the same stakeholders as rATA
- Most rATA elements are the same for TELE-rATA, but some key differences are:
  - Some changes/reduction in the questionnaire
  - Sampling
  - Team organization and mode of data collection
- See addendums to GDP and rATA enumerator manual for further information on TELE-rATA