

## **Time-to-travel**

### ***Description of tool***

Time-to-travel is a proxy measure of distance. Time-to-travel is one of a set of tools for assessing the impact on program coverage of distance of beneficiaries from program sites. The main advantage of using time to proxy distance is that a time measure generally takes into account factors relevant to travelling such as access to transportation or type of roads to name a few that are not typically considered when just considering the distance between two locations. Two villages may have the same distance from a clinic but if one village has paved roads and with access to transport facilities while the other doesn't, then the time-to-travel for the latter would generally be longer than the former. The limitation of using time to proxy distance is that this data would generally be a self-report by the mother or the caregiver and is prone to either under- or over-estimation. However, as a rough and ready tool to assess effect of distance on coverage, proper analysis of this data will provide useful insight with regard to program coverage.

### ***Data requirements***

Data on time-to-travel can be collected from the outpatient care treatment cards and recorded using a tally sheet. In situations where data on time-to-travel is unavailable or unreported on the beneficiary cards, it can be gathered through a quick survey of carers of current program beneficiaries and program staff and then recorded and tabulated using a tally sheet.

### ***Analysis of data***

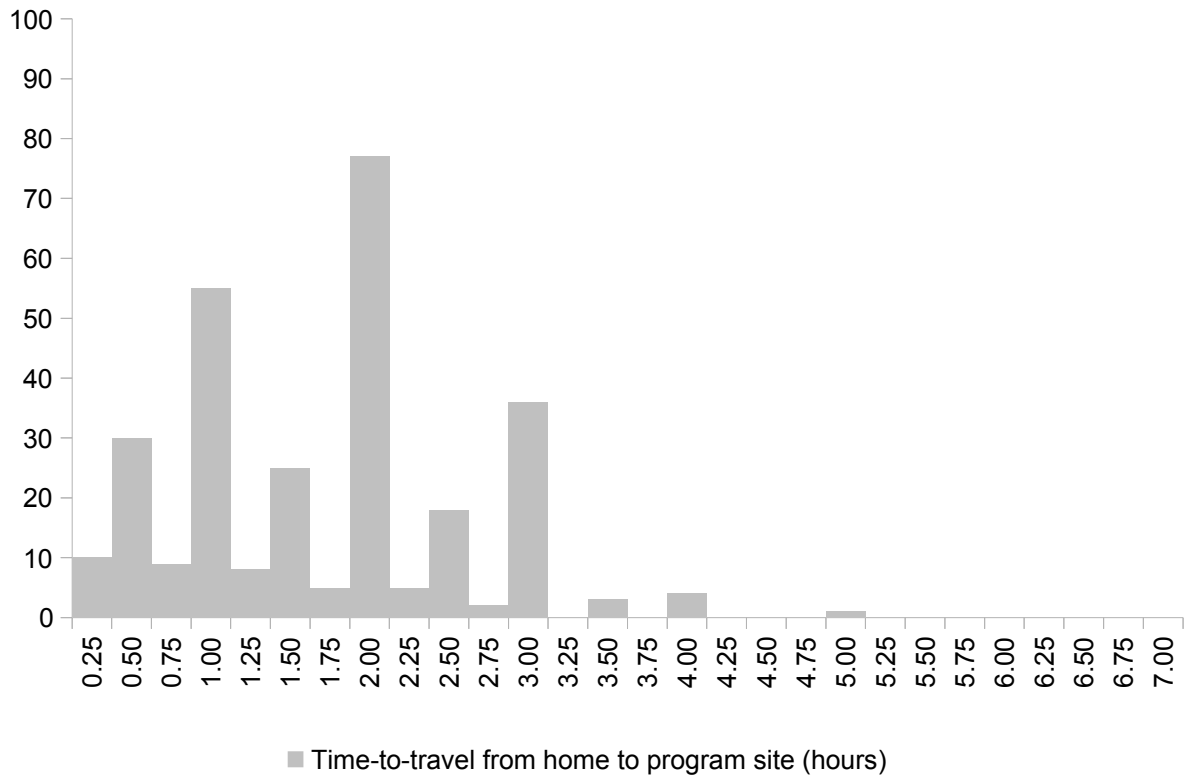
A graphical approach to analysing time-to-travel data is most informative. The tally sheet approach used for the other tools that use bar plots or histogram or Pareto charts to create plots by hand is also applicable to time-to-travel. Time (in either hours or minutes) will take up the first column of the tally sheet and the second column will be for the hash counts. Completion of this tally sheet will produce the bar plot of time-to-travel. These plots can also be made using a spreadsheet or a statistical package and will produce similar plots as those shown in Figure 1 and Figure 2.

It is recommended that separate time-to-travel plots be made for active cases, admissions, formal discharges and defaulters. Figure 1 shows a plot of time-to-travel from home to program site for beneficiaries that were discharged as cured. Figure 2 Shows a plot of time-travel from home to program site for defaulters.

### ***Interpretation***

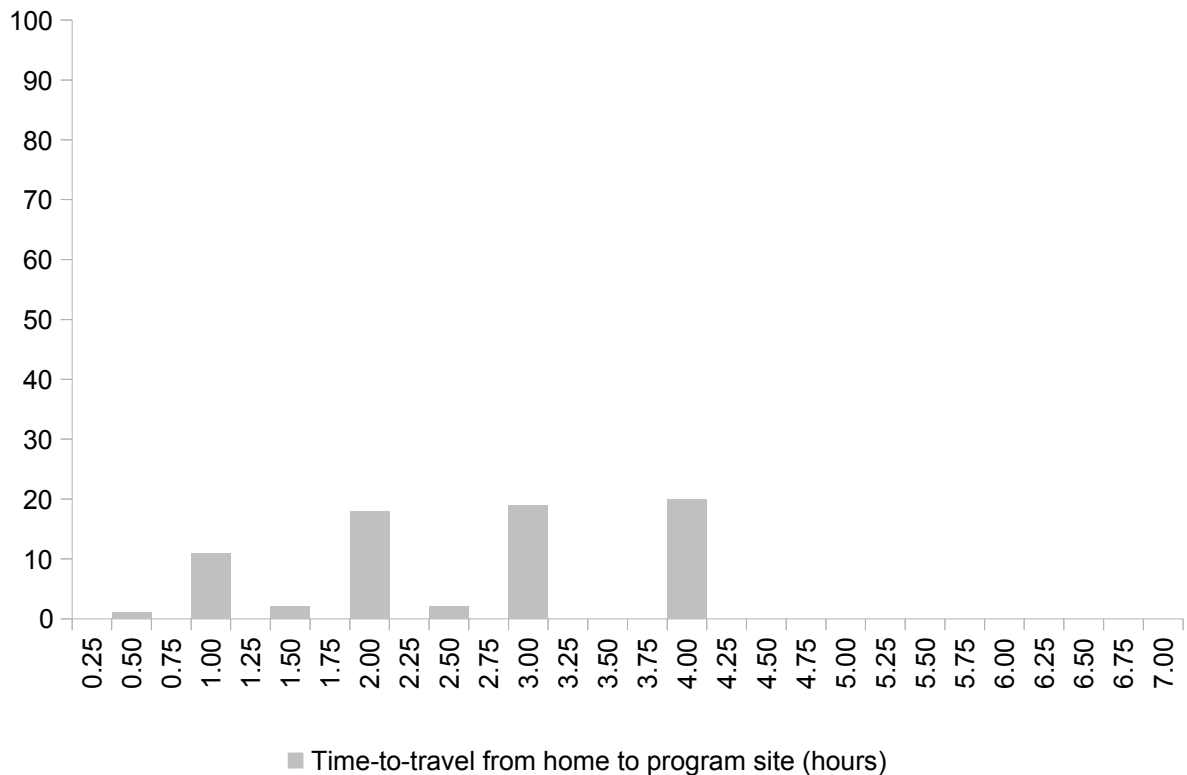
In these examples, defaulters tend to live further away from the program site than patients that were discharged as cured, suggesting that time-to-travel is a possible cause of defaulting in this program. This information should be further investigated, corroborated and triangulated with information from defaulters over time, time-to-default, mapping of beneficiary locations, key informant interviews and case histories of defaulters.

Figure 1: Time-to-travel plots for formal discharges



From FANTA Technical Reference page 34

Figure 2: Time-to-travel plots for defaulters



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