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# CHAPTER TEN

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## USING OTHER DATA SOURCES

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In this chapter we discuss the following: using other sources of data; types of data useful when conducting participatory appraisals; and types of data sources.

### **WHY USE OTHER SOURCES OF DATA?**

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Alternative sources of data can be a good way of complementing information collected through participatory methods. Obtaining data from different sources, observers, and/or through multiple methods is referred to as *triangulation*. Using a combination of data sources such as key informant interviews, focus group discussion, document analysis, and pre-existing data sets, increase the likelihood that the phenomenon under study is being understood from various points of view (Ary, Jacobs et al. 2002).

### **TYPES OF DATA**

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#### **Structural Data**

Structural information describes a population in terms of its *size, geographic distribution, and composition* (Friis and Sellers 1999). Structural information can be collected at both the local and national level. It can be useful to gather such information at both levels in order to make comparisons between community and national averages on selected indicators. This information can also be important in gaining a better understanding of contexts in which specific risk behaviors are occurring.

**Examples of structural types of information include:**

- Education level;
- Male and female literacy levels;
- Income;
- Rural/urban residence;
- Age distribution;
- Ethnicity;
- Religious beliefs.

## **Demographic data**

Demographic data refers to information about a population's *fertility, mortality, and migration* (Friis and Sellers 1999). A population's fertility rate consists of the number of live births, its mortality rate refers to the number of deaths, and migration is movement in and out of an area. Demographic information can be useful in identifying key characteristics of a community and assists in formulating a more targeted response to the AIDS epidemic.

## **Social Behavior Data**

In many countries there already exist studies that have been conducted by governmental agencies, academic institutions and/or NGOs that examine attitudes and behaviors relating to HIV/AIDS, sexuality, religious and cultural practices, and gender dynamics. In conducting a community appraisal, such information can be useful in identifying groups of people who are vulnerable to infection with the HIV virus or who are affected by it (Beaulieu 1992).

**Examples of social behavior information include:**

- Knowledge attitudes and behavior (KAP/B) studies
- IEC/BCC interventions
- National Behavioral Surveillance Data
- Crime rates
- Family instability indicators
- Alcohol and drug abuse rates
- Condom use rates
- Financial vulnerability data

## **HIV/AIDS Surveillance Data**

Surveillance data can help to identify what is known about patterns of infection and disease trends in a population (Beaulieu 1992). At national levels, ministries of health usually compile such information and organizations such as the U.S. Census Bureau, the World Health Organization, and UNAIDS also have both primary and secondary sources of surveillance data. At the local and community level blood banks and Voluntary Counseling and Treatment (VCT) centers may serve as primary data sources.

## **Health Statistics Data**

Health statistics provide information about the well-being of people. Types of health statistics of interest when conducting a participatory appraisal include morbidity or sickness rates due to HIV/AIDS and/or opportunistic infection such as tuberculosis (TB). Burden of disease and life expectancy loss due to various types of illnesses is also a useful indicator of a community's well-being. At national levels, both primary and secondary sources of such information can be obtained from Ministries of Health and Labor as well as from international organizations such The World Health Organization and The World Bank. At the local and community levels, such information can be obtained from local hospitals, health centers, and morbidity surveys conducted by local organizations or health authorities.

## **TYPES OF DATA SOURCES**

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There are two types of data sources - **primary** and **secondary**. The term primary data source refers to original documents, records, and data that have been directly collected by the researcher and are in their raw form (that is, no analysis has occurred). Examples of primary data sources are death certificates, hospital records, diaries, and survey data. Secondary data on the other hand are data that have been altered in some way such as through synthesis and/or analysis. Examples of secondary data sources include project and research reports, books, and newspaper articles.

## **ONLINE PRIMARY AND SECONDARY DATA SOURCES**

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### **Online Primary Data Sources:**

The International Data Base (IDB) is a source of demographic and socio-economic statistics for 227 countries and areas of the world. The major types of data available in the IDB include:

- Population by age and sex
- Vital rates, infant mortality, and life tables
- Fertility and child survivorship
- Migration
- Marital Status
- Family planning
- Ethnicity, religion, and language
- Literacy
- Labor force, employment, and income

**Website:** U.S. Census Bureau, International Data Base (IDB):

<http://www.census.gov/ipc/www/idbnew.html>

WHO Statistical Information System is a guide to health and health-related epidemiological and statistical information available from the World Health Organization. Most WHO technical programs make statistical information available and they are linked from this site. You also have the possibility to search for statistics by region, country, or topic. Types of statistics available on this site include:

- Disease statistics
- Population statistics
- Maternal Mortality
- HIV/AIDS statistics
- Immunization statistics
- Global Alcohol Database

**Website:** World Health Organization: WHO Statistical Information System (WHOIS): <http://www3.who.int/whosis/menu.cfm>

The Demographic and Health Surveys are nationally representative household surveys from several countries that contain information on health, population, and nutrition. Up to seven data sets may exist for each country. The standard Demographic and Health Survey includes questionnaires for households and women, although additional modules cover specialized topics. While this USAID-funded project is tailored to providing information for monitoring and evaluation purposes, the data are also useful for assessment and/or appraisals. Users can examine in-country trends for specific indicators or compare indicators regionally or across countries. Online instructions are available in English and French.

**Website: Demographic and Health Surveys (DHS):** [www.measuredhs.com](http://www.measuredhs.com)

### **Online Secondary Data Sources:**

- **Reports from International Organizations:** Many international organizations such as UN Agencies and non-profit development and health organizations release annual reports of global, regional, and national HIV/AIDS-related behavioral and epidemiological trends. Below are a list of annual reports from international organizations that could provide useful synthesis and analysis regarding this disease.
- **Program or Project Reports:** There is a possibility that a project has been carried out in your region or community that touches upon similar themes to your own project or interest. Project Reports can be a good source of secondary data.
- **Academic studies or research reports:** Past academic and research study reports can be very useful in obtaining pre-existing findings on selected topics.