

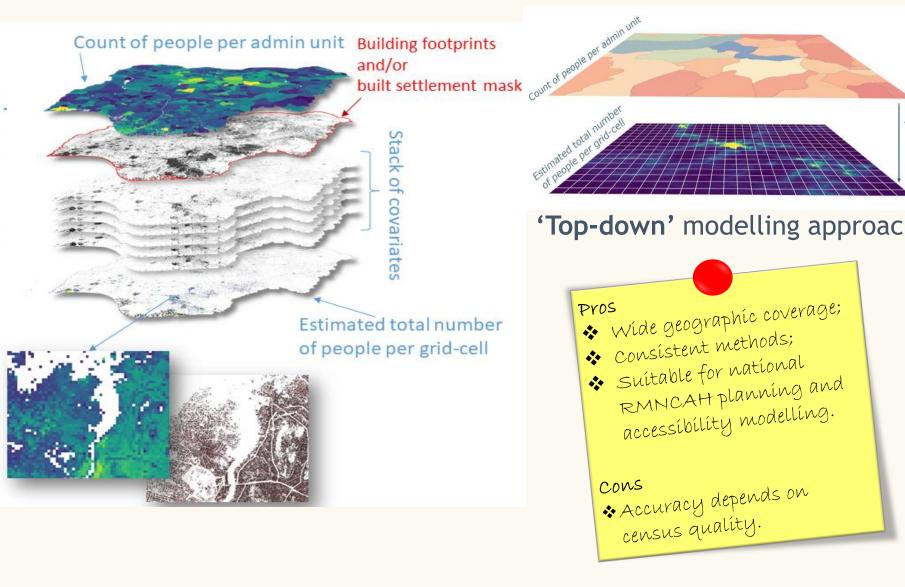
Using WorldPop Population data to strengthen Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) planning and outcomes

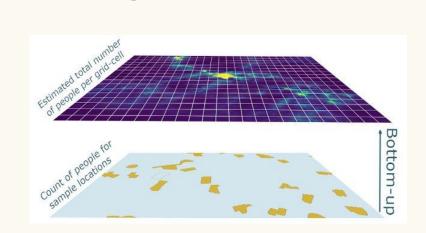


GRIDDED POPULATION ESTIMATES

WorldPop's gridded population estimates are produced from the harmonisation of sub-national census-based or official population projection data, administrative boundaries, built settlement growth data, and covariates, aligned to a base grid, at approximately 100m at the equator.

These are either constrained to built settlements or unconstrained using two broad modelling approaches: 'Top-down' disaggregation and 'Bottom-up' estimation.

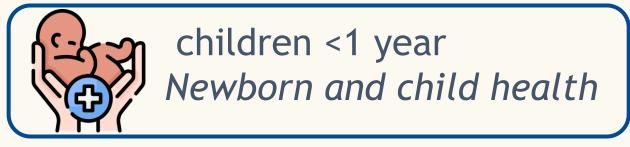




Selecting the right population data and further modelling approach differences are explained in the resources linked via these QR codes:

What population estimates are available?

- Population counts obtained via https://bit.ly/Wpopcounts;
- 2015 estimates of numbers of pregnancies and numbers of live births per grid square.
- Age and sex structures available for 2000-2020 and 2015-2030 and adjusted to United Nations population projections, accessed via https://bit.ly/ageAndSex. These are also available for specific RMNCAH groups, such as:





children <5, <10 years Adolescent health



females of reproductive age (15-49 years) Reproductive and maternal health

Creating Custom Population Layers with Tools and Plugins

Small-area population estimates can be generated by users for enumeration areas, catchments, or any administrative unit. WorldPop provides several tools and plugins that make this possible, including:

- QGIS pypopRF plugin a simple interface for creating population within QGIS.
- popRF (R package) an R framework for producing high-resolution population estimates using Random Forest models.
- peanutButter (R package and Web Application) tools for extracting, summarising, and aggregating gridded population data, including a user-friendly, no-code interface for generating custom population estimates.

Scan the QR codes to access tutorials on producing estimates for census enumeration areas (EAs), administrative units, health catchments, and grid-cell-level estimates using both R and the QGIS pypopRF plugin.







DID YOU KNOW?

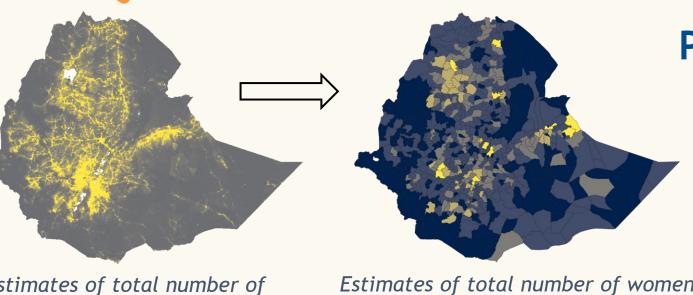
Free: All WorldPop datasets are open access, free, no registration required; Flexible: Custom small-area estimates can be generated for any country or

Easy: No coding required if using the peanutButter web app or QGIS pypopRF plugin;

Ready to use: Outputs can be analysed in any GIS software or RMNCAH planning tool.

WHY DO THESE MATTER FOR RMNCAH?

All population data are available at the grid/pixel level and can be aggregated to any administrative level, census enumeration area, catchment area or any preferred boundaries.



Population Data Use Cases for RMNCAH

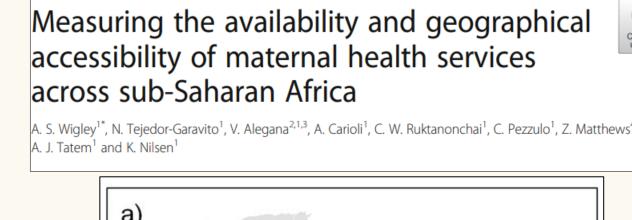
This flexibility allows RMNCAH programs to identify underserved areas, calculate accurate population counts, estimate coverage and plan interventions at the level where decisions should be made. These analyses include:

Enhanced accessibility and equity analysis:

of child-bearing age (15 - 49 years old)

per district in 2015 for Ethiopia

(source: GADM)



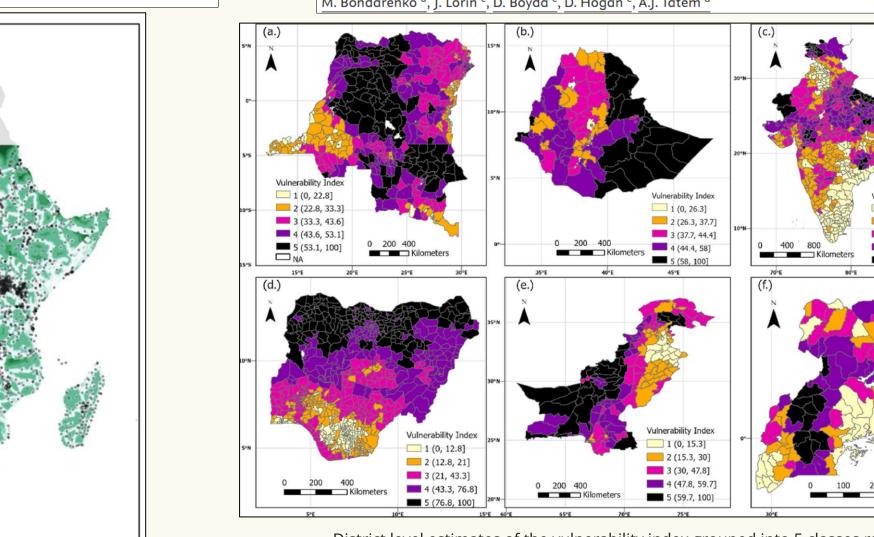
women of child-bearing age (15

49 years old) per grid square in

2015 for Ethiopia

A zero-dose vulnerability index for equity assessment and spatial prioritization in lowand middle-income countries

C.E. Utazi ^{a b} $\stackrel{\triangle}{\sim}$ $\stackrel{\boxtimes}{\bowtie}$, H.M.T. Chan ^b, I. Olowe ^a, A. Wigley ^a, N. Tejedor-Garavito ^a, A. Cunningham ^a,



Geospatial Analyses of Recent Household Surveys to Assess Changes

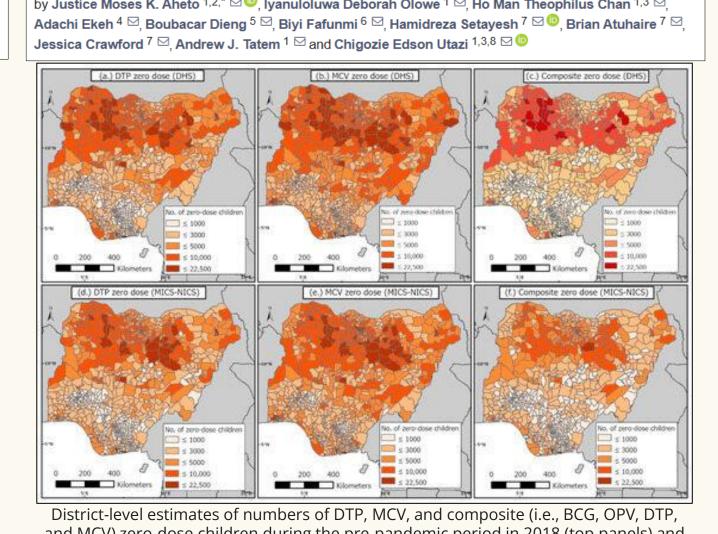
in the Distribution of Zero-Dose Children and Their Associated Factors

before and during the COVID-19 Pandemic in Nigeria

Estimating RMNCAH indicators at sub-national levels:

A review of geospatial methods for population estimation and their use constructing reproductive, maternal, newborn, child and adolescent health service indicators

Map showing travel-time to the nearest hospital in Sub-Saharan Africa



Geospatial Variation in Vaccination Coverage and Zero-Dose Prevalence

at the District, Ward and Health Facility Levels Before and After a

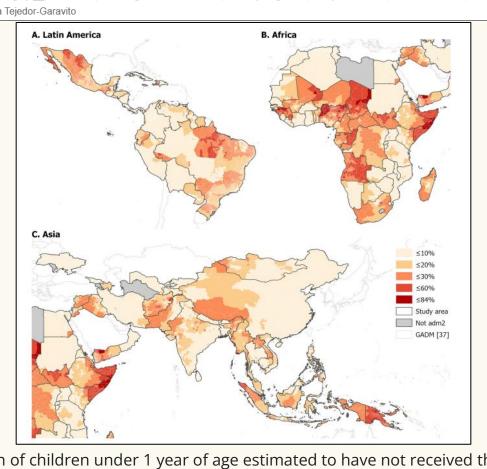
Measles Vaccination Campaign in Nigeria

District-level DTP3 and MCV1 vaccination coverage in Zambia, calculated using DHMIS

vaccinated children:

Identifying underserved and high-need population such as zero-dose or under-

Estimates of the number and distribution of zero-dose and under-immunised children across remote-rural, urban, and conflict-affected settings in low and middle-income

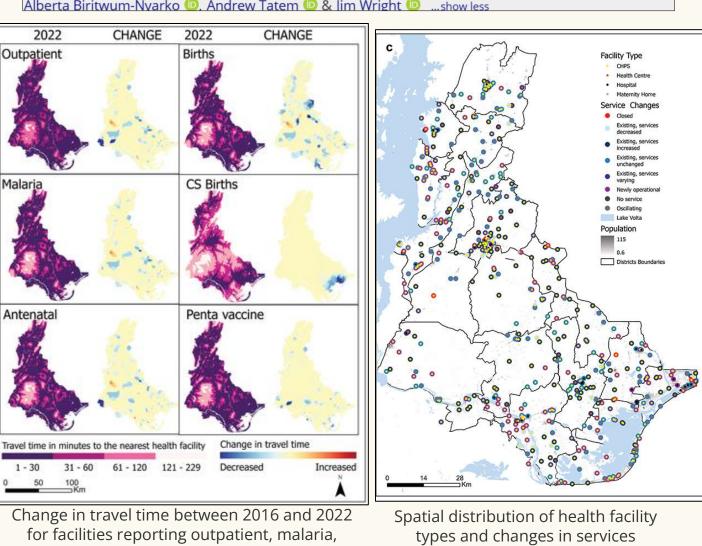


dose of the DTP vaccine in 2019 at GADM administrative level 2 [31, 37] for Latin America (A), Africa (B), and Asia (C).

by C. Edson Utazi ^{1,2,*} ⊠ 🌔, Iyanuloluwa D. Olowe ¹ ⊠ 🜔, H. M. Theophilus Chan ³ ⊠,

Improved health service delivery across catchment areas:

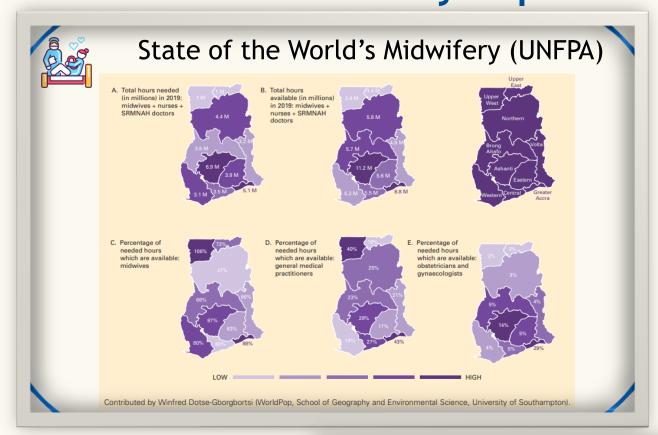
Spatio-temporal patterns of health service delivery and access to maternal, child, and outpatient healthcare in Volta region, Ghana: a repeated crosssectional ecological study using health facility data Winfred Dotse-Gborgbortsi 🔀 🗓, Kristine Nilsen 🗓, Ortis Yankey 📵, Anthony Ofosu 🗓

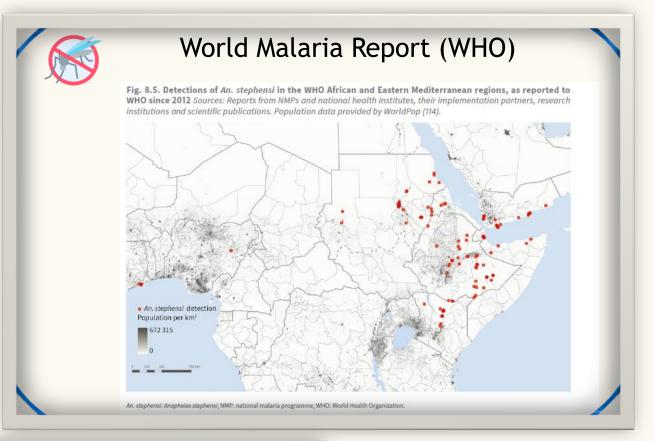


Delineating natural catchment health districts with routinely collected health data from women's travel to give birth in Ghana

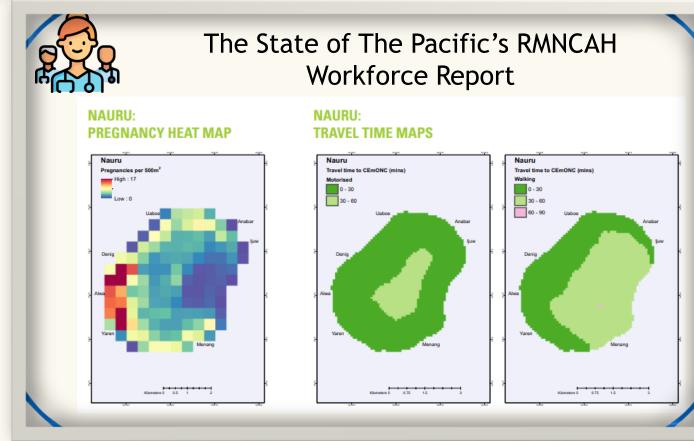
WORLDPOP POPULATION DATA IN RMNCAH POLICY MAKING

Used in Global Policy Reports

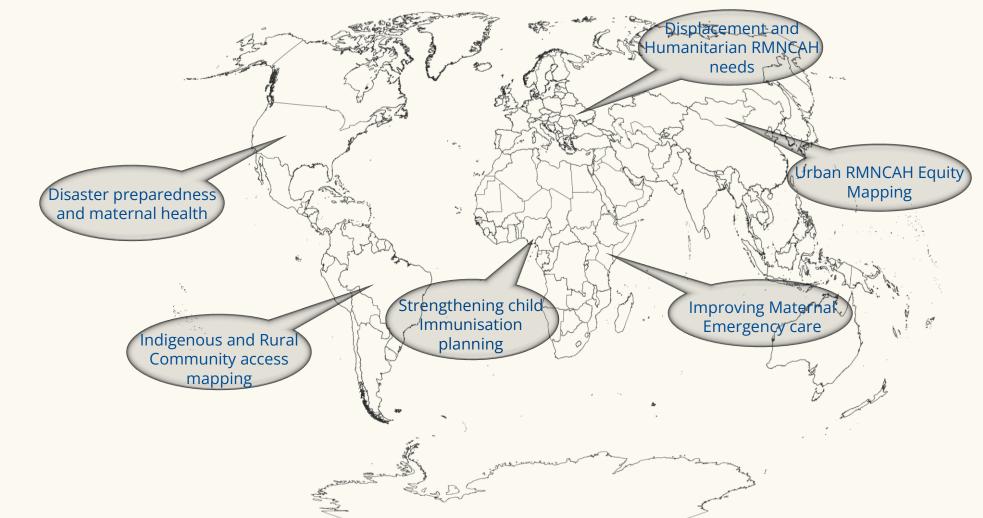




resource availability to provide birthing care in Ghana



Policy Uses Across Regions and Countries





When countries leverage high-resolution population, such as WorldPop data, RMNCAH policies can be made more precise, equitable, and effective, enabling better targeting of resources, improved planning, and more informed decision-making.

Acknowledgement

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