Strengthening Civil Registration and Vital Statistics Systems (CRVS) through Innovations in the Health Sector

Geneva, 17-18 December 2013
CRVS: the situation

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• registers births and deaths
• issues birth and death certificates
• compiles and disseminates vital statistics

Provides:
• essential documentation on legal identity and family relationships for individuals
• generates vital statistics on population, fertility and mortality.
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**SITUATION**
- Most low- and lower middle income countries do not have well-functioning CRVS
- One-third of births not registered
- Two-thirds of deaths not registered
- Limited progress in the past three decades
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**ACTION**

- Political declarations
- Governments beginning to invest more
- UN agencies and partners advocate & TA
- Regional bodies mobilize and invest
- Innovation through IT explored in many countries and projects
CRVS: key components of strengthening process

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**COMPONENTS**
- Political commitment
- Coordination (national steering committee)
- Plan
- Implementation and innovation
The links between CRVS and health

THE LINKS

Provider:
- Notification and confirmation of births and deaths
- Causes of death

Benefactor:
- Improve health programs - individuals
- Population health & vital statistics
Health Sector
Drive for Results

• Major pressure to show results

• Tendency to find short-term solutions to improve programs and to obtain data on results

• High expectations from innovative investments (especially IT)

• Must find ways in which the health investments and innovations can be used to strengthen CRVS
MNCH tracking
- Birth notification
- Immunization
- Maternal death surveillance (MDSR)
- Child death notification

Mortality and causes of death registration
- ICD-10 use & hospitals
- Verbal autopsy

Vital statistics
- Local/sample registration
- Analytical methods

CRVS system strengthening
- Political mobilization and commitment
- National steering committee
  - multisectoral coordination
- Improvement strategy
  - Assessment
  - National plan
  - Business process & architecture
- Implementation support
  - Innovative approaches
  - Increase coverage
  - Improve quality
  - Partner alignment

Good practices in health sector contributing to CRVS strengthening
Health sector good practices - examples

General CRVS strengthening process

• Advocacy
  ➢ E.g. play a role in the political mobilization for CRVS

• National engagement
  ➢ E.g. participate in national CRVS steering committee

• Capacity strengthening
  ➢ E.g. Support health workers and medical professionals in understanding their roles and responsibilities in the notification of vital events

• Innovations
  ➢ Use innovations developed to facilitate identification of births and deaths as part of a cohesive CRVS system overall rather than as isolated projects
Health sector good practices - examples

MNCH

• In health facilities
  ➢ E.g. Promoting mechanisms to ensure that all births that occur in health facilities are formally recorded in the health system and notified to the civil registration authorities securely and confidentially.
  ➢ Using childhood immunization services, as well as other child or family services, as occasions to promote and encourage families to register hitherto unregistered children.

• In communities
  ➢ E.g. Supporting community health workers to record all deaths occurring in their communities and to notify registration authorities accordingly.
  ➢ E.g. Developing appropriate and innovative methods for community health workers to record births and deaths such as mobile telephones and instant messaging (SMS), using secure systems to ensure confidentiality and privacy of data.
Health sector good practices - examples

Causes of death

• Medical certification
  ➢ E.g. Ensuring use of the international form of medical certification of cause of death for all deaths that occur in health facilities with appropriately trained medical staff.
  ➢ E.g. Promoting the use of IT to improve the quality and timeliness of coding of causes of death according to ICD standards, such as automated coding.
  ➢ E.g. Developing web-based electronic reporting systems of mortality and causes of death in hospitals.

• Verbal autopsy
  ➢ E.g. Supporting the scale up of verbal autopsy to estimate population level cause of death for deaths occurring outside health care facilities;
  ➢ E.g. Promoting innovative approaches for the registration of all deaths and use of verbal autopsy in communities, e.g. using CHWs, linked to the CRVS;
Health sector good practices - examples

Vital statistics

• **Capacity strengthening**
  ➢ E.g. Harnessing the skills developed in surveillance sites and sample registration systems to strengthen CRVS processes and build capacities for birth and death registration and cause of death ascertainment.

• **Data quality**
  ➢ Developing techniques and tools for analyses of data from multiple sources to obtain reliable fertility and cause-specific mortality trends.
Objectives & outcome

Objectives

• Share the evidence and potential of health sector innovations as they contribute to CRVS strengthening in countries;

• Agree upon common strategy to maximize the benefits of health sector investments for CRVS strengthening.

Outcome

• List of good practices for the health sector to maximize the benefits of its investments for strengthening CRVS

Agenda