Brief overview of death registration data availability based on international reporting to WHO

Colin Mathers

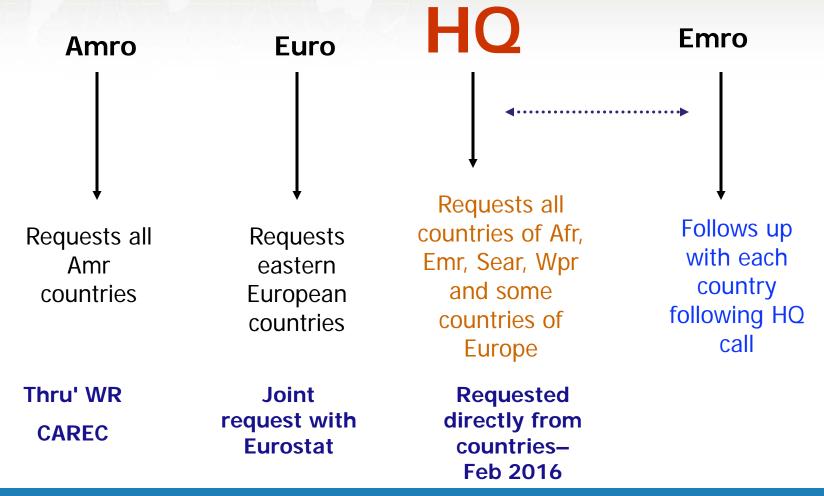
UN EGM on completeness and quality of vital statistics from civil registration, Nov. 2016



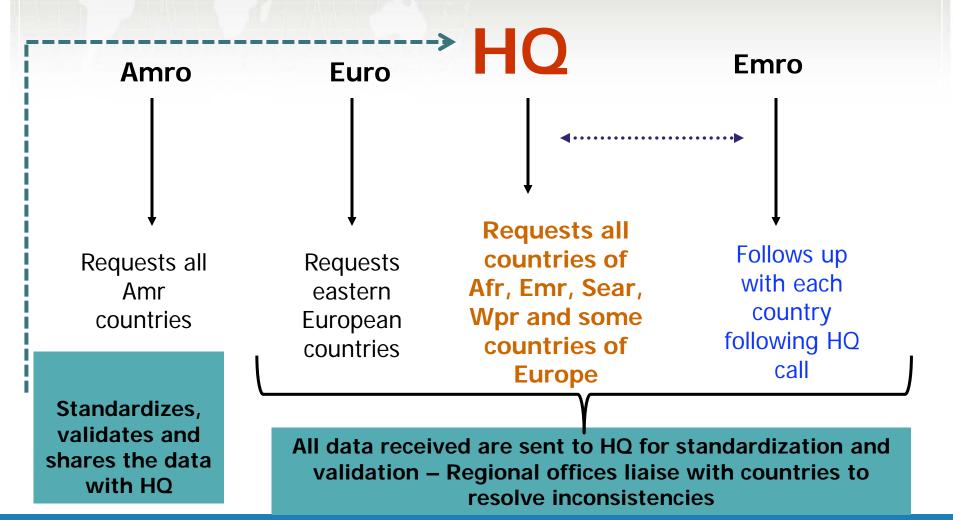




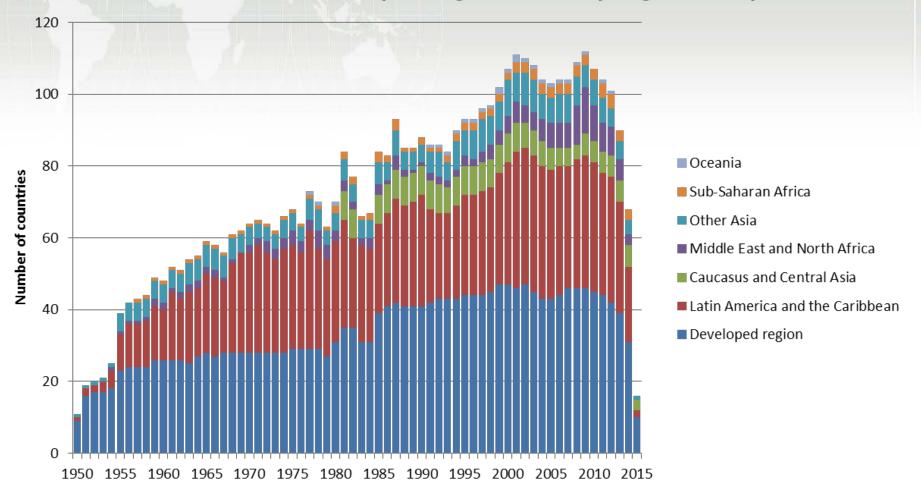
Mechanism for cause-of-death data collection



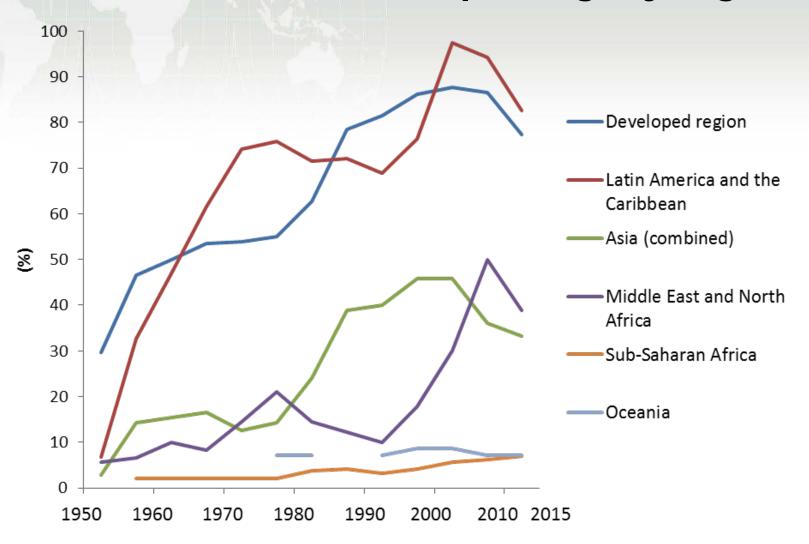
Mechanism for cause-of-death data standardization and validation



Number of countries reporting to WHO, by region and year



Per cent of countries reporting, by region





Data comparability issues

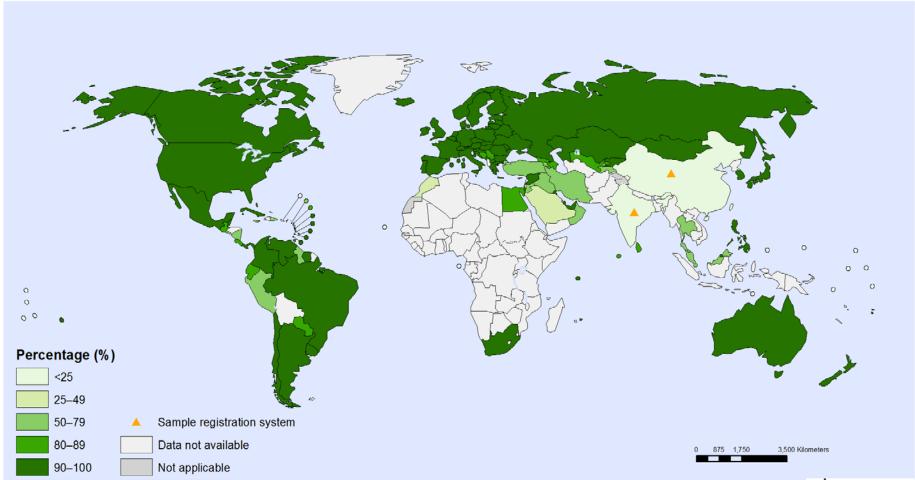
- Preference: data by year of occurrence, but unclear when data are received
- Not always clear if data are for residents or citizens or include non-residents
- Total deaths from CoD data are in most cases subsets of the total deaths from population registers. E.g. Israel, Iran
- Very few countries align the total number of deaths in their CoD data set with the number from population registers
- Some countries provide population data, but not usually consistent updated time-series, or compatible with UN population estimates
- Because of confidentiality issues, some countries are unwilling to share the data by 5-year age-group
- Reporting age format mostly 5 year age groups to 95+ or 85+ but some variation in final age group (65, 75) and some 10 year age group data

Country data issues

- Cyprus: data for government-controlled areas
- Palestine: data for West Bank only
- Georgia: exclude Abkhazia and South Osetia
- Moldova: exclude Transnitria and Bender
- Russian Fed: exclude Chechenya (1993-2003)
 but include Chechenya as from 2004
- Serbia: exclude Kosovo-Metohija province
- Ukraine: exclude non-government controlled areas as from 2014



Civil registration coverage of cause of death (%), 2005-2011



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Data Source: World Health Organization Map Production: Public Health Information and Geographic Information Systems (GIS) World Health Organization



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Data availability for all-cause mortality

Available recent data (since 2005)	Number of WHO Member States ^a	Percentage of global deaths in 2015	Methods
Death-registration data with completeness >=90%	59	28	Observed death rates
Incomplete death- registration data	38	25	Adjusted death rates
Other population- representative data on age-specific mortality	21	25	Estimated death rates and model life table systems
Data on child (under 5 years) and adult (15–59 years) mortality only	48	12	Estimated death rates and model life table systems
Data on child mortality only	59	10	Model life table systems
No recent data	1	<1	Projected from data for years before 2005

a With population above 90 000 in 2015.



b Total deaths that occur in the countries with data, not total registered deaths

Improved coverage in countries

South Africa: ~ 50% in 1990s ~ 90% in 2014

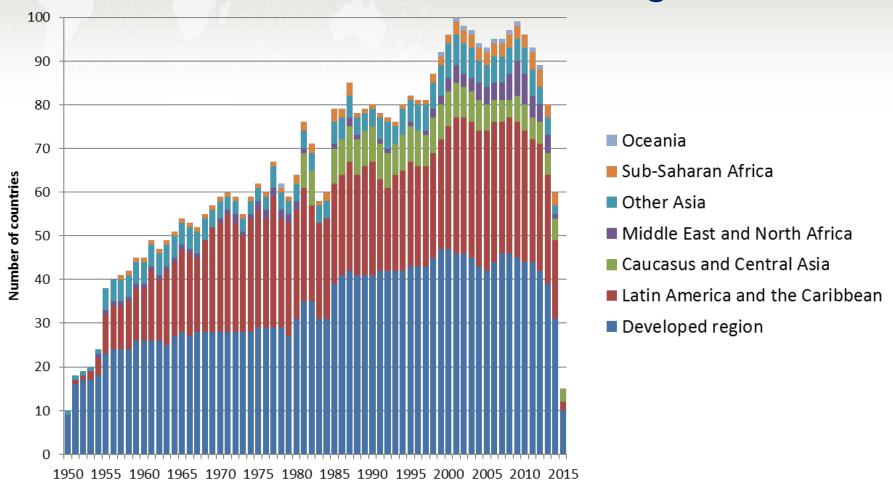
Turkey: ~ 50% in 2007 → ~ 85% in 2013

Iran: ~ 40% in 2001 → ~ 70% in 2014

China: ~ 9% in 2000 → ? >50% in 2015



SDG Indicator 17.19.2 Proportion of countries that have achieved 80% death registration



Momentum for Improvement in VR systems

- Ministerial commitments Africa, Asia,
 Pacific, Latin Americas, Middle East
- Global Commitments SDGs, G7 Health Ministers,
- Global Health
 - WHO (Global Strategy for Women's and Children's Health, CoIA, African Technical Strategy for Improving Mortality Statistics)
 - Canada and the World Bank (Global Financing Facility)
 - Health Partnerships for Countries WHO working with Global Fund, UNICEF, CDC, Bloomberg, Regional Partnerships



Ministerial Statement: African Ministers responsible for Civil Registration, Republic of Côte d'Ivoire, 12 and 13 February 2015

-Recognizing that the Ebola epidemic has shown that the need for death registration and real time cause-of-death information is no longer optional but critical;
-Realizing the centrality of civil registration based vital statistics in providing data to inform health....
-Appreciating the increased and continuing involvement of the African Ministers of Health in improving registration of births and deaths, including the collection of information on cause-of-death;
-Underscoring the important role of the health sector in the delivery of civil registration services to ensure a coordinated and integrated approach in addressing the challenges of improving CRVS systems in Africa;
-Call upon WHO, in collaboration with Pan African Organizations and other partners, to
- intensify their efforts in developing real time death registration and causes of death information systems at country level.

