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Birth Register and Statistics. A big challenge for the Pan American Health Organization (PAHO)

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Congreso Mundial de Epidemiología.

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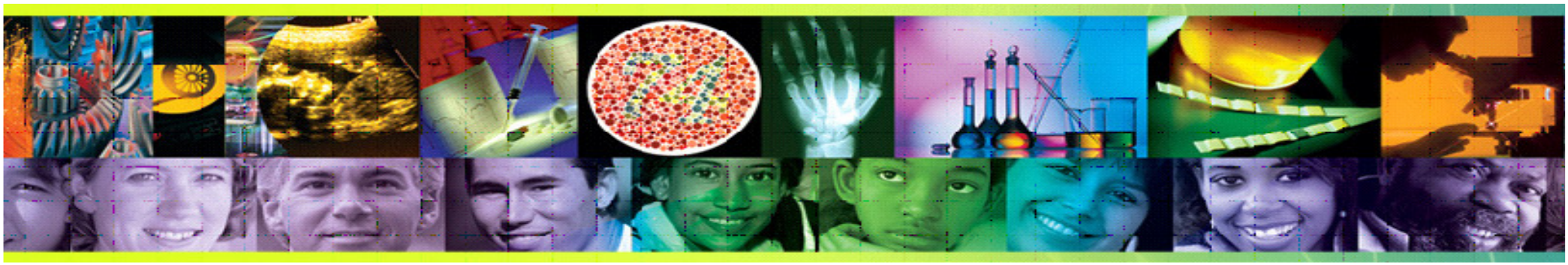

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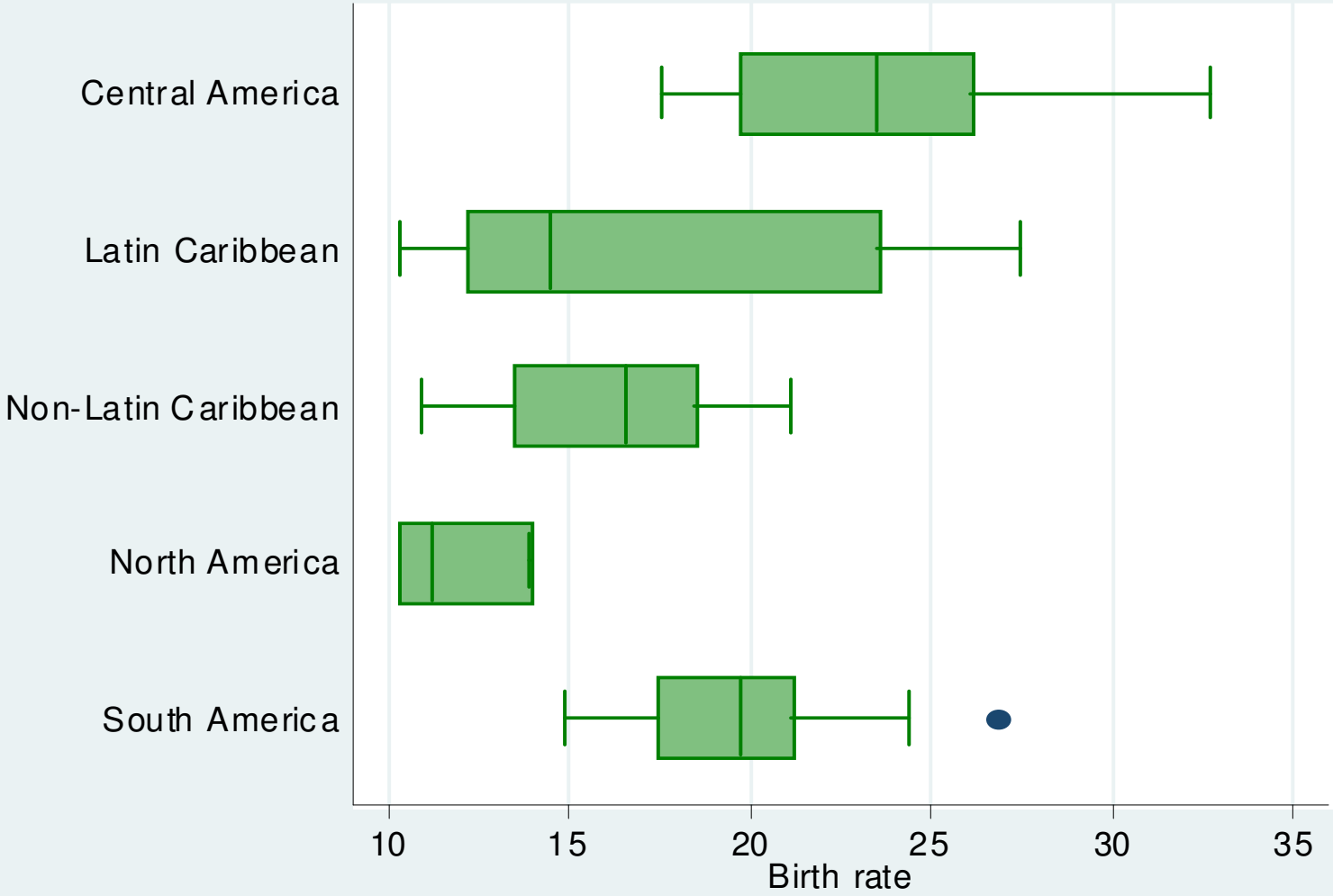
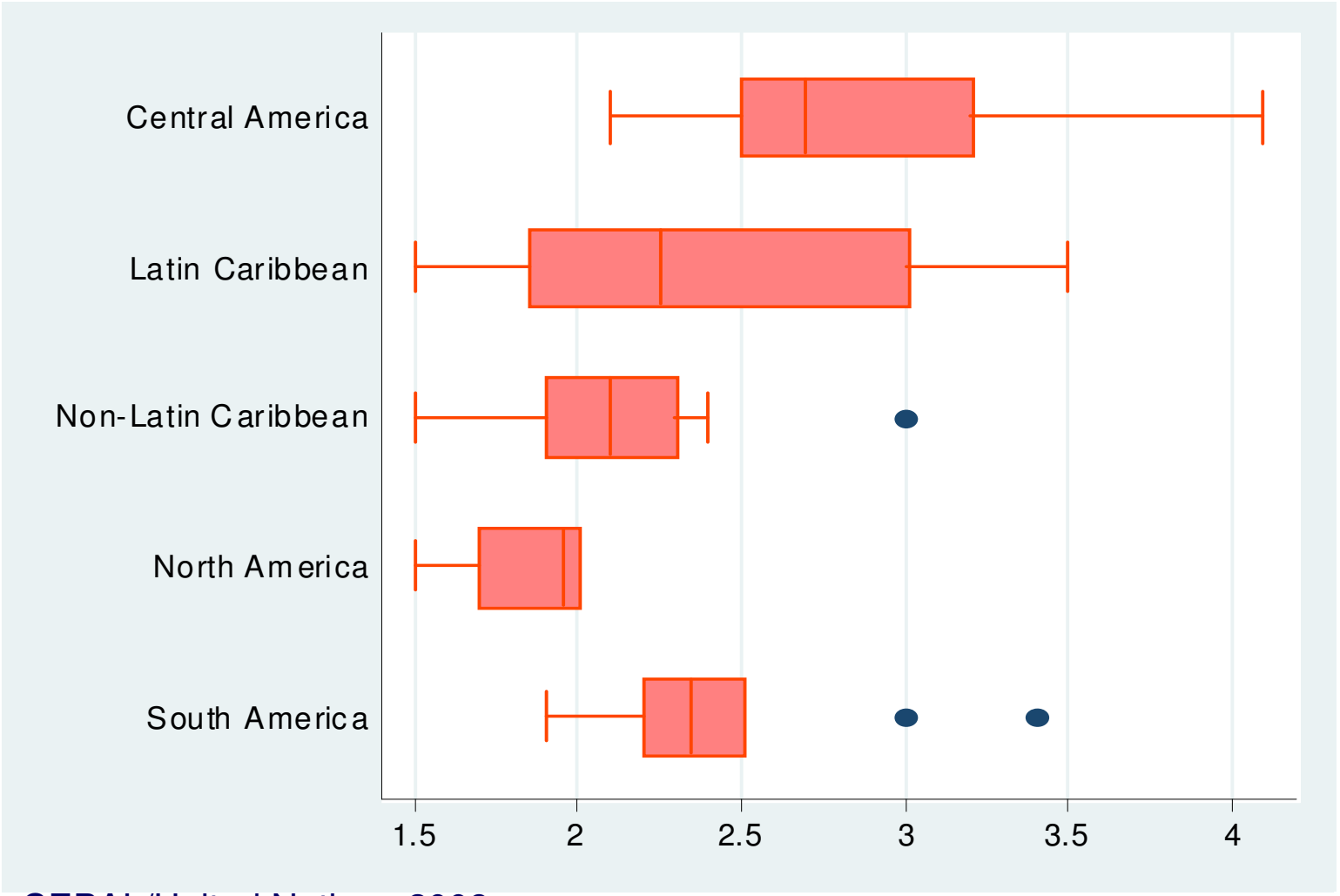
Crude Birth Rate AMERICAS and Sub Regions 2008



Source: CEPAL/United Nations 2008

Fertility Rate AMERICAS and Sub Regions 2008



Source: CEPAL/United Nations 2008

Vital and Health Statistics Situation

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- ✓ **2004-2005**

  Project started – evaluation of vital statistics information

  .

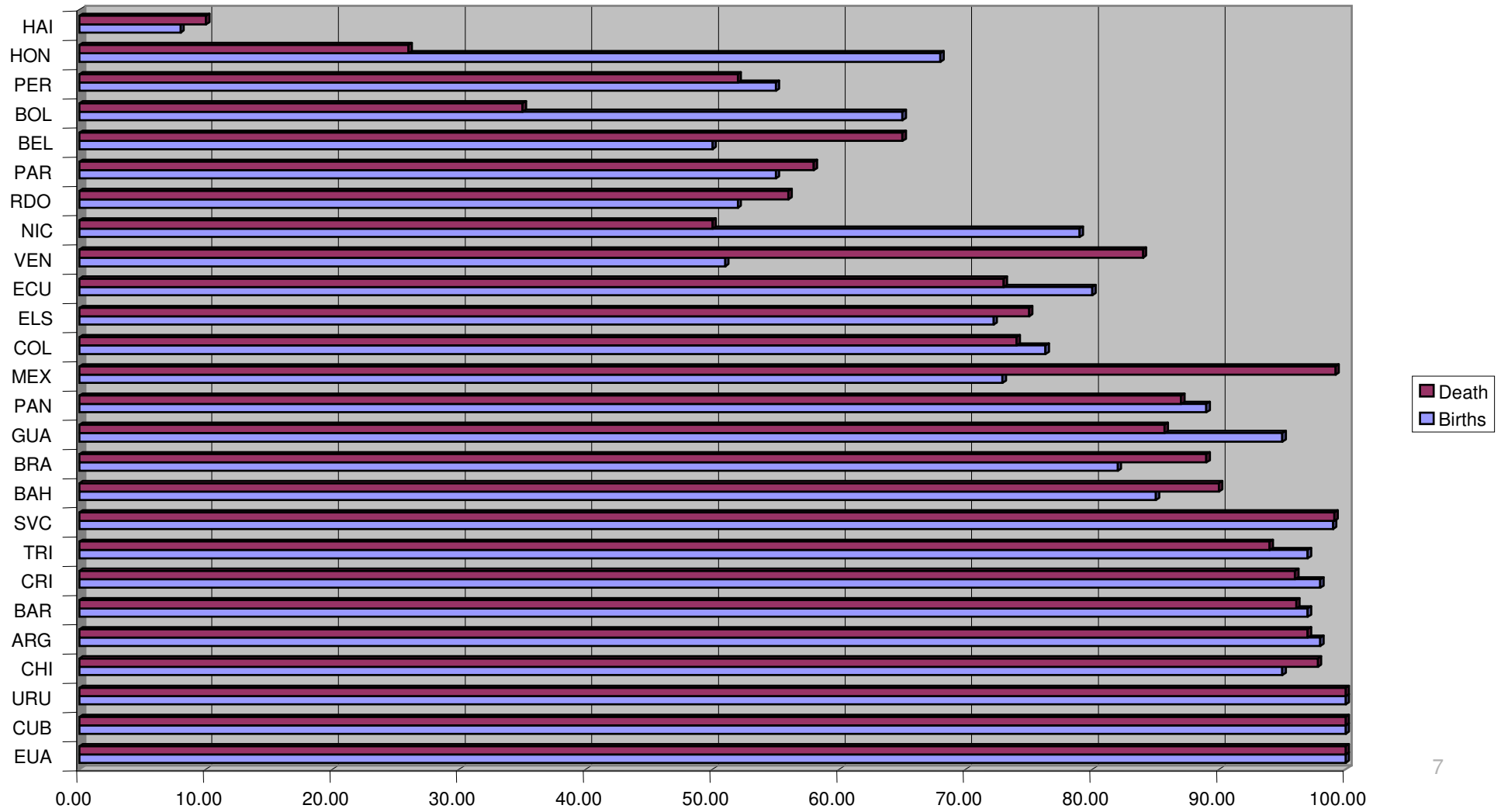
- ✓ **2005**

  - **A preliminary report was presented**
  - **A database was consolidated, and a REGIONAL REPORT was issued identifying strengths and weaknesses in the production of countries statistics.**
  - **The report also identified differences among countries to facilitate the design of a plan of action, both national and international in scope, that, respecting national differences and needs, would strengthen capacity in the management, operation, and maintenance of health information systems.**

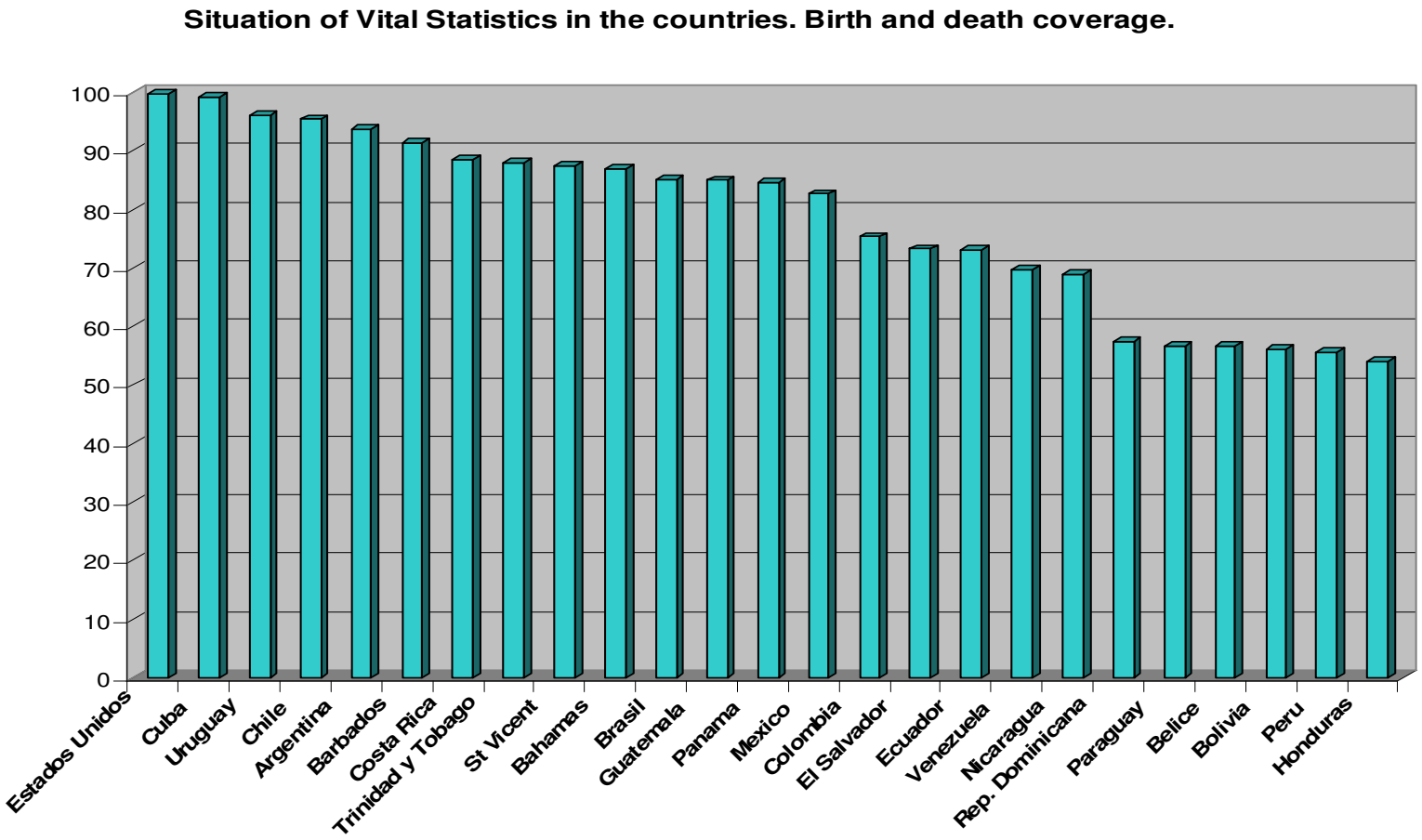
Regional Situation

- ✓ The Regional Report lists the countries according to their vital and health statistics situation, revealing wide disparities among countries and even within them.
- ✓ This findings make it possible to pinpoint the areas requiring greater attention and targeting (at geographical and sectoral level, in processes associated with health care, vital records systems, etc.).
- ✓ Coverage. Situation was relatively better in 7 of 26 countries, which exhibited broad coverage (over 85%) throughout their national territory. Al the other extreme, however, 7 countries recorded barely 50% of these events. This means: only one out of every two births or deaths are recorded (under recording affects special groups of population).
- ✓ Quality. Affects the countries in a more homogeneous manner, specially at the local level. Lack of information on the mother's age, the child's birth weight, the place of residence, the socioeconomics characteristics of people involved in events, the attribution of ill-defined cause of death or failure to state the cause make it difficult for the countries to know the true levels of risk and burden of disease or to determine the epidemiogical profiles of mortality.

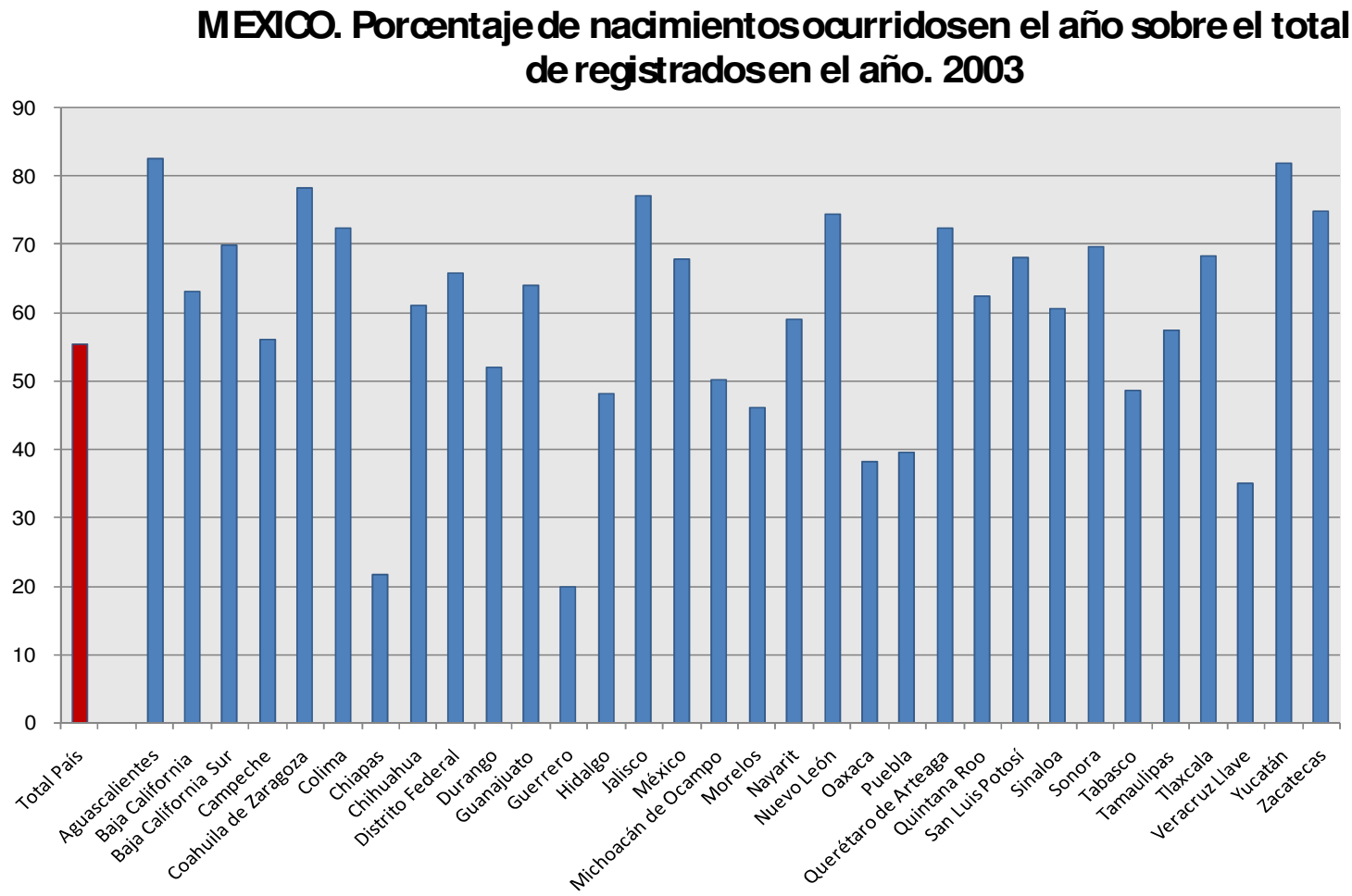
1. COVERAGE. Births and deaths. 2005 (c)



2. Regional Situation. Births and Deaths coverage. 2005 (c)

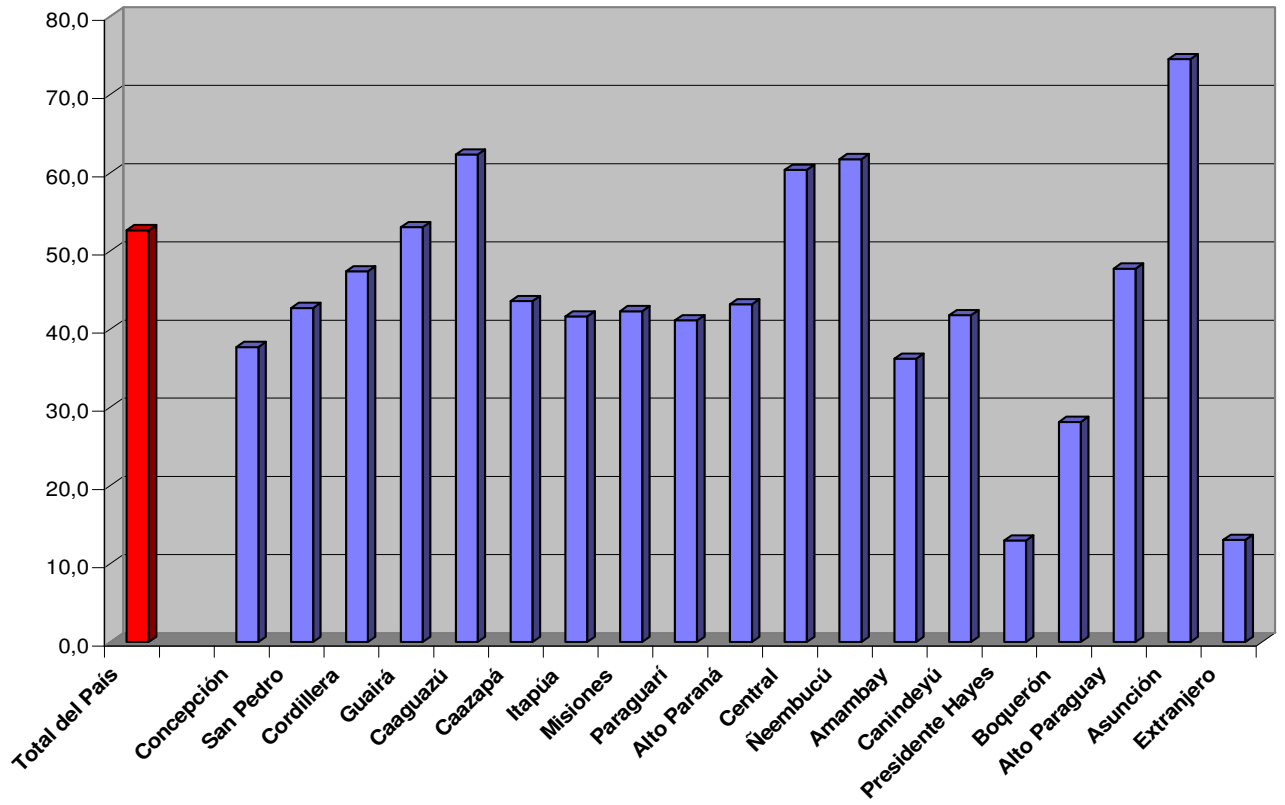


3. COVERAGE. MEXICO. Births. Occurred vs. Registered. 2005 (c)



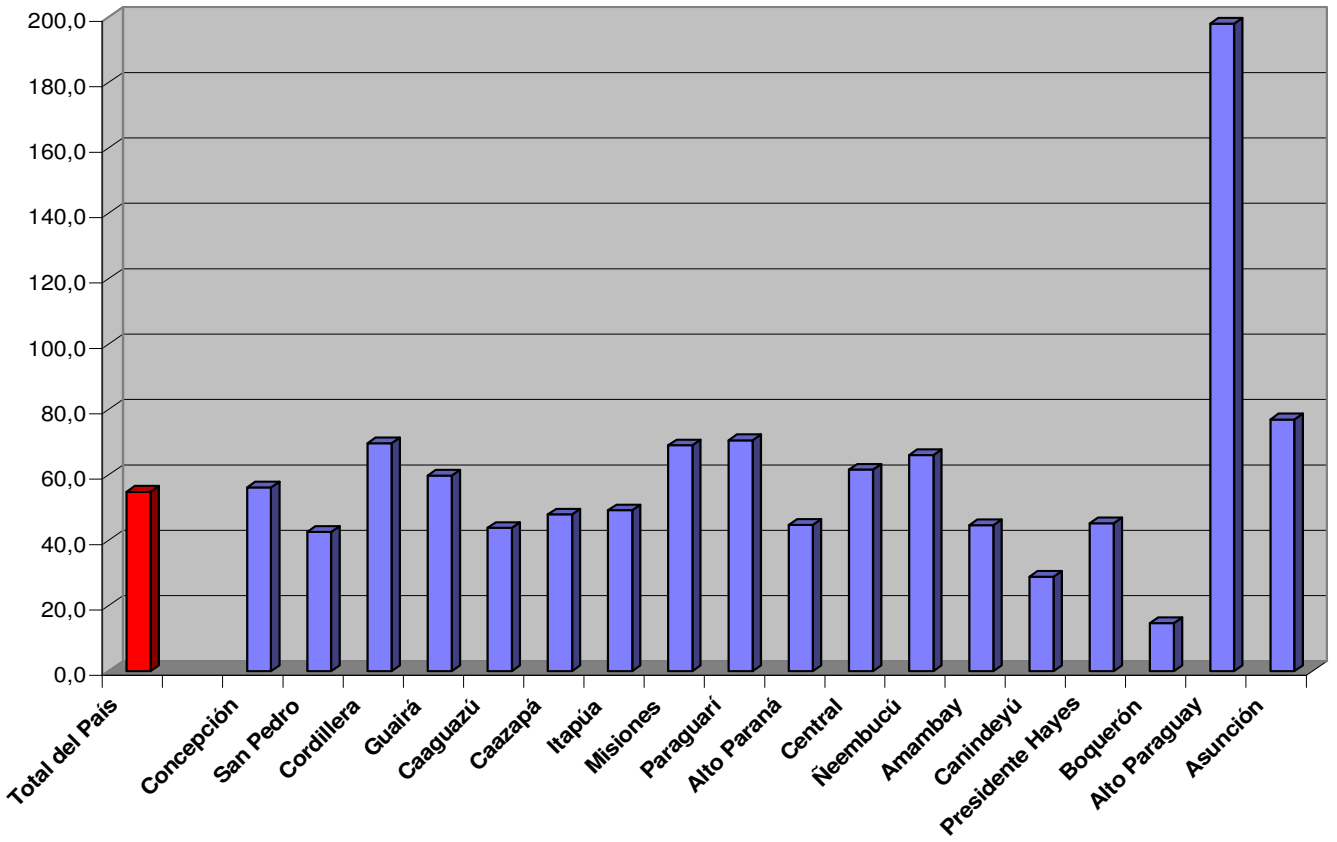
4. COVERAGE. PARAGUAY. Births. Differences between sources (MOH,VR). 2005 (c)

Gráfico 2
Nacimientos. Diferencias debidas a la transmisión (salud y registro civil). 2005.

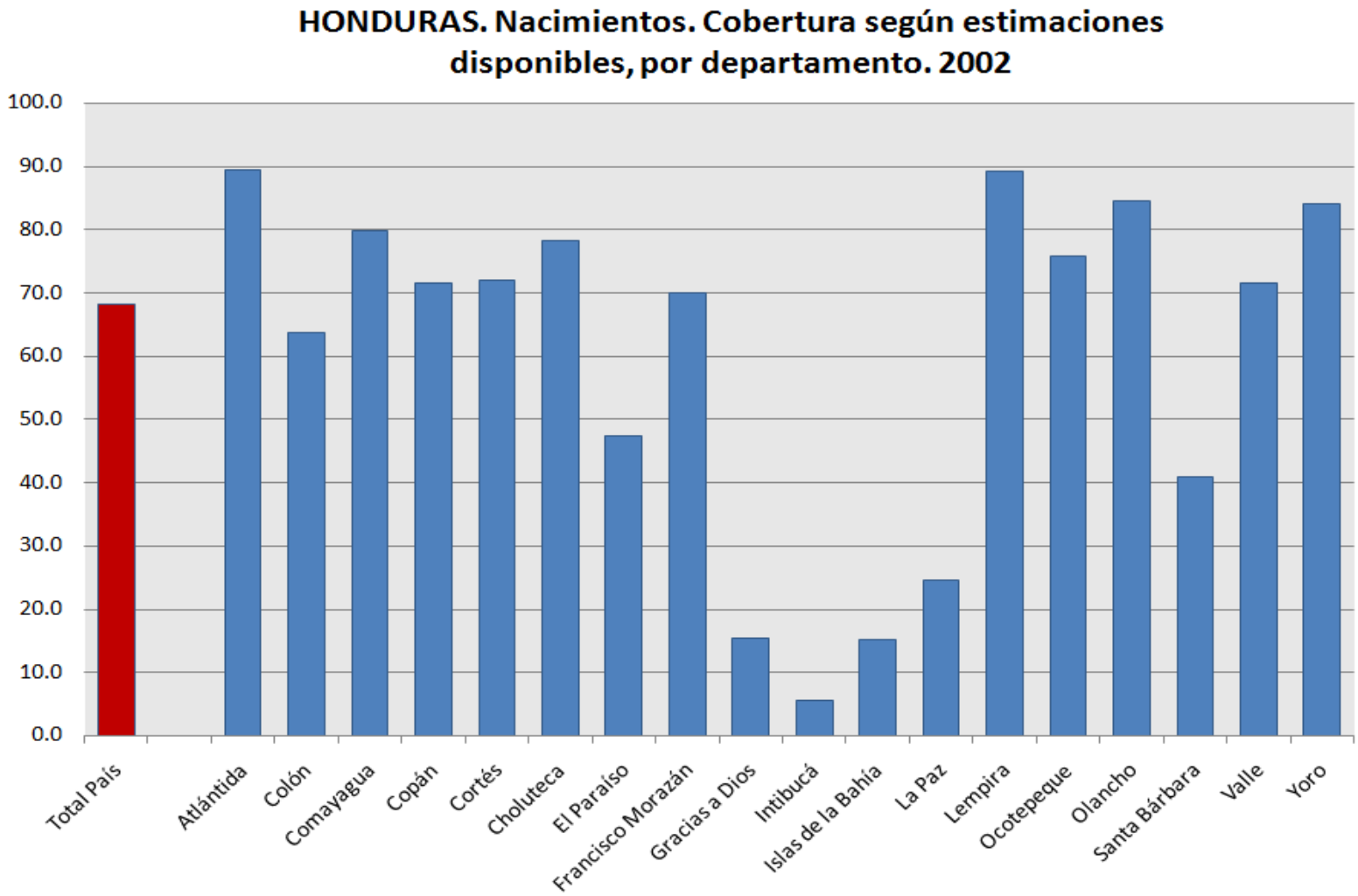


5. COVERAGE. PARAGUAY. Births. Register vs. estimates. 2005 (c)

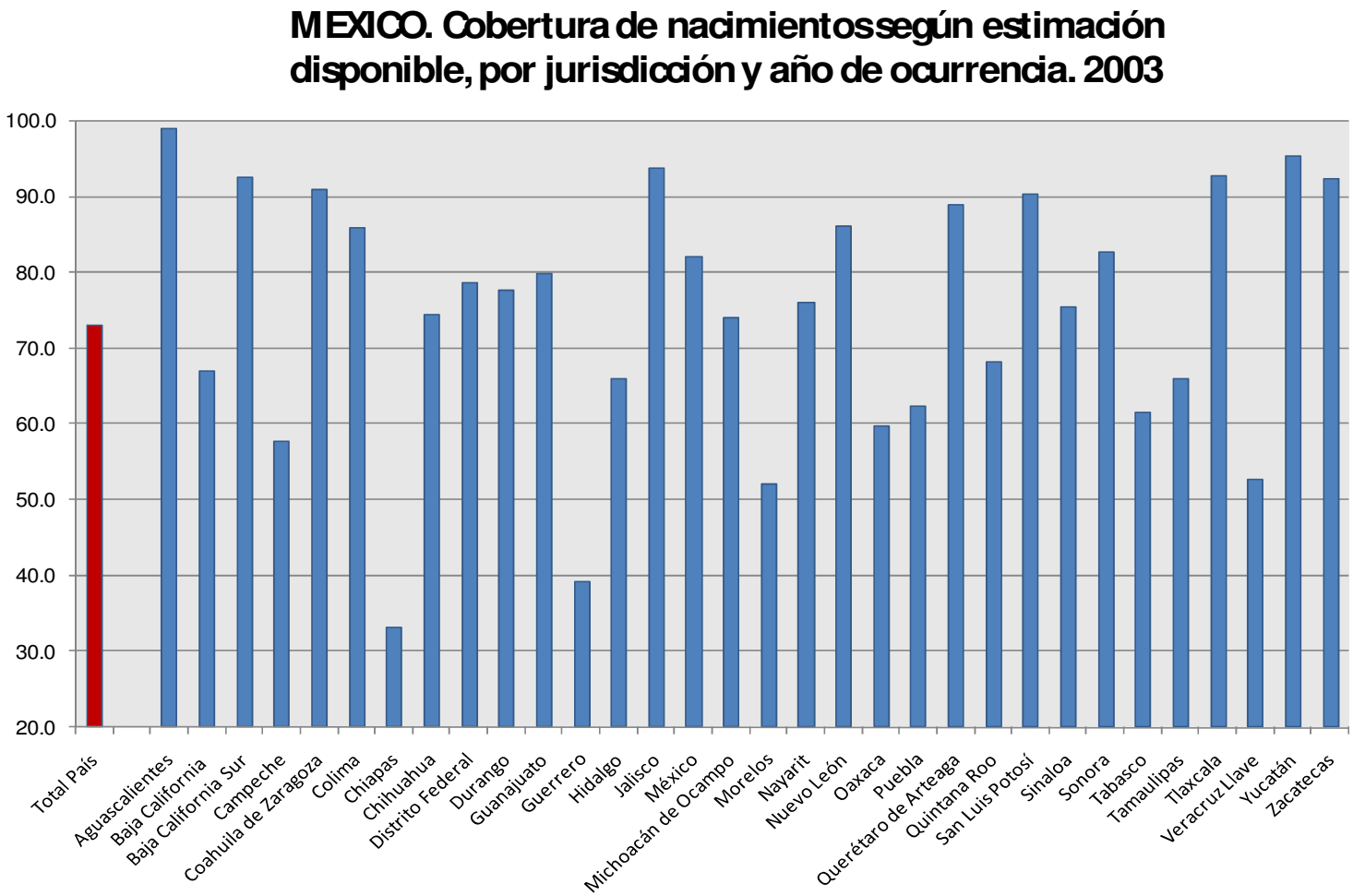
Gráfico 3
Nacimientos. Cobertura (diferencia entre registro y estimaciones). 2005.



6. COVERAGE. HONDURAS. Births. Register vs. estimate. 2005 (c)

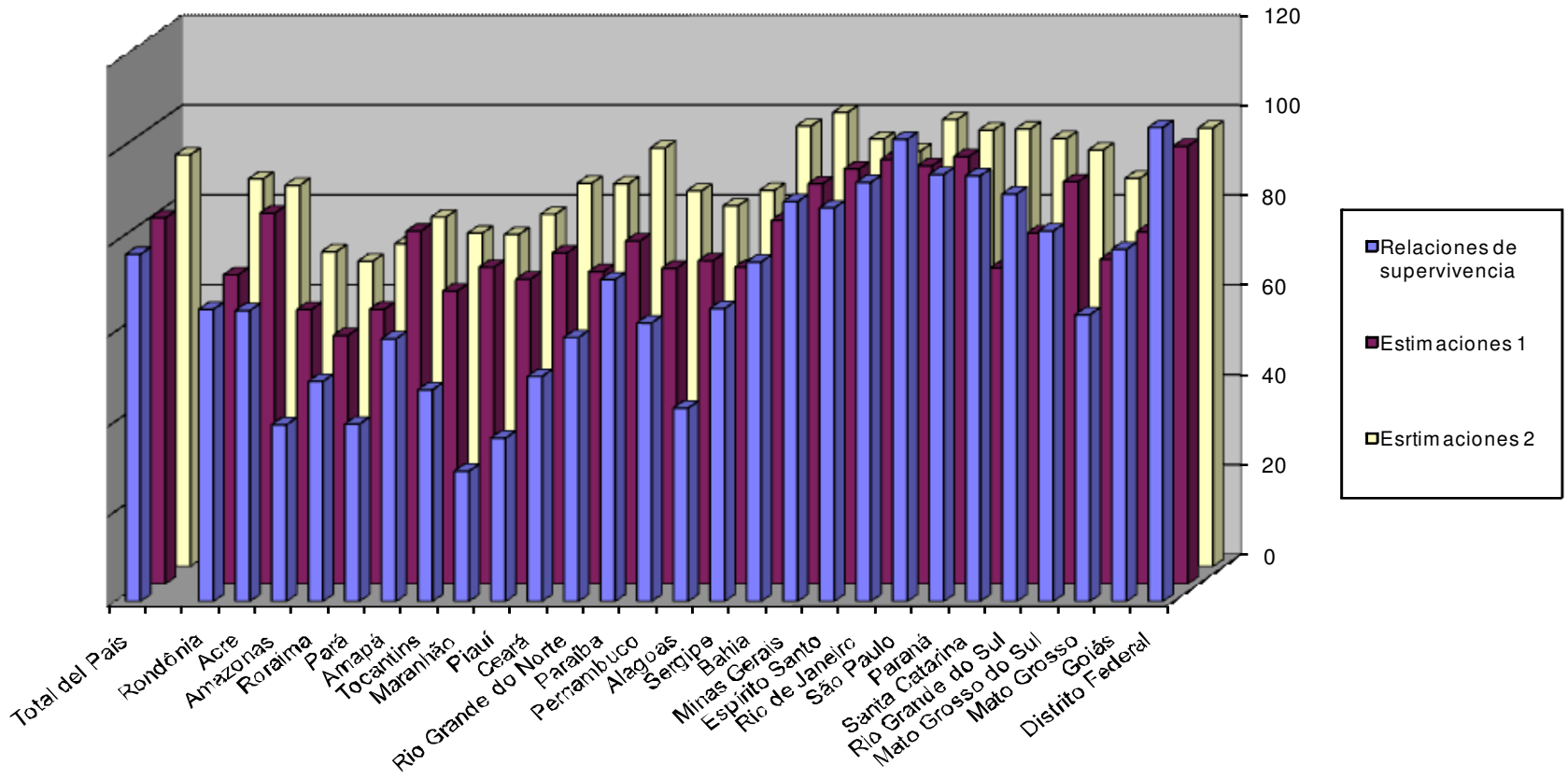


7. COVERAGE. MEXICO. Births. Register vs. estimates. 2005 (c)

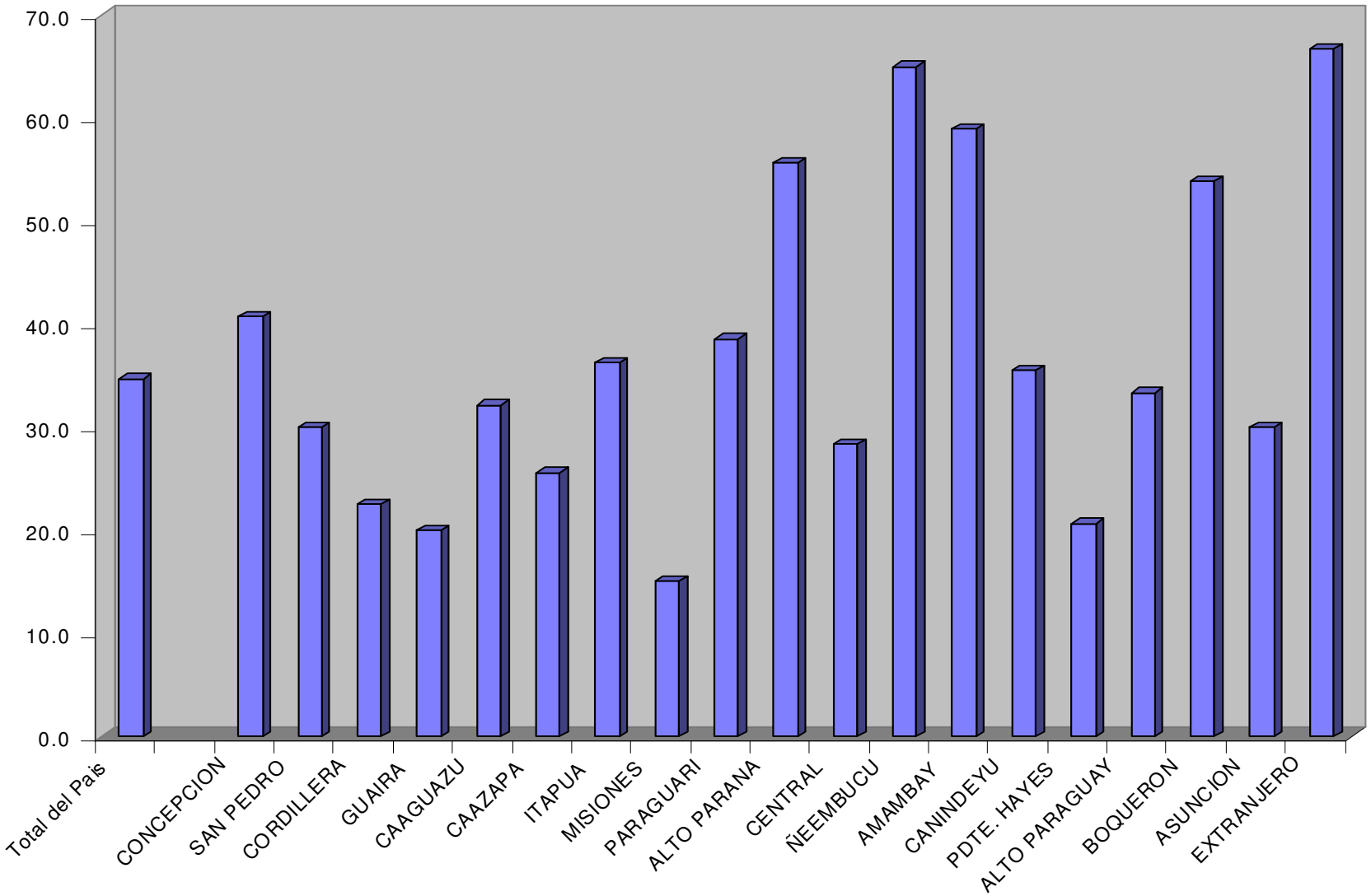


8. COVERAGE. BRASIL. Births. Register vs. estimates. 2005 (c)

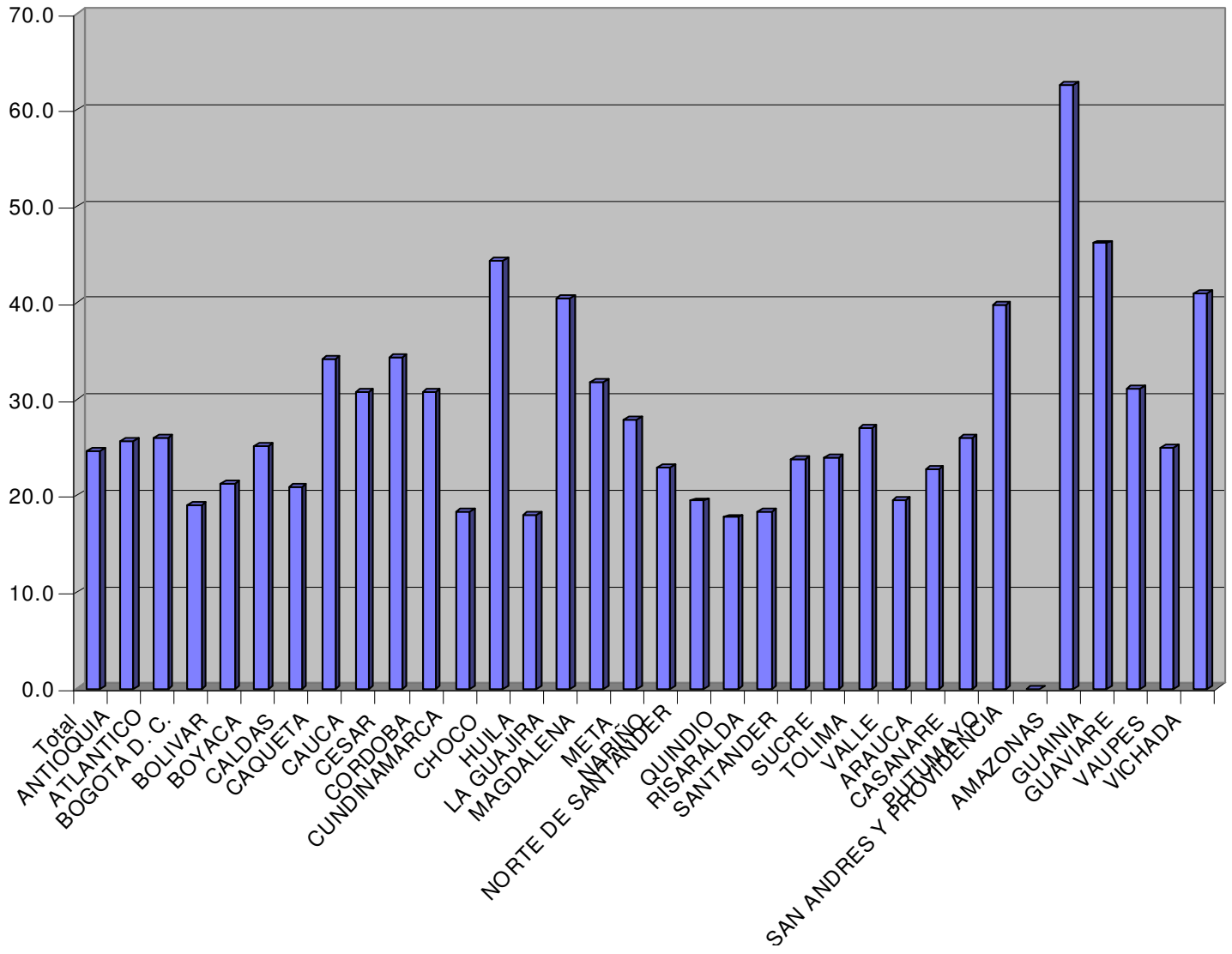
Gráfico 4
Nacimientos. Cobertura, estimaciones varias. Circa 2002.



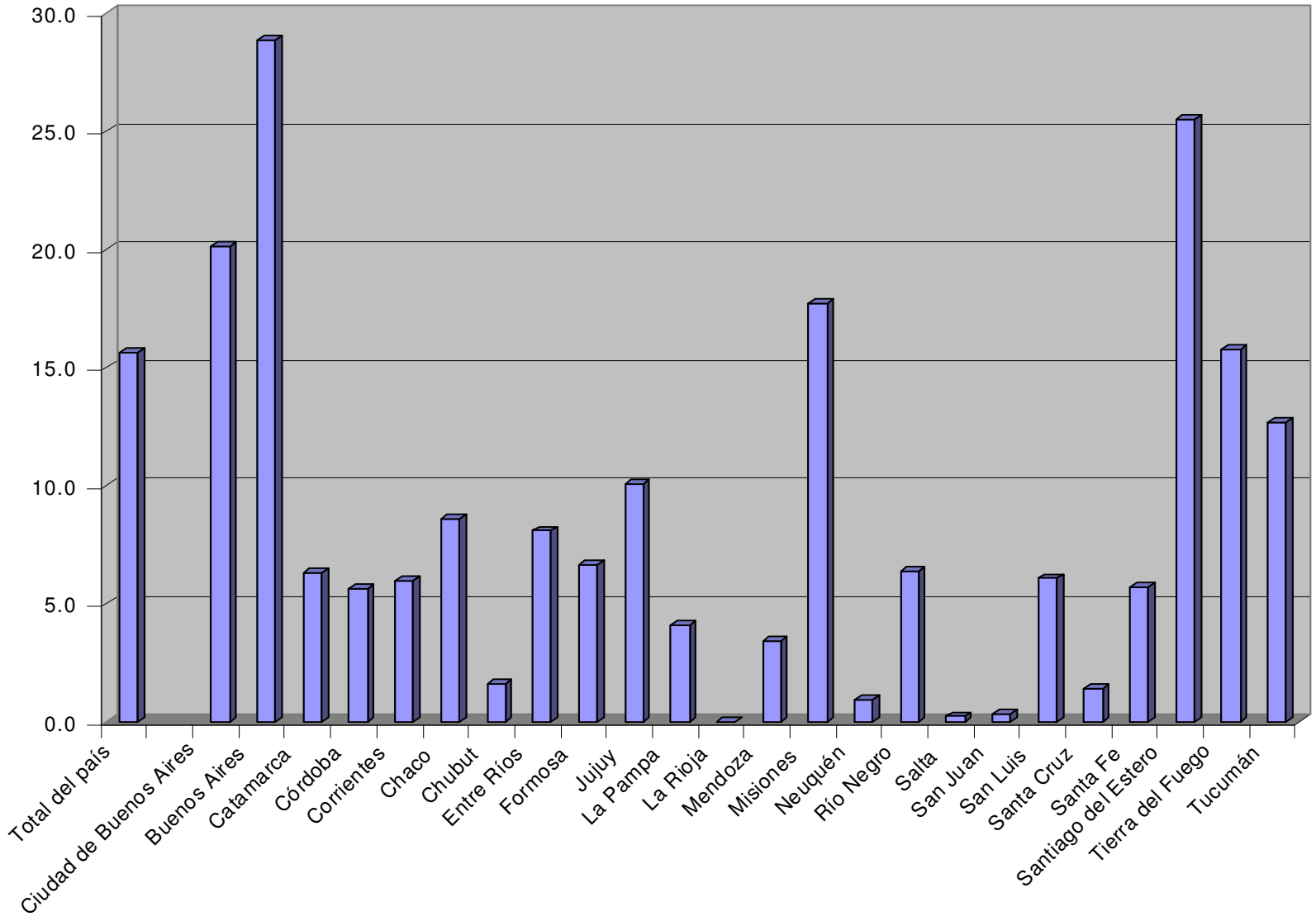
9. QUALITY. PARAGUAY. Births. Unspecified birth-weight of child. 2005 (c)



10. QUALITY. COLOMBIA. Births. Unspecified birth-weight of child. 2005 (c)



11. QUALITY. ARGENTINA. Births. Unspecified birth-weight of child. 2005 (c)



Way forward (2008-2009)

- ✓ 2007. PAHO DC approved the Strategy for the Strengthening Vital and Health Statistics in the countries of the Americas in it s 27th Session (WDC, October 2007) that aims at providing amore effective assistance to the countries, promote horizontal cooperation, establish a collaboration mechanism between areas of the Organization, and coordinate actions with other IOs.

- ✓ 2008. PAHO EC approved a Regional Plan for the Strengthening Vital and Health Statistics in the countries of the Americas (PEVS) *(http://www.paho.org/spanish/gov/ce/ce142index-s.htm).*

- ✓ 2007-2008. The PEVS is included in the SP 2008-2013, Strategic Objective 11 ("To strengthen leadership, governance and the evidence base of health systems.") *http://intranet.paho.org/DPM/PPS/Strategic_Plan0812_INTRANET-esp.doc*

Way forward (2008-2009)

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The RP has led to consideration of lines of action in the following areas:

(a) Preparation or expansion of situation analysis in each country.
(b) Creation of an interinstitutional team to make a diagnosis and devise a plan in each country.
(c) The priorization of greater coverage (thematic, geographical, sectoral), improvements in quality, and timelines of availability and dissemination of data.
(d) To prepare a national plan in countries (NP).
(e) To harmonize the national plan in the PEVS.
(f) To define a corporative multilateral components of the plan.