

MONDAY 23 JUNE, 14:00-17:00, SECTORAL FORUM – HEALTH (WHO)

## ENABLING THE HEALTH SECTOR CONTRIBUTION TO DEATH REGISTRATION AND FUNDAMENTAL ROLE IN IMPROVING CAUSE-OF-DEATH REPORTING

**ORGANIZERS: WHO**

### **PURPOSE<sup>1</sup>:**

The purpose of this session is to put forward successful country practices where the health sector has contributed to improving the recording and the notification of deaths to the civil registrar. The health sector with its wide network of frontline workers capable of reaching the most vulnerable populations, is a real asset in strengthening the registration of vital events such as births and deaths. In many settings, health workers already collect much of the core information that is needed to register a death. Relatively speaking, in some settings small adjustments would need to be made to existing data collection practices to furnish the civil registrar with the necessary details pertaining to a death for registration. In addition, when the registration of the fact of death has high completeness and is accompanied by information on cause of death, it is possible to track high-priority indicators, such as maternal mortality and deaths associated with specific causes such as HIV/AIDS and other infectious diseases; noncommunicable diseases such as cancer, cardiovascular diseases and diabetes; and external causes of deaths such as road traffic accidents and injuries. This detailed cause-specific information is essential for tracking epidemiological transitions and modifying health strategies accordingly.

Reliable and timely statistics on mortality and cause of death are essential for the development of national health and population policies and underpin the ability of countries to respond to emerging health threats and epidemics.

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<sup>1</sup> Source: Health sector contributions towards improving the civil registration of births and deaths in low-income countries: guidance for health sector managers, civil registrars and development partners. Geneva: World Health Organization and the United Nations Children's Fund (UNICEF), 2021.

The health sector has the responsibility for the ascertainment of medical cause of death. The international standard for doing so involves the completion by a doctor of the Medical Certificate of Cause of Death (MCCD). When death occurs at home and/or a doctor is not available to complete the MCCD, community-based health workers or trained enumerators can apply methods for ascertaining probable cause of death using verbal autopsy (VA) to generate statistics on causes of death in the community.

**SESSION FORMAT:**

<b>Time</b>	<b>Topic</b>	<b>Presentation mode</b>
<b>14:00–14:15</b>	Brief overview of the 3 main topics, the interlinkages between those and WHO partnered normative tools and standards	Main Moderator
<b>14:15–15:00</b>	A place-based approach to collecting cause-of-death data: challenges, successes, and innovation. <ul style="list-style-type: none"> <li>- Data collection in health facilities (ICD-11 implementation)</li> <li>- Data collection in homes and the community level (VA)</li> </ul>	3 country presentations of good practices (12 mins each) + Q&A (10 mins)
<b>15:00–15:45</b>	The importance of generating and reporting mortality – evidence from the WHO Mortality Database	3 country experiences of improved mortality statistics (12 mins each) + Q&A (10 mins)
<b>15:30–15:45</b>	Tapping the opportunities for improved CRVS data use beyond the health sector.	
<b>15:45–16:00</b>	Coffee break	
<b>16:00–16:30</b>	The importance of generating and reporting mortality – WHO Mortality Surveillance Framework (concept, methods, and preliminary results)	2 presentations around the 2 stages of developing the framework from selected country case-studies (10 mins each) + Q&A (10 mins)
<b>16:30–16:45</b>	Summary of key messages and recommendations	Rapporteur
<b>16:45–17:00</b>	Closing remarks	Main moderator