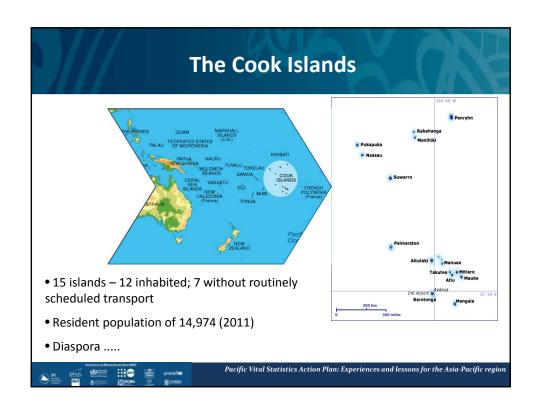


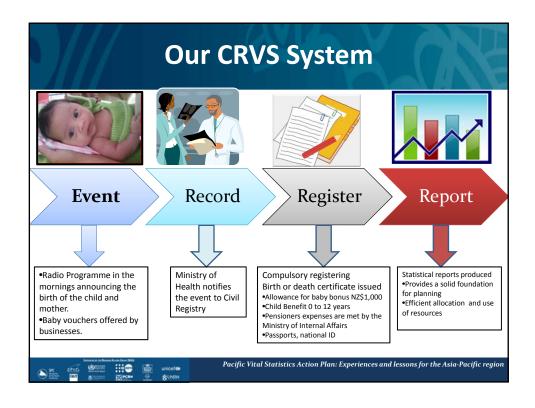
### **Civil Registration and Vital Statistics (CRVS)**

For Monitoring Health Policy Impacts in the Cook Islands

### H.E. Mr. Nandi Glassie







# **Key Challenges to the CRVS**

- National Agencies still operate in silos, making coordination difficult
- Increased capacity to record, compile, analyse and disseminate complete and reliable statistics on vital events;
  - With nearly 100% registration there is data available but it is not always in a format that makes it easy to link to policy and planning decisions
  - Data may be affected by:
    - Poor certification
    - Off island events "skewing" statistics and cause of death distributions as many vital events may happen overseas as Cook Islanders have NZ passports
    - Small population numbers may lead to misleading reporting of trends



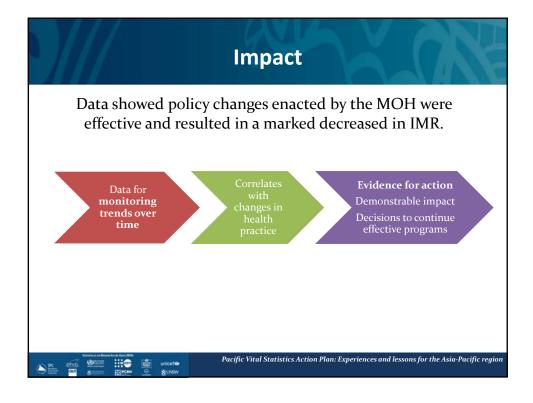
### What was done

- · Starting in 2011 with a sub-regional workshop hosted by BAG
- Mechanisms established for effective coordination among key stakeholders;
  - The establishment of CRVS Committee
  - WHO Comprehensive Assessment and informal plan
  - Cook Islands NSDS, supported by Paris21 and SPC
  - New Statistics Legislation
- Capacity and capability building across all sectors as per the plan
  - Training for doctors in certification
  - Analysis and report writing training



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#### CRVS data show policy changes led to a decrease in IMR Data showed a dramatic drop in IMR from Over the last 5 years, interventions encouraged pregnant mothers to: **15.3** in the period of 1999 – 2003 attend antenatal check-ups to **3.6** in 2009-2013. receive counselling of proper antenatal care IMR in the Cook Islands for 3 periods eat well, exercise, stop smoking, 25.0 Infant deaths per 1000 live births and avoid alcohol. Policies ensured: 20.0 - mothers received antenatal care 15.0 transport costs were covered to 10.0 reach the main hospital in Rarotonga for delivery 5.0 high risk births were transferred early to the hospital on the main 0.0 island of Rarotonga or New 2001 2006 Period Midpoint 2011 Zealand Pacific Vital Statistics Action Plan: Experiences and lessons for the Asia-Pacific region



# A regional collaboration

- Share experiences with countries of similar size and with similar challenges
- Training (such as the Analysis and Report Writing workshop) has come directly from country needs
- Regional training builds a group of professionals from around the Pacific Islands for support and encouragement
- A national vital statistics report is being prepared as an outcome of the training and is due for release shortly. This will provide further information for senior managers.
- Regional partners such as BAG and PHIN provide a network of support for Health Information professionals and others involved in statistical analysis of CRVS data.

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# **Next steps and lessons learnt**

#### Next steps:

- Update and formalise a National CRVS Improvement plan including an emphasis on routine analysis and publication of time series data from CRVS
- Working with the registrar in NZ, and other Pacific countries on data sharing for vital events that happen overseas.

#### **Lessons learnt:**

- CRVS data can be a powerful tool to demonstrate policy impact and advocate for policy change
- Even though the Cook Islands has a strong CRVS system, there is more that can be done to make data more available and meaningful for policy and planning
- Good data in the Pacific setting requires cooperation across national boundaries, and a network of support to professionals working in this area in the region.



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## **Conclusion**

EVERY LIFE SHOULD BE VISIBLE

AND

SHOULD NOT BE ALLOWED TO FALL BETWEEN THE

CRACKS BECAUSE OF INCOMPLETE DATA

## **KIA MANUIA**

