



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



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H. REGIONAL PLAN OF ACTION FOR STRENGTHENING VITAL AND HEALTH STATISTICS

Background

1. This is a progress report to the Directing Council of the Pan American Health Organization (PAHO) on the status of the achievement of the targets in the Regional Plan of Action for Strengthening Vital and Health Statistics (PEVS), (Resolution CD48.R6 [2008])¹ (I).

Progress Report

2. With regard to birth coverage (Table 1), by the middle of the last quinquennium (2005-2010),² it is estimated that 17 of 25 countries reached the coverage target: Argentina, Bahamas, Barbados, Belize, Brazil, Chile, Costa Rica, Cuba, Honduras, Mexico, Nicaragua, Peru, Saint Vincent and the Grenadines, Trinidad and Tobago, United States of America, Uruguay, and Venezuela (it is estimated that 12 surpassed the target). Three countries (Ecuador, Panama, and Paraguay) are believed to have increased

¹ This document only reports on birth and death coverage, since efforts to strengthen the health information systems (HIS) in quinquennium 2008-2013 were focused on these events, which are the principal source of data for the preparation of most of the Millennium Development Goal indicators. For both events, the PEVS contains the following targets for 2005 to 2013: countries with >90% coverage should at least maintain it; countries with 80-90% should reach at least 90%; countries with 61-79% should improve coverage by at least 10%; and countries with ≤60% should improve coverage by at least 20%. The other indicators mentioned in the annex to Resolution CD48.R6 (2008) are currently being evaluated and will be available in late 2013.

² Since uniform information is only available from routine birth and death records through 2011 and from current estimates for quinquennia (2000-2005 and 2005-2010) from ECLAC/CELADE, this report analyzes changes in coverage between averages for those quinquennia. In the next two years (2014/2015) it is expected that routine data up to 2013 will become available for numerators of the rates and up-to-date country projections based on the last censuses in the 2010 round for denominators of those rates. Thus, more realistic values will be available to evaluate changes in coverage rates.

coverage levels during that quinquennium and could reach the projected target if they maintain existing strengthening plans. Bolivia, Colombia, El Salvador, Guatemala, and the Dominican Republic are believed to have decreased their level compared to the previous period and these countries should make a special effort to reach the target.

3. With regard to death coverage (Table 2), by the middle of the last quinquennium (2005-2010), it is estimated that 11 of 25 countries reached the target: Argentina, Barbados, Belize, Chile, Cuba, Ecuador, United States of America, Mexico, Saint Vincent and the Grenadines, Trinidad and Tobago, and Uruguay (the last four are believed to have surpassed it). Bahamas, Brazil, El Salvador, Nicaragua, Panama, Paraguay, and Peru are believed to have increased their coverage during that quinquennium and could reach the target if they maintain processes for strengthening health information systems. The slight decline in Costa Rica, a country with almost complete coverage, and the declines in Colombia, Guatemala, the Dominican Republic, and Venezuela may be associated (particularly in Costa Rica and Venezuela) with the use of estimates that have not yet been adjusted in light of their new census. Finally, no data are available for Bolivia and Honduras for the last period.

4. In addition to actions taken to improve this statistical coverage, the PEVS strategy for quinquennium 2008-2013 included measures to lay the groundwork for improving the quality of mortality data and other health statistics. In 2010, the Latin American and Caribbean Network for Strengthening Health Information Systems (RELAC SIS) was established in Lima. This network has already implemented two work plans (2010-2011 and 2012-2013) have been implemented, based on the dissemination of good practices suggested by countries in the Region in the context of horizontal cooperation between countries.³

5. The disseminated practices include courses given on WHO family of international classifications, in particular the International Classification of Diseases (ICD-10), and the guidelines provided for the establishment of national reference centers for mortality and morbidity, serving Bolivia, Ecuador, El Salvador, Guatemala, Honduras, Nicaragua, Paraguay, and Peru; guidelines drafted for systematic searches for maternal deaths; transfer of technology for assisted coding using the ICD-10 and epidemiological surveillance; the development of online courses to learn coding using the ICD-10; and activities to raise awareness among medical professionals with regard to the coding of causes of death.

³ Promoted and financed by cooperation and development agencies (USAID, CIDA); international organizations (Economic Commission for Latin America and the Caribbean [ECLAC]—in particular its statistics and population divisions, such as the Latin American and Caribbean Demographic Center [CELADE]); WHO collaborating centers (Mexican Center for the Classification of Diseases [CEMECE]); national disease classification centers (Argentina); and academic units (such as MEASURE Evaluation) whose results are available at: www.relacsis.org.

6. Given the importance of using routine data and up-to-date estimates to monitor the PEVS objectives, a progress report should be prepared by 2015 in order to ensure the plan's sustainability and any necessary adjustments for the period 2013-2017, so that without neglecting the achievements of many of the countries, efforts are focused on technical cooperation so that countries where the situation is more critical can move forward in improving the coverage and quality of vital statistics and health statistics.

7. It is also necessary to strengthen horizontal cooperation; exchange good practices through RELAC SIS; include the countries of the English-speaking Caribbean in the network; and maintain partnerships with international technical and financing agencies.

Action by the Directing Council

8. The Directing Council is invited to take note of this progress report and offer any recommendations it deems necessary for ensuring attainment of the Plan of Action.

Annex

References

1. Pan American Health Organization. Regional Plan of Action for Strengthening of Vital and Health Statistics [Internet]. 48th Directing Council of PAHO, 60th Session of the Regional Committee of WHO for the Americas; 29 September – 3 October 2008; Washington (DC), United States. Washington (DC): PAHO; 2008 (Resolution CD48.R6) [cited 2013 Feb 13]. Available from: <http://www1.paho.org/english/gov/cd/cd48.r6-e.pdf>

Birth and Death Coverage. 2000-2005 and 2005-2010. PEVS 2013 Targets.

Table 1. BIRTHS. Progress in coverage between quinquennia 2000-2005 and 2005-2010

Selected countries of the Americas							
Group by coverage at baseline	Country	2000-2005	CD48.R6 Target	2013 Target (%Coverage)	2005-2010	Progress by 2010	Effort to make by 2013
1 ≥91%	USA	100,0	Maintain level	100,0	100,0	Reached	
	Mexico*	100,0	Maintain level	100,0	100,0	Reached	
	Argentina**	100,0	Maintain level	100,0	100,0	Reached	
	Bahamas	100,0	Maintain level	100,0	100,0	Reached	
	Barbados#	97,0	Maintain level	97,0	100,0	Reached and Improved	
	Cuba**	96,8	Maintain level	96,8	96,8	Reached	
	Uruguay**	96,2	Maintain level	96,2	100,0	Reached and Improved	
	Venezuela**	96,5	Maintain level	96,5	100,0	Reached and Improved	
	Chile**	95,1	Maintain level	95,1	98,3	Reached and Improved	
	St Vicent	94,8	Maintain level	94,8	95,4	Reached and Improved	
	Costa Rica**	94,6	Maintain level	94,6	99,8	Reached and Improved	
	Trinidad and Tobago	92,9	Maintain level	92,9	93,6	Reached and Improved	
	Guatemala	91,8	Maintain level	91,8	81,6	Declined (10.2 points)	10,2
	El Salvador	91,2	Maintain level	91,2	82,8	Declined (8.4 points)	8,4
2 80-90%	Panama*	84,6	Reach 90%	90,0	88,4	Improved w/o reaching	1,6
	Ecuador*	83,0	Reach 90%	90,0	84,6	Improved w/o reaching	5,4
3 61-79.9%	Nicaragua	79,6	Improve 10%	87,6	89,3	Reached and Improved	
	Bolivia**	79,2	Improve 10%	87,1	52,9	Declined (26.3 points)	34,2
	Colombia	78,7	Improve 10%	86,6	76,4	Declined (2.3 points)	10,2
	Brazil**	74,1	Improve 10%	81,5	90,8	Reached and Improved	
	Dom. Rep.**	69,3	Improve 10%	76,2	62,9	Declined (6.4 points)	13,3
	Honduras#	68,0	Improve 10%	74,8	100,0	Reached and Improved	
	Peru	62,3	Improve 10%	68,5	100,0	Reached and Improved	
4 ≤60%	Paraguay***	60,1	Improve 20%	72,1	65,0	Improved w/o reaching	7,1
	Belize#	50,00	Improve 20%	60,00	96,4	Reached and Improved	

* Countries with adjusted estimates based on circa-2010 censuses.

** Countries with circa-2010 censuses that have not yet released adjusted estimates. Current United Nations estimates are used.

Countries with registry data in PAHO.

Table 2. DEATHS. Progress in coverage between quinquennia 2000-2005 and 2005-2010

Selected countries of the Americas							
Group by coverage at baseline	Country	2000-2005	CD48.R6 Target	2013 Target (%Coverage)	2005-2010	Progress by 2010	Effort to make by 2013
1 ≥91%	USA	100,0	Maintain level	100,0	100,0	Reached	
	Cuba**	100,0	Maintain level	100,0	100,0	Reached	
	Uruguay**	100,0	Maintain level	100,0	100,0	Reached	
	Chile**	100,0	Maintain level	100,0	100,0	Reached	
	Argentina**	99,0	Maintain level	99,0	99,0	Reached	
	St Vicent	100,0	Maintain level	100,0	100,0	Reached	
	Barbados	100,0	Maintain level	100,0	100,0	Reached	
	Costa Rica**	97,3	Maintain level	97,3	93,5	Declined (3.8 points)	
	Trinidad and	99,4	Maintain level	99,4	100	Reached and Improved	
	Mexico*	94,9	Maintain level	94,9	100,0	Reached and Improved	
	Ecuador*	93,5	Maintain level	93,5	94,6	Reached and Improved	
	Guatemala	93,2	Maintain level	93,2	89,5	Declined (3.7 points)	3,7
	2 80-90%	Venezuela**	89,1	Reach 90%	90,0	71,1	Declined (18.0 points)
Brazil**		86,4	Reach 90%	90,0	87,0	Improved w/o reaching	3,0
Panama*		84,4	Reach 90%	90,0	85,8	Improved w/o reaching	4,2
Colombia		81,6	Reach 90%	90,0	78,0	Declined (3.6 points)	12,0
3 61-79.9%	Bahamas	75,6	Improve 10%	83,2	76,9	Improved w/o reaching	6,3
	El Salvador	75,6	Improve 10%	83,2	79,0	Improved w/o reaching	4,2
	Honduras	68,0	Improve 10%	74,8	nd		
	Paraguay**	62,4	Improve 10%	68,6	67,9	Improved w/o reaching	0,7
4 ≤60%	Nicaragua	57,4	Improve 20%	68,9	62,0	Improved w/o reaching	6,9
	Dom. Rep.**	50,4	Improve 20%	60,5	49,9	Declined (0.5 points)	10,6
	Peru	57,1	Improve 20%	68,5	58,8	Improved w/o reaching	9,7
	Belize	50,0	Improve 20%	60,0	80,5	Reached and Improved	
	Bolivia**	31,1	Improve 20%	37,3	nd		

* Countries with adjusted estimates based on circa-2010 censuses.

** Countries with circa-2010 censuses that have not yet released adjusted estimates. Current United Nations estimates are used.

nd: No data.

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