SRS as a strategy for immediate and long-term availability of representative mortality data

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- Population: 31.6 million (65.5% in rural areas)
- Life expectancy: 55.7 years old
- HIV prevalence: 12.4% (2021)
- Infectious diseases as main causes of morbidity and mortality with NCDs and trauma increasing – triple burden of diseases
- Reached MDG 4: U5MR declined by 70% from 248 to 75 between 1990 and 2015
- Committed to the SDGs with goal 3.2 aiming at reducing U5MR to at least 25 and NMR to at least 12
Community deaths: pathway to civil registration in Mozambique

- Community leaders confirm the death
- Police confirms if it is a traumatic death
- The morgue provides a death certificate
- CRVS department provides burial permit
- Provides official CRVS statistics
Strategy for immediate and long-term availability of CR and causes of death data in Mozambique

- **CRVS:** 10% coverage
- **National Health System:** 60% coverage
- **HMIS:** ¼ of deaths/ Low quality of causes of death
- **Census/ surveys:** No causes of death

**COMSA**
- Mar 2017 – Dec 2020
- BMGF
- Proof of concept

**Transition phase**
- Jan – Sep 2021
- BMGF/ The Global Fund
- Country ownership

**SIS-COVE**
- Oct 2021 – to date
- The Global Fund (until Dec 2023)
- Main system for the community subsystem
- Potential for community IDS
SIS-COVE: A platform with potential for implementing additional research

SIS-COVE

• Link to CRVS to improve community births and deaths registration
• Link with DHIS-2 to ensure data access for users
• Monitoring of health emergencies;
• Disease Surveillance and Social Determinants (event-based);
• Management of rumors and misinformation;
Births and deaths registration through SIS-COVE community workers (pilot in Inhambane Province)

Feeding e-CRVS and vital statistics reports

Access to mortality data at district and provincial level through dHIS-2 (SIS-MA)
CRVS Pilot in one of province

VA team and CSAs support HH with:
1. Notification of events
2. Filling out the forms
3. Obtaining official signatures and stamps
4. Delivery of the certificate to the household
5. Community education to improve registration
6. CRVS produce certificate of event

Note: By law, registration must be done by the CRVS. COMSA cannot link directly to the system to e-CRVS
Registration of births by family members has increased significantly in Inhambane

The proportion of birth registrations has been inactively increasing

Total:
Notified by CSA: 73.3%
Notified by family member: 26.7%
Interoperability between COMSA/SIS-COVE and CRVS

- SIS-COVE officially started feeding CRVS, supporting civil registration in one province
- Next step fundraising to increase the coverage including all remaining provinces
Interoperability with dHIS-2/ SIS-MA

Data processing and sending

COMSA Plataform ODK

Plataforma Ukwaba

SIS-COVE DHIS2

Data analysis
10709
Leveraging SIS-COVE to improve community-based disease surveillance and outbreak investigation

**Cholera outbreak in 2023:**
- Excess mortality in a remote community in Tete Province due to cholera
- Early warning system through mortality surveillance to detect public health treats

**VPD Seroprevalence in Zambezia:**
- Diphtheria: 87.2% (95%CI 84.3-89.6)
- Tetanus: 86.9 (95%CI 83.6-89.6)
- Rubella: 83.0% (95%CI 78.3-86.8)
- Measles: 69.1% (95%CI 63.3-74.4)
Key actors for RMS in Mozambique

National Institute of Health
- Main Implementer of the System
- Interaction with the multiple stakeholders
- Through the NHO, triangulate and integrate data from different sources for dissemination and use

Minister of Health
- Community surveillance agents
- Monitoring and evaluation system (HMIS/DHIS-2)
- Hospital data on causes of death

Minister of Justice
- CRVS Management

National Institute of statistics
- Sampling and cartography
- Generate vital statistics
Involvement of key stakeholders

- TWG for the implementation of an integrated strategy in the mortality registration is required;
- Identify all small groups collecting data and invite to TWG;
- Advocate at the political level of all institutions involved to support death registration systems;
- Continue to expand surveillance areas to improve coverage.
Key notes

- COMSA/SIS-COVE is a good example of SRS for resource-poor countries and is generating results on mortality and causes of death.
- CRVS System is the perfect model for deaths registration but in Mozambique it still far from optimal coverage.
- COMSA Supports Civil registration through community health agents and verbal autopsy team.
- More recent experiences have awakened the use of the platform as an Early Warning system for health events.
- Stakeholder engagement is essential for advocacy on mortality data registration.
COMSA (2019 and 2020) reports are now available!!

https://comsamozambique.org/

Obrigado!
COMSA has a digitized sample and data collection

1. Random selection of 700 clusters
2. Representative at national and provincial levels
3. Large cluster (~300, households)
4. Surveillance of total population of each cluster
5. 180,000 households
6. 800,000 population