

## Improving CRVS in Uttar Pradesh: Coverage, Quality, and Cause of Death

The Civil Registration and Vital Statistics (CRVS) is responsible for generating statistics on births, deaths, and their medical causes. In a recent global assessment of CRVS, India was rated with the lowest vital statistics performance index. Even though improvements were seen in birth and death registrations through the CRVS, they had remained poor in India's most populous state, Uttar Pradesh (UP). The Public Health Foundation of India (PHFI) and Sambodhi proposed to study the barriers and facilitators towards improving UP's coverage and quality of birth and death registrations.

The study's objectives were:

- identifying community-level barriers and facilitators within UP for improving birth/death/stillbirth registrations,
- tracing the registration process within health facilities and mapping barriers and facilitators to improve the process, and
- exploring the issues around improving the medical certification of the cause of death.

The following studies were proposed to achieve the objectives mentioned above:

- **Community-level study:** This study aimed to answer some critical questions on coverage of birth/death registration and provide insights on heterogeneities based on age, sex, and cause of death. An enumeration survey was done in five UP districts, and households with reported birth and death outcomes were selected for a detailed survey. This survey included reasons for registering/not registering birth and deaths, information regarding barriers to registration or ease of registration, and differential registration based on the cause of death. Post-analysis of survey data, some interviewed households were selected and invited to participate in focus group discussions (FGDs) to throw more light on understudied themes.
- **Facility-level study:** The health facility-level study addressed questions regarding the facility's registration process for births and deaths. This assessment consisted of three components, namely i) process mapping on births/deaths and causes of death in health facilities, ii) follow-up on retrospective and prospective cases of birth/deaths/stillbirths, and iii) in-depth interviews with facility doctors, nurses, and ANMs. In addition to the community-level study, this helped build a comprehensive story of civil registration at UP.

Several communication and dissemination products and platforms were developed to disseminate various findings and developments of multiple products. The information was shared across platforms with respective state and national governments and other relevant stakeholders.

The total sample size for the community-level assessment was 6000 households (Urban – 1200 & Rural 4800) and 10 FGDs. For the facility-level reviews, interviews were conducted within 25 health facilities.

Sambodhi contributed by facilitating:

- study design,
- data collection tool finalization,
- training of data collectors,
- data collection,
- data quality assurance,
- data analysis,
- preparation and finalization of reports, and
- dissemination of these reports in peer-reviewed journals, presentations at relevant scientific and policy meetings, and within the larger data quality eco-system in India.