



# ECUADOR

## CRVS country overview

Ecuador has identified five interventions to improve system performance, with a focus on building human capacity, increasing death registration completeness, and improving quality of mortality data.

### The Challenge

Ecuador has demonstrated its commitment to civil registration and vital statistics (CRVS) improvement in spite of the country's limited resources and duplicative efforts in the production of vital statistics. Cooperation between key CRVS stakeholders is facilitated by a well-functioning interagency steering committee.

However, Ecuador struggles with significant disparities in subnational coverage and quality of mortality data, as well as regional variations in birth registration completeness. Cause of death (COD) data quality is also unreliable, as the Ministry of Health does not receive health facility-level data until the end of the calendar year, therefore limiting quality assurance and data quality monitoring.

### Our Approach

In collaboration with the Bloomberg Philanthropies Data for Health Initiative, the country has identified **five interventions** to improve system performance that aim to: 1) build human capacity; 2) increase death registration completeness; and 3) improve quality of mortality data.

#### Intervention 1



#### Introduce and implement a proactive search system to improve completeness of death registration and quality of mortality data

In 2015, an international study concluded that Ecuador's Vital Statistics Performance Index (VSPI) is 'medium', indicating that its CRVS system is operational, but disparities in subnational coverage and quality of mortality data remain, including under-registration of deaths in rural areas and poor quality COD data. This intervention will likely improve notification and registration of deaths, as well as quality of COD data through investigation of cause of death for community deaths. This will result in improved completeness of death registration and quality and representativeness of COD data.



### Intervention 2

#### **Improve quality of mortality data through application of ANACONDA and harmonisation of guidelines and manuals**

Much of Ecuador's mortality data issues stem from the lack of data quality checks and the lack of uniform guidelines and manuals for the Ministry of Health and health sector for capturing and analysing health data. This intervention will both harmonise guidelines and manuals between the public and private health sectors, and build Ecuador's capacity to identify inconsistencies and errors in their mortality datasets. This two-fold approach should result in improved quality of mortality statistics for health policy and planning.



### Intervention 3

#### **Stakeholder training in demographic estimation methodology to improve estimates of registration completeness and population denominators**

Accurate demographic estimates are requisite for the production of reliable vital statistics. Presently, Ecuador employs simplistic estimation methods and does not apply correction factors to their data, resulting in unreliable subnational estimates. This intervention will build stakeholder capacity to apply more sophisticated methods to estimate national and subnational demographic estimates, thereby resulting in more accurate and reliable vital statistics. The availability of reliable vital statistics will improve resource allocation and public health policy and planning.



### Intervention 4

#### **Enterprise architecture business process mapping to support implementation of an online notification and registration system for deaths**

Enterprise architecture (EA) is a tool that applies system science and analysis to better describe, understand, analyse, compare and visualise the organisation, processes, workflows and functionality of a CRVS system. Using EA maps, bottlenecks, duplication and other inefficiencies can be identified and the overall functioning of the CRVS system improved. Building capacity for EA in Ecuador to regularly assess the core business processes of their system is a fundamental intervention for introducing system innovations.



### Intervention 5

#### **Smartphone app to support physicians with medical certification of cause of death.**

By law, all deaths must be medically certified by a physician; as described elsewhere, Ecuador's COD data quality is 'medium' – in part due to poor certification practices. A low-cost, interactive smartphone app to support physician certification of cause of death will serve as a readily available guidance tool for physicians, and is expected to improve the quality of cause of death data in the country. Moreover, the app will underpin future in-person physician training in medical certification of COD.

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