





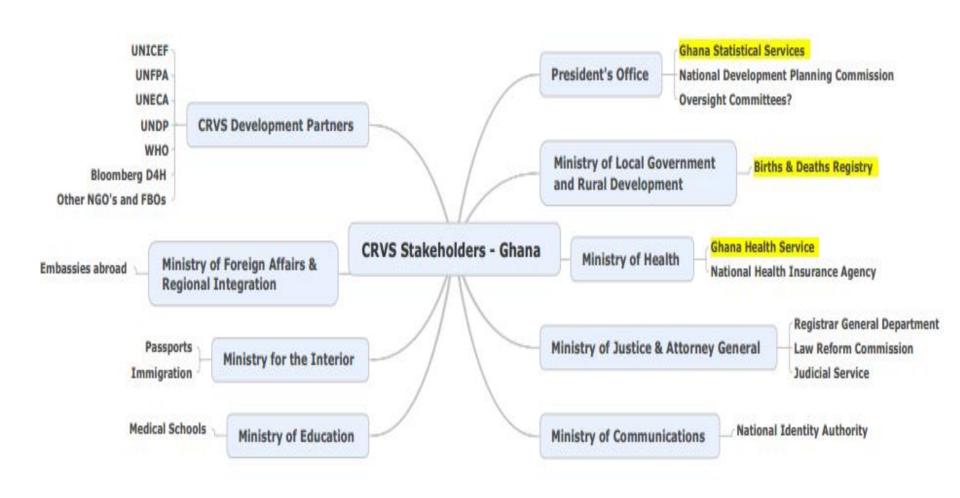
Automated Verbal Autopsy in Ghana: The Role of Community Health Workers and Other Cadres

Francis Yeji (Country Coordinator, D4H Initiative)





CRVS Landscape in Ghana











CRVS Challenges in Ghana

Incomplete information

- Birth registration (~55%), Death registration (~27%)
- COD (~7% majority, facility-based deaths)

Limited access to registration points

- ~420 registration offices (1 / 67,000 population)
- Family-led notification
 - No obligation on GHS to notify births or deaths









CRVS Strengths in Ghana

- Renewed focus on CRVS system strengthening leading to:
 - Comprehensive assessment (2015)
- Well-functioning inter-agency coordinating mechanism
- Strong human capacity at many key stakeholders
- Newly drafted CR law, addressing many key issues
- Team of DHIS2 developers









Data for Health (D4H) Country Strategy

- Use business process mapping to improve system design
- Extend CR service point coverage and IT digitization strategy

Support national rollout of DHIS2 mortality module

- ✓ Completeness
 - Health facility events
 - Community events
- √ Completeness
 - Health facility events
 - Community events
- ✓ Completeness
 - Health facility deaths
- ✓ Quality
 - COD









D4H Country Strategy

- Use ANACONDA to regularly assess quality of mortality data
- ✓ Quality
 - COD

 Implement community-based automated verbal autopsy

- ✓ Completeness
 - Community deaths
- ✓ Quality
 - COD

- Training course on CRVS data analysis and use (DI component)
- ✓ <u>Dissemination</u>
 - Vital statistics

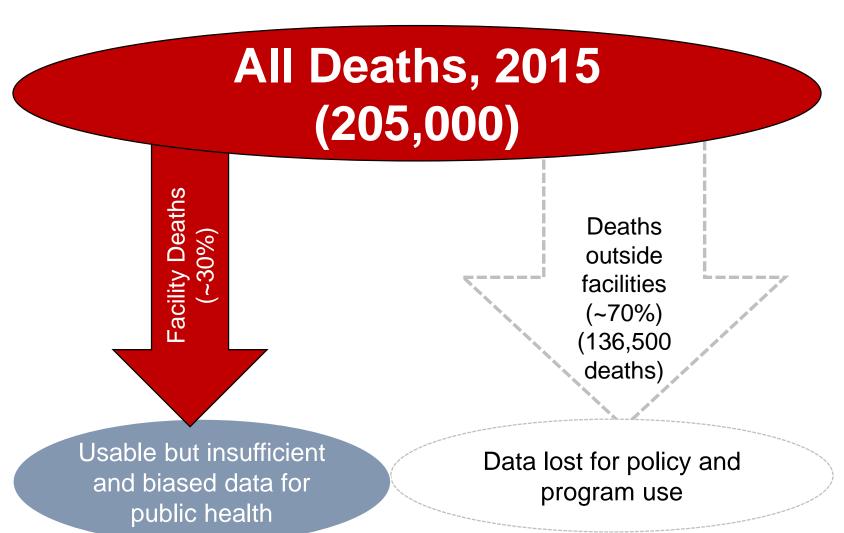








Death Registration, Certification, and COD in Ghana











Objectives of Community Based VA

- Test an active system of death notification
- Increase the level of death registration
- Improve availability of data on COD
- Generate evidence about the effectiveness and feasibility of a model for community-based death notification and automated VA in Ghana's CRVS









Key Stakeholders

GHS

- National
- Regional
- District
- Sub-district
- Community

GSS

- National
- Regional

BDR

- National
- Regional
- District
- Community

LOCAL COMMUNITY
(Chiefs, Religious leaders, Volunteers etc.)

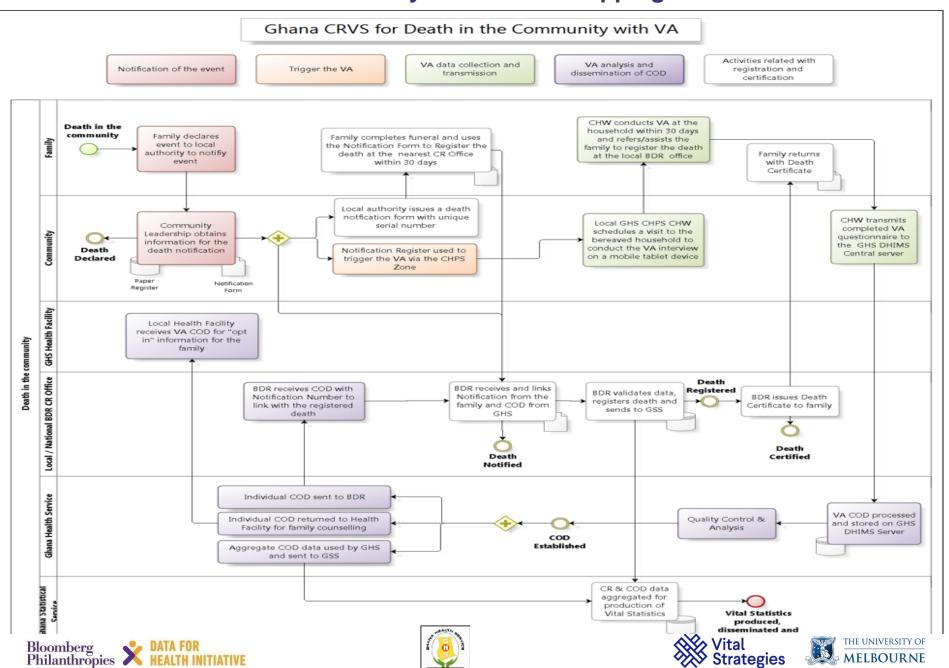








Community VA Process Mapping



Site Selection for VA Pilot



Criteria:

- High crude death rate
- Strong CHPS implementation
- Lack of access to health facilities
- Near but not in HDSS catchment area
- Strong local support for the intervention
- Functional BDR office and volunteers









Death Notification Form: A Giant Step

FORM NUMBER



BIRTHS AND DEATHS REGISTRY DEATH NOTIFICATION FORM

A. DETAILS ABOUT DECEASED AND EVE	ΕN	E١	AND	ASED	DECE	ABOUT	DETAILS	Α.
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0.	District / Sub-District /Community	
1.	SERIAL NUMBER	
2.	FULL NAME OF DECEASED	
3.	AGE OF DECEASED	
4.	SEX OF DECEASED	
5.	DATE OF DEATH (DAY/MONTH/YEAR)	
6.	PLACE OF DEATH (State House Address or Name of Facility)	
7.	USUAL ADDRESS OF RESIDENCE	

B. DETAILS ABOUT INFORMANT

1.	FULL NAME OF INFORMANT	
2.	ADDRES	
3.	TELEPHONE NUMBER	
4.	DATE OF REPORTING	

Note: This is not a burial permit or a death certificate.

DECLARATION

Frontline Workers

Community Health Volunteer

- Link between community, CHW, and BDR
- Fills death notification form (*Not registration*)
- copy to BDR for death registration
- copy to CHPS CHW for VA interview
- Community Health Worker (CHW)
 - Conducts VA interview
- Births and Deaths Registration (BDR) Office
 - Register and issue death certificate









Expected Impact of VA in Ghana

All Deaths

Facility Deaths (~30%)

Deaths outside facilities (~70%) (136,500 deaths)

Use of VA in CRVS & Health Systems

Pilot may not capture all outside facility deaths

Data useable for health policy and program use









Timelines

ACTIVITY		2016							2017					
		JUNE	JULY	AUG	SEP	ОСТ	NOV	DEC	JAN	FEB	MAR	APR	MAY	
Stakeholder Consultations														
Advocation and Community Sensitization														
Train community informants														
Train Interviewers, Supervisors and data														
managers														
Train physicians in CoD Certification/coding														
Field test tools and model														
Data collection														
Physician coding of VA, coding and run														
algorithm for probable COD														
Evaluate field test results														
Presentation of results and decision on pilot														









THANK YOU!



QUESTIONS, COMMENTS, SUGGESTIONS?







