

SAVVY: A Toolset for Counting Every Person



MEASURE Evaluation Fact sheet **SAVVY: Sample Vital Registration** **with Verbal Autopsy**

The improved collection, analysis, and use of data lead to better health program decision making and, ultimately, improved health outcomes. This fact sheet introduces an innovative toolset created by MEASURE Evaluation in partnership with the U.S. Census Bureau for monitoring and evaluating public health interventions.

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To learn more about MEASURE Evaluation and our current activities, visit us on the Web at www.cpc.unc.edu/measure.



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Overview: Accurate information about vital events – particularly births, deaths, and causes of death – is critical for rational health and public policy. Yet most of the world’s poorest countries lack reliable sources of routine vital statistics. The tools available in the Sample Vital Registration with Verbal Autopsy (SAVVY) can help solve that.

In sub-Saharan Africa, where an estimated 80% of the total disease burden is due to premature death, only our countries have produced useable mortality data since 1990; in 2000, birth registration or official estimates based on registered births provided the basis for fertility estimates for less than 1% of the continent’s population. Thus, reliable data on levels – let alone causes – of death, particularly of neonatal, perinatal and adult death, simply do not exist for the majority of developing countries. This does not provide an adequate foundation for setting health sector priorities, or for assessing program progress and impact.

By fostering new collaborations between global leaders, the Health Metrics Network (HMN) is search-

ing for new ways to monitor vital events. As the HMN has indicated, sample or sentinel registration systems such as SAVVY, can provide routine vital statistics until civil registration of sufficient quality and coverage is established, and representative cause of death statistics are produced from institutional sources.

Developed by MEASURE Evaluation and the U.S. Census Bureau, SAVVY is a family of methods that allows the direct measurement of vital events and the determination of causes of death in a nationally representative sample of small areas, or in selected ‘sentinel’ locations. The components of SAVVY are:

- Demographic surveillance system (DSS) — DSS is a complete and repeated registration

of the resident population, as well as births, deaths, and migration, in a geographically defined population.

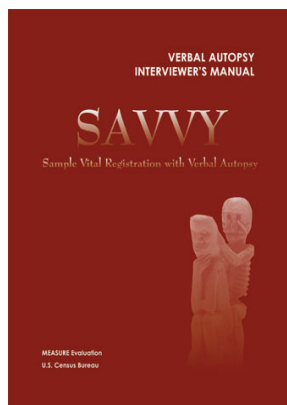
- Mortality surveillance system (MSS) — MSS consists of the active reporting and registration of deaths in a geographically defined population. Verbal autopsy (VA) interviews are used to determine causes of death.
- Nested surveys — Nested surveys consist of a focused set of questions and are included in the census update rounds. Examples include surveys on poverty monitoring, reproductive health, health service coverage, and environmental and behavioral risk factors.

In a fully implemented SAVVY system, national agencies first conduct a complete census in the sampled areas. Then, on an ongoing basis, a network of community reporters notifies field officers of all deaths occurring in those areas. Each death is followed up at the household in which it occurred, and a validated VA interview is conducted with the family members and care-givers of the deceased. This information is used to determine the probable cause of death, and to generate reliable and internationally comparable mortality statistics. The longitudinal information collected with the system is not available from any other source. Data can also be collected using the SAVVY VA tool in household surveys or censuses.

Information from sample and sentinel vital registration systems has been used at the local, district, national, and international levels for a variety of purposes. Mortality rates by age, sex, and specific causes of death have assisted planners in developing health programs to address the leading causes of death in the country; they may also provide information about the impact of investments in reducing deaths due to specific causes such as HIV/AIDS and malaria. SAVVY can also serve as a platform for investigating the coverage and community uptake of preventive, palliative, or ameliorative health interventions. The ultimate goal of SAVVY is to help countries build complete systems of universal civil registration by national legal authorities.

Recent Experience

With funding from USAID and UNICEF, MEASURE Evaluation and the U.S. Census Bureau are supporting the Mozambican National Statistics Institute to implement the first-ever nationally representative post-census cause-of-death survey. The study uses new international standards for VA, and its results will provide information of crucial interest to Mozambique, including causes of child and adult mortality related to malaria, AIDS, maternal conditions, and several others.



Key Publications and Tools

In 2007, MEASURE Evaluation and the Census Bureau published a series of manuals for implementing SAVVY (interviewer's manual pictured at left). In addition, we have collaborated with WHO, HMN, and others on the publication of an online and CD-ROM *Monitoring Vital Events Resource Kit*. Other articles and documents related to SAVVY include the following:

- World Health Organization (WHO). *Verbal Autopsy Standards: Ascertaining and Attributing Cause of Death*. Geneva: WHO; 2007.
- Setel PW, Macfarlane SB, Szreter S, et al. A scandal of invisibility: making everyone count by counting everyone. *Lancet*. In press. Available at <http://www.thelancet.com/journals/eop>.
- Hill K, Lopez AD, Shibuya K, et al. Interim measures for meeting needs for health sector data: births, deaths, and causes of death. *Lancet*. In press. Available at <http://www.thelancet.com/journals/eop>.
- AbouZahr CJ, Cleland J, Coullare F, et al. The way forward. *Lancet*. In press. Available at <http://www.thelancet.com/journals/eop>.
- Setel PW, Sankoh O, Mathers C, Velkoff VA, Rao C, et al. Sample registration of vital events with verbal autopsy: innovative approaches to measuring and monitoring vital statistics. *Bull World Health Organ*. 2005;83:611-617.
- Setel PW, Whiting DR, Hemed Y, Chandramohan D, Wolfson LJ, Alberti KGMM, Lopez AD. Validity of verbal autopsy procedures for determining cause of death in Tanzania. *Trop Med Int Health*. 2006;5:681-696.

For more information

<http://www.cpc.edu/measure/leadership/SAVVY.html>

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