Managing Issues Addressing the Challenges of Using Administrative Data for Statistical Purposes in Sri Lanka.

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1. ## Main Sources of Administrative Data

   Administrative data plays a vital role in the Statistical system in Sri Lanka. The main sources of administrative data in Sri Lanka are as follows.

   1.1. Vital Registration System

   The Registrar General Office (RGO) of Sri Lanka is the agency responsible for the registration of births, deaths and marriages in Sri Lanka. The recording of the vital events in Sri Lanka by RGO commenced in 1867 and the Births and Deaths registration Act of 1897 made the registration compulsory. Late registrations, false declarations have been made offences under the act. The administrative procedures for registration of vital events require that the statistical returns to be handed over to the District Registration's office before the 5th of each month. The returns of the Local Registrars are forwarded monthly to the District Scanning Centers manned by Department of Census and Statistics (DCS) officers for validation and processing. The electronic version of data is sent to the Vital Statistics Unit of the RGO, upon completion of the scanning process before the end of following month for the central processing. The data so gathered is used for the compilation of basic important demographic indicators.

   1.2 . Educational Statistics

   Educational statistics in Sri Lanka is based on the School Census, which is carried

   out annually(mid -yearly) by the Statistical Unit of the Ministry of Education (MOE).
   The core staff for the Statistical Unit of the MOE is provided by the DCS. Following
   information is collected at the School Census.

   (1) Demographic distribution of the students
   (2) Distribution of Students by Grade of study.
   (3) Particulars of teachers and non-academic staff
   (4) Physical resource availability in schools
   (5) Availability of sanitary and other facilities in schools

   The data is collected at the school level, based on the administrative data, by the

Principal of the School or by his designated appointee, who is subject to annual training by the Statistical Unit. The completed schedules are submitted to the Statistical Unit of the MOE through the existing administrative setup. The MOE publishes the School Census Report based an information so gathered. This report

however does not cover the 'International Schools'. Indicators related to education in

the country are completed either using School Census data only or School Census data in conjunction with other household survey or population census data.

1.3. Health Statistics

Medical Statistics Unit (MSU) located in the Ministry of Health (MOH) is responsible for compiling health statistics. DCS provides staff required for the MSU. There are Medical Report Officers (MROs) attached to hospitals and they are responsible for sending returns containing primary data pertaining to their respective

hospitals to the MSU. MROs extract the primary data from the documents containing

the patients particulars. The respective medical specialists should make sure that the

final diagnosis is entered in detail in the respective documents to enable the diagnosis to

be coded according to ICD (International Classification of Diseases). MSU publishes the 'Annual Health Bulletin' containing all the information so obtained. The 'Annual Health Bulletin' contains the detailed tabulations on the following items.

i.   Patients information by disease groups
ii. Information on the number of live births, birth weights, deaths (infants/mothers) and still births. Physical resource availability in the hospitals and other health facilities
iii. Information on the health personnel
iv. Information on the services provided by different types of health facilities.

Apart from the 'Annual Health Bulletin', other quarterly reports are also published.

1.4. Other Sources of Administrative Data.

Apart from these 3 major sources, the following sources of administrative data are also

used in compiling some important statistical indicators.

i.   Customs Statistics

The Statistical Unit established in the Customs Department is responsible for processing import and export data. Processed customs statistics is used for compiling some important trade and financial indices.

ii.   General Treasury
Selected financial indicators required for the computation of GDP are provided by various departments functioning under the General Treasury of Sri Lanka. Central Bank of Sri Lanka also provides financial indicators required for the estimation of GDP.

iii.   Other Government Agencies

DCS has established statistical units in all important government agencies and they provide relevant statistics on the respective subject areas. (eg: Ministry of Agriculture, Ministry of Fisheries, Ministry of Industries, Inland Revenue Department etc.)

2. Issues arising from using administrative data for Statistical Purposes

2.1 Vital Registration System.
        Following issues are observed over time, while using statistics generated thro' Vital Registration System in compiling basic demographic indicators.

I. Coverage and Non-response
   The completeness of registration of births and deaths is relatively high in the urban areas due to the following reasons. In the case of a death, the registration certificate is required for for burial or cremation, where as this requirement is not strictly enforced in some rural areas. Regarding births, the hospital authorities ensure the registration of the birth, if the birth takes place in a hospital and many hospitals are located in urban areas. However a survey conducted some years back, indicated that the completeness of the registration is relatively high. (Completeness of birth registration is over 98 present and death registration is over 94 present.)

II. Timeliness and Accuracy of reporting

The primary reporters do not strictly follow the time schedule initially planned due to various reasons. Also the accuracy of the information filled by the primary reporters is affected by the lack of training.

2.2. Educational Statistics

Even though Educational Statistics is considered a source administrative data, it is based on a well planned census. So not much problems are experienced in terms of coverage and timeliness. However following problems are unavoidable.

I. Better schools are located in urban areas and so there is a likelihood of enrolling children from adjoining rural areas in such schools. This will lead to wrong conclusions based on indicators disaggregated by geographical location.

II. Interpretation of some enrolment ratios become problematic as same parents opt to enrol their children in a school not according to the prescribed age.

2.3. Health Statistics

Following problems are encountered in compiling Health Statistics.

I. As for now only the health facilities in the public sector are covered by the system of health data collection and private sector entities are not covered.

II. Sometimes doctors are not careful enough to mention the disease in sufficient detail to classify them under correct ICD classification.

III. A delay is experienced in the receipt of returns from the hospitals due to the shortage of MRO'S

IV. The MRO'S are not adequately trained for them to do a proper job in editing and coding of the information.

V. There is a time lag of 2-3 months in sending the completed returns by the hospitals.

VI. Some information processed at regional level is subject to errors and long delays, as this operation is done manually.

3. Recommendations

In section 2 of this paper, the problems affecting the quality and timeliness of the data generated through the major sources of administrative data were

discussed. Following recommendations are made to overcome some such problems, to an extent possible.

    I.   Cause of death statistics are compiled both by RGO and MSU. The coverage of RGO statistics is believed to better, so a comparison could be made between the 2 sources to identify the problems and rectify them. This could be adopted for few selected prominent causes of death.

    II.   Recruitment of adequate number of MRO'S and training them properly to improve the quality and the timelines of the health statistics.

    III.   The system of health data collection should be extended to cover the private health facilities, as the private sector plays a significant role as a health service provider.

    IV.   Educating the doctors to be careful in giving sufficient diagnostic details for accurate coding of diseases.

    V.   Revising the 'Statistics Ordinance' to compel the public and private sector institutions to provide high quality and timely administrative data to the national statistical system.