

Quality of vital statistics obtained from civil registration

I. Basis of tabulation	Live births	Deaths	Infant deaths	Late foetal deaths	Marriages	Divorces
Present basis of tabulation:						
- date of occurrence	Yes	Yes	Yes		Yes	Yes
- date of registration					Yes	
How long has the present basis of tabulation been used?	1960	1960	1960		1960	1960

II. Estimated completeness of registration	Live births	Deaths	Infant deaths	Late foetal deaths	Marriages	Divorces
90 per cent or more	Yes	Yes	Yes		Yes	Yes
75-89 per cent						
50-74 per cent						
Under 50 per cent						
Please specify:						
(a) Year(s) to which completeness estimate refers	2013	2013	2013		2013	2013
(b) Basis of completeness estimate						
-Demographic analysis	Yes	Yes	Yes		Yes	Yes
-Dual record check						
-Questions in population census						
-Questions in sample surveys						
-Other (specify)						
-No evaluation						

Please include any reports describing completeness of registration and methods used in arriving at estimated completeness:

by check the completeness send all health offices Completed Notifications on vital statistics every week and through a comparison between the data of the ministry of interior and the ministry of health.

Quality of vital statistics obtained from other sources

Basis of vital statistics estimates is						
- Population censuses (date)						

- Sample surveys						
- Population registers	Yes	Yes	Yes		Yes	Yes
- Dual record systems						
- Other (specify)						

Please include any reports describing the methods used for estimates of vital statistics based on other sources than civil registration:

Additional metadata for selected tables

Table 1.1 - Urban / rural definitions

Please state the definition used for urban area and the period of time it has been in use:	
Please state the definition used for rural area and the period of time it has been in use:	

Table 1.6 - Grounds for legally induced abortion

<i>Please mark with an "X" the applicable options</i>	X	
a) Continuance of pregnancy would involve risk to the life of the pregnant woman greater than if the pregnancy were terminated.		
b) Continuance of pregnancy would involve risk of injury to the physical health of the pregnant woman greater than if pregnancy were terminated.		
c) Continuance of pregnancy would involve risk of injury to the mental health of the pregnant woman greater than if pregnancy were terminated.		
d) Continuance of pregnancy would involve risk of injury to the mental or physical health of the pregnant woman greater than if pregnancy were terminated.		
e) There is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.		
f) Other, please specify.		

Tables 14a, 14b, 15a and 15b - Life tables

Do the life tables refer to de Facto population or de Jure population?	de jure
Was any method used to smoothen the life table? Which one?	
Was any specific method used to close the life table at older ages (e.g., Gompertz, Makeham, etc.)? Which one?	

If any model life table or relational model was used to derive the life table (e.g., Coale-Demeny West, UN South Asian pattern), what model was used?		
<i>Please mark with an "X" the applicable options</i>	X	
What source of data was used to compute the life tables?		
a) Unadjusted vital registration deaths		
b) Adjusted vital registration deaths		
c) Information on deaths from census		
d) Life expectancy at birth		
e) Under-five mortality		
f) Infant mortality		

Table 22 Minimum legal marriage age

Please specify the minimum legal age at which marriage can take place:	Men	Women
a) With parental consent	18	18
b) Without parental consent		