



Workshop on the Principles and Recommendations for Improving Vital Statistics

Presentation on AGENDA ITEM 14

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LIVE BIRTHS

Comparison of the core topics:

1. Characteristics of the event – all captured
2. Characteristics of the newborn – all captured
3. Characteristics of the mother – the following might not be captured
 - Educational attainment
 - Duration of residence in usual place
 - Children born alive to mother during her entire lifetime
 - Foetal deaths to mother during her entire lifetime
 - Date of last previous live birth
 - Date of marriage

LIVE BIRTHS- cont'd

4. Characteristics of the father – where the father is present all except Educational status (Not sure)

However, the economic activity status is captured for both mother and father

DEATHS including FOETAL

DEATHS

In the core topics

1. Characteristics of the event – all captured
2. Characteristics of the decedent – all captured except marital status (not sure)

FOETAL DEATHS

1. Characteristics of the event– all captured
2. Characteristics of the foetus- all captured
3. Characteristics of the mother – the following might not be captured
 - Children born alive to mother during her entire lifetime
 - Foetal deaths to mother during her entire lifetime
 - Date of last previous live birth
 - Date of marriage

DEATHS including FOETAL

FOETAL DEATHS Cont'd

1. Characteristics of the father- all captured

MARRIAGES & DIVORCES

MARRIAGES

1. Characteristics of the event – all captured
2. Characteristics of the bride and groom – all captured

DIVORCES

1. Characteristics of the event– all captured
2. Characteristics of divorcees- all captured

OBSTACLES

The collection of the births, deaths , marriages and divorces data does not pose a major challenge.

However there is need to address the issue of coverage of minority groups of persons who live in remote areas who because of their religious belief do not use established medical facilities nor the formal school system.

Major challenge has to do with the collection and compilation of migration statistics as this impacts the population mid year estimates and other related indicators.

DATA QUALITY

- ✓ Proper data quality measures are generally not applied. An inadequate cross check of the births and deaths from the CR against the aggregated Census data was performed.
- ✓ Following the Census however, the number of registered births was cross referenced with the MICS data on the number of children with birth certificates.
- ✓ On completion of the Survey of Living Conditions /HBS in 2016, CSO will undertake to cross reference the CR data.
- ✓ Efforts are being made to reconcile the data with the Ministry of Health which is also compiling the data. Discussions to that effect have already begun.

STRATEGIES TO ACHIEVE COMPLETENESS AND IMPROVE DATA QUALITY

- The Civil Registry has added an IT expert to its staffing complement. This has facilitated the electronic filing of records at the main Registry. This process will be extended to some of the District Registries while some will be made redundant.
- Digitizing of the records began over 3 years ago. This has help significantly to minimize the length of time for the issuance of certificates.
- Bedside registration was implemented over a year ago at the National Hospital. This will be extended to the St. Jude's Hospital in the south in the coming new year. The majority of births occur at these two institutions.

STRATEGIES TO ACHIEVE COMPLETENESS AND IMPROVE DATA QUALITY

There is need to generate migration data in order to produce more accurate and reliable population mid year estimate. This is a matter to be addressed in the new year. Technical assistance is required.

Establishment of the Population Register in the distant future would be a great asset but this would require political buying and commitment and enormous resources.

Training in the production of the population mid-year estimates, projections and the vital statistics indicators from CR as well as from Census data (where CR is not available. This training must

Certainly there is need for better collaboration among the key players (mainly Office of the Civil Registry, Ministry of Health and CSO). Formation of a Steering Committee with all stakeholders will be proposed.