

# MEASURE Evaluation's SAVVY: A Toolset for Counting Every Person



## MEASURE Evaluation Fact sheet SAVVY: Sample vital registration with verbal autopsy

At MEASURE Evaluation, we know that improved analysis and use of data leads to better health program decision making and, ultimately, improved health outcomes. This fact sheet introduces one of the innovative toolsets created for monitoring & evaluating public health interventions.

MEASURE Evaluation is funded by the U.S. Agency for International Development (USAID) through Cooperative Agreement GPO-A-00-03-00003-00 and is implemented by the Carolina Population Center at the University of North Carolina in partnership with Constella Futures, John Snow, Inc., ORC Macro, and Tulane University.

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



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**Overview:** Accurate information about basic demographic events – births, deaths, and causes of death – is important for rational health and public policy. Yet most of the world's poorest countries lack reliable sources for these vital statistics. Sample vital registration with verbal autopsy can help solve that.

In sub-Saharan Africa, where an estimated 80% of the total disease burden is due to premature death, only four 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. 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.

Now, global leaders with the

Health Metrics Network (HMN) are searching for new ways to monitor vital events. SAVVY is a tool for sentinel registration that is fast becoming a stepping stone in HMN's initiative.

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 nationally representative sample, or selected 'sentinel' areas. The components of SAVVY are:

- Demographic surveillance system (DSS)—DSS is a complete and repeated enumeration 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 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 selected 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 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 SAVVY 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 assist 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.

**Resent Experience:** MEASURE Evaluation and the U.S. Census Bureau are expanding collaborative networks and opportunities to improve the measurement of vital events. We work closely with the Health Metrics Network and University of Queensland.

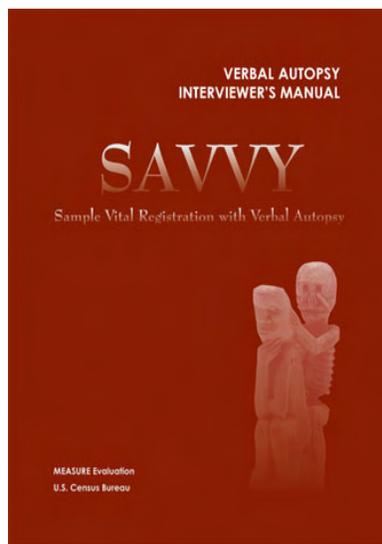
SAVVY mortality surveillance tools are part of routine mortality statistics in the sample registration systems in China and India, and the collection of rural deaths in Iran. Current activities include the proposed incorporation of a verbal-autopsy survey

in conjunction with a national census to assess national levels of HIV/AIDS mortality, and the exploration of options for measuring reductions in childhood malaria mortality.

**Key Publications and Tools:** In Fall 2006, MEASURE Evaluation will publish a series of manuals for implementing SAVVY (interviewer's manual pictured at left). Other articles and documents related to SAVVY include the following:

- Setel PW, Sankoh O, Mathers C, Velkoff VA, Rao C, et al. (2005) Sample Registration of Vital Events with Verbal Autopsy: Innovative Approaches to Measuring and Monitoring Vital Statistics. *Bulletin of the World Health Organization* 83: 611-617.
- Setel, Philip W, David R Whiting, Yusuf Hemed, Daniel Chandramohan, Lara J Wolfson, KGMM Alberti, and Alan D Lopez (2006). Validity of Verbal Autopsy Procedures for Determining Cause of Death in Tanzania. *Tropical Medicine and International Health* 5:681-696.
- Setel, Philip W, Chalapati Rao, Yusuf Hemed, Gonhuan Yang, Daniel Chandramohan, David R Whiting, KGMM Alberti, and Alan Lopez (2006). Proposed Core Verbal Autopsy Procedures for use in Sample Vital Registration, with Comparative Findings from Validation Studies in China and Tanzania. *PLoS Medicine*, on press.

These publications and others are available at the MEASURE Evaluation Web site, <http://www.cpc.unc.edu/measure>.



## For more Information

- Philip Setel, PhD ([psetel@unc.edu](mailto:psetel@unc.edu))

MEASURE Evaluation, Carolina Population Center  
University of North Carolina at Chapel Hill  
206 W. Franklin St., CB 8120  
Chapel Hill, NC 27516

919-966-7482 <http://www.cpc.edu/measure/>