

## ***0.a. Goal***

Goal 3: Ensure healthy lives and enhance well-being for people of all ages

## ***0.b. Target***

Target 3.1: By 2030, reduce the maternal mortality rate to less than 45/100,000 live births; reduce the under-1 mortality rate to less than 10 cases per 1000 live births and the under-5 mortality rate to less than 15 cases per 1000 live births (Global Target 3.1 and Target 3.2)

## ***0.c. Indicator***

Indicator 3.1.2. Percentage of births supported by skilled medical staff

## ***0.d. Series***

Proportion of births attended by skilled health personnel [3.1.2] SH\_STA\_BRTC

## ***0.e. Metadata update***

June 2021

## ***1.a. Organisation***

Ministry of Health

## ***1.f. Contact mail***

No. 138A Giang Vo - Ba Dinh - Hanoi

## ***1.g. Contact email***

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## ***2.a. Definition and concepts***

Percentage of births assisted by skilled health workers is the number of women giving birth in the reporting period who were assisted by skilled health workers per 100 women giving birth in the same period.

Skilled medical staff including obstetricians from orientation and above, midwives and above, obstetricians and paediatricians, and other certified medical staff who have been trained in procedures on “skilled birth attendants” under the program of the Ministry of Health.

## ***2.c. Classifications***

The list of administrative units in Vietnam issued together with the Prime Minister's Decision No. 124/2004/QĐ-TTg dated July 8, 2004 and the changes updated by the General Statistics Office to date December 31, 2019)

## ***3.a. Data sources***

Annual report of health facilities - Department of Maternal and Child Health, Ministry of Health

## ***3.b. Data collection method***

The Ministry of Health issues a statistical report form and sends it to the Departments of Health of the provinces/cities directly under the Central Government for collection. Periodically, the Departments of Health send data back to the Ministry of Health to summarize. The Ministry of Health reviews and synthesizes data collected from the reporting and investigation regime before publishing.

## ***3.d. Data release calendar***

Year

## ***3.e. Data providers***

Ministry of Health

## ***3.f. Data compilers***

Ministry of Health

## ***4.a. Rationale***

- Assessment of service access and quality of maternity care of a region and country.
- As the basis for planning and health intervention activities.

## ***4.b. Comment and limitations***

It is advisable to disaggregate by plain/mountainous region and ethnic minorities as the accessibility to antenatal care services of women giving birth in these areas is very different.

In addition to the periodic data source, which is the annual report of the Health Facility - the Ministry of Health, the indicator is also integrated and collected through statistical surveys such as population census, coordinated health facility survey. with the General Statistics Office.

## ***4.c. Method of computation***

Method of computation

Công thức tính:

$$\text{Tỷ lệ ca sinh được nhân viên y tế có kỹ năng đỡ (\%)} = \frac{\text{Tổng số phụ nữ đẻ được nhân viên y tế có kỹ năng đỡ trong kỳ báo cáo}}{\text{Tổng số phụ nữ đẻ trong kỳ báo cáo}} \times 100$$

## 5. Data availability and disaggregation

Indicator figures are available every year from 2016-2019

No published data by subgroup for this indicator

(Published source : SDG indicator data – ASEAN ; Health Statistical Yearbook)

## 6. Comparability/deviation from international standards

This indicator corresponds to the international norm “3.1.2 Proportion of births attended by skilled health personnel”. Comparing the metadata of the two indicators, there are some specific differences:

|                    | International Indicator   | Vietnam indicator  |
|--------------------|---|--|
| Calculation method | Number of women aged 15-49  | Number of women giving birth   |
| Split              | <ul style="list-style-type: none"> <li>- When data is collected from household surveys. Disaggregation by place of residence (urban/rural), household wealth and maternal age, geographical regions</li> <li>- When data is reported from administrative sources, disaggregated by residence</li> </ul> | <ul style="list-style-type: none"> <li>- Mother's age group;</li> <li>- Ethnicity (Kinh and other ethnic groups);</li> <li>- Urban/rural;</li> <li>- Province/city directly under the Central Government.</li> </ul> |

| Announcement period | 3 to 5 years   | Year |  |
|---------------------|--|------|--|
| Data source         | National household surveys include the Demographic and Health Survey (DHS), the Women and Children Targeted Survey (MICS), and the Reproductive Health Survey (RHS). ) and country survey based on similar methods |      | <ul style="list-style-type: none"> <li>- Statistical reporting mode issued by the Ministry of Health.</li> <li>- Census</li> <li>- Investigate medical facilities</li> </ul> |

## 7. References and Documentation

- Circular No. 03/2019/TT-BKHĐT dated January 22, 2019 stipulating the set of statistical indicators for sustainable development of Vietnam;
- Decision No. 43/2016/QĐ-TTg dated October 17, 2016 of the Prime Minister promulgating the National Statistical Survey Program;
- <https://unstats.un.org/sdgs/metadata/>