## Title: Adult mortality in Zambia: Where do Adults die?

Vesper H. CHISUMPA<sup>1, 2</sup>

1. Demography and Population Studies Programme, University of Witwatersrand, Johannesburg, South Africa 2. Department of Population Studies, University of Zambia, Lusaka, Zambia

### **Extended Abstract**

### Introduction

Adult mortality in Zambia is high and a health burden. However, little research has been done on place of death (home, health facility, other). Place of death has important implications for public health policy. An understanding of determinants of place of death among adults is important for access and utilization of health services to health planners and decision-makers. This study, therefore, examines independent contributions of determinants associated with place of death among adults aged 15-59 years old in Zambia.

# Methods

Bivariate and logistic regression analyses were performed using the 2010-2012 Sample Vital Registration with Verbal Autopsy (SAVVY) survey data. Place of death was the outcome with category of interest, an adult death occurring at a health facility. Determinants of interest associated with place of death were: age, sex, marital status, urban-rural residence, province, education, occupation, and cause of death.

## Results

In the two-year period, 50.6 % of adult deaths occurred in a health facility and 41.5 % died at home (Table 1). Among all determinants examined, urban-rural residence, education, and sex contributed most to place of death (Table 2). Adult deaths in urban areas were 2.1 times more likely to occur at a health facility (Adjusted Odds Ratio (AOR)=2.08, 95%, CI [1.60-2.70]) than in rural areas. Adults with higher education were 3.8 times (AOR=3.83, 95%, CI [1.79-8.18]) more likely to die at a health facility than those without education. The odds of adult female deaths occurring at a health facility were 1.3 times higher (AOR=1.32, 95%, CI [1.01-1.72]) than of male adult deaths. Accidents and injury deaths were 0.35 times (AOR=0.35, 95%, CI [0.25-0.55]) less likely to occur at a health facility.

#### Conclusion

Over half of adult deaths occur at a health facility. There is need, therefore, for improvement in health facilities to ensure avoidable adult mortality. Health planners and decision-makers need to understand where most adult deaths are taking place and determinants. Place of death can be used as an indicator of access and utilization of health services in Zambia.

Characteristic	Health Facility	Home	Other	Total
Residence***				
Rural	243(40.7)	306(51.4)	45(7.6)	596(55.3)
Urban	302(62.7)	141(29.3)	38(7.8)	482(44.7)
Province		× /		
Central	35(50.3)	27(39.8)	7(9.9)	69(6.4)
Copperbelt	41(61.0)	23(34.8)	3(4.2)	67(6.2)
Eastern	101(55.3)	75(41.2)	6(3.5)	183(16.9)
Luapula	59(38.7)	85(55.2)	9(6.1)	153(14.2)
Lusaka	130(53.0)	84(34.3)	30(12.4)	245(22.7)
Northern	34(48.9)	28(40.3)	8(10.8)	70(6.5)
North-western	23(56.7)	15(36.7)	3(6.6)	40(3.7)
Southern	68(54.0)	46(36.3)	11(9.0)	126(11.7)
Western	55(43.5)	64(51.1)	6(6.5)	126(11.6)
Sex**				
Male	284(48.8)	240(41.1)	58(9.9)	582(54.0)
Female	261(52.6)	208(41.9)	25(5.1)	496(46.0)
Age group				
15-24	91(52.0)	63(36.2)	21(11.8)	175(16.2)
25-34	165(49.6)	144(43.3)	24(7.1)	332(30.8)
35-44	168(53.7	122(39.0)	20(6.4)	313(29.0)
45-54	91(46.2)	91(46.3)	15(7.5)	197(18.3)
55-59	30(49.1)	27(44.1)	4(6.7)	62(5.7)
Education level***				
None	32(33.6)	61(63.5)	3(2.9)	96(8.9)
Primary	231(45.1)	243(47.6)	35(6.9)	511(47.4)
Secondary	224(59.3)	116(30.7)	37(9.8)	377(35.0)
Higher	43(68.4)	15(23.5)	5(8.1)	63(5.9)
Marital status**		. ,		
Never married	124(49.2)	96(38.1)	32(12.8)	253(23.5)
Married/living with partner	297(52.4)	226(39.9)	43(7.6)	566(52.5)
Widowed	52(54.3)	42(43.7)	1(1.0)	96(8.9)
Divorced/Separated	72(45.2)	79(49.9)	7(4.3)	159(14.7)
Occupation***				
Legislators/Senior Officials/Managers	15(74.3)	4(20.6)	1(5.1)	20(1.8)
Professionals	15(67.6)	4(18.0)	3(14.4)	22(2.1)
Technicians/Associate Professionals	15(65.8)	8(34.2)		23(2.1)
Clerks	41(60.3)	23(33.9)	4(5.8)	67(6.2)
Service/Shop/Market Sales Workers	60(60.8)	29(29.2)	10(10.0)	99(9.2)
Skilled Agricultural/Fishery Workers	120(36.2)	189(56.8)	22(6.7)	332(30.8)
Craft & related Trade Workers	20(66.2)	4(13.9)	6(19.9)	30(2.8)
Plant & Machine Operators/Assemblers	35(64.0)	12(22.0)	8(14.0)	55(5.1)
Elementary Occupations	224(52.2)	175(40.7)	29(6.7)	430(39.9)
Cause of death***				
HIV disease	239(54.5)	186(42.4)	13(2.9)	439(40.7)
Diseases of circulatory system	29(49.1)	28(47.8)	2(3.2)	59(5.5)
Tuberculosis	42(49.3)	42(48.5)		86(7.9)
Accident & Injuries	38(31.6)	40(33.4)	42(35.0)	120(11.2)
Malaria	37(53.1)	28(40.1)	5(6.8)	71(6.6)
Neoplasms	22(66.6)	11(33.4)		33(3.1)
Pneumonia/ARI	16(65.9)	9(34.1)		25(2.3)
Senility/Old age	- ( )	3(100)		3(0.3)
Diabetis mellitus	13(67.8)	6(32.2)		19(1 7)
Diarrhoeal diseases	8(49.8)	6(38.4)	2(11.8)	15(1 4)
All other causes	100(48.0)	88(42.5)	20(9.4)	208(19.3)
	100(40.0)	00(72.0)	20(0.4)	_00(10.0)
Total	545(50.6)	447(41.5)	83(7.7)	1078(100)

Table 1: Number and percentage distribution of adult deaths (15-59 years) by place of death and background characteristics

Note: \*\*\*Significant at p<0.00; \*\*=p<0.05 and \*=p<0.10; Ref = Reference Category

Predictor	Adjuste	ed Odds Ratio	z-value	
Residence				
Rural	Ref			
Urban		2.08	5.46***	
Sex				
Male	Ref			
Female		1.32	2.07**	
Education level				
None	Ref			
Primary		1.56	1.81*	
Secondary		2.49	3.52***	
Higher		3.83	3.46***	
Cause of death				
HIV disease	Ref			
Diseases of circulatory system		0.79	-0.79	
Tuberculosis		0.88	-0.51	
Accident & Injuries		0.35	-4.49***	
Malaria		0.83	-0.75	
Neoplasms		1.32	0.67	
Pneumonia/ARI		1.59	1.07	
Diabetis mellitus		1.46	0.67	
Diarrhoeal diseases		0.94	-0.13	
All other causes		0.73	-1.82*	

Table 2: Adjusted odds ratios by predictor variables

Note: \*\*\*Significant at p<0.00; \*\*=p<0.05 and \*=p<0.10; Ref = Reference Category