PHG Needs Assessment Calculator China Congenital Rubella Syndrome

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(There is no sheet RUB-NA2.)

Intro

China Shared Data Demographic, maternal health and socio-economic indicators

Please read first! If you have already completed a needs assessment for a different topic in this country, you will be able to copy the Demography information from that Calculator into here. The information should be the same.

By default, the Toolkit contains information at the national level.

If you would like to use a different population, then replace country information with that of your specific population of interest.

Number of persons by age-group and sex		Estimates		Your estimates			Cho	sen estima	ates
Age group	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-4 years	42835	39883	82718			0			0
5-9 years	40441	37578	78019			0			0
10-14 years	42369	40015	82384			0			0
15-19 years	40818	38700	79518			0			0
20-24 years	41325	39027	80352			0			0
25-29 years	37390	36097	73487			0			0
30-34 years	32825	30710	63535			0			0
35-39 years	28778	27774	56552			0			0
40-44 years	28598	27676	56274			0			0
45-49 years	25835	24487	50322			0			0
50-54 years	20215	19794	40009			0			0
55-59 years	15735	15426	31161			0			0
60-64 years	11956	12164	24120			0			0
65+ years	23298	27424	50722			0			0
Total	432418	416755	837271	0	0	0	0	0	0
Female population aged 15-44 years		199984			-			-	
Data year		2007 reporte	ed in 2007						
Source, Year			UN 2011						

Ethnicity. Please enter data for the main ethnic groups if you are working with a population that is different from that of the country.

Ethnic group	Number	% population

Demography

	Estimate	Source, Year	Your	Source,	Chosen	Source,
Fertility and mortality			estimate	Year	estimate	Year
Crude birth rate: live births (LB) / year / 1000 population	12.15	Unicef, 2013				
Still birth rate: still births (SB) / year / 1000 total births	9.83	WHO, 2009				
Total births in 1000s (LB+SB) per year	16364	Unicef, 2013				
Infant mortality rate: infant deaths / 1000 LB / year	12.6	Unicef, 2013				
Under-5 mortality rate: U5 deaths / 1000 LB / year	14.6	Unicef, 2013				
Percentage births in women >35 years						
Life expectancy at birth (yrs)	73.46	Unicef, 2013				
% of marriages consanguineous						

	Estimate	Source, Year	Your	Source,	Chosen	Source,
Maternal health			estimate	Year	estimate	Year
Prenatal visits – at least 1 visit (%)	94.1	Unicef, 2013				
Prenatal visits – at least 4 visits (%)	-	Unicef, 2013				
Births attended by skilled health personnel (%)	99.6	Unicef, 2013				
Contraception prevalence rate (%)	84.6	Unicef, 2013				
Unmet need for family planning (%)	2.3	WHO, 2001				
Total fertility rate	1.58	Unicef, 2013				
% home births						
% births at health care services	97.80	Unicef, 2013				
Newborn health	Estimate	Source, Year	Your estimate	Source, Year	Chosen estimate	Source, Year
Number of neonatal examinations by SBA / trained staff						
% neonatal examinations by SBA/ trained staff						

Socio-economic indicators	Estimate	Source, Year	 Source, Year	Source, Year
Gross national income per capita (PPP int. \$)		Unicef, 2013		
% population living on < US\$1 per day		Unicef, 2013		
Birth registration coverage (%)				
Death registration coverage (%)	<25	WHO, 2007		

LB = live births PPP = purchasing power parity SBA = skilled birth attendant

China Shared Data Health Services Data

Please read first! If you have already completed a needs assessment for a different topic in this country, you will be able to copy the Health Services information from that Calculator into here. The information should be the same.

This section provides health-service-related information for your country.

By default, the Toolkit contains information at the national level.

If you would like to use a different population, then replace country information with that of your specific population of interest.

			Your		Chosen	
Health Expenditure	Estimate	Source, Year	estimate	Source, Year	estimate	Source, Year
Per capita total expenditure on health (PPP int. \$)	432.3	WHO 2011				
Total expenditure on health as percentage of GDP	5.2	WHO 2011				
Per capita government expenditure on health (PPP int. \$)	241.6	WHO 2011				
External resources for health as percentage of total expenditure on health	0.1	WHO 2011				
General government expenditure on health as percentage of total expenditure on health	55.9	WHO 2011				
Out-of-pocket expenditure as percentage of private expenditure on health	78.8	WHO 2011				
Private expenditure on health as percentage of total expenditure on health	44.1	WHO 2011				
General government expenditure on health as percentage of total government expenditure	12.5	WHO 2011				

			Your		Chosen	
Health Workforce	Estimate	Source, Year	estimate	Source, Year	estimate	Source, Year
Number of nursing and midwifery personnel	1854818	WHO, 2009				
Nursing and midwifery personnel density (per 10,000 population)	13.8	WHO, 2009				
Number of physicians	1905436	WHO, 2009				
Physician density (per 10,000 population)	14.15	WHO, 2009				
Number of obstetricians						
Number of paediatricians						
Number of paediatric surgeons						
Number of paediatric cardiac surgeons						
Number of paediatric neurosurgeons						
Number of clinical geneticists						
Number of genetic counsellors						
Number of community health workers						
Number of skilled birth attendants (SBA)						
Density of SBA						
Number of lab staff providing cytogenetic testing						
Number of lab staff providing molecular genetics						
Number of lab staff providing biochemical tests for genetics						

Number of skilled health attendants

			Your		Chosen	
Infrastructure	Estimate	Source, Year	estimate	Source, Year	estimate	Source, Year
Number of maternity units						
Number of services providing specialised care for people with CD						
Number of family planning services						
Number of preconception services						
Number of services providing prenatal care						
Number of services providing newborn care						
Number of facilities providing genetic services						
Number of laboratories providing cytogenetics						
Number of laboratories providing molecular genetics						
Number of laboratories providing biochemical tests for genetics						
Number of facillities for safe terminations of pregnancies for fetal defects						

PPP = purchasing power parity

GDP = gross domestic product

SBA = skilled birth attendant

CD = congenital disorders

Congenital Rubella Syndrome RUB Epidemiology 1.1: Country epidemiology

Epidemiological indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Year of estimate						
Prevalence at birth and by age-group (/100)0)					
Live birth prevalence (LB)						
Stillbirth prevalence (SB)						
Total birth prevalence (LB+SB)						
All age groups						
<1 year olds						
1-4 year olds						
5-14 year olds						
15-44 year olds						
45+ year olds						
Number of cases by age group						
Annual live births						
All age groups						
<1 year olds						
1-4 year olds						
5-14 year olds						
15-44 year olds						
45+ year olds						
% cases by level of impairment						
No or minor disability						
Moderate disability						
Severe disability						
Mortality and morbidity						
Mean life expectancy (yrs)						
No. deaths < 1yr						
No. deaths 1-4 yrs						
No. deaths < 5 yrs						
Infant mortality / 1000 LB						
Under-5 mortality / 1000 LB						
Years of life lost						

Congenital Rubella Syndrome RUB Epidemiology 1.2: International comparison

	Your chosen			
Epidemiological indicator	estimates	Country	Region	World
Prevalence at birth and by age-group (/1000 p	eople)		(Asia, East)	
Live birth prevalence (LB)				
Stillbirth prevalence (SB)				
Total birth prevalence (LB+SB)				
All age groups				
<1 year olds				
1-4 year olds				
5-14 year olds				
15-44 year olds				
45+ year olds				
Number of cases by age-group				
Annual live births				
All age groups				
<1 year olds				
1-4 year olds				
5-14 year olds				
15-44 year olds				
45+ year olds				
% cases by level of impairment				
No or minor disability				
Moderate disability				
Severe disability				
Mortality and morbidity				
Mean life expectancy (yrs)				
No. deaths < 1yr				
No. deaths 1-4 yrs				
No. deaths < 5 yrs				
Infant mortality / 1000 LB				
Under-5 mortality / 1000 LB				
Years of life lost				

Congenital Rubella Syndrome

RUB Epidemiology 1.3: Country epidemiology for rubella

Epidemiological indicator	Your estimates	Range		Reynna (i 898,	
			Country	East)	World
Rubella immunisation coverage (%)			99		
Reported number of rubella cases					
Reported number of congenital rubella syndrome cases			40156		
Live birth prevalence (LB)					
Stillbirth prevalence (SB)					
Data year			2012		

Congenital Rubella Syndrome

RUB Epidemiology 2.1: Data on affected pregnancies: Research studies

Study author, year, site	Sample size	Study quality and representativeness	Main findings

Based on the studies listed above (or in section RUB-E2.1 of the Tool), enter the best estimates for the prevalence of affected births, stillbirths and terminations of pregnancy in the country, and a range of values to reflect uncertainty or within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Estimates for the total country/territory	Number of affected live births	LB prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			
Estimates for the total country/territory	Number of affected stillbirths	SB prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			
Estimates for the total country/territory	Number of terminations of pregnancy due to condition		Comments
Best estimate			
Lower estimate			
Higher estimate			

China

Congenital Rubella Syndrome RUB Epidemiology 2.2: Data on affected pregnancies: Surveillance

Based on surveillance data, enter the best estimates for the prevalence of the condition in live births, stillbirths and terminations of pregnancy. Give a range of values to reflect uncertainty and within-country variation, and use comments for information on data quality, uncertainty and representativeness.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Estimates for the total country/territory	Number of affected live births	Birth prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			

Estimates for the total country/territory	Number of affected stillbirths	Stillbirth prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			
Estimates for the total country/territory	Number of terminations of pregnancy due to condition	ТоР / 1000 ТВ	Comments
Best estimate			
Lower estimate			
Higher estimate			

China

Congenital Rubella Syndrome

RUB Epidemiology 2.3: Data on affected pregnancies: Other sources

	Source 1:	Source 2:	Notes
Enter year and source of data – use last year with information available.			
Basic Numbers			
Number of affected live births / year, from data source			
Total number of live births / year, from data source]
Number of affected still births / year, from data source]
Total number of stillbirths / year, from data source]
Number of ToP for affected fetus / year from data source			7
Total number of affected births / year (live and still)	0		Number of affected live births + Number of affected still
Total number of births / year, from data source	0		births Total number of live births + Total number of still births
Total number of ToP / year, from data source			
Total number of women aged 15-44			
Live birth prevalence: recorded and estimated			
Recorded live birth prevalence (affected recorded live births / 1000 recorded total births)	#DIV/0!	#DIV/0	!
Estimated completeness of recording: what proportion of true affected live births in your data source were recorded?			Range: 0 to 1
Estimated coverage of recorded live births (number of recorded live births / total live births in country or territory)			Range: 0 to 1
Estimated live birth prevalence (recorded prevalence / completeness)	#DIV/0	#DIV/0	1
Estimated true number of affected live births in data source (number of recorded affected live births / completeness)	#DIV/0!	#DIV/0	!
Estimated number of affected live births in total population (number of affected live births from data source / (coverage x completeness))	#DIV/0!	#DIV/0	!
Stillbirth prevalence: recorded and estimated			1
Recorded stillbirth prevalence (affected recorded still births / 1000 recorded total births)	#DIV/0	#DIV/0	1
Estimated completeness of recording: what proportion of true affected stillbirths in your data source were recorded?			Range: 0 to 1
Estimated coverage of recorded stillbirths (number of recorded still births / total still births in country or territory)			Range: 0 to 1
Estimated stillbirth prevalence (recorded prevalence / completeness)	#DIV/0!	#DIV/0	1
Estimated true number of affected stillbirths in data source (number of recorded affected still births / completeness)	#DIV/0!	#DIV/0	1
Estimated number of affected stillbirths in total population (number of affected still births from data source / (coverage x completeness))	#DIV/0!	#DIV/0	1

ToP prevalence: recorded and estimated			
Recorded ToP prevalence (ToP in affected fetuses / 1000 women aged 15-44)	#DIV/0!	#DIV/0!	
Estimated completeness of recording: what proportion of true affected pregnancy terminations in your data source were recorded?			Range: 0 to 1
Estimated coverage of recorded ToP (number of recorded ToP / total ToP in country or territory)			Range: 0 to 1
Estimated ToP prevalence (recorded prevalence / estimated completeness)	#DIV/0!	#DIV/0!	
Estimated true number of ToP in data source (number of recorded ToP / completeness)	#DIV/0!	#DIV/0!	
Estimated number of ToP in total population (number of ToP from data source / (coverage x completeness))	#DIV/0!	#DIV/0!	
Based on the sources above, enter the best prevalence estimates for your population, and a range within country variation.	of values to reflect unce	rtainty of estimates and	
If studies are not representative of the national population you may need to weight your data (see t with the calculations).	he Guide for explanation	n on weighting and help	
Estimates for the whole country/territory	Number of affected live births	LB prevalence / 1000 TB	
Best estimate			
Lower estimate			
Higher estimate			

Higher estimate		
Estimates for the whole country/territory	Number of affected still births	SB prevalence / 1000 TB
Best estimate		
Lower estimate		
Higher estimate		
Estimates for the whole country/territory	Number of ToP due to condition	ТоР /1000 ТВ
Best estimate		
Lower estimate		

China

Congenital Rubella Syndrome RUB Epidemiology 2.4: Summary of affected pregnancies

Indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Number of annual affected live births						
Annual birth prevalence / 1000 TB						
Number of annual affected still births						
Annual Stillbirth prevalence / 1000 TB]
Number of terminations of pregnancy in affected fetuses /year						
Affected ToP / 1000 women 15-44/ year						1

If there are specific sub-types of condition, you can repeat this exercise below. However, you should consider (a) whether subtypes would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

China

Congenital Rubella Syndrome RUB Epidemiology 2.5: Sub-population variation in affected pregnancies

If the birth prevalence rates vary by population sub-group (e.g. geographically or by another factor), indicate any population groups with different prevalence estimates from the whole population and describe reasons for variation. If a group is substantially different from the general population, you may wish to conduct a needs assessment for that group alone.

Population sub-group	Number of affected live births	LB prevalence / 1000 TB	Reason for variation

Population sub-group	Number of affected stillbirths	SB prevalence / 1000 TB	Reason for variation
Population sub-group	Number of ToP in affected	ToP prevalence / 1000 TB	Reason for variation
Population Sub-group	pregnancies	TOP prevalence / Tooo TB	Reason for variation

China Congenital Rubella Syndrome RUB Epidemiology 3.1: Mortality data: Research studies

Source, year, site	Sample size	Study quality and representativeness	Main findings

Based on the studies above, enter the best estimates for the specific mortality by age-group e.g. infant, under-5s, etc., as appropriate, and a range of values to reflect uncertainty of estimates and within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Mortality estimates	Number of deaths	Ratio (deaths / 1000 LB)	Comments
Neonatal group (<28 days)			
Best estimate			
Lower estimate			
Higher estimate			
Infant group (<1 year)			
Best estimate			
Lower estimate			
Higher estimate			
Under-5 group (<5 years)			
Best estimate			
Lower estimate			
Higher estimate			
Other age group:			
Best estimate			
Lower estimate			
Higher estimate			

LB = live births

Congenital Rubella Syndrome

RUB Epidemiology 3.2: Mortality data: Vital registration data

Fill in the blank cells based on your vital registration data.		
Enter year and source of data		
Registered data		
Total registered live births		
Registered condition-specific neonatal deaths (first 28 days of life)		
Registered condition-specific infant deaths (first year of life)		
Registered condition-specific under-5 deaths (first 5 years of life)		
Registered condition-specific neonatal mortality ratio (condition-specific neonatal deaths /(Total registered live births/ 1000))	#DIV/0!	
Registered condition-specific infant mortality ((condition-specific infant deaths /(Total registered live births/	#DIV/0!	
Registered condition-specific under-5 mortality (condition-specific under-5 deaths / (Total registered live births/ 1000))	#DIV/0!	

Adjustment for under-ascertainment of cause of death and sub-registration of deaths: Enter estimates in the highlighted cells. It is not always possible to adjust the estimates, in which case you may give the value '1', accepting that the estimates in these cases will usually be biased towards low values. (Or you may move to the next section.) It is assumed that under-ascertainment is stable across age-groups; if ascertainment varies by age-group, you could use separate estimates for each age group.

Estimated completeness of recording: what proportion of deaths in affected persons were registered as such?		Range: 0 to 1
Population coverage: what proportion of the total country/territory population is covered by the vital		Range: 0 to 1
Existration?	0	
Estimated values for the total country/ territory population		
Estimated number of live births in total population (Total registered live births/population coverage)	#DIV/0!	
Estimated number of neonatal deaths in total population (number of deaths registered in neonatal period / ascertainment)	#DIV/0!	
Estimated number of infant deaths in total population (number of deaths registered in first year of life / ascertainment)	#DIV/0!	
Estimated number of under-5 deaths in total population (number of deaths registered in under-5s / ascertainment)	#DIV/0!	
Estimated neonatal mortality ratio (estimated neonatal deaths / 1000 live births)	#DIV/0!]
Estimated infant mortality ratio (estimated infant deaths / 1000 live births)	#DIV/0!	
Estimated under-5 mortality ratio (estimated under-5 deaths / 1000 live births)	#DIV/0!	

China Congenital Rubella Syndrome

RUB Epidemiology 3.3: Mortality data: Other sources

Source, year, site	Sample size	Data quality and representativeness	Main findings

Based on data from the sources above, enter estimates for the disease-specific deaths and mortality rates in your population.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Neonatal mortality		Infant mortality		Under-5 mortality	
Estimates for the total country/territory	Value	Ratio/1000 LB	Value	Ratio/1000 LB	Value	Ratio/1000 LB
Best estimate						
Lower estimate						
Higher estimate						

Congenital Rubella Syndrome RUB Epidemiology 3.4: Summary mortality estimates

Indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Year of data collection						
Number of annual deaths in affected persons						
Number of annual live births (in 1000s)						
Number of annual affected neonatal deaths						7
Number of affected neonatal deaths / 1000 LB						
Number of annual affected infant deaths						
Number of affected infant deaths / 1000 LB						7
Number of annual affected under-5 deaths						
Number of affected under-5 deaths / 1000 LB						7
Mean life expectancy at birth in affected people						
Other indicators (e.g. survival following surgical procedure, etc)						

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

Congenital Rubella Syndrome RUB Epidemiology 3.5: Sub-population variation in mortality

Age group: neonatal Population sub-group	Cause-specific, group-specific neonatal mortality ratio / 1000 LB	Reason for variation

Age group: infant Population sub-group	Cause-specific, group-specific infant mortality ratio / 1000 LB	Reason for variation

Age group: under 5 Population sub-group	Number of deaths in affected persons	Cause-specific, group-specific under-5 mortality ratio / 1000 LB	Reason for variation

Age group: Population sub-group		Cause-specific, group-specific mortality ratio / 1000 population	Reason for variation
Population Sub-group	•	2 11	

Congenital Rubella Syndrome

RUB Epidemiology 4.1: Population prevalence: Research studies

Study, year, site	Sample size	Study quality and representativeness	Main findings

Based on the studies above, enter the best estimates for population prevalence, and a range of values to reflect uncertainty of estimates and within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Prevalence / 1000 persons	Range	Comments
Best estimate			
Lower estimate			
Higher estimate			

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

China

Congenital Rubella Syndrome

RUB Epidemiology 4.2: Population prevalence: Other sources

Source, year, site	Sample size	Data quality and representativeness	Main findings

Based on data from the sources above, enter estimates for the disease-specific deaths and mortality rates in your population.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Prevalence / 1000 persons	Range	Comments
Best estimate			
Lower estimate			
Higher estimate			

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

China

Congenital Rubella Syndrome

RUB Epidemiology 4.3: Summary of population prevalence

Source of estimates	Estimated total population number of affected persons	Range	Estimated total population prevalence / 1000 persons	Range
1				
2				
3				
4				
5				
PHGDB				
Chosen estimates				

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

China

Congenital Rubella Syndrome

RUB Epidemiology 4.4: Sub-population prevalence variation

Population sub-group	Number of affected people	Total number of people in population sub-group	Population prevalence per 1000 people	Reason for variation
			#DIV/0!	

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

Formula in column D: Number of affected people/ (Total number of people in population subgroup/1000)

Congenital Rubella Syndrome

RUB Intervention 1: Effect of immunisation on rubella incidence in women

Baseline prevalence of rubella in women aged 15-44 per 1000		
Baseline prevalence of rubella in women ageu 15-44 per 1000		
Variables		
Coverage of rubella immunisation		Range: 0 to 1
		Range: 0 to 1
Proportion of women of reproductive age receiving immunisatio	n	
Effectiveness of immunisation (proportion of cases prevented among those immunised)		Range: 0 to 1
Results		
% prevalence reduction due to immunisation ¹	0%	
Prevalence reduction due to immunisation, per 1000 women aged 15-44 ²	0.000	
Final prevalence of rubella in women aged 15-44 per 1000 ³	0.000	

TB = total births (live births + still births)

¹ (Coverage of immunisation X Proportion of women receiving immunisation) X Effectiveness of immunisation

² % prevalence reduction due to immunisation X Baseline prevalence of rubella in women

³ Baseline prevalence of rubella in women – Prevalence reduction due to immunisation

China

Congenital Rubella Syndrome

RUB Intervention 2: Effect of maternal rubella diagnosis and ToP on congenital rubella

Baseline prevalence: rubella-affected pregnancies per 1000 TB]
Variables		
Proportion of rubella cases in pregnancy that are diagnosed		Range: 0 to 1
Proportion of diagnosed cases ending in pregnancy termination		Range: 0 to 1
Results		
% prevalence reduction due to PND & pregnancy termination	0%	
Prevalence reduction due to PND & pregnancy termination, per 1000 TB	0.000	
Final prevalence of congenital rubella after PND & pregnancy termination, per 1000 TB	0.000]

PND = prenatal diagnosis

TB = total births (live births + still births)

ToP = termination of pregnancy

China Congenital Rubella Syndrome RUB Needs Assessment 1: Quantitative baseline

Table RUB-NA1a Burden of Congenital Rubella Syndrome in pregnancy, at birth and at population level

	Chosen estimates			Notes
Indicator	Number (n)		Range of prevalence (/1000 TB)	
Annual affected live births (LB)	0	0	0	Drawn from sheet E2.4
Annual affected stillbirths (SB)	0	0	0	Drawn from sheet E2.4
Annual affected births (LB+SB)	0	0		Drawn from sheet E2.4
Annual affected persons (all age groups)	0	0	0	Drawn from sheet E1.1

Table RUB-NA1b Congenital Rubella Syndrome mortality indicators

	Chosen estimates			Notes
Indicator	Number (n)		Range of prevalence (/1000 TB)	
Annual overall mortality	0			Drawn from sheet E3.4
Annual neonatal mortality	0	0	0	Drawn from sheet E3.4
Annual infant mortality	0	0	0	Drawn from sheet E3.4
Annual under-5 mortality	0	0	0	Drawn from sheet E3.4
Mean life expectancy at birth among affected people	0		0	Drawn from sheet E3.4

TB = total births (live births + stillbirths)

Congenital Rubella Syndrome

RUB Needs Assessment 3: Quantitative assessment of interventions

Table RUB-NA3a	Estimated prevalence in the absence of interventions for Congenital Rubella Syndrome		
Indicator	Number (n) Prevalence (n/1000)		
Potential live births			
Potential still births			

Table RUB-NA3b	Current situation in relation to interventions before birth				
Intervention	Coverage (%) Cases averted (n) Cases averted/1000 LB				
Effect of family planning, education					
Effect of vaccination					
Effect of prenatal diagnosis					
Effect of termination of pregnancy					
Overall effect					

Table RUB-NA3c	Target situation in relation to interventions before birth			
Intervention	Coverage (%)	Cases averted (n)	Cases averted/1000 LB	
Effect of family planning, education				
Effect of vaccination				
Effect of prenatal diagnosis				
Effect of termination of pregnancy				
Overall effect				

Table RUB-NA3d	Current situation in	Current situation in relation to interventions after birth		
Intervention	Coverage (%)	Cases managed (n)	Cases managed/1000 LB	
Effect of newborn diagnosis				
Effect of treatment				
Effect of social care and support				
Effect of rehabilitation				
Overall effect				

Table RUB-NA3e	Target situation in r	Target situation in relation to interventions after birth		
Intervention	Coverage (%)	Cases managed (n)	Cases managed/1000 LB	
Effect of newborn diagnosis				
Effect of surgical treatment				
Effect of social care and support				
Effect of rehabilitation				
Overall effect				

Table RUB-NA3f	Current and desired outc	omes		
	Current situation		Target situation	
Indicator	Annual number (n)	Incidence (n/1000)	Annual number (n)	Incidence (n/1000)
Estimated affected pregnancies	·	·	·	
Live births (LB)	() ()	
Still births (SB)	() ()	
All births (LB+SB)	() ()	
Estimated population prevalence		·		
All age groups				
Estimated mortality	· ·		·	
Neonatal deaths	() ()	
Infant deaths	() ()	
Under-5 deaths	()	