

# **India's Pandemic Toll Remains Elusive**

#### **Context**

The COVID-19 pandemic exposed profound weaknesses in global health systems. In India, the officially reported death toll of roughly 5.33 lakh has been challenged by researchers, who point to civil registration and medical certification data indicating a far higher real impact.

## **Excess Mortality: A Stark Indicator**

Excess mortality measures deaths above the expected baseline under normal conditions. India's Civil Registration System shows:

Year Registered Deaths (lakh) Year-on-Year Change

2019 76.4

2020 81.11 +6.1 %

2021 102 (1.02 crore) +25.8 %

These surges imply that many COVID-19 fatalities went uncounted. The World Health Organization's estimate of roughly 47 lakh pandemic-related deaths aligns more closely with excess mortality trends.

### Inadequacies in Medical Certification and Registration

- Only 23.4 % of registered deaths were medically certified in 2021.
- In 2020, 45 % of deaths occurred without any medical attention.
- Misclassification risks surge when certification is weak or absent.
- A Kerala field study found daily cremations increasing outside designated COVID facilities, with just 22.8 % of cases carrying medically documented causes.

#### The Hidden Toll: Indirect Deaths and Systemic Disruption

Beyond direct viral fatalities, factors driving excess deaths include:

• Avoidance of healthcare services for fear of infection

- Hospital bed and oxygen shortages
- Interruptions in diagnosis and treatment of chronic conditions
- Lockdown-induced delays in seeking emergency care

In Kerala, 34 % of additional deaths were linked to these indirect causes, and 9 % of fatalities were potentially misclassified—warning signs for states with weaker health infrastructure.

#### Structural Deficiencies in Mortality Surveillance

- Declaring civil registration an essential service was overlooked during lockdowns, creating reporting gaps.
- National Family Health Survey-5 data show that ~29 % of deaths (2016–2020) went unregistered.
- Regional disparities in adoption of Medical Certification of Cause of Death (MCCD) rules hinder a unified picture.
- Opacity in mortality data undermines public health policymaking and accountability.

#### The Way Forward: Reform and Systematic Inquiry

- 1. Commission an independent, large-scale inquiry into pandemic mortality.
- 2. Integrate decedent mortality modules in the next national Census.
- 3. Conduct retrospective mortality surveys in high-impact districts.
- 4. Mandate universal, timely medical certification with digital reporting.
- 5. Strengthen CRS infrastructure—ensure registration even during emergencies.
- 6. Build regional capacity for accurate cause-of-death determination.

# Conclusion ILLUMINATING YOUR PATH

Excess deaths, indirect fatalities, and under-registration have obscured COVID-19's true toll in India. Strengthening death registration, medical certification, and data transparency is essential—not only to honour those lost, but to prepare for future health crises with resilience and accountability.

#### Further Avenues to Explore

- Comparative analysis with excess-mortality reporting in Brazil and South Africa
- Role of community health workers in improving rural death registration
- Leveraging mobile and GIS technologies for real-time mortality tracking
- Policy frameworks for rapid mortality audits during public health emergencies