



Economic and Social Council

Distr.: General
31 October 2014

Original: English

Economic and Social Commission for Asia and the Pacific

Ministerial Conference on Civil Registration and
Vital Statistics in Asia and the Pacific

Bangkok, 24-28 November 2014

Item 6 of the provisional agenda*

**Policy priorities for improving civil registration
and vital statistics in Asia and the Pacific**

State of civil registration and vital statistics in Asia and the Pacific and overview of supporting initiatives

Note by the secretariat**

Summary

The present document contains a review of the state of civil registration and vital statistics systems in Asia and the Pacific, drawing upon self-assessments completed by 47 members and associate members. It also provides a situation analysis based on relevant ongoing subregional and global initiatives, and a solid evidence basis in preparation for the “Asian and Pacific Civil Registration and Vital Statistics Decade, 2015-2024”.

Governments and development partners are invited to incorporate the present review’s findings into their endeavours to “Get every one in the picture” through implementation of the regional action framework on civil registration and vital statistics in Asia and the Pacific, which aims to accelerate and focus the efforts of the region’s Governments and development partners in improving civil registration and vital statistics.

The Conference, during its deliberations on policy priorities, may wish to refer to the information contained in the present document. Moreover, it may wish to provide guidance on ensuring a coherent regional approach to improving civil registration and vital statistics during the “Asian and Pacific Civil Registration and Vital Statistics Decade, 2015-2024”, thus guaranteeing maximum impact at the national level.

* E/ESCAP/MCCRVS/L.1/Rev.1.

** The late submission of the present document to conference services was due to the need to address developments related to the Global Financing Facility in Support of Every Woman Every Child, which was announced at the end of September 2014.

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I. Civil registration and vital statistics: “Get every one in the picture”

1. Civil registration is defined as the continuous, permanent, compulsory and universal recording of the occurrence and characteristics of vital events.¹ Vital events include the life and death of individuals, as well as events that affect an individual’s family or civil status. They include births and deaths as well as marriages, divorces and annulments, adoptions, legitimations and recognitions. In addition to information on the location and date of the event, the recorded characteristics of a death include medically certified information on its underlying and immediate causes.

2. The main purpose of civil registration is to provide a permanent record of vital events and to issue related legal documentation that serves as proof of registration. However, a functional civil registration system covers the whole population and is available on a continuous basis, and therefore also offers the most complete and timely source of vital statistics on the population in a country, with the added benefit of being able to disaggregate them in a variety of ways.

3. Together, the institutions, people and public administration systems that notify and record vital events and use the information for the production of

¹ *Principles and Recommendations for a Vital Statistics System: Revision 3* (United Nations publication, Sales No. E.13.XVII.10), chap. II. Available from <http://unstats.un.org/unsd/Demographic/standmeth/principles/M19Rev3en.pdf>.

vital statistics are referred to as the “civil registration and vital statistics system” of a country.

An essential national resource

4. Well-functioning civil registration and vital statistics systems are strongly associated with multiple benefits at the individual and societal levels.

5. At the individual level, the official registration of important life events enables individuals to establish legal identity, civil status and family relationships, participate in modern societies, and exercise their civil and political rights. Legal identity enables people to vote, and to claim inheritance and insurance benefits, and spousal pension rights. Registration facilitates access to a range of social and economic services, including health care, child protection and benefits, schooling, academic and professional qualifications, and employment. In situations of emergency and displacement, registration offers risk protection and facilitates family tracing and reunification.

6. At the societal level, vital statistics generated through civil registration provide indispensable information about the demographics and health of the population, which strengthens the evidence base for decisions and renders policies and interventions more effective and responsive to people’s needs. High-quality vital statistics enable Governments and donors to direct resources to people in most need, and allow individuals, Governments and donors to develop socioeconomic development plans, set targets and monitor and evaluate the use of scarce resources. Well-functioning civil registration and vital statistics systems enhance the credibility of national and local administrators and their capacity to deliver services by helping them to identify what services are needed and by whom.

7. When civil registration data for the compilation of vital statistics do not exist or are lacking, countries must consider using alternative data sources such as population censuses or household sample surveys. However, such alternative sources are no substitute for a well-functioning civil registration system since they cannot provide complete and detailed data on a continuous basis, particularly as regards different population groups and geographical areas. Moreover, unlike alternative data sources, by helping individuals to establish a legal identity, civil registration offers important benefits in terms of legal and human rights.

II. State of civil registration and vital statistics in Asia and the Pacific²

8. The Asia-Pacific region is home both to some of the most advanced and some of the most deficient civil registration and vital statistics systems in the world.

9. A well-functioning civil registration and vital statistics system provides the following services: (a) registration of all births, deaths and other vital events that occur in the territory of the country or area concerned; (b) issuance to all individuals of legal documentation of civil registration of births, deaths and other vital events, as necessary, to claim identity, civil status and ensuing rights; and (c) production and dissemination of accurate, complete and timely vital statistics. Assessments of key aspects of civil registration and vital

² This section is based on the article: Carla Abouzahr and others, “A development imperative: civil registration and vital statistics systems in the Asia-Pacific region”, *Asia-Pacific Population Journal*, vol. 29, No. 1 (July 2014) (ST/ESCAP/2696).

statistics systems can shed light on their strengths and weaknesses and identify priority issues that need to be improved.

10. The current status of civil registration and vital statistics in the region is illustrated below using statistics on registration rates and assessments, by individual countries, of the strengths and weaknesses of such systems.

A. Birth and death registration coverage

11. Birth registration coverage in the Asia-Pacific region varies from a low of 24 per cent to a high of close to 100 per cent, whereas death registration coverage ranges from a low of only 9 per cent to complete coverage. This diversity is illustrated in tables 1 and 2 of the annex.

12. Although much progress has been made in improving birth registration coverage, the United Nations Children's Fund (UNICEF) estimated that, in 2013, one third of children under the age of 5 — 220 million in total — had not been registered at birth; 135 million of these children live in Asia and the Pacific, mostly in South and South-West Asia.³

13. In general, death registration coverage is lower than that of births. Often there is less of an incentive to register a death. Absence of registration can, however, make it difficult for surviving family members to establish inheritance rights, including claims to spousal pensions, property and insurance. From a societal perspective, incomplete death registration can result in inaccurate voting registers and give rise to social benefit fraud.

14. In terms of quality, death registration is particularly problematic. While complete statistics on the quality of information recorded during death registration are not available; survey information indicates an even lower proportion of deaths with properly recorded information regarding the cause of death. Such a lack of information hinders a country's ability to plan health care services and the related social protection schemes.

15. According to survey information, registration rates among boys and girls are similar, although wide variations exist in rates among urban and rural populations, with births in urban areas much more likely to be registered. Also, children born in the richest households are more likely to have had their birth registered when compared with children born in poorer households.

B. Strengths and weaknesses of civil registration and vital statistics systems

16. As of October 2014, 47 countries and areas in the Asia-Pacific region had assessed their civil registration and vital statistics systems⁴ using a rapid

³ United Nations Children's Fund, *Every Child's Birth Right: Inequities and Trends in Birth Registration* (New York, 2013).

⁴ The following members and associate members completed a rapid self-assessment (listed by subregion): (a) East and North-East Asia: China; Democratic People's Republic of Korea; Hong Kong, China; Japan; Macao, China; Mongolia; Republic of Korea; (b) North and Central Asia: Armenia; Azerbaijan; Georgia; Kazakhstan; Kyrgyzstan; Russian Federation; Tajikistan; Turkmenistan; Uzbekistan; (c) South-East Asia: Cambodia; Indonesia; Lao People's Democratic Republic; Malaysia; Philippines; Thailand; Timor-Leste; Viet Nam; (d) South and South-West Asia: Bangladesh; Bhutan; Iran (Islamic Republic of); Maldives; Pakistan; Sri Lanka; Turkey; (e) Pacific: Australia; Cook Islands; Fiji; Guam; Kiribati; Marshall Islands; Nauru; New Zealand; Niue; Northern Mariana Islands; Palau; Papua New Guinea; Samoa; Solomon Islands; Tuvalu; Vanuatu.

self-assessment tool developed by the World Health Organization (WHO) and the University of Queensland, Australia.⁵

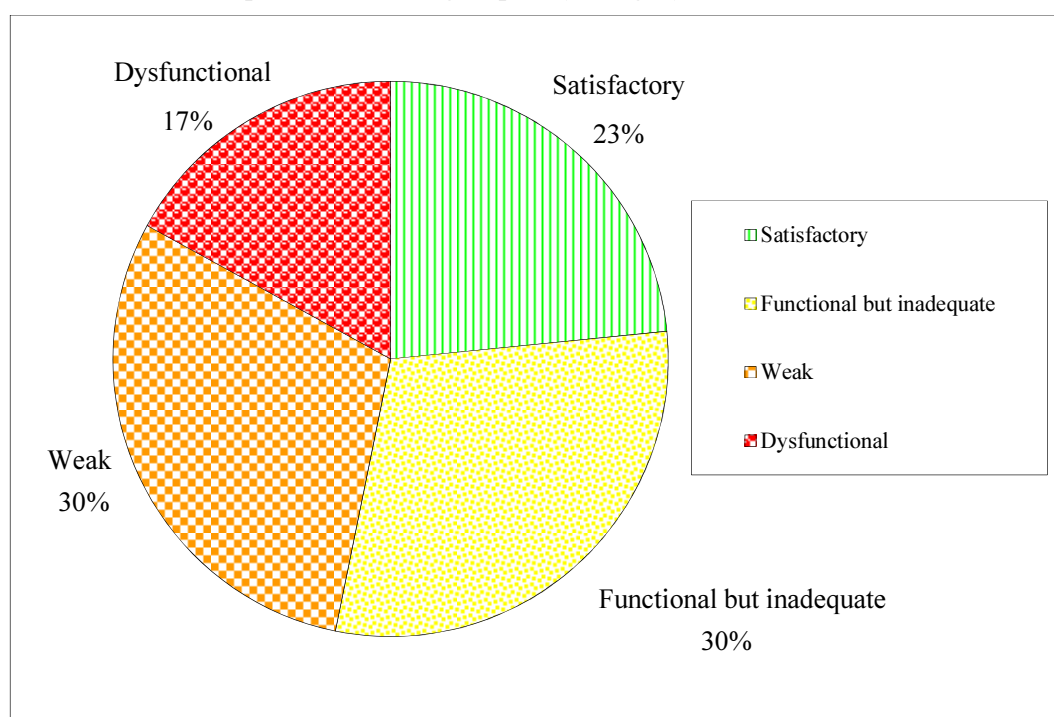
17. This overwhelming response by Governments to the call, contained in Commission resolution 67/12, to assess the functioning of civil registration and vital statistics systems demonstrates a firm commitment to, and recognition of the importance of, the issue by countries throughout the region.

18. Information gleaned from the rapid assessments offers a useful indication of the strengths and weaknesses of individual civil registration systems and a starting point for the development of national action plans to improve such systems. Viewed together, the assessments provide an invaluable knowledge base in preparation for the “Asian and Pacific Civil Registration and Vital Statistics Decade, 2015-2024”.

Results of the rapid assessments

19. The results of the rapid assessments are presented in the figure. The results highlight vast differences in the functioning of civil registration and vital statistics systems. According to the self-assessment scores, 17 per cent of civil registration and vital statistics systems in the region were characterized as dysfunctional, 30 per cent as weak, 30 per cent as functional but inadequate, and 23 per cent as satisfactory.

Figure
Results of rapid assessments, grouped by category



Note: The range of scores assigned to each category is outlined in the textbox below.

⁵ World Health Organization and University of Queensland, *Rapid Assessment of National Civil Registration and Vital Statistics Systems* (Geneva, 2010). Available from http://whqlibdoc.who.int/hq/2010/WHO_IER_HSI_STM_2010.1_eng.pdf?ua=1.

20. The results for different areas within civil registration and vital statistics systems indicate that a number of challenges are shared by several countries, including, in particular, issues related to data quality control, cause-of-death certification and coding, and data management, analysis, dissemination and use (see table). That points to the need and potential for regional collaboration, such as on action research and the development of guidance materials. Subregional characteristics and differences provide grounds for developing knowledge-sharing and other forms of South-South cooperation.

The rapid assessment tool and its method of scoring

The rapid assessment tool includes 25 questions in 11 subject areas related to the functioning of civil registration and vital statistics systems. During the course of an assessment, each question is assigned a numerical value from zero to three, with three indicating the best score. The assessment score for a country is the simple sum of the individual values scored on each question. Systems are assessed according to four categories and are dependent on the score obtained, namely:

Score (per cent)	Rating	Actions required
0-34	Dysfunctional	System requires substantial improvements in all areas
35-64	Weak	Many aspects of the system do not function well and multiple issues require attention
65-84	Functional but inadequate	The system works but some elements function poorly and require attention; specific weaknesses of the system should be identified by completing a comprehensive review
85-100	Satisfactory	Minor adjustments may be required in an otherwise well-functioning system

Table
Average results of rapid assessments, grouped by subject area

	Average (maximum = 3)
Legal framework	2.3
Registration infrastructure and resources	2.3
Organization and functioning of the vital statistics system	1.8
Completeness of birth and death registration	2.2
Data storage and transmission	1.9
ICD ^a -compliant practices	1.9
Practices affecting the quality of cause-of-death data	1.7
ICD coding practices	2.0
Coder qualification and training, and quality of coding	1.4
Data quality and plausibility checks	1.6
Data access, dissemination and use	2.3

Source: Data from ESCAP and the University of Queensland.

^a International Classification of Diseases.

III. Overview of supporting initiatives

A. “Get every one in the picture”: improving civil registration and vital statistics in Asia and the Pacific

1. Creating a platform for regional action

21. The present regional initiative began in 2009 at the first session of the Committee on Statistics, when the region’s national statistical offices noted the importance of improving civil registration and vital statistics in Asia and the Pacific.⁶ The ESCAP secretariat worked with development partners⁷ and hosted a regional forum to develop the key elements of a regional programme for improving civil registration and vital statistics in Asia and the Pacific, which were subsequently endorsed in 2010 at the second session of the Committee on Statistics.⁸ In the following year, the Commission adopted resolution 67/12 on the improvement of civil registration and vital statistics in Asia and the Pacific, in which it requested the Executive Secretary to convene a high-level meeting to bring together all national and international stakeholders to raise awareness of the issue and to chart a path for the future. The High-level Meeting on the Improvement of Civil Registration and Vital Statistics in Asia and the Pacific took place in December 2012 and was co-organized by ESCAP, WHO and 18 development partners. The High-level Meeting was successful, bringing together senior officials from the civil registration, health and statistics sectors of 43 member and associate members States in order to reach consensus on a regional strategic plan, which was subsequently endorsed at the third session of the Committee on Statistics,⁹ held in December 2012. Two key recommendations of the High-level Meeting were the need for an intergovernmental ministerial conference in order to foster commitment for further action as part of the regional initiative and the establishment of a regional steering group to provide strategic guidance to the initiative.

22. Member States endorsed the outcomes of the High-level Meeting when they adopted Commission resolution 69/15 in 2013, creating a mandate for ESCAP to convene the Ministerial Conference on Civil Registration and Vital Statistics in Asia and the Pacific in November 2014 and for the Regional Steering Group for Civil Registration and Vital Statistics in Asia and the Pacific to be established, initially under the auspices of the Committee on Statistics. In July 2013, the ESCAP secretariat formed a working group of co-organizers of the Ministerial Conference, including UNICEF, the United Nations Development Programme, the United Nations Population Fund (UNFPA), the Office of the United Nations High Commissioner for Refugees (UNHCR), WHO, the Asian Development Bank (ADB) and Plan International. Following a call for nominations in July 2013, the Regional Steering Group was formed in September 2013, comprising senior representatives from 19 member States and four development partners. The Regional Steering Group held its first meeting in December 2013¹⁰ when it agreed on the main

⁶ See E/ESCAP/CST/10.

⁷ The development partners involved were the Asian Development Bank, the Australian Bureau of Statistics, UNICEF, the United Nations Population Fund, the University of Queensland Health Information Systems Knowledge Hub and WHO.

⁸ See E/ESCAP/CST(2)/9.

⁹ E/ESCAP/CST(3)/6/Add.1.

¹⁰ H.E. Dr. Neil Sharma, Minister of Health of Fiji, was elected as Chair of the Regional Steering Group. Mr. Enrique Tayag, Assistant Secretary of Health of the Philippines, Mr. Chandramouli Chandrasekaran, Registrar-General and Census Commissioner of India, and Mr. Peter Harper, Deputy Australian Statistician were elected Vice-Chairs.

features of a regional action framework to serve as a platform for action during a civil registration and vital statistics decade from 2015 to 2024, which would be developed and presented for endorsement by member States at the Ministerial Conference.¹¹

2. Forming regional networks

23. Although countries face a number of similar challenges to improving civil registration and vital statistics systems, there are no international forums for regular sharing of knowledge and experiences. Seeking to address this gap, three regional networks related to civil registration and vital statistics have recently been established or proposed in order to facilitate the transfer of knowledge, lessons learned and best practices among Governments, development partners and experts.

24. The Asia eHealth Information Network (AeHIN), established in 2012, promotes more effective use of information communications technology to achieve better health through peer-to-peer assistance and knowledge-sharing among its members, who come from government and non-government organizations. One of its four strategic areas is building the capacity of countries for eHealth, health information systems and civil registration and vital statistics systems. AeHIN has devoted considerable time, as part of its regular electronic meetings, to disseminate best practices and foster learning related to civil registration and vital statistics.¹²

25. The proposal for an Asia-Pacific civil registrars' network was one of the outcomes of the Asia-Pacific Civil Registrars' Meeting organized in July 2014 by UNICEF, UNHCR, Plan International, WHO and ESCAP. The Meeting was convened as a follow-up to the recommendation of a workshop organized by the Association of Southeast Asian Nations' Intergovernmental Commission on Human Rights (AICHR) and UNHCR in December 2012.¹³ During the Meeting, senior civil registration officials from 25 member States recognized the value of a network exclusively for civil registrars to share knowledge and learning in support of implementing the regional action framework on civil registration and vital statistics in Asia and the Pacific. Considering the many shared challenges at the subregional level and the lack of resources to establish a regional network, delegates concluded that an Asia-Pacific civil registrars' network would begin as a collection of subregional networks. The subregional approach would facilitate linkages with existing mechanisms such as the Association of Southeast Asian Nations (ASEAN) and the South Asian Association for Regional Cooperation. The process of developing the terms of reference for subregional networks is still ongoing.

26. As part of the consultation process in preparation for the Ministerial Conference, Plan International, World Vision International and the ESCAP secretariat organized the Civil Society Forum for the Ministerial Conference on Civil Registration and Vital Statistics in Asia and the Pacific in August 2014. A key recommendation of the Forum was that a network of civil society and non-governmental organizations engaged in improving civil registration and

¹¹ "First meeting of the Regional Steering Group for Civil Registration and Vital Statistics in Asia and the Pacific". Available from www.unescap.org/sites/default/files/Final-RSG-CRVS1-Meeting-Report-030214.pdf.

¹² Additional information about the Asia eHealth Information Network is available from www.aehin.org.

¹³ United Nations High Commissioner for Refugees, "Report of the Regional Workshop on Good Practices in Birth Registration, Bangkok, 7 December 2012". Available from <http://getinthepicture.org/docs/unhcr-birth-reg-rpt.pdf>.

vital statistics at national and regional levels should be established, in particular to share experiences and to undertake joint advocacy activities. An informal network was established among the 18 organizations represented at the Forum, the first task of which was to draft a civil society statement to be delivered at the Ministerial Conference.

3. The Pacific Vital Statistics Action Plan (2011-2014)

27. The Pacific Vital Statistics Action Plan (2011-2014)¹⁴ was developed to support one of the four priority areas of the Ten Year Pacific Statistics Strategy 2011-2020. The Plan was developed by the Brisbane Accord Group (BAG), an assembly of 10 development partners¹⁵ established to coordinate, facilitate and support civil registration and vital statistics in the Pacific islands through collaborative activities. In July 2013, while recognizing the need for reliable mortality data to support public health policies, particularly in response to non-communicable diseases, Pacific Health Ministers recommended, at their tenth meeting in Apia, that the improvement of civil registration and vital statistics should be a priority for health development activities in the Pacific.¹⁶

28. Under the Pacific Vital Statistics Action Plan (2011-2014), as of October 2014, 16 of the 21 Pacific island countries and territories have completed rapid assessments of their civil registration and vital statistics systems. Activities supported by BAG, such as birth registration awareness campaigns, training for death certification and analysing vital statistics, the introduction of computerized civil registration systems and the adoption of the International Form of Medical Certificate of Cause of Death, have led to improvements in many Pacific island countries and territories, including Fiji, Kiribati, Niue, Samoa, the Solomon Islands, Tonga, Tuvalu and Vanuatu. As the Pacific Vital Statistics Action Plan (2011-2014) expires at the end of 2014, a new plan is currently being developed by BAG.

4. The role of the health sector in improving civil registration and vital statistics in South-East Asia and South and South-West Asia

29. At the sixty-seventh session of the WHO Regional Committee for South-East Asia in September 2014, a regional strategy for strengthening the role of the health sector in improving civil registration and vital statistics was endorsed by the Ministers of Health of the following countries: Bangladesh; Bhutan; Democratic People's Republic of Korea; India; Indonesia; Maldives; Myanmar; Nepal; Sri Lanka; Thailand; and Timor-Leste.¹⁷ The strategy, which builds on and aims to support implementation of the regional action framework on civil registration and vital statistics in Asia and the Pacific, is designed to bolster involvement and leadership of the health sector in activities to improve the civil registration and vital statistics system.

¹⁴ "The Brisbane Accord Group and the Pacific Vital Statistics Action Plan (2011-2014): Outline Document". Available from www.uq.edu.au/hishub/docs/Brisbane-Accord-Group/vital-stats-outline-final.pdf.

¹⁵ BAG comprises the Secretariat of the Pacific Community (as Chair), the United Nations Children's Fund, the United Nations Population Fund, the World Health Organization, the Australian Bureau of Statistics, the Fiji National University, the Pacific Health Information Network, the Queensland University of Technology, the University of New South Wales and the University of Queensland.

¹⁶ World Health Organization, "Apia Outcome: Tenth Pacific Health Ministers Meeting, 2-4 July 2013". Available from www.wpro.who.int/southpacific/pic_meeting/reports/apia_outcomefull3.pdf.

¹⁷ SEA/RC67/9 Inf. Doc.1. Available from www.searo.who.int/mediacentre/events/governance/rc/rc67-9_infdoc1_agenda_8.1.pdf?ua=1.

5. Civil registration and human rights in South-East Asia

30. AICHR and UNHCR co-organized the Regional Workshop on Good Practices in Birth Registration in December 2012.¹⁸ Among the recommendations made at the workshop was the establishment of a network of civil registrars, which led to the organization of the Asia-Pacific Civil Registrars' Meeting in July 2014. The workshop also highlighted the need for benchmarks and indicators to assess progress towards universal birth registration by ASEAN members.

31. Following extensive research and consultations throughout 2013 and 2014, a draft set of benchmarks and indicators was developed by UNHCR, and then, in September 2014, reviewed by technical experts from Governments, academia, civil society and international organizations and AICHR representatives at a workshop co-organized by UNHCR and Thailand's representative to the AICHR. The benchmarks and indicators will be finalized as a result of the outcomes of that workshop. They will be published in 2015.

6. Improving civil registration and vital statistics in the Eastern Mediterranean

32. The WHO Eastern Mediterranean Regional Office has, in collaboration with development partners such as UNFPA, UNICEF, the secretariats of the Economic Commission for Africa (ECA), the Economic and Social Commission for Western Asia and ESCAP, and the League of Arab States, driven an initiative to improve civil registration and vital statistics in the Eastern Mediterranean, which includes three ESCAP member States: Afghanistan, the Islamic Republic of Iran and Pakistan. At the sixtieth session of the WHO Regional Committee for the Eastern Mediterranean in October 2013, a resolution was adopted¹⁹ that endorsed a regional strategy for the improvement of civil registration and vital statistics systems 2014-2019,²⁰ which was based on the Regional Strategic Plan for the Improvement of Civil Registration and Vital Statistics in Asia and the Pacific.

B. Regional initiatives in Africa, and Latin America and the Caribbean

1. Africa

33. The regional initiative to improve civil registration and vital statistics in Africa is driven by a core group comprising ECA (as secretariat for group), UNFPA, UNHCR, UNICEF, the African Development Bank, the African Union and Plan International. Having first been convened in 2010, the Conference of African Ministers Responsible for Civil Registration has since been instituted as a biennial intergovernmental conference under the auspices of the African Union.

¹⁸ United Nations High Commissioner for Refugees, "Report of the Regional Workshop on Good Practices in Birth Registration, Bangkok, 7 December 2012". Available from <http://getinthepicture.org/docs/unhcr-birth-reg-rpt.pdf>.

¹⁹ EM/RC60/R.7. Available from http://applications.emro.who.int/docs/RC60_Resolutions_2013_R7_15140_EN.pdf.

²⁰ EM/RC60/10. Available from http://applications.emro.who.int/docs/RC_Tech_paper_2013_10_15084_EN.pdf.

34. The African Programme on Accelerated Improvement of Civil Registration and Vital Statistics,²¹ which was endorsed in 2012 at Second Conference of African Ministers Responsible for Civil Registration and which is being operationalized through the Regional Medium-Term Plan 2010-2015,²² aims to support an integrated, multisectoral approach to improving civil registration and vital statistics systems in African countries, and to make regional resources, such as pools of technical experts, guidelines and manuals, available to countries. Supporting this initiative, in 2010 the 6th Africa Symposium on Statistical Development recommended to shift its focus from censuses to civil registration and vital statistics.²³ The third Conference of African Ministers Responsible for Civil Registration will take place in Côte d'Ivoire in 2015.

2. Latin America and the Caribbean

35. Several initiatives in Latin America and the Caribbean are relevant to civil registration and vital statistics. In 2006, the Organization of American States (OAS), the Inter-American Development Bank (IDB) and UNICEF founded an alliance with the goal of universal birth registration in the region by 2015, which led to the launch of the Inter-American Program for Universal Civil Registry and the Right to Identity in 2007.²⁴ In support of the Program, OAS established the Universal Civil Identity Project of the Americas, which has been supporting the efforts of countries to address underregistration ever since. A review of progress is expected to take place at a regional ministerial conference in 2015.

36. IDB has been financing civil registration and identity management projects for more than a decade, including many designed to improve interoperability between civil registries and statistical databases so as to ensure timely and complete vital statistics. At the same time, the Pan American Health Organization has been implementing the Regional Plan of Action for Strengthening Vital and Health Statistics²⁵ since 2008 as part of broader efforts to strengthen health information systems.

²¹ E/ECA/CMRCR/2/EXP/3.

²² E/ECA/CMRCR/2/EXP/4.

²³ See www.statssa.gov.za/assd2010/Website%20material/6th%20ASSD%20Resolutions.pdf.

²⁴ "Inter-American Program for a Universal Civil Registry and 'the Right to Identity'", Available from www.unicef.org/barbados/spmapping/Planning/Regional/CP/2007_OAS_Resolution_birth_registration.doc.

²⁵ "Regional Plan of Action for Strengthening Vital and Health Statistics" (CD48/9 (Eng.)). Available from www.paho.org/English/GOV/CD/cd48-09-e.pdf.

C. Global initiatives

1. The development agenda beyond 2015

37. It has been widely acknowledged that the lack of progress in improving civil registration and vital statistics systems has hampered efforts to monitor and achieve the Millennium Development Goals, and that this situation should, as a matter of priority, be rectified in the development agenda beyond 2015.^{26,27,28,29,30,31,32,33}

38. In the absence of universal and well-functioning civil registration and vital statistics systems, tens of millions of people around the world have been left without a legal identity. Likewise, statistics for monitoring development progress, particularly that related to maternal and infant mortality, as well as per capita indicators, have not been as accurate, complete or timely as they could have been had they been compiled using maximum high quality civil registration data.

39. The international community has responded to the need to learn valuable lessons from the Millennium Development Goal experience. A specific target on legal identity and birth registration appeared in the 2013 report of the High-level Panel of Eminent Persons on the Post-2015 Development Agenda;³⁴ it was subsequently included in the June 2014 proposal of the Open Working Group on Sustainable Development Goals³⁵ to the General Assembly. Likewise, the call for a “new data revolution” first made in the report of the High-level Panel has inspired debate within the development and statistic communities on a transformative shift to focus investments on administrative data sources, such as civil registration and vital statistic systems, and their use for statistical purposes. A key motivation for this shift would be the need to localize and disaggregate data in order to be consistent with the mantra of “leaving no one behind”. Linked with this, the

²⁶ E/CN.3/2014/15.

²⁷ Philip W. Setel and others, “A scandal of invisibility: making everyone count by counting everyone”, *Lancet* (2007).

²⁸ United Nations Millennium Project, “Monitoring Goals 4 and 5: targets and indicators”. Available from www.unmillenniumproject.org/documents/maternalchild-chapters5-7.pdf.

²⁹ The World We Want, “Health in the post-2015 agenda: report of the global thematic consultation on health”. Available from www.worldwewant2015.org/file/337378/download/366802.

³⁰ World Bank and World Health Organization, *Global Civil Registration and Vital Statistics: Scaling up Investment Plan 2015-2024* (Washington, D.C., World Bank Group, 2014).

³¹ Data2X, “Civil registration, vital statistics and gender”. Available from http://data2x.org/wp-content/uploads/2014/10/Data_2X_Gender_Dimensions_of_CRVS.pdf.

³² The MDG Africa Steering Group, *Achieving the Millennium Development Goals in Africa: Recommendations of the MDG Africa Steering Group, June 2008* (New York, 2008). Available from www.mdgafrica.org/pdf/MDG%20Africa%20Steering%20Group%20Recommendations%20-%20English%20-%20HighRes.pdf.

³³ E/ECA/STATCOM/3/13.

³⁴ See High-level Panel of Eminent Persons on the Post-2015 Development Agenda, “A new global partnership: eradicate poverty and transform economies through sustainable development” (New York, 2013). Available from www.post2015hlp.org/wp-content/uploads/2013/05/UN-Report.pdf.

³⁵ See A/68/970.

Open Working Group's proposal included stronger national statistical systems in developing countries as part of the suggested means of implementation.

2. Health

40. Since almost all births and deaths come into contact with the health sector, whether it be in the form of a hospital or a community health worker, the health sector is a key stakeholder in improving civil registration and vital statistics. Even among developed countries with universal civil registration coverage, few are capable of publishing annual statistics on the leading causes of death within a year. Moreover, the health sector has recognized the value of civil registration and identification systems for implementation of universal health coverage. The health sector is thus one of the key drivers of the growing global momentum around civil registration and vital statistics.

41. Out of a need to greatly improve the accuracy, completeness and timeliness of mortality data that can be localized and disaggregated in a variety of useful ways, the health sector has been at the forefront of national and international efforts to give greater priority to improving civil registration and vital statistics systems and establishing linkages with health information systems. WHO and other development partners, such as the Centers for Disease Control and Prevention and the University of Queensland Health Information Systems Knowledge Hub, have been active in developing and supporting the implementation of international standards around cause of death certification, including the International Classification of Diseases coding system, verbal autopsy and the International Form of the Medical Cause of Death Certificate, and developing tools and innovative approaches to support the improvement of civil registration and vital statistics.

42. Responding to the incompleteness of maternal and infant mortality information in many developing countries, the Commission on Information and Accountability for Women's and Children's Health, which was established by the Secretary-General in 2010, recommended improving civil registration and vital statistics as one of its 10 recommendations.³⁶ As a result of this, funds were made available in 75 priority countries³⁷ to undertake activities to improve civil registration and vital statistics systems, such as conducting a comprehensive assessment. The then Health Metrics Network led global advocacy efforts, including supporting the convening of the first Global Summit on Civil Registration and Vital Statistics, which took place in Bangkok in April 2013. Another relevant initiative is Every Woman Every Child, which was launched by the Secretary-General in 2010 to mobilize international and national action to address the major health challenges facing women and children.

3. Birth registration

43. "Everyone has the right to recognition everywhere as a person before the law" is the human right to a legal identity that is enshrined in the Universal Declaration on Human Rights.³⁸ Recognizing that birth registration is the gateway to establishing legal identity and for realizing other rights, such as to a

³⁶ See "Translating the Recommendations into Action: Workplan". Available from www.who.int/entity/woman_child_accountability/resources/Workplan_post_Commission_final_20110921.pdf?ua=1.

³⁷ Of those 75 countries, 20 are in Asia and the Pacific, namely: Afghanistan; Azerbaijan; Bangladesh; Cambodia; China; Democratic People's Republic of Korea; India; Indonesia; Kyrgyzstan; Lao People's Democratic Republic; Myanmar; Nepal; Pakistan; Papua New Guinea; Philippines; Solomon Islands; Tajikistan; Turkmenistan; Uzbekistan; and Viet Nam.

³⁸ General Assembly resolution 217A (III).

nationality and to access health care and education, the Convention on the Rights of the Child³⁹ obligates States parties to register a child immediately after birth. The Human Rights Council has passed several resolutions reiterating the importance of universal birth registration, the most recent being in April 2013,⁴⁰ which was also the first to describe birth registration as part of a broader civil registration and vital statistics system.

44. UNICEF, along with other children's rights organizations, such as Plan International and World Vision International, have addressed underregistration of children with great success. Those efforts have included community and household campaigns to register the births of children, developing and publishing technical guidelines for birth registration, supporting national and international reviews of birth registration, lobbying for legislative change, undertaking or supporting public awareness campaigns and providing technical assistance to increase birth registration coverage by strengthening the civil registration system, including through innovations such as mobile registration. Utilizing its Multiple Indicator Clustered Survey and other sources of data such as demographic and health surveys or population and housing censuses, UNICEF has also played a critical role in drawing attention to the issue and generating momentum for change by publishing statistics and reports on birth registration coverage and on children in possession of a birth certificate.

45. The United Nations High Commissioner for Refugees has led efforts to improve birth registration coverage in countries of concern to the Office, including for refugees, internally displaced persons and stateless persons, in order to promote durable solutions. For the stateless, documenting links, such as place of birth, parents' nationalities or proof of marriage, can be an important step towards claiming a nationality. In emergency situations, civil registration systems can be employed to aid the humanitarian response, including accounting for the population and for facilitating the delivery of temporary financial assistance. Likewise, in some parts of the world with significant populations in refugee camps, there is a need for vital statistics to monitor population dynamics and mortality within those populations. In recognition of the importance of improving civil registration and vital statistics systems in fulfilling its mandate, the Executive Committee of the High Commissioner's Programme adopted its first conclusion on civil registration in October 2013.⁴¹

4. Vital statistics

46. The statistics community has long recognized that data from well-functioning civil registration systems are the best source of official vital statistics. The Principles and Recommendations for a Vital Statistics System were first adopted by the United Nations Statistical Commission in 1953, with subsequent revisions in 1973, 1999 and 2014. Since 1991, the United Nations Statistics Division, which publishes the Principles and Recommendations, has been responsible for substantive coordination of the International Programme for Accelerating the Improvement of Vital Statistics and Civil Registration Systems, which includes developing technical handbooks and guidelines. Building on the recent momentum around civil registration and vital statistics, in 2014 the Statistics Division established the Global Civil Registration and Vital Statistics Group to coordinate global efforts.⁴²

³⁹ United Nations, *Treaty Series*, vol. 1577, No. 27531.

⁴⁰ Human Rights Council resolution 22/7 (A/HRC/RES/22/7).

⁴¹ A/AC/96/1132, chap. III, sect. A.

⁴² Additional information about the Global Civil Registration and Vital Statistics Group is available from <http://unstats.un.org/unsd/Demographic/CRVS/GlobalCRVS.html>.

47. As part of its mandate to improve data for population and development, UNFPA, as well as national statistics offices in developed countries, such as the Australian Bureau of Statistics, Statistics Korea and Statistics Norway, have played important roles in delivering technical assistance to countries to produce vital statistics using administrative data from civil registration.

48. At the Fourth High-level Forum on Aid Effectiveness, held in Busan, Republic of Korea, in 2011, the Partnership in Statistics for Development in the 21st Century (PARIS21) presented the Busan Action Plan for Statistics,⁴³ which called for countries to address weaknesses in civil registration and vital statistics systems. PARIS21, through its leadership in global advocacy for statistics, has led calls for civil registration and vital statistics to feature as part of the data revolution.

5. Identity management

49. Identity management, which builds on civil registration through advanced population databases and enabling verification of identity by means of unique characteristics, such as an identity number or biometrics, is becoming increasingly relevant for member States seeking to utilize civil registration for public administration and service delivery, and pursuing eGovernment. In addition, all Governments have agreed to roll out machine-readable travel documents by November 2015.⁴⁴ The Government of the Republic of Korea, IDB, ADB and the African Development Bank organized the first International Identity Management Conference in September 2014.⁴⁵

6. Financing

50. In May 2014, the World Bank and WHO published the Global Civil Registration and Vital Statistics: Scaling Up Investment Plan for 2015-2024,⁴⁶ a result of extensive consultations with Governments, development partners and donors. The Plan contains the goals of universal civil registration of births, deaths, marriages and other vital events, including cause of death, and access to legal proof of registration for all individuals by 2030. To achieve this goal in 73 of the 75 priority countries of the Commission on Information and Accountability for Women's and Children's Health, the plan estimates that US\$ 3.82 billion of investment is required, and that, after excluding domestic sources of funds, there is a financing gap of US\$ 1.99 billion, or US\$ 199 million per year.

51. In May 2014, the Government of Canada hosted the Saving Every Woman Every Child: Within Arm's Reach Summit, where it re-energized the 2010 Muskoka Initiative⁴⁷ to address gaps in women's and children's health by

⁴³ Partnership in Statistics for Development in the 21st Century, "Statistics for transparency, accountability and results: a Busan Action Plan for Statistics" (Paris, 2011). Available from www.paris21.org/sites/default/files/Busanactionplan_nov2011.pdf.

⁴⁴ International Civil Aviation Organization, Annex 9 to the Convention on International Civil Aviation, Facilitation, chap. 3, sect. D, para. 3.10.1.

⁴⁵ "First International Identity Management Conference – Seoul Statement". Available from http://unstats.un.org/unsd/Demographic/CRVS/Global_CRVS_Docs/news/Seoul_Statement_ENG.pdf.

⁴⁶ World Bank and World Health Organization, *Global Civil Registration and Vital Statistics: Scaling up Investment Plan 2015-2024* (Washington, D.C., World Bank Group, 2014).

⁴⁷ www.nsi-ins.ca/wp-content/uploads/2014/05/Muskoka-Final.pdf.

announcing a US\$ 3.5 billion commitment over a period of five years to improve the health of mothers and children, including investments in civil registration and vital statistics.

52. On the margins of the General Assembly in September 2014, the World Bank Group and the Governments of Canada, Norway and the United States of America announced the establishment of a Global Financing Facility in Support of Every Woman Every Child,⁴⁸ with initial contributions of US\$ 400 million from the Government of Norway and US\$ 200 million from the Government of Canada, which together could leverage up to US\$ 3.2 billion of financing through the International Development Association of the World Bank Group. Included in the announcement was the news that the Global Financing Facility would have a special focus on civil registration and vital statistics in support of the goals of the Global Civil Registration and Vital Statistics: Scaling Up Investment Plan 2015-2024.

IV. Conclusion

53. In the present document two features in particular have been highlighted: firstly, the urgency of improving civil registration and vital statistics in Asia and the Pacific; and, secondly, the significant momentum around this issue, which should be leveraged at national, regional and global levels. The key to success of the regional action framework on civil registration and vital statistics in Asia and the Pacific will be for the issue to feature in the development agenda beyond 2015 and for the financing gap to be closed.

54. In order to realize the goals of the regional action framework, there is a need to ensure a coherent approach among the various international initiatives to improve civil registration and vital statistics, which will, as a consequence, lead to a greater and more sustainable impact in countries.

55. Members and associate members are invited:

(a) To take the information presented in the present document into account in their efforts to implement the regional action framework;

(b) To provide guidance to ensure a coherent regional approach to improving civil registration and vital statistics during the “Asian and Pacific Civil Registration and Vital Statistics Decade, 2015-2024” for maximum impact at the national level.

⁴⁸ “Global Financing Facility in Support of Every Woman, Every Child”. Available from [www.worldbank.org/content/dam/Worldbank/document/HDN/Health/GFF Executive SummaryFINAL.pdf](http://www.worldbank.org/content/dam/Worldbank/document/HDN/Health/GFF_Executive_SummaryFINAL.pdf).

Annex

Table 1
Coverage of birth and death registration in Asia

Country or area	Birth registration coverage		Death registration coverage	
	Births registered	Year of most recent report	Deaths registered	Year of most recent report
Afghanistan	.. ^a		..	
Armenia	≥90%	2010	100%	1994
Azerbaijan	99%	1994	≥90%	2001
Bangladesh	..		<90%	1997
Bhutan	
Brunei Darussalam	75-89%	2003	75-89%	2003
Cambodia	
China ^b	90%	1994	90%	1994
Democratic People's Republic of Korea	
Georgia	≥90%	2001	≥90%	2000
Hong Kong, China	≥90%	2011	≥90%	2011
India ^c	53%	1994	48%	1994
Indonesia	60-70%	1993	60-70%	1993
Iran (Islamic Republic of)	≥90%	2009	≥90%	2009
Japan	≥90%	2012	≥90%	2012
Kazakhstan	≥90%	2000	≥90%	2001
Kyrgyzstan	≥90%	2012	≥90%	2012
Lao People's Democratic Republic	
Macao, China	≥90%	2012	≥90%	2012
Malaysia	≥90%	2012	≥90%	2012
Maldives	≥90%	2001	≥90%	2001
Mongolia	100%	1994	100%	1994
Myanmar	90%	1994	90%	1994
Nepal	24%	1994	9%	1994
Pakistan	35%	1994	35%	1994
Philippines	75-89%	2002	50-74%	2002
Republic of Korea	≥90%	2011	≥90%	2012
Russian Federation	≥90%	2010	≥90%	2010
Singapore	≥90%	2012	≥90%	2012
Sri Lanka	≥90%	2009	≥90%	2009
Tajikistan	≥90%	2009	75-89%	2009
Thailand	70%	1994	60%	1994
Timor-Leste	
Turkey	≥90%	2010	75-89%	2010
Turkmenistan	≥90%	1998	≥90%	1998
Uzbekistan	≥90%	2001	≥90%	2001
Viet Nam	<90%	1993	..	

Source: United Nations Statistics Division, "Coverage of birth and death registration", using primary sources only, updated August 2012. Available from http://unstats.un.org/unsD/demographic/CRVS/CR_coverage.htm.

^a .. = not available.

^b Figures refer to the completeness of civil registration rather than for vital statistics, as the country does not process civil registration records for statistical purposes.

^c Figures refer to the coverage of vital statistics obtained by civil registration even if the vital statistics published are obtained from a dual-record system.

Table 2
Coverage of birth and death registration in the Pacific

Country or area	Birth registration coverage		Death registration coverage	
	Births registered	Year of most recent report	Deaths registered	Year of most recent report
American Samoa	≥90%	1993	≥90%	1993
Australia	≥90%	2012	≥90%	2012
Cook Islands	≥90%	1999	98%	1994
Fiji	≥90%	1999	97%	1994
French Polynesia	<90%	1994	<90%	1994
Guam	≥90%	2003	≥90%	2003
Kiribati	70%	1994	60%	1994
Marshall Islands	≥90%	2001	≥90%	2001
Micronesia (Federated States of)	.. ^a		..	
Nauru	≥90%	1995	≥90%	1995
New Caledonia	≥90%	1999	≥90%	1999
New Zealand	≥90%	2012	≥90%	2012
Niue	100%	1994	100%	1994
Northern Mariana Islands	<90%	1989	<90%	1989
Palau	<90%	1999	<90%	1999
Papua New Guinea	50-74%	2004	50-74%	2004
Samoa	<90%	1996	<90%	1998
Solomon Islands	75%	1994	75%	1994
Tonga	95%	1994	90%	1994
Tuvalu	26%	1994	9%	1994
Vanuatu	40%	1994	30%	1994

Source: United Nations Statistics Division, “Coverage of birth and death registration”, using primary sources only, updated August 2012. Available from http://unstats.un.org/unsD/demographic/CRVS/CR_coverage.htm.

^a .. = not available.