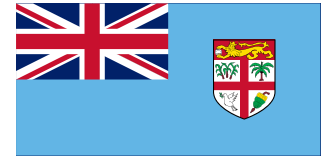




Assessing Inequalities in Registration of Births and Deaths



Fiji (2023) CRVS Inequality Assessment Brief

A well-functioning civil registration and vital statistics (CRVS) system helps ensure that every person has a legal identity, facilitating access to the benefits and protections of the State. Data collected by (CRVS) systems are critical for monitoring the health and well-being of the population, implementing policies and monitoring the 2030 Sustainable Development Goals. However, disparities exist in the completeness of birth and death registration among and within marginalized and hard-to-reach populations. The [Regional Action Framework \(RAF\)](#) on CRVS in Asia and the Pacific recognized the need to address disparities in civil registration, calling upon countries to assess CRVS-related inequalities. In response, ESCAP initiated a [project](#) and developed [guidelines](#) for assessing inequalities in registration, which is critical to address disparities and ensure all persons have access to and full inclusion in the CRVS system.

This brief summarizes findings from the inequality assessment [report](#) that Fijian CRVS stakeholders implemented, with technical support from ESCAP. Findings from this quantitative assessment can be used to inform future research and policy interventions to bridge gaps in registration between different populations in the country.

Fiji's CRVS system

The main stakeholders in the Fiji CRVS system include the Registrar General's Office under the Ministry of Justice (MoJ), the Ministry of Health and Medical Services (MoHMS), and the Fiji Bureau of Statistics (FBoS). MoJ is responsible for the administration and registration of births, deaths and marriages occurring in Fiji. MoHMS oversees Fiji's healthcare system, providing administrative data on the number of births and deaths occurring each year, disaggregated by key variables. Further, they are responsible for the notification of births and deaths, which are required for all events occurring in Fiji. FBoS has a mandate to produce vital statistics and other relevant data and to improve public access to vital statistics.

Estimates from the recent Multiple Indicator Cluster Survey (MICS) (2021) in Fiji report that approximately 87% of children under age 5 years have had their birth registered. Death registration completeness is estimated to be around 69% for deaths occurring in 2020 (as reported in the inequality assessment report).

Methodology

To assess inequalities, a comparison between the number of registered births and deaths and the estimated number of births and deaths was conducted. Inequalities in registration were examined by sex, age group, marital status and ethnicity.

This analysis overlaps with the introduction of the Parental Assistance Payment Program (PAPP) from August 2018 to July 2020, which



provided cash payments to parents upon registration. Thus, absolute estimates of registration completeness during this period should be interpreted with caution, instead drawing attention to the inequalities found between different population groups.

To assess inequalities in birth registration, registered births from the MOJ were used as the numerator and various denominators were considered, including the estimated number of births from 2017 census data, recorded births from MOHMS and the United Nations World Population Prospects (UNWPP) data.

To assess inequalities in death registration, registered deaths from MOJ were used as the numerator and notifications of death from MOHMS and UNWPP data were used as the denominators.

Key Findings

Birth registration:

- **Ethnicity appeared to have the largest impact on birth registration,** with significantly lower rates of registration among iTaukei mothers, compared to non-iTaukei mothers (66% and 92% respectively for births occurring at Fiji's largest hospital: Colonial War Memorial Hospital).
- Birth registration completeness rates were significantly lower for children under the age of 1, compared to their counterparts under the age of 5.
- **Children born during the PAPP incentive had higher rates of registration** compared to those born before the period, with the greatest increase for iTaukei children, and children born to single mothers.
- **Mothers' wealth quintile appeared to have a large impact on birth registration** with registration rates increasing with level of household wealth.
- **Married mothers were much more likely to register their births compared to single mothers** across all age groups, including teenage mothers.
- Comparison with census data suggested there was a **slight preference in registering boys compared to girls.**

Death registration:

- **The largest differential was between non-iTaukei decedents compared to iTaukei decedents,** across all age groups (91% compared to 58% respectively).
- **Children under age 5 were the least likely to have their deaths registered, likely due to the lack of economic incentives (children usually do not have financial assets).** These differences were also emphasized when disaggregated by ethnicity.
- **A decline in registration from age 70 years and above was observed.**
- **A 14% differential was seen in registration between males and females, with more male deaths registered than females.**

Policy Recommendations

- **Continue economic incentives** for birth registrations, given the clear evidence that once the successful PAPP program ended, birth registration rates returned to pre-program levels, particularly among the iTaukei population and single mothers. Economic incentives should also be extended to death registration, to improve completeness. Cash payments and stipends for travel costs to a registration office or support with funeral costs should be considered to encourage timely registration. Birth registration incentives are further discussed in this associated [policy brief](#).
- **Bring registration services to the people** through more frequent mobile registration services in remote and hard-to-reach areas, including follow-up for notified but not yet registered births and deaths. In addition, ensuring the availability of staff at large health facilities to support birth and death registration for new parents and grieving families.
- **Leverage existing initiatives,** such as The Ministry of Women, Children and Poverty Alleviation's outreach program supporting poor and rural mothers. They provide financial support for mothers residing on outer islands to travel to Suva and Nadi to give birth, and in

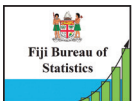


future, this mechanism could be leveraged to provide support to register births. Immunization programs could also encourage parents to register births and provide support for the process.

- **Further research is needed to understand differentials in registration for iTaukei and non-iTaukei populations** across geographic areas, to ensure the implementation of appropriate interventions.
- **Undertake Business Process Improvement (BPI)** to improve efficiency in the CRVS system. BPI helps to identify gaps, bottlenecks, and areas

of duplication. Further, it can help design desired changes and improvements in the system to ensure timely collection and complete collation and sharing of data.

- **Strengthen CRVS data collection, sharing, and analysis** (in a timely fashion). The collection of usual residence information for births and deaths that can be standardized, easily collated, and analyzed is essential to understand geographic inequalities in registration. The process of entering and sharing notification of births with other stakeholders should also be revisited.



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