



PAKISTAN'S 1ST INTERNATIONAL CRVS SUMMIT & SOUTH ASIAN CIVIL REGISTRARS MEETING - REPORT

November 28 - 30, 2018 | Islamabad - Pakistan



TECHNICAL SUPPORT UNIT - CRVS
MINISTRY OF PLANNING DEVELOPMENT
& REFORM GOVERNMENT OF PAKISTAN



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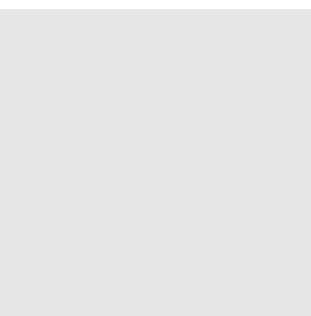
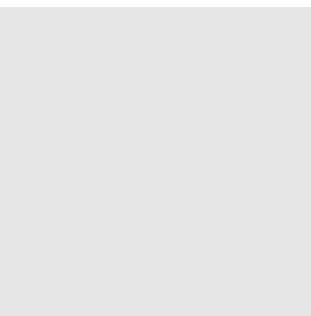
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ACRONYMS

AJ&K	Azad Jammu & Kashmir
AKRSP	Agha Khan Rural Support Program
ACCRA	Afghanistan Centre for Civil Registration Authority
BISP	Benazir Income Support Program
CRVS	Civil Registration and Vital Statistics
CRMS	Civil Registration Management System
CR8	Civil Registrars of South Asian Countries
DHIS	District Health Information System
DFID	Department for International Development
HMIS	Health Management Information System
HSA	Health Services Academy
ICD	International Coding for Death
KP-RTS	Khyber Pakhtunkhwa – Right to Services
LHW	Lady Health Worker
MoPDR	Ministry of Planning Development and Reform
MFLO-1961	Muslim Families Law Ordinance – 1961
MICS	Multi Indicators Cluster Survey
MC	Municipal Committee
NADRA	National Database and Registration Authority
NIH	National Institute of Health
NGO	Non-Governmental Organization
NCIT	National Center for Information Technology
PCRN	Pacific Civil Registrar Network

PPMI	Pakistan Planning and Management Institute
RAF	Regional Action Framework
SAARC	South Asia Association for Regional Cooperation
SDGs	Sustainable Development Goals
SOPs	Standard Operating Procedures
TSU-CRVS	Technical Support Unit – Civil Registration and Vital Statistics
UNESCAP	United Nations Economic and Social Commission for Asia and Pacific
UNICEF	United Nations International Children's Emergency Fund
UNFP	United Nations Food Program
UC	Union Council
WHO	World Health Organization
WB	World Bank



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MESSAGE FROM
PARLIAMENTARY
SECRETARY,
MINISTRY OF
PLANNING,
DEVELOPMENT &
REFORM

MESSAGE FROM **MS. KANWAL SHAUZAB** **PARLIAMENTARY SECRETARY MINISTRY** **OF PLANNING, DEVELOPMENT &** **REFORM GOVERNMENT OF PAKISTAN**



Ms. Kanwal Shauzab

I am delighted to note that the Technical Support Unit – Civil Registration and Vital Statistics (CRVS), Ministry of Planning, Development & Reform in coordination with UNICEF and other partners has successfully organized the “first International Summit on Civil Registration and Vital Statistics systems and a meeting of the Civil Registrars of South Asian Countries (CR8)” from November 28-30, 2018 in Islamabad. It is indeed a moment of great pride for us to host such a beneficial event in the country.

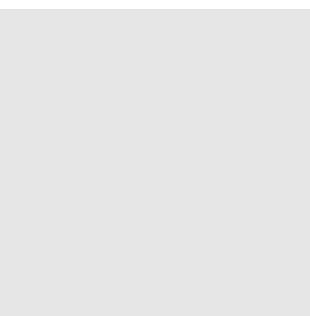
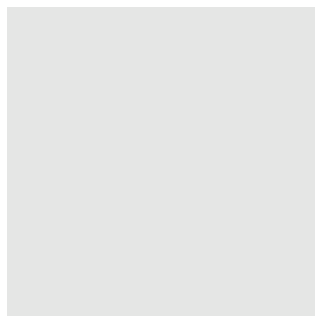
It is indeed a moment of great pride and honor for our ministry to host such an important event of high prestige. Undoubtedly, the CRVS system of the country not only provides legal documentation of identity to its population, but is, an essential tool to calculate appropriate Social, Economic and Health planning indicators. The reliable and timely availability of statistics on births and deaths and other vital events, play a critical role in effective and helpful in decision making process at all levels.

Improvement of CRVS is one of the priority agenda of the current Government. Once strengthened it would serve the poor and underprivileged segments through provisioning of better health, education and safety policies. This could only be achieved if we design our national policies on the basis of realistic and accurate population statistics, instead of mere estimates.

On behalf of the Government I assure that we will extend all possible support and facilitation to develop a credible CRVS system in Pakistan. Towards this end, we will try our utmost to implement the valuable recommendations of this summit.

Here I would appreciate the participation and acknowledge the contribution of our distinguished guests from international organizations, South Asian countries, Federal/ Provincial Governments' representatives, academia and the Development Partners. At the end, I would like to extend my personal appreciations for the staff of Technical Support Unit – CRVS under Ministry of Planning, Development and Reform for organizing this professional event. I am sure with this momentum and zeal we would be able to establish a robust CRVS in the country.





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AN OVERVIEW

AN OVERVIEW

Civil Registration and Vital Statistics (CRVS) are the building blocks for establishing good governance and securing human rights in a country. It provides essential legal documentation for identity and civil status at various stages of life and ensures ability to monitor and manage the human capital appropriately. CRVS systems also provide valuable data on population trends and demographic and social indicators, which can be used to watch progress towards development efforts. Despite clear benefits for civil registration and vital statistics at individual and national level, Pakistan like several other countries of the region doesn't have credible data of births and deaths and lack in reporting accurate causes of death. Around 30 per cent births are being registered whereas about 20 million children under the age of five years are not registered in Pakistan. Unfortunately, information disaggregated by age, gender, location and or socioeconomic status is also not available.

Pakistan is in process of formulating a national CRVS strategic framework that has set distinct goals to be achieved until year 2025. These include; achieving civil registration of births, deaths with causes and other vital events e.g. marriages, divorces, adaption and migration. These registrations will then be made obligatory to claim identity, civil status and ensuring individual's rights.

This CRVS Summit and meeting of the Civil Registrars of South Asian countries was an excellent opportunity to learn from the knowledge and experiences of their countries of the region to promote CRVS systems in Pakistan. The Ministry of Planning, Development and Reform (TSU- CRVS) hosted this event with the assistance of UNICEF - Pakistan and was strongly supported by all key stakeholders like; National Database and Registration Authority (NADRA), Provincial Governments, and international partners - UNESCAP, WHO, DFID, UNFPA, and World Bank. Participation of Government delegations, comprising ministries/ provincial departments of interior, law, health, local governments, Bureau of Statistics and academia was also there. Keeping in view the scope of Summit and its benefits, participation of the CRVS Experts and Civil Registrars from South Asian countries was a commendable step.

We made our all efforts to document the valuable inputs from all the key stakeholders. Further the forum accelerated the efforts of Governments and Development Partners to make sure that by year 2025 all people in the country benefit from universal and responsive CRVS systems. The commitments from federal and provincial governments, international

partners and multiple stakeholders are a positive sign to achieve the targets to be set under National CRVS Strategic Framework.

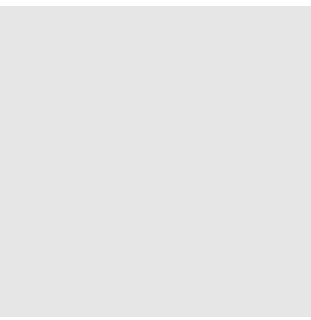
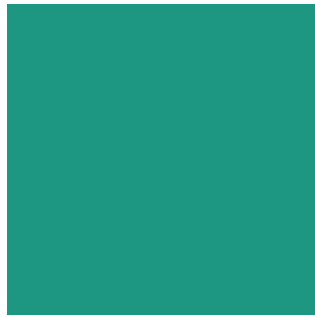
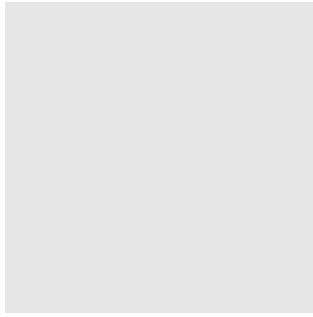
The tremendous organizational efforts made by the team of Dr. S. M. Mursalin (TSU-CRVS) and of Ms. Muqaddisa Mehreen (UNICEF-Islamabad) for making this event successful are commendable. Further the role of Mr. Khalid H. Shah for completing this report in such a handy and goodlooking manner is lauded. Hopefully this report, will give an insight to its readers about the CRVS Summit and CR8 meeting to motivate them for their positive contribution to the CRVS Goal.



Dr. Muhammad Asif

Chief Health

Ministry of Planning Development
& Reform (Government of Pakistan)
Islamabad - Pakistan



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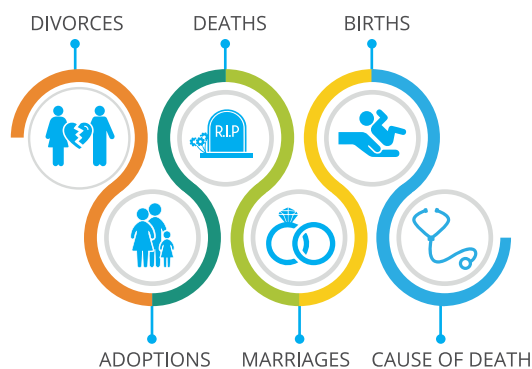
INTRODUCTION



INTRODUCTION

Historical Background

The basic definition of CRVS is “the total process of collecting information by civil registration or enumeration on the frequency of occurrence of specified and defined vital events and of compiling, processing, analyzing, evaluating, presenting and disseminating these data in some statistical form”.

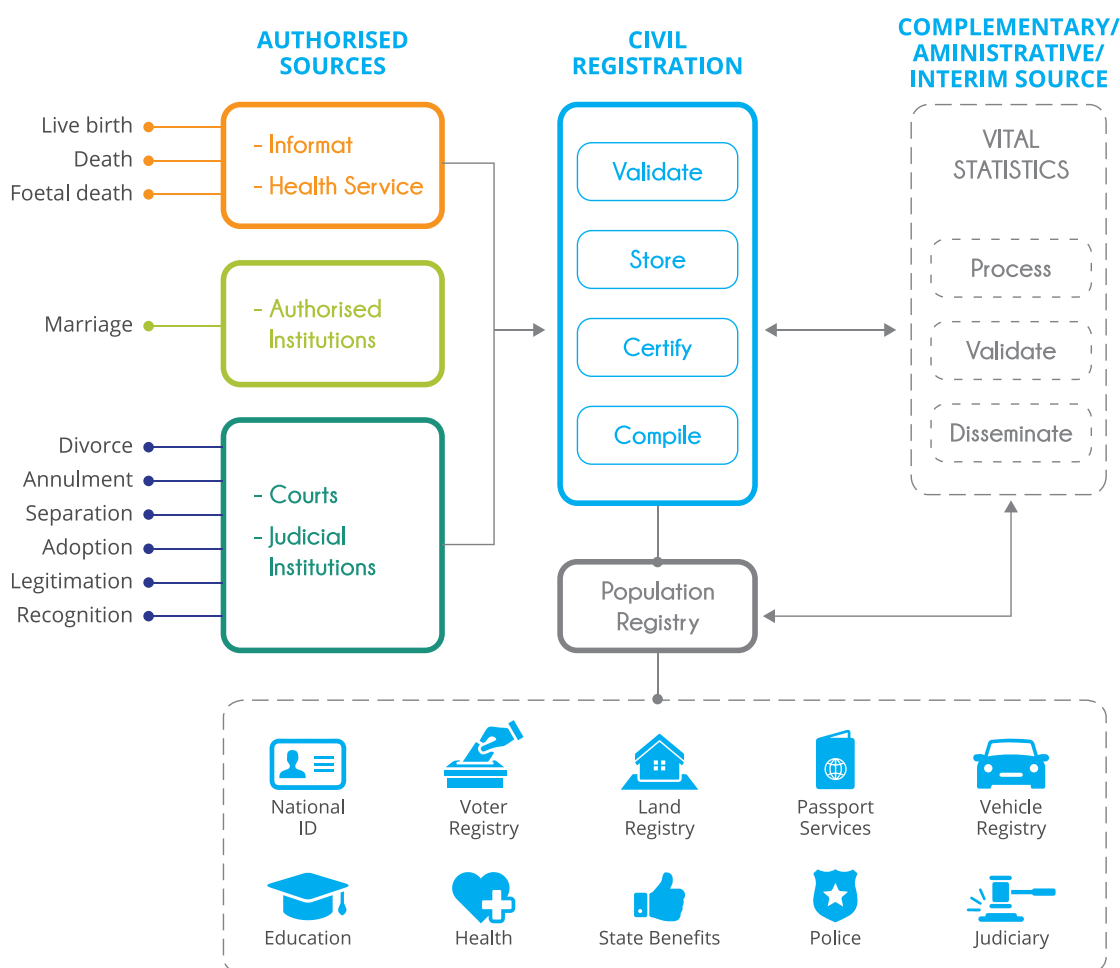


Civil registration is the important act of recording and documenting the occurrence of vital events (i.e. birth, death, marriage, divorce, and adoption) in a person’s life and is therefore a fundamental function of any government. Civil registration contributes to public administration and governance by providing individuals with legal identity and civil status and by generating information to be used as the source of civil registries and population database.

Reliable information in births, fertility and deaths enable the calculation and production of timely and accurate population estimates, which contributes to policy-making and long-term national planning. A well-functioning Civil Registration and Vital Statistics System ensures the timely and accurate reporting to the national statistics system. It enhances the capacity and credibility of national and local administrators to deliver services by helping them to identify what services are needed and by whom.

Civil registration provides individuals with the documentary evidence often required to secure recognition of their legal identity, family relationships, nationality and ensuring their rights. It enables onward access to essential services such as inheritance, health, education and social welfare. Some activities that civil registration can contribute to include seeking employment, exercising electoral rights, transferring property, opening bank accounts, accessing credit and obtaining other forms of identification such as ID cards, passports and driving licenses.

Unlike other sources of vital statistics, such as census or household surveys, the administrative data provided from civil registration systems permit the production of statistics on population dynamics and health indicators on a continuous basis for the country as a whole and at a local level for its administrative subdivisions.



CRVS Vision - 2025

By year 2025, all people in the country will benefit from universal and responsive CRVS systems that facilitate the realization of their rights and support good governance, health and development.

CRVS Journey in Pakistan

In order to achieve the successful implementation of credible, responsive and sustainable CRVS system, the below mentioned activities have been executed so far in the country;

- Rapid Assessment (Dec 2012 – Mar 2013)
- CRVS Comprehensive Assessment (Jun –Aug 2013)
- National CRVS Stakeholders Meeting (March 20-21, 2014)
- Nomination of Steering and Coordination Committee (September 9, 2014)
- First National Steering Committee meeting (November 18, 2014)
- Second National Steering Committee meeting (April 03, 2015)
- Third National Steering Committee meeting (March 17, 2016)
- National CRVS Progress Review Meeting (October 5-7, 2016)
- Establishment of Technical Support Unit for CRVS (October, 2017)
- Fourth National Steering Committee meeting (January 17, 2018)
- Orientation Seminar on National/International CRVS Best Practices (April 09, 2018)

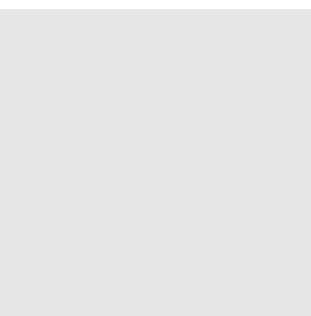
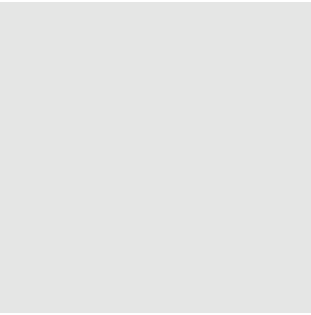


NATIONAL CRVS MILESTONES



Summit Objectives

- To bring multiple CRVS stakeholders and partners on the same page on the usefulness, status, issues and possible options for optimally functioning, universal and robust CRVS leading to development of broad based multi-stakeholders national level strategic framework.
- To learn from experiences of regional SAARC countries for acceleration and enhancement of vital events registration and to ensure vital statistics of national and international importance.
- To deliberate on prospects for institutionalization of a Civil Registrar's network of SAARC countries (CR8), scope of its functioning, information sharing and mutual cooperation.
- To deliberate on modalities to conduct mutually inclusive assessment of vital events registration of vulnerable groups like illegal migrants, stateless persons etc., making use of Assessment Toolkit development RSO Bali Process adopting a rights' based approach.



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GUESTS ARRIVAL
& REGISTRATION

SUMMIT
PROCEEDINGS

GUESTS ARRIVAL & REGISTRATION



SUMMIT PROCEEDINGS



The arrival of Chief Guest, Ms. Kanwal Shauzab, Parliamentary Secretary, Ministry of Planning, Development & Reform, Government of Pakistan. Formal proceedings of the Summit started with the National Anthem and recitation from the Holy Qur'an by Qari Abdul Basit. Thereafter, Mr. Touseeq Haider managed the stage as Moderator.

Session-1: Opening Ceremony

Welcome Address by Dr. Asma Hyder

Dr. Asma Hyder, Member (Social Sector and Devolution), Planning Commission Government of Pakistan welcomed all the participants. She expressed the hope that such huge participation from all key stakeholders will help Pakistan in developing Strategic Framework to implement reliable, complete and cohesive CRVS system in the country. This will help in achieving the goals set under Vision-2025. It will further support the national planners / policy-makers and the other development partners to design and implement better national health and social development plans. Further, the large participation of the CRVS experts and Civil Registrars from the South Asian countries would certainly help Pakistan to learn from their knowledge and experiences towards this end.



Dr. Asma Hyder

Remarks by Ms. Cris Munduate - UNICEF

Ms. Cris Munduate, Deputy Representative - UNICEF Pakistan, in her opening remarks applauded the DFID, WHO, World Bank, international dignitaries from Maldives and Afghanistan, Federal and Provincial ministries representatives, development partners and civil society organizations towards CRVS promotion. She said, it is indeed a moment of great pride for Government of Pakistan to host first international summit on CRVS with representation from the South Asian countries.



Ms. Cris Munduate

UNICEF believes in slogan of "Each and Every Child Counts". The Civil Registration of Vital Statistics systems are not only a source of legal documentation and empowerment for individuals including children but, this also generate crucial evidence for decision making in social, economic and health sector. The reliable and timely statistics of births and deaths and causes of deaths play a pivotal role in effective public decision-making. We all have a huge agenda ahead; therefore, UNICEF in support to Government would endeavor to register all children of under five years through creating partnership and actions on ground.

We would like to thank many of the civil society actors and of course recognize the leading role of the Government of Pakistan and its Provincial Governments in making this happen and moving for registration of all vital events. This international summit provides a good opportunity for Pakistan in many ways. For example, it gives an option for optimal functioning of CRVS system drawn from lessons learned from others for a broad based multiple national level Strategic Framework. It also gives us a chance to learn from the experiences of SAARC countries in accelerating and enhancing the vital events registration and use of statistics at national and operational levels.

Further creation of the South Asian Civil Registrars' (CR8) network would be a great support to develop reliable CRVS systems in all the member countries. On behalf of UNICEF we would like to confirm and publically commit all our support to such initiatives, both technically and financially.

Remarks by Ms. Joanna Reid - DFID

Ms. Joanna Reid - Head of DFID Pakistan, in her opening remarks thanked the organizers for inviting her to this very important summit on CRVS promotion. She mentioned that the CRVS related material provided by the organizers gives fascinating information about the civil registration. This is something we would be eager to know about the cause specific mortality rate. Civil registration is the fundamental human right and it is



Ms. Joanna Reid

very alarming that many countries of the region don't have adequate CRVS system in place. Resultantly millions of children are remain unregistered every year and even 2/3rd deaths are also not being registered. The consequences are very much alarming with reference to planning of social development programs for the countries.

The Awaz Program for Pakistan in partnership with UNICEF and the Government of Pakistan, we are keen to also partner with this to make sure that "every citizen counts". DFID is the pioneer to support Pakistan in implementing Digital Birth Registration (DBR) and CRVS system. A strong statistical system that could generate reliable data on vital events is the

need of time. CRVS is a fundamental system and this can generate statistical data that normally we collect through surveys and census.

It is very much obvious that DFID, UNICEF, WHO, and World Bank can extend technical assistance, but it is the Government which has to lead and convert the efforts into actions. It is the duty of Government to capitalize the momentum and materialize the deliverance through universal and responsive CRVS system by year 2024 in Pakistan.

Remarks by Ms. Cristina Isabel - World Bank

Ms. Cristina Isabel Panasco Santos - Human Development Program Leader - World Bank, first appreciated and congratulated the Government of Pakistan and UNICEF for taking the initiative to organize such an important and essential Summit for the promotion of Civil Registration and Vital Statistics in Pakistan. She shared that while preparing for her opening note she found herself engaged in her childhood as when she got her first identity card and having her signature on it.



Ms. Cristina Isabel
Panasco Santos

Ms. Cristina mentioned that civil registration has vital role in enhancing empowerment such as right of voting during elections and communication between individuals and the state. She narrated the example of Pakistan's "Benazir Income Support Program (BISP)" which is of course an exemplary initiative on improving registration of women and issuance of identity cards for receiving cash support. She emphasized that this is basic right of every child to be given identity immediately after birth. She once again appreciated the efforts of Government and its partners on organizing this useful event in Pakistan.

Remarks by Dr. Nima Abid - WHO

Dr. Nima Saeed Abid, WHO Representative – Pakistan, in his opening remarks informed that he joined Pakistan Polio Program in 2005. Thus earned a decade plus experience in Pakistan for working with federal and provincial governments. Due to non-availability of credible CRVS systems, there are difficulties to plan better health interventions, he mentioned. Couple of years back, WHO took an initiative by piloting a CRVS project at community level in four districts of Pakistan by using Open-source Registry Platform Initiative to help enhance CRVS systems in Pakistan. World Health Organization is still keen to support such initiatives.



Dr. Nima Saeed Abid

WHO look forward for the successful mainstreaming of CRVS into national database and health sector that can play a significant role. Health workers are the first point of contact for vital event reporting and registration like; birth, death, pregnancy and antenatal & postnatal visits, EPI and so on. Pakistan has many opportunities and potential as there is a political will and the new Government Leadership has key focus on social sector development including health planning.

Moreover, the country has basic infrastructure; like human resources at the community level in the shape of Lady Health Workers, other Community Workers and the Civil Society Organizations. However, coordination for data collection, data analysis and planning an advance system is much desired. To enhance CRVS system this would however, remain an area of priority for WHO and we would remain committed to support Pakistan. Dr. Nima highly appreciated the management for organizing this very important conference in Islamabad.

Inaugural Speech by the Chief Guest

Ms. Kanwal Shauzab – Parliamentary Secretary for Ministry of Planning Development and Reform on behalf of the Government of Pakistan welcomed the participants for Pakistan’s First International Summit on Civil Registration and Vital Statistics. She said, “Hosting of this very First International Summit on CRVS in South Asia where all South Asian countries can share their knowledge, experiences, ideas, and practices brings her an immense pleasure”. She reiterated the hope that this conference will help all of us to explore efficient ways to strengthen our friendships and collaborations in CRVS and beyond. A strong CRVS system contributes to be more effective and informed planning, efficient resource allocation, accurate evaluation and monitoring of Sustainable Development Goals (SDGs), she mentioned.



Ms. Kanwal Shauzab



The present government of Pakistan having an agenda to revolutionise the social sector through reforms and evidence based policy. Among major goals of the government are to transform Health and Education sectors, expansion of social safety net, women empowerment and provision of basic facilities of clean drinking water. To achieve these objectives, we fully realize the significance of a well-functioning Civil Vital Registration System, which is the driving force and is supportive of this desired initiative. Civil registration helps in strengthening public administration and governance by giving individuals a legal identity and civil status and by generating information that feeds into national data system and

population databases. Currently, Pakistan has several well-functioning CRVS systems, but unfortunately, these systems are not synchronized and are not in a position of producing disaggregated data by gender, location and socioeconomic status. If synchronized such initiatives could play an enormous role in improving planning, forecasting, development, management and research work in our day to day activities.

Considering the fact that there is a need of universal CRVS system and it is encouraging that UNESCAP identified Pakistan as a priority country for CRVS strengthening during coming years till 2022. In light with these developments National Steering and Coordination Committee for Civil Registration and Vital Statistics (CRVS) comprising broad-based, multiple stakeholders from Federal Ministries, provincial departments, NADRA and international partners has been constituted under the chairmanship of Federal Minister for Planning Development and Reform. We can proudly say that CRVS Summits organized at provincial levels have accelerated the efforts of governments and development partners to ensure that by 2025, all people in the country benefit from universal and responsive CRVS systems.

Beside from all this, I feel honored and pleased to announce the establishment of CRVS Consortium of South Asian countries. This consortium will not only help in strengthening our friendly ties, but will also build knowledge and research sharing platform at regional level. The CRVS-Unit at Planning Ministry in Islamabad will coordinate with all countries. I am confident that this initiative will strengthen the existing system not only in Pakistan but also in the region.

For me this is a great privilege to inaugurate Pakistan's 1st International CRVS Summit. The participation of this galaxy of international experts is certainly a big opportunity for us to learn and benefit from their wide expertise for building our system. This huge participation

**FOR ME THIS IS A GREAT PRIVILEGE TO
INAUGURATE PAKISTAN'S 1ST INTERNATIONAL
CRVS SUMMIT.**

in CRVS summit from the Federal and Provincial Ministries is a tremendous source of satisfaction, that CRVS agenda would be boosted in coming days. We would look forward to the deliberations and the outcomes of this important event. This conference, hopefully would serve to broaden our understanding on different dimensions of CRVS and motivate relevant departments to push the CRVS plans forward. In the end she congratulated the organizers for their endeavors to strengthen CRVS system in Pakistan.



Session-2 International Scenario

(Global Case for Investment in CRVS Systems)

Chaired by:

Dr. Asma Hyder, Member SS&D – Planning Commission, Islamabad

Co-chaired by:

Ms. Cris Munduate, Deputy Representative – UNICEF

Improving Civil Registration and Vital Statistics in Asia Pacific

Mr. David Rausis (Associate Statistician – UNESCAP) joined the summit via Skype and briefed audience about Regional Action Framework (RAF) for CRVS. He shared the Vision 2024 of Ministerial Conference on CRVS. He said that “by 2024 all people in Asia and Pacific will benefit from universal and responsive CRVS systems that will facilitate in realization of their rights and support good governance, health and development” and adopted Declaration to “Get everyone in the Picture”. Mr. Rausis further added that the Asian and Pacific CRVS Decade (2015-2024) proclaimed with specific goals, e.g. 15-nationally set targets, 7-action areas and 8-implementation steps.



He highlighted the Goal-1 having targets for Pakistan that, by 2024 at least 100 per cent of births with children under 5 years and all individuals in the territory and jurisdiction are registered. Under RAF, Goal-2 targets say that all individuals are provided with legal documentation of civil registration for births, deaths and other vital events, as necessary, to claim identity, civil status and ensuing rights. Further Goal-3 demands that accurate, complete and timely vital

statistics (including causes of death) are produced based on registration records and are disseminated. The statistics on deaths – disaggregated by age, sex, cause of death defined by ICD (latest version as appropriate), geographic area and administrative subdivision – are produced from registration records show 80 per cent of deaths occurring in health facilities have an underlying cause of death code derived from the medical certificate. The proportion of deaths coded to ill-defined codes will have to be reduced compared to deaths taking place outside of a health facility and without the attention of a medical practitioner recording their underlying cause of death code determined through verbal autopsy in line with international standards.

Further, by 2024 an accurate, complete and timely vital statistics report will be made available in the public domain. It will cover many action areas under RAF like political commitment, public engagement and participation, demand generation, coordination, policies, legislation and implementation of regulations, infrastructure and resources, Operational procedures, practices and innovations, production, dissemination and use of vital statistics.

For implementation National CRVS coordination mechanism would be established to conduct a comprehensive assessment by setting the national target value for each target. For this purpose, a comprehensive multi-sectoral national CRVS strategy will be developed & implemented to monitor achievement of the national targets. It will also help to assign a National Focal Point (NFP) within the Government and report relevant information to the ESCAP secretariat.

For Regional support and CRVS Partnership, development partners shall be engaged to discuss and coordinate partners' activities and to avoid replication in standardized partners' message about the CRVS decade. Referring to Reporting Mechanism Timeline, Mr. David informed that by 2019, members and associate members will submit midterm report to the secretariat and regional review would be conducted by 2020. Final reports will be submitted by 2024 and their review would be done by 2025.

Regional Strategic Plan for CRVS Improvement in EMRO Region

Dr. Jamal Nasher – HSD Coordinator, World Health Organization gave an overview of the CRVS journey and progress in the WHO Eastern Mediterranean Region. An efficient CRVS system includes provision of vital statistics on births and causes of death, allows governments and Ministry of Health to make better informed decisions and provides more targeted public services for citizens.



Dr. Jamal Nasher

Civil registration gives legal recognition of their identity and social, economic, political and human rights including the right of vote and right to inheritance. He further highlighted the role of CRVS and Health Information System in health, health care improvement and policy debates.

While talking about the regional CRVS strategy (2014-2019), Dr. Jamal Nasher informed that EMR CRVS regional strategy was developed in July 2013. This strategy was endorsed by regional partners e.g. UNESCWA, UNFPA, LAS, UNECA, UNICEF in September 2013 and also endorsed by WHO/EMR RC60 (Muscat, Oman, Oct 2013). Further discussing the roadmaps, he mentioned that CRVS rapid/comprehensive assessments were completed for all EMR countries and now all 22 EMR countries have CRVS improvement plans. Four CRVS regional stakeholders' coordination workshops were organized during 2013-18 in Dubai, Cairo, Casablanca, and Tunis. Moreover, national level CRVS progress workshops were conducted in 11 countries (Afghanistan, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Palestine, Somalia, Syria, and Pakistan). Regional level capacity building sessions were also conducted by covering;

- ICD-10 compliant medical certification of deaths
- ANACONDA methods of analysis of causes of deaths
- ICD- 10 Iris automated coding of deaths
- WHO 2016 automated Verbal Autopsy methods
- DHIS 2-SMoL Customization (short mortality list)
- ICD-11 orientation workshop conducted

Furthermore, capacity building workshops on medical certification of deaths were conducted in 11 countries (Afghanistan, Iraq, Jordan, Lebanon, Libya, Qatar, Saudi Arabia, Syria, Tunisia, UAE, and Somalia). TOT of physicians and statisticians on ICD-10 compliant deaths certification and selection rules were organized for >600 Physicians. Capacity building workshops in ICD-10 for mortality coding have been arranged in 7 countries (Afghanistan, Bahrain, Egypt, Iraq, Libya, Palestine and Qatar). CRVS progress in the region (2013-2018) for timely registration of births, deaths and medical certification of deaths in EMRO countries data for 2012-16 was also shared.

While sharing the way forward steps, Dr. Nasher informed; WHO will continue to mobilize political will, leadership, commitment, and coordination efforts across sectors. Capacity building of the physicians, coders and statisticians would be done, especially with regards to automated verbal autopsy methods. Moreover, WHO will continue to critically appraise quality and availability of data, especially on causes of death and support countries with relevant Tools and Standards.

UNICEF Role for Global CRVS Commitments

Ms. Silvia Pasti, Chief Child Protection, UNICEF – Pakistan, addressed the summit and informed that UNICEF recognizes the link between different vital events like births, marriages, divorce and deaths. The CRVS system, birth registration and onward services will improve and strengthened if more children receive identity, as aimed under article 7 of Charter for Registration of Children (CRC). She mentioned that UNICEF, in many countries, collaborated with other UN agencies and donor partners to support governments for CRVS system assessments and development of frameworks to implement plans for birth registration.

UNICEF works in more than half of its programming countries to enhance the resource capacity of the civil registries to develop birth registration and



Ms. Silvia Pasti



immunization, she added. While talking about the UNICEF's commitment to SDGs, Ms. Silva mentioned, there is plan for 2018-2021 aligned with the 2030 Agenda and envisages a world in which all children are healthy, protected, living in a clean environment, learning and have a fair chance to succeed. UNICEF is fully committed to its supporting member states to localize the SDGs national targets related to children, establishing systems to track progress in reducing inequality and ensuring that "no child is left behind".

Talking about the SDGs, Ms. Silva mentioned that the CRVS systems recognize as a powerful driver for more inclusive economies and produces critical measurement data for many population-based indicators and targets. Concluding the brief, she pointed out that UNICEF continuously urges all governments to;

- Strengthen civil registration systems that register every child immediately after birth.
- Identify and address disparities in birth registration between different groups & gender.
- Get everyone in the picture for CRVS

Global DFID supported CRVS initiatives

Fiach O'Broin Molloy from DFID briefed that the civil registration means knowledge of a government about their citizens, when they were born and when they have died. Without a well-functioning CRVS system, people who are left behind will remain undetected and uncouned. Globally around 65% of births are registered. According to household survey data, only 33% of births are registered for people in the P20.



Fiach O'Broin Molloy

People who have evidence of their legal identity are better equipped to access education, health and social protection, employment and inheritance. Civil registration is fundamental to women's empowerment. Children who have been registered are better protected from early marriage, child labour and exploitation.

He further told that with 44% of countries worldwide not having comprehensive birth and death registration data, we can continue to both advocate for and support partner countries, undertake national censuses, and build their Civil Registration and Vital Statistics (CRVS)

systems as a key source of national disaggregated data. We can also build their capacity on inclusive collection of data and on disaggregation. DFID continues to engage with do the same. He committed that DFID will work with others to test the feasibility of, and develop guidance for using the Washington Group disability status questions for administrative systems and programme M&E processes.

Organizations should finance for the strengthening of civil registration and vital statistics systems. Sixty-five million people – the highest number seen in decades – are displaced due to conflict, drought and other factors. Refugees, other forcibly displaced persons and the stateless are often left out of the CRVS and national identity systems of the countries in which they live. The births of their children are not registered and they are not issued documentation by host governments. This lack of legal identity prevents access to both public and private services, increases the risk of statelessness, and inhibits effective state planning. The increasing digitization of CRVS systems may exacerbate exclusion by preventing access to the predominant registration system, and as a result other services that are dependent on digital CRVS registration records.

WHERE DATA PROTECTION AND PRIVACY STANDARDS ARE MET, A BROADLY RECOGNIZED DIGITAL IDENTITY SYSTEM BENEFITS ALL STAKEHOLDERS.

A digital identity can facilitate access to essential services, aid countries in distribution of social benefits, and open up formal financial tools to the world's 2 billion unbanked people. Furthermore, accurate systems of identification are necessary for accountability and governance, and to help ensure that development aid and protection is directed to those most in need. Like-wise for refugees and people who are not fully included in state identity systems, a portable digital identity system can be a step toward regaining their identity, providing them with self-reliance opportunities, and improving their participation in the social and economic life of their host community.

But critically, individuals should have agency over their own identity and associated data, with the ability to choose what to share and with whom.

He concluded his recommendations with an urge to strengthen key data components in CRVS; Digital Birth Registration, Gender Management Information System, Women's Economic and Social Wellbeing and prevents Child Labour.

World Bank CRVS Global Perspective

Dr. Aliya Kashif, Health Specialist - World Bank Pakistan, briefed about the innovative ways to strengthen birth registration with a slogan "Counting the Uncounted". She discussed in details the core principles of CRVS and why does it matter for all. Further approaches for accelerating birth registration to link with health services (maternal and child health services) and its extension to health facilities were highlighted.



Dr. Aliya Kashif

Sharing the world CRVS scenario she gave the example of on-site registration in **Botswana**, where >90% of births occur in health institutions and Government implemented an electronic on-site registration of births in health facilities. This process increased birth registration upto 76.6%.

Another example of **Tanzania** was given where they implemented simplified birth registration process by using health facilities to promote birth registration. They declared health facilities as registration points to make the registration process 'one step, one visit' rather than the present 'three steps, multiple visits'.

In **Thailand** for National ID & Universal Health Coverage (UHC), personal Identification Number (PID) issued at the time of birth or first household registration. Bureau of Registration sends updated data to NHSO on new births and Newborns automatically added to beneficiary registry.

Update on Promotion of CRVS in Pakistan

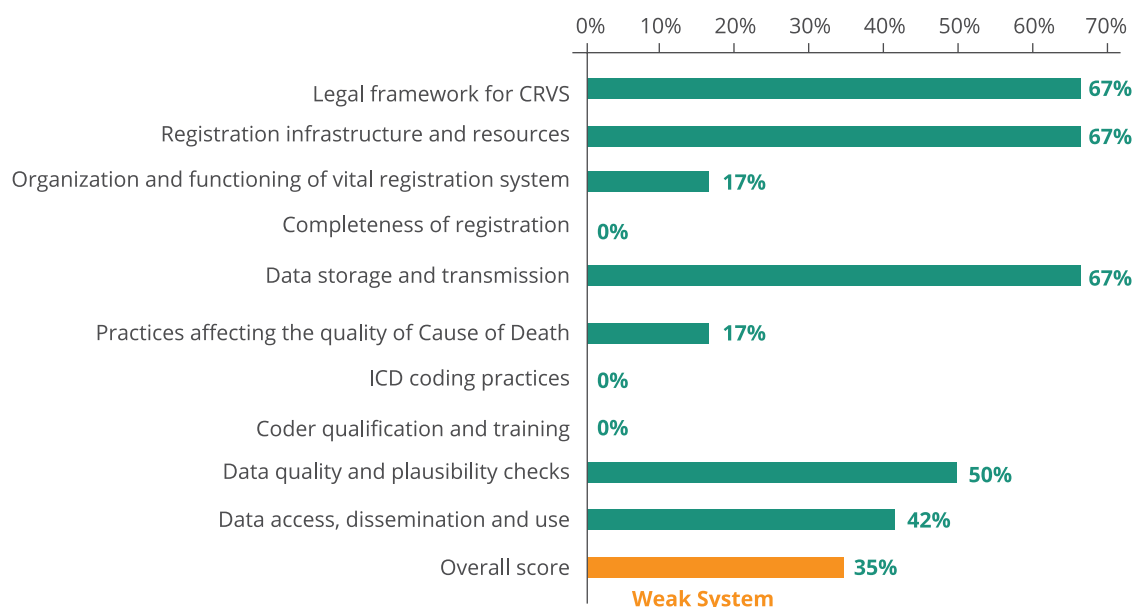
Dr. Murtaza Haider, Assistant Chief (Health) Ministry of Planning, Development & Reform updated the audience on promotion of CRVS systems in Pakistan. He introduced about the wide range of stakeholders involved are; Union Councils Administration of local government departments and NADRA together with departments of Health, Interior and Law & Justice. While covering the Rapid round of CRVS Assessments



Dr. Murtaza Haider

in Pakistan, he shared the results, which were not very encouraging. This assessment revealed that Pakistan's CRVS system is far from the components of universal, continuous, and compulsory. The birth registration was only 34% for children under age of 5 years. To record the cause of death as per ICD-10 coding in hospitals are not being practiced. Birth registration in rural areas was only 23% and the death registration coverage was only 5%. National level data for Birth and Death registration was found extremely low.

Rapid Assessment - Results



While sharing opportunities for CRVS promotion in Pakistan, Dr. Haider mentioned that institutional arrangements for strengthening of CRVS have been initiated both at federal and provincial level. This has brought CRVS to a take off stage. This could now be extended to district, sub-district and below. CRVS awareness campaigns for multiple related departments/ stakeholders has been organized and national & provincial managers/ decision makers have been sensitized. Baseline studies on CRVS Thematic Areas have been launched and have started producing results to become basis for long term CRVS strategic planning. International partners working for CRVS are now keen to align their strengths with the government plan.

He shared Pakistan's plan of implementation of robust CRVS system throughout the country by 2022. Sharing the implementing challenges he said that CRVS is an interdisciplinary subject so coordination with diverse stakeholders has been an issue. CRVS requires sound legal framework and inter-institutional collaboration across sectors, especially Health, Local Government and Bureau of Statistics etc. It also involves significant administrative and management challenges for registration at local level.

In order to demand generation, passive system relies on civil society collaboration for notification of births & deaths. Need to establish collaboration with health sector and religious authorities to ensure death notification. At federal level a Technical Support Unit has been established for coordination for CRVS development and promotion, he added.

Session-3 Global Best Practices - A Broad Development Partnership

(Role of multiple Stakeholders in the CRVS data collection and storage)

Chaired by:

Mr. Gohar Ahmad Khan (Director General – CRMS/NADRA)

Co-Chaired by:

Mr. Bahrawar Jan (Deputy Director General – Pakistan Bureau of Statistics)

NADRA – An Overview

NADRA is operating CRMS since 2004 and till now 8000 sites are functional which have registered 60 million vital events. Now we're moving to online system shortly. The key data providers are; NADRA, local governments, statistics and health departments, whereas the users are; education department, population registry, social security, electoral Registry, Private Sector, Planning Commission and the Law Enforcement Agencies.



Mr. Gohar Ahmad Khan

He said that citizens' role is very important in data generation as they are producers/owners of data, so they have to report occurrences as per law and to provide accurate details/documents. It's also their moral, social and legal obligation to do so. Local Governments role on data generation is also very significant to establish reporting points/ offices and authenticate the information of citizens and verify documents for issuance of certificates and develop byelaws.

NADRA have developed infrastructure and deployed technical operations, data hosting & management, trouble shooting, operational details and carry out regular monitoring & evaluation. Further, for quality data NADRA have introduces online facility where perception & assessment of its fitness to serve its purpose of accuracy, completeness, reliability,

relevance and updated information are assured. For this purpose NADRA have developed an interactive system to establish direct linkage of concerned stockholders with National Database. Central networks infrastructure is to be created to establish connectivity and host data. Internet connectivity, CNIC verification, data storage, application of business rule, tracking facility and verification mechanism is provided by NADRA.

Cost impact of online facility was also discussed including development of central networks infrastructure, human resources, routine operations, administration, monitoring evaluation & maintenance, training & development, trouble shooting and management of parallel system where internet is not available. For improvement in administrative functions, formulation of health policy, education policy and development of CRVS database is also required to contribute to related SDGs targets and indicators.

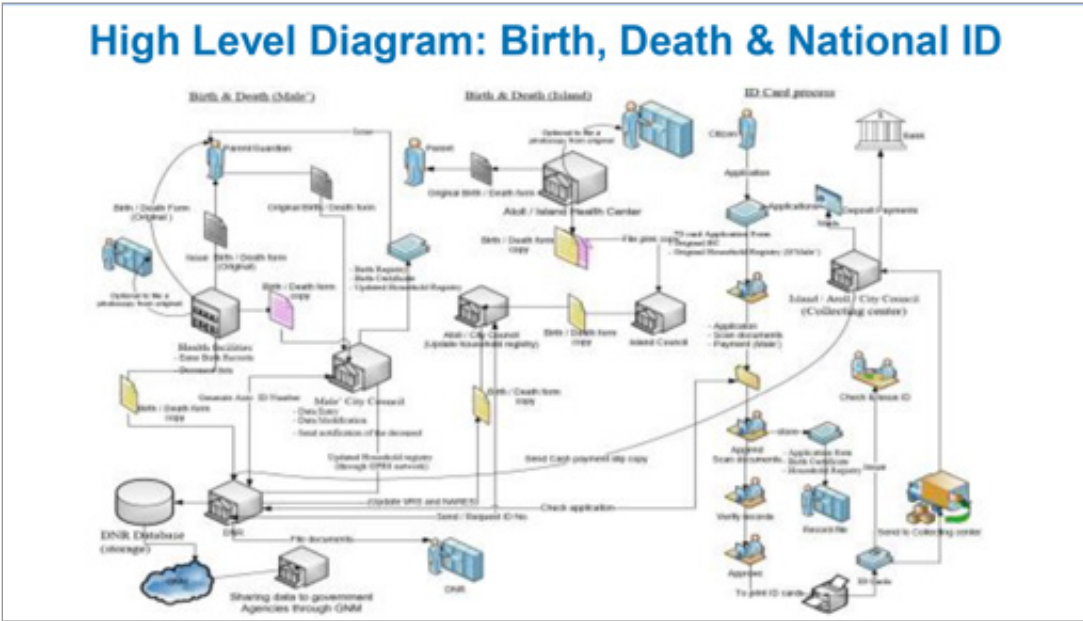
CRVS in Maldives

Mr. Ibrahim Shaugee, System Analyst Department of National Registration - Maldives briefed the CRVS system of Maldives covering current status, roles and responsibilities, coordination mechanism, challenges and the way forward. He mentioned that the CRVS is helping in recording and generating statistics for health including births and deaths with causes and mortality statistics together with burden of diseases, informing policy, planning and monitoring progress towards Sustainable Development Goals.



Mr. Ibrahim Shaugee

There is a high-level CRVS coordination mechanism at National Level with policy and technical representation. Its objective is to strengthen the CRVS system of the country and to improve inter-agency coordination for addressing the challenges and new requirements. This coordination mechanism acts as Advisory Board to make changes in the Legal Framework concerning to CRVS. Its Stakeholders includes; National Bureau of Statistics, Department of National Registration, Ministry of Health, National Center for Information Technology, and Male' City Council. It oversees the capacity building issues as well.



In Maldives the agencies involved in CRVS activities at local and national level are; Department of National Registration (DNR), Ministry of Health, National Bureau of Statistics, Local Government Agency and NCIT. Regarding the roles & responsibilities, Ministry of Health manages the births and deaths data, assures its quality by analysis and disseminates the vital statistics. The Government health facilities do births & deaths registration, fill the relevant forms and send them to DNR. The private hospitals complete the birth & death form in triplicate (for Parent, DNR, Local Council) and the Island Council checks whether all the forms have been received.

The formulation of national coordination mechanism to enhance the Management Information Systems for greater coverage, accuracy, and timeliness is the key challenge. Other challenges are strengthening of both inter and intra agency coordination, registration of overseas birth, death, and marriages events, timely dissemination of VRS statistics, harmonizing the legal framework, sustainable human capital development program, and improving cause of death identification & coding.

Accelerated actions needed by the Member States to implement CRVS strategies and plans. The SDG agenda can help by applying best practices on better coordination across sectors



and partners to improve scaling up and sustainability. The state needs continuous support in implementation of CRVS strategies by expanding use of medically certified and ICD-coded cause of death, better linking of CRVS systems with the overall health information system, and by improving analysis and interpretation of CRVS statistics.

CRVS in Afghanistan

Mr. Homayoun Muhtaata - Director General for CRVS, Government of Afghanistan while presenting the CRVS history of his country informed that the registration of vital events has been practiced inconsistently in Afghanistan since 1978. After the end of Taliban regime (in 2001), the government started to revitalize the system (Birth, death, marriage, divorce and migration).

The laws governing CRVS in Afghanistan were reviewed in 2014 and 2017. The Afghanistan Central Civil Registration Authority (ACCRA) is responsible for the collection of civil registration events including marriages and divorces through a decentralized system. Currently there are registration offices in 364 districts for which supervision and training in birth and death registration is provided by the ACCRA.



Mr. Homayoun Muhtaata

The birth registration mostly occurs in the health centers and the current registration rate is around 42% for children under 5 years of age (Source: DHS 2015). The major challenges we are facing is poor infrastructure as most of the health centers lacking direct road connections. The security situation is another issue that makes it difficult to provide consistent services of high quality.

A comprehensive CRVS assessment was carried out in 2012 by the Ministry of Public Health with the collaboration of WHO, ACCRA and the Central Statistic Organization based on international standards. It revealed that Afghanistan CRVS system required substantial improvement in all areas including strategic framework, legal framework, political support and CRVS System structure and organization. Further, resources and capacity is also inadequate for implementation of quality of birth and death registration and appropriate certification. Improper coordination and culture of data use, geographical terrain, lack of security and culture of resistance especially in remote areas for birth registration of females are the major hurdles. Based on the assessment, Vital Statistics Country Strategic Plan 2016-20 was commissioned by the WHO in Kabul.

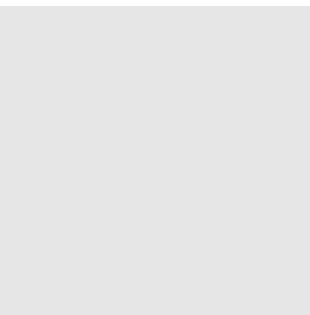
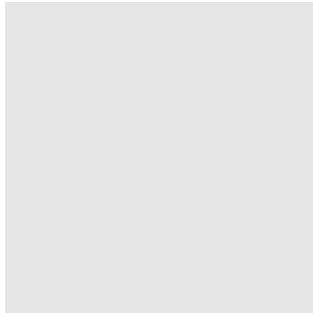
In 2015, a web-based database was developed with the support of UNICEF to register both birth and death but it is available only at central and provincial level so far. eTazkera was launched for issuance of National Electronic Identity Card and on May 13, 2018; a fully functional and complex information technology system for ID management and CRVS system was launched in Afghanistan. Currently this program is at the pilot phase however, there is a gradual plan to implement linkage of ID management to the CRVS system as a 2019 priority. Since 2017, Afghanistan has established a coordination mechanism covering all key stakeholders.

The Ministry of Public Health (MoPH) developed and endorsed SOP in 2018 that state health sector must collaborate with ACCRA in birth registration and give responsibility to all health facilities (public and private) to register all children below two years who are born in the health facilities or those born at home but brought to health facilities for vaccination. In this regard, MoPH has started training of all the Midwives and Vaccinators on birth registration with the support of UNICEF.

The Vital Statistics and Demographic Department of the Central Statistical Office is responsible for the calculation of indicators, compilation of collected information, statistical analysis, reports development and dissemination of results. The availability of vital statistics offices in 24 provinces encourage village's head and Mullahs to collaborate with Vital Statistics offices for birth registration.

Death Registration is mainly done through hospitals and National Security Authorities. Death reports are prepared on monthly basis and shared with Central Statistics Organization which includes Gender and Place of Death. Marriage/Divorce registration is done with collaboration of courts.





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PROCEEDINGS
DAY-2 (NOVEMBER
29, 2018)

PROCEEDINGS DAY-2 (NOVEMBER 29, 2018)

Session-1: Recap Day 1

The second day proceedings of the Summit were started with recapitulation of day-1, by Ms. Muqaddisa Mehreen, Child Protection Specialist UNICEF – Pakistan. She highlighted that in opening ceremony speakers emphasized upon the strengthening of registration system for better policy making and implementations. Real life examples had been shared with the audience to deliver key message efficiently.



Ms. Muqaddisa Mehreen

The second Session was about the “International Scenario of CRVS”. The discussion roamed around importance of an Efficient CRVS system for a Well Governed Society. Session was closed with a Lunch Break. Session-3 was about Best Global Practices, which was honored by our Foreign Guests from Thailand, Maldives and Afghanistan. In this session, speakers presented the steps taken by their Governments regarding the strengthening of Civil Registration and Vital Statistics.

It was proposed that an Integrated Registration System should be implemented throughout the country. Maj. Aftab Saleem Director (CRMS-NADRA) presented his experience and ideas about how to improve CRVS system in Pakistan. His input was of great importance. In the end, the day was closed with a commitment to utilize and get benefit from each other’s ideas and experiences in future.

Session-2: National Scenario

(National & Provincial case for investment in CRVS Systems)

CRVS Developments in Punjab

Mr. Mahmood Javed Bhatti, Director General, Local Government & CDD Punjab presented the CRVS status in Punjab. He informed the audience that under Section 72 of the Punjab Local Government Act-2013, Union Councils arrange registration of births, deaths, marriages and divorces. Further Section 81 of this Act gave authority to Municipal Committees for births and deaths registration.



Mr. Mahmood Javed Bhatti

It was informed that there is a timeframe for registration of each event. Like for normal registration of new born at UC there is a time of 60 days and the Secretary of UC complete the process within 3 days. Beyond 61 days to 7 years the Chairman of the UC or Administrator of MC enters such registration and complete certification within 7 days. Over and above 7 years as late entry, the Assistant Commissioner of the district after verification of the birth certificate by Medical Superintendent of THQ/ DHQHospital enters the birth registration and issue birth certificate within 20 days. Likewise, there are procedures for correction and change of entries also, he added.

There exist an ordinance for registration of marriages "Muslim Families Law Ordinance – 1961 (MFLO-1961)". Every marriage solemnized under Muslim Law is being registered in accordance with the provisions of this Ordinance. Under this Ordinance, the Union Council shall grant license/s to one or more persons, to be called Nikah Registrars, but in no case shall more than one Nikah Registrar be licensed for any one Area Ward. The Nikah Registrar or the person who solemnizes a Nikah will accurately fill all the columns of the 'Nikahnama' form with specific answers of the Bride or the Bridegroom. Every marriage not solemnized by the Nikah Registrar will, for the purpose of registration under this Ordinance be reported to him by the person who has solemnized such marriage.

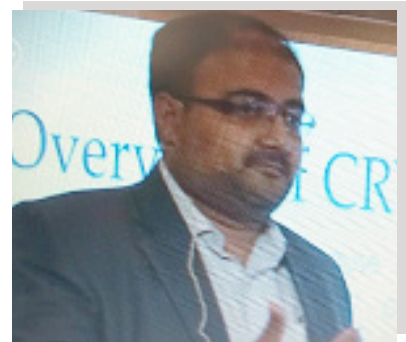
For divorce, this ordinance (MFLO-1961) allows that any man who wishes to divorce his wife shall, as soon as may be after the pronouncement of divorce in any form whatsoever, give the notice to UC Chairman in writing of his having done so, and shall also provide a copy thereof to the wife.

Mr. Bhatti also shared an overview and recommendations of the 1st CRVS Seminar held on October 31, 2018 in Lahore - Punjab to strengthening the CRVS system in Punjab province.

- A proper CRVS system should be in place and measures should be taken to give awareness about the significance of CRVS and the procedures involved.
- Formulate laws, by-laws and policies at local level. CRVS rules for all the provinces must be framed unanimously.
- A Central Statistical Repository should be established.
- Offices of Union Councils should be renovated and updated with modern technology and other utilities.
- Proper allocation of resources for the Local Government Department should be made.
- Form-B should be issued by NADRA only when the Birth Certificate record is made available.
- Use of innovative technologies in CRVS should be promoted and DBR should be made available online
- Involvement of general practitioners and private sector is necessary for uniform birth and death reporting, registration and compilation of data for planning
- Collaboration is required between multiple stakeholders to work in a coherent way to tackle the challenges in the system.
- Universal Health coverage needs to be promoted.

CRVS Developments in Sindh

Briefing about the CRVS situation in Sindh province, Mr. Nasir Khan, Assistant Director (MIS) – Bureau of Statistics, Planning & Dev. department of Sindh mentioned that the modern history of Civil Registration can be traced 300 years back. Sharing the birth registration status in Sindh he said, it is just 29.1 per cent, which is much lower as is alarming. He further highlighted the importance and components of birth registration strategy and onward policy option for Sindh i.e. if no fee is charged for civil registration it would be good for the public.



Mr. Nasir Khan

Mentioning the rational approach for birth registration and improving demand, people are the rational economic agent. For an integrated approach, he asked to integrate the birth registration with other Social Safety networks. Regarding strengthening of civil registration, he emphasized the participation of private sector for technological support.

CRVS Developments in Khyber Pakhtunkhwa

Mr. Faiz Muhammad, Director (Policy & Operations), Local Government Khyber Pakhtunkhwa briefed about the LG Act - 2013 for births, deaths and marriages as a primary function of 3501 village / Neighborhood Councils (VC/NCs) in KP province. He further intimated that KP-Right to Services (RTS) Act – 2014 which ensures birth certification is mandatory public service



Mr. Faiz Muhammad

and shall be delivered within the specified time limit of 2-days.

He also informed that the CRMS of NADRA for the provisioning of an independent access code to 986 Union Councils for registration of vital events, is in process. The current coverage of birth registration (19% approx) is much below the desired target as four out of five children

live un-registered in KP. Currently the registration demand is need based, hence is very low. He made below recommendations and way forward for KP province.

- Simplification of law at National/Province and Local level
- Civil Registration needs to be make mandatory and free of cost
- Coordination and collaboration amongst all CRVS stakeholders should be strengthened
- Extensive awareness campaign in print, electronic media and through elected local bodies' representatives.
- Capacity building trainings for VC/NC staff
- Adoption of modern Information technology/ mobile phone App for connecting VC/NC offices with community as well as district, province and National level's stakeholders and international partners.
- The issuance of the CRMS codes for the VCs/NCs to ensure efficiency and increasing registration/certifications
- Linking birth and death registration with health facilities

In the end he said, KP Government is committed to ensure 100% registration of all vital event and no such event would remain unregistered/ uncounted by 2024.

CRVS Developments in Baluchistan

Mr. Abdul Ghaffar Kakar, Director General, Bureau of Statistics (P&DD), Baluchistan gave an overview of the CRVS implementation in his province. He informed that collection of information on the frequency of occurrence of vital events like birth, death, marriage, divorce and migration etc. is unfortunately very weak in Baluchistan. The birth registration rate is below 10 per cent and death registration ratio is even much lower than birth registration. To improve and strengthen CRVS systems in Baluchistan, P&D department has notified provincial CRVS Steering Committee and a provincial focal person. This Steering



Mr. Abdul Ghaffar Kakar

Committee is chaired by ACS (Dev) while Secretary Health, Secretary Population Welfare, Secretary Planning in P&DD and Director Bureau of Statistics in P&DD are the members.

Under the technical and financial support of UNICEF, we are planning to establish CRVS Technical Support Unit in Baluchistan. This unit will organize events to give awareness about CRVS systems and built capacity for promoting CRVS activities in Baluchistan. Sharing the challenges and the way forward, Mr. Kakar added the following points.

- Lack of awareness among common masses on realizing importance of vital events' registration is the major issue.
- Reaching all population is another challenge because of widely dispersed population in Baluchistan.
- Inadequate capacity for implementing civil registration requests within the civil registration system in the province.

CRVS Developments in Azad Jammu & Kashmir

Raja Zulqarnain – Deputy Director (M&E/MIS), LG&RDD Muzaffarabad – Azad Jammu & Kashmir shared the CRVS status of AJ&K state. In AJ&K the birth and death registration is the function of Local Government, which is having 206 registration offices. On the other hand, registration of deaths with causes and coding is the responsibility of Health department and they have 24



Mr. Raja Zulqarnain

offices with 240 such sites of registration.

Further, the marriage and divorce registration is done by the Religious Affairs Department and they have 16 offices with 3000 plus Nikah Khawan throughout the state.

The AJ&K Government has implemented CRVS transformation from manual to digital under a Pilot Project. Nearly 54 sites have been established for birth and death registration in both urban and rural areas.

CRVS PILOT PROJECT COVERAGE (BIRTH/DEATH)		
SITES	LOCATION	NOS.
Union Councils	Rural	31
Municipal Corporations	Urban	5
Municipal Committees	Urban	5
Town Committees	Urban	13
Total:		54

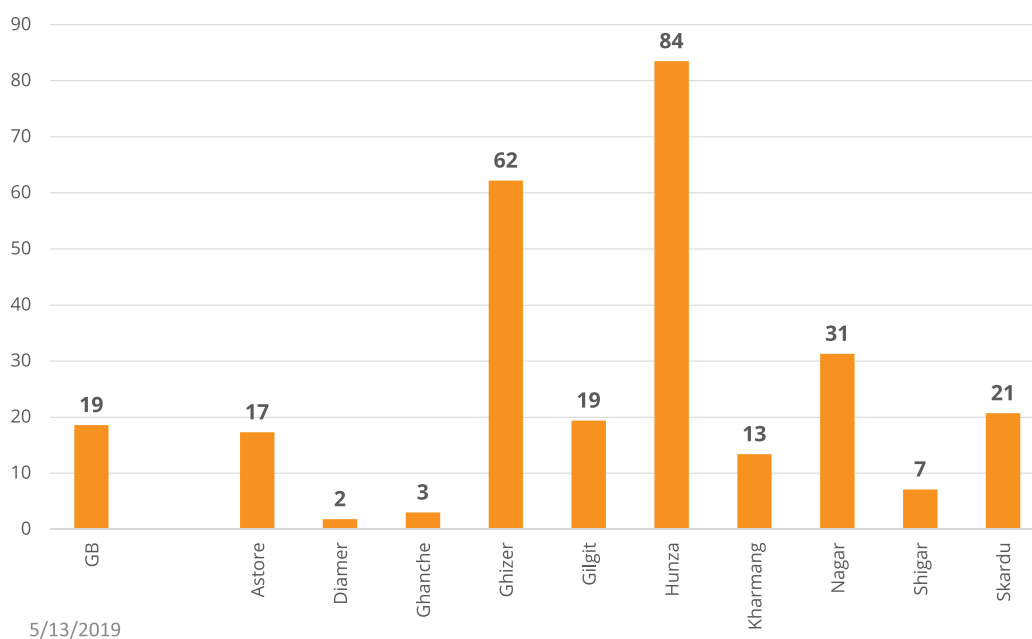
Speaking about limitations being faced by AJ&K Government for credible CRVS system, Mr. Raja mentioned that the legal framework is outdated. The capacity of implementing agencies for transformation of system from manual to digital is limited. Similarly, there are limited financial resources to ensure 100% coverage. Furthermore, because of the unawareness of public and the difficult terrain of registration offices we are having low CRVS registration. Other issues include; non availability of coordination mechanism or SOPs between various stakeholders e.g. LG&RDD, Health, Religious Affairs, and Social Welfare departments. For the successful implementation of desired CRVS system in AJ&K, he recommended;

- There is a need of national level legal framework for CRVS to initiate state level's civil registration drive;
- Additional resources be arranged for 100% coverage and completeness;
- Public private partnership would also be required to be strengthened;
- A comprehensive Media Strategy is required to create public awareness about CRVS importance and benefits;
- Technology based mechanism be promoted for vital events reporting;
- CRMS Number should be printed on CNIC and linkage of Civil Registration with facilities/ service providers.

CRVS Developments in Gilgit Baltistan

Mr. Ali Jabbar, Focal Person – CRVS, P&DD Gilgit-Baltistan, shared the background of CRVS system in Gilgit-Baltistan. He informed that as per the “Local Government Act-2014 and Gilgit-Baltistan Rules of Business-2009” the registration of vital events (i.e. births, deaths, marriages & divorces) is the prime responsibility of LG&RD department. The birth registration initiation was first launched in 2012 by LG&RD in collaboration with NADRA & AKRSP for which the financial assistance was extended by Plan International. Gilgit-Baltistan Government conducted its first ever Multi Indicators Cluster Survey (MICS) in 2017 with the technical support of UNICEF.

Birth Registration



5/13/2019

The provincial Steering Committee for CRVS stands notified in April 2018 comprising representations from all relevant stakeholders. Its first meeting was held on 11th September, 2018. An orientation seminar on CRVS has also been organized with the technical assistance of Ministry of PD&R and UNICEF in September 2018. A development project titled “Strengthening of Union Council Offices in GB” having a cost of PKR: 57.5 million stands

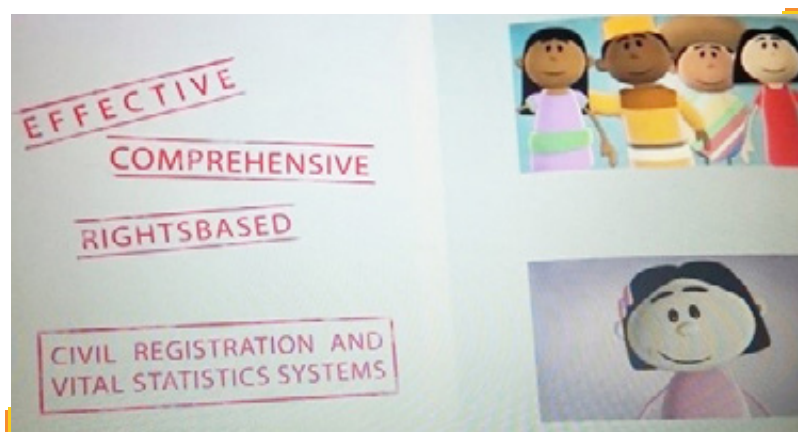


approved. Its basic objectives are; provisioning of IT equipment, internet facility, electricity (Solar Panels), transport (motor bikes), hiring of Data Entry Operators at headquarters & divisional level and capacity building of the UCs Secretaries. Following are the challenges being faced for CRVS implementation;

- Accessibility issue due to scattered valleys;
- Lack of IT literate staffs and limited financial & HR resources;
- Limited connectivity and low electricity coverage;
- Weak inter-sectoral coordination
- Besides provisioning of solution to above issues, there is also a need to sensitize the community at wider level in Gilgit-Baltistan;

Animated Movies Show

Before closing of the session, two Animated Short Movies were shown to the audience. The first one was developed for 2.25 minutes having a slogan “Count Every Child”. This animated movie covered the benefits of ‘Effective, Comprehensive and Rights-based’ civil registration and vital statistics system that ensures; better health, education and other social services in onward life of every child.



The second movie of 3.10 minutes was based on a story of a Girl (Meena) and a Boy (Raju) by depicting the importance and the benefits of birth registration and national identity.



Both the movies were very much interesting and highly admired by the audience. Participants were of the view that such movies be also used in CRVS campaign.

Session-3 Technical Session

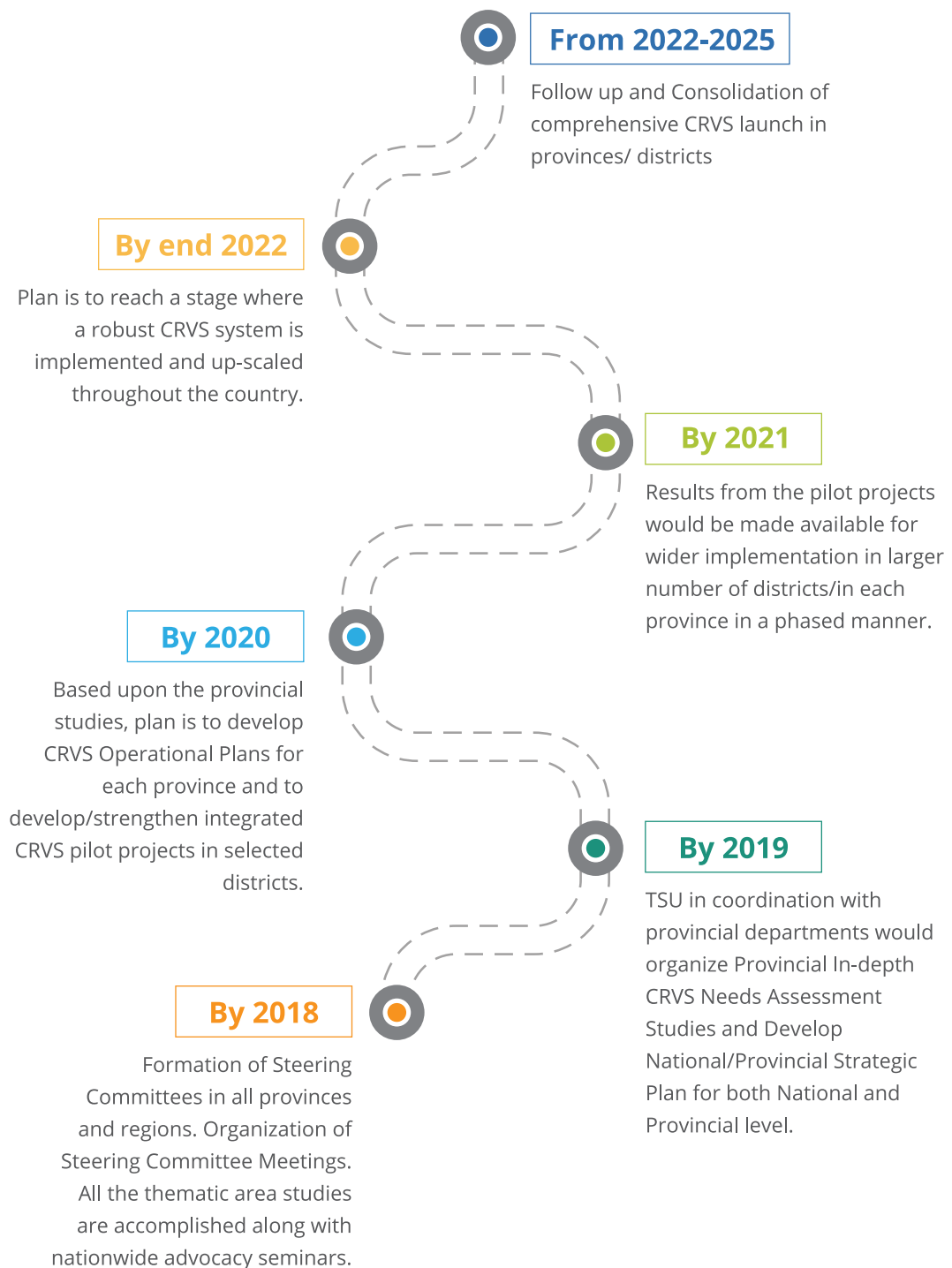
(CRVS Thematic Areas & Group Work)

Essentials of Thematic Areas

Dr. S. M. Mursalin, National Technical Adviser (TSU-CRVS), Technical Support Unit MOPDR briefed the participants on essentials of five Thematic Areas of CRVS. He said that to reach consensus and get doable recommendations from the provincial departments, a set of questions were priorly sent by TSU, to be discussed in group work during respective provincial summits (see Questionnaire at annex-B). The international summit was preceded by five summits at provincial level. Provincial response thus received was consolidated by TSU for final adoption and national consensus. He then explained the modalities of group work. The list of Group Facilitators and its Members can be seen at annexure-C. Groups on following thematic areas were accordingly formed.

- a. Development of CRVS Legal Framework
- b. Physical, Human and Financial Resources for Civil Registration System
- c. Registration Practices, Coverage, and Completeness
- d. Death Certification and Cause of Death / ICD Coding
- e. Innovative approaches for Data Access, Use and Quality.

He said since its inception in October 2017, Technical Support Unit has organized number of activities both at the Federal and Provincial levels. This included a number of advocacy seminars, organization of national and Provincial CRVS Steering Committees and initiation of baseline thematic area studies. He said one of major achievement of technical Support Unit is the establishment of a robust institutional mechanism for the strengthening of CRVS with distinct developments including a) Formation and activation of National /Provincial CRVS Focal Units and Steering Committees. b) Functioning of Technical Support Unit to take national coordinating role c) Effective coordination with international partners for CRVS improvement. He said that a broad vision and longer terms goals have been developed in partnership with CRVS stakeholders.



He said time is now ripe for perusing a longer term roadmap for the development of CRVS in the country.

Thematic Areas - Group Work Presentations

Group-A “Development of CRVS Legal Framework”



Facilitator: Mr. Saqib Aleem

Additional Secretary (R).
Ministry of Law, Justice & Human Rights,
Government of Pakistan, Islamabad.

Eleven professionals participated in the activities of Group-A. Their point-wise discussion and its subsequent response were presented to the audience by the Group Facilitator, which is as under:

POINTS OF DISCUSSIONS	GROUP RESPONSE
1. How do you feel about National Uniform CRVS law? What could be its components? Are the existing CRVS laws sufficient or certain changes have to be made in them?	<ul style="list-style-type: none"> • The laws for registration of vital events available in all the provinces. The local governments need to amend it to cover the additional requirements of CRVS systems and to harmonize them to cover adoptions and causes of death. • The new comprehensive law would be hard due to the segregation of the powers between the federal government and the provinces. The expected/proposed law may be procedural legislation instead of a substantive law. It won't disturb the empowerment of provincial government. This law will establish to fill the gaps and remove the nonuniformities. • Preferably there may be a transition period for the implementation of new legislation in which the old and new both working simultaneously, so that the current practices won't be disturbed and the ratio of registration may not be dropped down.
2. How could timely registration of vital events be ensured? Do we need laws, rules or By-Laws?	<ul style="list-style-type: none"> • Relevant laws be amended to include both NADRA and the local councils for CRVS registrations and to find the way for transfer of vital statistics both ways.
3. What are the most appropriate options for registration fee?	<ul style="list-style-type: none"> • Making provisions in the federal and provincial laws for appropriate funding for CRVS Registrations in the relevant laws. Preferably the currently applicable fees for birth and death registrations may be removed in the laws.
4. What roles and responsibilities could be assigned to various CRVS departments? How could these be implemented?	<ul style="list-style-type: none"> • Existing laws may be amended to harmonize them with the CRVS requirements and remove contradictions in this respect. Lack of confidentiality in the Local Governments' laws and lack of inter-operability needs to be removed.
5. Other important suggestions in this area for National Consensus	<ul style="list-style-type: none"> • The law should cover both the CRVS registrations, and their lacking areas to create linkages with the existing laws and the information available in the national database.

Group-B “Physical, Human & Financial Resources for CRVS”



Facilitator: Prof. Dr. Amna Mahmood

Head of Department (Politics & Int'l Relations)
Faculty of Social Sciences International Islamic University,
Islamabad, Pakistan

Fourteen professionals participated in the activities of Group-B. Their point-wise discussion and its subsequent response were presented to the audience by the Group Facilitator, which is as under:

POINTS OF DISCUSSIONS	GROUP RESPONSE
1. What is the current situation of infrastructure, human resource and their ability / capacity for the smooth running of vital events registration?	<ul style="list-style-type: none"> Multiple institutions are responsible for registration that leads to completions and confusions. They face little constraint of trained Human Resource, Building/ infrastructure and Network facilities are not available everywhere.
2. What are the adequate or necessary measures to maintain the smooth functioning of the entire process of registration, certification, storage, retrieval and transmission of legal and statistical information?	<ul style="list-style-type: none"> Efficient communication is requested at LG, NADRA, household through health/social worker. Instead of union council there should be village council as in KP. Monitoring should be provided to UC. The CRVS data to be transferred to NADRA on monthly basis. Public Private Partnership should be encouraged. Capacity Building of the staff should be done along with better computing facilities instead of over staffing. Building should be provided to UCs.
3. Suggest special measures required to protect vital records from loss or damage due to conflict or natural disasters?	<ul style="list-style-type: none"> Data should be placed in National database with NADRA. Soft copies of data should be sent from UC to various levels. Unique identity number should be assigned to every new born. Bio-Matrices should be available with the UCs to register finger prints of every citizen.
4. What initiatives could be taken to mobilize and empower social & health workers, including frontline health workers, midwives, community health workers, volunteers and health facilities, as notifies for vital events?	<ul style="list-style-type: none"> Extra increments are recommended to all involved in direct dealing with people and providing records to LG
5. Other important suggestion in this area for National Consensus.	<ul style="list-style-type: none"> Responsibility should be focused in one institution for CRVS. LG should be strengthened by conducting on time elections and providing adequate funds. Local Panchait/Mosque system should be utilized. Donor agencies and private sector should be consulted. Civil society and NGOs should be used for creating awareness.

Group-C “Registration Practices, Coverage & Completeness”



Facilitator: Dr. Jasim Anwar

MBBS (Pak), PhD (Sydney)

International Consultant CRVS

Fourteen professionals participated in the activities of Group-C. Their point-wise discussion and its subsequent response were presented to the audience by the Group Facilitator, which is as under:

POINTS OF DISCUSSIONS	GROUP RESPONSE
1. What best practices could be suggested to increase coverage, completeness and good quality information for CRVS registration?	<ul style="list-style-type: none"> • Strengthening reporting mechanism (Website/mobile Apps, Hybrid) should be launched for all vital events. • One designated person at village level (replacement of Chawkidar) should be appointed for reporting birth/death well in time. Free certification for poor & marginalized population. • Availability of uniform Application Forms at public places. Birth registration needs to be linked with immunization that will indeed help to achieve the timely targets.
2. How could the message of CRVS be disseminated across various segments of population including community workers, civil society organizations, parliamentarians, citizens and media?	<ul style="list-style-type: none"> • Communication and advocacy materials such as newsletters, posters, leaflets, stickers and audio-visual resources for mass media outlets (FM Channels) should be produced and disseminated. • Seminars and workshops should be used to spread awareness of CRVS in the community and supervisory level.
3. What is the current practice or barriers of registration of marriage, divorce, migration and adoption in your province? How could we enhance registration of these events and collection of such information at a central point?	<ul style="list-style-type: none"> • Barriers: Low literacy rate, no awareness, Lack of access to registration offices, low incentive for the public to register vital events, registration and certification costs are major barriers. Migration and adoption is not in the domain of UC/VC. • To upscale the process of CRVS, provisions for minorities to be made in 2013 Act for marriage and divorce registration. Marriage and divorce registration are carried out under Muslim Family Law-1961. VC and volunteers can be engaged for timely information of these events.
4. How could the demand for vital events registration be generated both at the community, supervisory and other levels, while using existing structures?	<ul style="list-style-type: none"> • Special registration campaigns should be launched and mobile civil registration facility should be provided • Demand Side: Specified Weeks/28-29 Nov as SAARC CRVS days).
5. Other important suggestions in this area for National Consensus	<ul style="list-style-type: none"> • Awareness, integration and access hard to reach areas (Tribal, deserts and floods areas) must be increased.

Group-D “Death Certification & Cause of Death/ICD Coding”



Facilitator: Dr. Shagufta Zareen

Program Director (PSP Unit)

Department of Health, Government of Punjab, Lahore.

Fourteen professionals participated in the activities of Group-D. Their point-wise discussion and its subsequent response were presented to the audience by the Group Facilitator, which is as under:

POINTS OF DISCUSSIONS	GROUP RESPONSE
<p>1. In view of the exceptionally low death and COD registration in the country, what do you think are the barriers and possible options for improvement?</p>	<ul style="list-style-type: none"> • Absence of uniform death certificates & No legal binding to issue death certificate. • No systematic arrangement for ICD 10 Coding. ICD codes shall be adopted at National Level and in the state as well. Standardization of ICD compliant death certificate (at provincial level) is required. • Lack of coordination for data sharing between NADRA & Local Govt. department • Lack of awareness about registration of death. • Death declaring certificate should be different from Death certificate. • In Gilgit-Baltistan, mostly women don't own property so, it is considered useless of death registration. To overcome this issue, public awareness is required.
<p>2. How can the information relating registration of deaths occurring in the community and private hospitals be tapped or improved?</p>	<ul style="list-style-type: none"> • Legal coverage for registration of death in new housing societies and hospitals • Involvement of Prayer Leaders and Nikah Registrars and community Leaders of minorities • Involvement of Union Councils
<p>3. What is the current status of community based death registration using verbal autopsy method?</p>	<ul style="list-style-type: none"> • The community based death registration using verbal autopsy method already being practiced in Punjab and AJ&K in LHWs covered area only
<p>4. How to ensure the registration of unnatural deaths (e.g. road side accidents, suicide/police information etc.) and its collation with central database?</p>	<ul style="list-style-type: none"> • Ambulance Services may be involved in coordination with Police, Union Councils, Local Government and the involvement of Prayer Leader.
<p>5. From your province, please quote an institute/hospital/pilot project where death registration along with ICD coding is being adequately practiced</p>	<ul style="list-style-type: none"> • Death registration along with ICD coding will be observed in Punjab tentatively by Dec, 2018.

Group-E “Innovative approaches for Data Access, Use & Quality”



Facilitator: Maj. Aftab Saleem

Director (CRMS – NADRA)

Islamabad.

Fourteen professionals participated in the activities of Group-E. Their point-wise discussion and its subsequent response were presented to the audience by the Group Facilitator, which is as under:

POINTS OF DISCUSSIONS	GROUP RESPONSE
<p>1. How can we promote/establish linkage between various CRVS related data sources e.g. local governments, health information systems, BISP, NADRA, Bureau of Statistics & other related systems?</p>	<ul style="list-style-type: none"> • Online linking facility be establish for data sources with Local Governments, Health Departments, Benazir Income Support Program, NADRA, Bureau of Statistics & Related systems
<p>2. How we can promote the secure utilization of collected information and civil registration records for the improvement of other administrative systems?</p>	<ul style="list-style-type: none"> • CRVS can help control Child Labor/Violence against children/ women, ensure checks on under age marriages • It can help improve Law & Order, Human Rights situation and Social Security System and control Pilferage/Wastage of National Resources • Formulation of Health/Education Policy & Planning, and help Population/Housing/Employment planning • CRVS Data contribute to related SDGs Targets/ Indicators
<p>3. Please enlist (quote example with salient features) of some innovative CRVS pilot programs in your province/districts at smaller and large scale?</p>	<ul style="list-style-type: none"> • Any reporting system which integrates existing system of LG/ CRMS, NADRA is recommended by the group.
<p>4. What is the current practice of data generation, dissemination & usage of vital statistics in your province?</p>	<ul style="list-style-type: none"> • Data collected at UCs/MCs and is available at NADRA Central Server. Data Sharing is done on requirement basis. IS Policies are observed. Interior, Planning and other Government Insinuations, Stakeholders regularly engage NADRA

<p>5. How we can promote the culture of generation & usage of vital statistics in decision making? Suggest some innovative ways and means to generate interim vital statistics reports, including utilizing the incomplete VR data.</p>	<ul style="list-style-type: none"> • Enhanced cooperation to create linkages (NADRA, LGs Education Health Law & order, Social Security Depts). Introducing IT Base culture in all data related departments. Promote/Increase reliance of statistical reports. Ensure that reports are based on authenticated systems • Promote regular interaction amongst related departments to improve governance & engage NADRA for developing necessary sharing framework • Online linkage between Stakeholders can be a great help
<p>6. Other important suggestions in this area for National Consensus</p>	<ul style="list-style-type: none"> • Creating Legal Framework, Holistic approach to create CRVS Systems • Joint Working Groups to create Policy Framework, Synergize & to describe key CRVS Processes



Session-4 Provincial Governments Commitments

This session was chaired by Dr. Asma Hyder, Member (SS&D), Planning Commission, Islamabad. Dr. Muhammad Asif, Chief Health, Ministry of Planning Development & Reform elaborated the purpose to envisage provincial commitments from all the provincial governments including AJ&K and Gilgit-Baltistan on the measures and actionable plans they are going to implement and take them up over the coming three years in their respective jurisdiction. These measures and plans relating to improving ICD-10 coding and accelerating CRVS system in their areas should base on the discussions they had on various aspects of the CRVS system during previous session and during the Thematic Areas Group discussions as well.

PROVINCE	COMMITMENTS (FOR NEXT 3-YEARS)
1. Punjab (Mr. M. Abid Razzaq Senior Chief P&D Department – Lahore)	<ul style="list-style-type: none"> • Will take ICD10 coding to a higher scale for efficient output • Will invite TWG and Stakeholders to devise an efficient action plan • Will conduct training workshop upon newly developed application for implementation sake. (to upscale its implementation upto 50%)
2. Sindh (Mr. Fahim Akhtar Junejo Director General (Monitoring) – Local Government)	<ul style="list-style-type: none"> • Will come upto the promises already made • Will further modify and implement birth registration strategy (already approved) • The outcome of this summit will be considered for policy making • Will extend DBR upto 10 districts
3. Khyber Pakhtunkhwa (Mr. Faiz Muhammad Director Policy & Operations – Local Government)	<ul style="list-style-type: none"> • Each and every Vital event will be registered • Will utilize services of Local Governments. • Will generate demand
4. Baluchistan (Mr. Muhammad Nadeem Akhtar Additional Secretary Health – Quetta)	<ul style="list-style-type: none"> • Will build capacity at policy (Bureau of Statistics etc.) and ground levels • Capacity building of secretaries of Union Councils • Will hold an assessment program and devise a strategy/ Plan for implementation to overcome current barriers.
5. Azad Jammu & Kashmir (Mr. Khwaja Muhammad Masood Chief M&E, LG&RDD Muzaffarabad)	<ul style="list-style-type: none"> • Will implement CRVS all over AJ&K • Will establish a pilot project in collaboration with stakeholders (NADRA) • Will develop an effective mechanism for an integrated system so that all vital information can be shared • Will use our passion and spirit to fly to high levels, we aim for
6. Gilgit Baltistan (Mr. Saeed Ullah Khan Niazi Secretary Health – GB)	<ul style="list-style-type: none"> • Will develop a political will and parliamentarian task force • Will focus at district levels for implementation of existing plans • Will make sure the availability of mobile service and electricity

Conclusion & Next Steps

The Chief Guest and almost all the participants, especially the International Partners and representatives from South Asian countries appreciated the efforts of Ministry of Planning, Development and Reform and Technical Support Unit – CRVS for organizing such a fabulous international Summit in Pakistan. The selected venue of the summit (Serena Hotel – Islamabad) and the way it was conducted by Mr. Touseeq Haider (Moderator) was also much admired by all the participants. The agenda items and the technical sessions highly lauded. The commitments shown by all key stakeholders especially; UNICEF, WHO, DFID, The World Bank, Federal Institutions, Provincial Governments’ representatives including Azad Jammu & Kashmir and Gilgit-Baltistan were also encouraging.

Given the workable recommendations received from National and Provincial CRVS Steering Committee meetings and groups work deliberation in Summit, it was realized that Technical Support Unit – CRVS would now be in strong position to develop a doable National Strategic Plan.

In view of National Scope of CRVS system it was realized that the subject is to be dealt with seriously and with strong political commitments and zeal. Therefore, based upon the discussions the following next steps were endorsed:

- An in-depth study should be conducted across country to analyze the reasons for not getting timely registered the vital events by the community.
- A close coordination among multi-sectoral stakeholders should be chalked out at national level. NADRA may support the Local Governments to develop their CRVS data registration infrastructure with their staff’s capacity building on handling the day-to-day registration activities.
- A comprehensive Legal Framework should be evolved to ensure on time vital events registration by the community. Moreover, standardized data reporting forms for all vital events should be developed and implemented across country with its translation into local languages, if required.
- A National CRVS Support office under Ministry of Planning, Development and Reform and like-wise Provincial CRVS Support office at each province including AJ&K and Gilgit-Baltistan should be created to promote functioning of the CRVS system and for time to time improvement etc.

Session-5 Closing Ceremony

(Participants Feedback)

Overall CRVS Promotion

1. Make CRVS laws and Registration Processes simpler and very friendly to follow.
2. Infrastructure is must for the society to motivate and educate the people to do in a proper way. Government should find means for public engagement through creating the demand.
3. Conduct CRVS mapping exercise to identify gaps in CRVS registrations system and organize need based campaigns at community level by engaging media.
4. Multi-sectoral strategy must be adopted to ensure uniformity and for desired results.
5. A national CRVS formulation campaign be initiated to search all segments of society to eliminate discrimination, and extend support towards marginalized and poor segments of society.
6. Develop understanding and capacity building of the key stakeholders for efficient, correct and complete CRVS recording.
7. We need to work for an integrated and standardized uniform CRVS system in Pakistan.
8. There should be standardized system i.e. UC level, where Vital events are reported, it should be connected with National Statistical System i.e. Pakistan Bureau of Statistics or NADRA.
9. Development of Small Mortality List (ICD-10 Compliant) for capturing 90% + data.
10. Organize CRVS symposium for the district of Southern Punjab

Specific to Technical Support Unit – CRVS

11. Establish and strengthen Model CRVS District Coordination Mechanism
12. Extensive exercise to determine CRVS barriers and extend Partnerships at multiple levels.
13. In-depth studies should be done to identify target audience for counseling upon CRVS.
14. Need a bottleneck analysis to have a better understanding of why demand is low.

15. Spearhead the process of National CRVS system and have a defined framework.
16. CRVS should be included in National Development Agenda/ curricula/ Emergency for rapid implementation.

Specific to International Coordination

17. All SAARC countries may be declared as CRVS family for data sharing and support.
18. South Asia CRVS Academia Hub should be created.
19. 2019 should be declared as CRVS Year by Pakistan.

Specific to Federal / Provincial Departments

20. Implement CRVS best practices for development of CRVS uniform legislation and local government system.
21. Smart ID cards should be used for children at birth or during first 28 days of life for ensuring registration through NADRA.
22. Promote intersection coordination.
23. CRVS should be extensively digitalized and data must be protected from potential hackers.
24. Use of mobile registration centers for women of rural areas.
25. Award and appreciation for Local Gov. Best performing Centres/ Districts
26. Free birth registration to families registering their children before the age of five, to accelerate registrations.
27. Laws of CRVS Registration must be reviewed, amended and in line with ground facts.
28. Adequate plans for community based deaths registration and private sector involvement.
29. Imam Masjid should be registered and engaged to register deaths, marriages, divorces for improving CRVS

Role of Academia & Non Governmental Organizations

30. CRVS should be included in syllabus for creating awareness in children and students from the onset.
31. There is a need to involve social worker and civil societies.
32. Link all social benefits to CRVS.

Other Innovative Ideas

33. Law enforcement agencies may be engaged for registration.
34. Civil Registration may be given the status of Basic Human Rights.
35. Introduce a robust technology plan for CRVS and Online Registrations.
36. Organization of regular Quarterly/ Biannually Registration events (CRVS Weeks/ Days)
37. Expanded Program on Immunization - Linked E- CRVS.
38. Need for CRVS promotion through print, social and electronic media. Talk shows to be arranged
39. To enhance female death registration, women should be given more property rights.
40. Use Chowkidars/Numberdars or their counterparts in other provinces to capture CRVS details at Village level and collation at UC level with Urdu based apps on Cell phone with little incentives.
41. NADRA should lead digitalization of CRVS

Closing Remarks



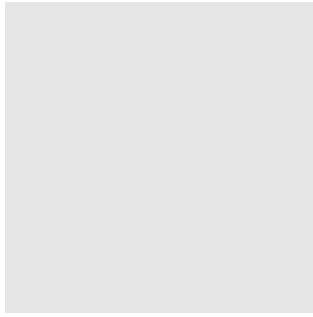
Vote of Thanks

In her closing remarks Dr. Asma Hyder once again thanked the participants, especially the guests from South Asian countries and International Development partners for giving valuable time to this Summit and sharing their experiences and ideas for promoting and strengthening CRVS systems in Pakistan. She expressed the hope that they surely enjoyed their stay in Islamabad and will remain in touch for onward coordination and achieving common agenda of developing and implementing better civil registration system in the Region.

Dr. Asma congratulated the team of Dr. Muhammad Asif (TSU-CRVS) for organizing this Summit nicely and appreciated the support of UNICEF for making this event successful. She also admired the role of Mr. Touseeq Haider for conducting the event extremely well and thanked his team for extending logistic and secretarial support to valued participants.

Shields Distributions

On account of recognition of the best services contributed by the Speakers, Presenters and the Organizers to make this event successful, beautiful shield were distributed to them by Dr. Asma Hyder, Member (SS&D), Planning Commission, Islamabad.



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SOUTH ASIAN
CIVIL REGISTRARS
(CR8) MEETING
(NOVEMBER 30,
2018)

SOUTH ASIAN CIVIL REGISTRARS (CR8) MEETING

(November 30, 2018)



Introduction

Civil registries are responsible for overall coordination for the registration and certification of vital events. They play key role in achieving the countries to register all events including, first and foremost, birth and death registration. Under the theme of ***'Get everyone in the Picture'*** the civil registries have a fundamental role to achieve goals of improving civil registration in the Asia-Pacific region over the next decade.

In order to share information and good practices in the region for strengthening civil registries in the eight countries of South Asia (CR8), it was decided in CR8 meeting, held in Katmandu – Nepal (July 24-25, 2018) to organize a meeting of CR8 during the Pakistan's civil registration Summit scheduled in November, 2018. The core objective of this CR8 meeting was to foster coordination and integration of Civil Registrars' inputs and ideas into implementation of the Asia Pacific Regional Action Framework for Civil Registration and Vital Statistics systems.

Summary of the CR8 Meeting:

The meeting of South Asian "Civil Registrars" (CR8) was organized on 3rd day of the Pakistan's CRVS Summit at Serena Hotel – Islamabad. This meeting was chaired by Mr. Homayoun Muhtaaf, Director General (CRVS) Government of Afghanistan who is currently CR8 Chairperson. Agenda and list of the participants is annexed in this report. CR8 network enables Civil Registrars of the South Asia to work together in advancing the CRVS agenda in the region. The specific Islamabad's meeting objectives were;

- Shared understanding of role of the network
- Consensus on how to best operationalise the CRVS agenda in the countries
- To discuss the documentation of regional CRVS best practices

Ms. Muqaddisa Mehreen, Child Protection Specialist UNICEF – Pakistan, being moderator for the meeting welcomed the participants and appreciated the interest and efforts of member countries to establish credible CRVS systems in South Asia. She said that sharing of current good practices and promotion of innovative ideas in the respective country will benefit the CR8 network to develop understanding on how to strengthen CRVS systems in South Asia. Briefing modalities she informed that there would be two (02) sessions of this meeting.

Accordingly, during the first session all the participants gave their introduction to each other. Thereafter, the Chairperson (Mr. Homayoun Muhtaata) gave presentation on CR8 with conclusions from the Nepal CR8. Each member of the network also discussed about the working of consortium and its onward work plan for year 2019-2020.

In the second session, all member country representatives gave their presentations covering identification of key CR challenges faced by the countries. The regional events especially during 2019 and its Road-map were discussed in detail. This included; upcoming ministerial meeting and South Asia CR8 meeting of 2019. Further discussions focused on cross country linkage and opportunities for collaboration and fund raising for advocacy to support CRVS in South Asia. Finally, recommendations for CR8 Scope and its function were complied.



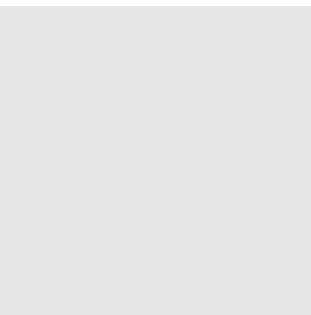
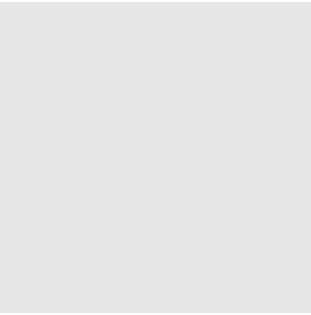
(Group Photo - Participants of the CR8 meeting)

Recommendations for CR8 Scope and Functions

1. Youth societies/forums, Civil societies, entrepreneurs could be involved in CRVS advocacy.
2. A youth forum 'South Asia CRVS Youth Forum' may be initiated.
3. Side event CR8 meeting be organized during inter-ministerial meeting of Bangkok scheduled in 2019.
4. To have as successful CRVS system, social services should be taken in the loop for birth registration.
5. We should assess the reasons for CR8 existence and generate demand by conducting CRVS awareness campaigns at massive scale.
6. CR8 online meetings can be conducted to review the progress and follow up of recommendations.
7. A strong bridge (electronic) must be built between South Asian countries to share the success stories.
8. Can use an IT platform for publishing of success stories so that CRVS administrators can use it for further discussion.
9. This platform can also be used for posting operational difficulties and possible solutions.
10. Diverse CRVS Models be created/piloted to get results/products and then ensure political commitments.
11. CR8 must include political commitments in priority areas, by ensuring involvement of organizations like UN & SAARC.
12. The role of media (electronic/social/print) should not be underestimated.
13. There is a need to involve all medium of the media to show Animated Videos for CRVS awareness.
14. Social media (Facebook, WhatsApp, Twitter, Web page etc.) can be used for efficient communications.
15. Field visits can be conducted by CR8 Group members to assess ground realities and learning lessons.
16. Accelerated use of information technology for CRVS promotion.

17. A form (including details) can be made for online membership in CR8 Social Media Pages.
18. The availability of good concept notes, feasibility models of an effective CRVS system would attract international partners and other agencies in its investment.
19. Need to organize Webinars, Consultative Meetings upon CRVS Thematic Areas.
20. Need to develop CR8 countries CRVS Experts Directory.





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ANNEXURE

(ANNEXURE-A)

Pakistan International CRVS Summit (Agenda- November 28-29, 2018)

DAY 1 - 28TH NOVEMBER 2018		
TIMELINE	SESSION TITLE/DETAILS	SPEAKERS
9:30 – 10:00	Guests Arrival &Registration	
SESSION 1	OPENING CEREMONY	
10:00 – 10:10	Recitation from Holy Quran	Qari Abdul Basit
10:10 – 10:30	Round of introductions	Moderator – Tauseeq Haider
10:30 – 10:40	Welcome Address	Dr.Asma Hyder, Member(SS&D) Planning Commission, Islamabad
10:40 - 10:50	Opening Remarks	Ms. Cris Munduate - Deputy Representative - UNICEF Pakistan
10:50 – 11:00	Opening Remarks	Ms. Joanna Reid - Head of DFID Pakistan
11:00 – 11:10	Opening Remarks	Ms. Cristina Isabel Panasco Santos – Human Development Program Leader - World Bank
11:10 - 11:20	Inaugural speech	Ms. Kanwal Shauzab, Parliamentary Secretary - M/o Planning Development and Reform
11:20 – 11:30	GROUP PHOTO	
11:30 – 12:00	Coffee /Tea Break	
SESSION 2	International Scenario: Global Case for Investment in Civil Registration & Vital Statistics Systems	Chaired: Dr. Asma Hyder (Member SS&D - Planning Commission) Co-Chaired: Ms. Cris Munduate (Deputy Representative- UNICEF Pakistan)
12:00 – 12:20	Improving civil registration and vital statistics in the Asia Pacific	Mr. David Rausis–Associate Statistician - UNESCAP
12:20 – 12:40	Regional Strategic Plan for improvement of CRVS in EMRO	Dr.Nima Saeed Abid - WHO Representative in Pakistan
12:40 – 01:00	UNICEF's Role for Global commitments for CRVS	Ms. Emelia Allan – Child Protection Specialist -UNICEF Pakistan
01:00 – 01:20	Global DFID supported CRVS initiatives	Representation from DFID Pakistan
01:20 – 01:40	World Bank CRVS Global perspective	Dr. Aliya Kashif – Health Specialist - World Bank Pakistan

01:40 – 02:30	Lunch & Prayer Breaks	
SESSION 3	Global Best Practices – A broad development partnership (Role of multiple stakeholders in the CRVS data collection and storage)	Chaired: Mr. Gohar Ahmad Khan (Director General – CRMS - NADRA) Co-Chaired: Mr. Bahrawar Jan (Deputy Director General– Pakistan Bureau of Statistics)
02:30 – 03:15	Nepal	Mr. Suresh Adhikari - Joint Secretary, M/o Federal Affairs, Nepal
03:15 – 03:30	Sri Lanka	Mr. N. C. Vithanage – Registrar General– Sri Lanka
03:30 – 03:45	Maldives	Ms. Ikrisha Abdul Wahid - Senior Statistical Officer - National Bureau of Statistics, Maldives
03:45 – 04:00	Bhutan	Mr. Thinley Wangchuk – Chief Civil Registration and Census Officer - Bhutan
04:00 – 04:15	Afghanistan	Mr. Homayoun Muhtaat - General Director for CRVS, Govt. of Afghanistan
04:15 – 04:30	Pakistan	Dr. Muhammad Asif - Chief Health M/o PDR, Islamabad
04:30 – 04:50	Q&A / Comments& Wrap up	
04:50	Coffee & Tea Break / Day Closed	

DAY 2- 29THNOVEMBER 29, 2018		
TIMELINE	SESSION TITLE/DETAILS	SPEAKERS
SESSION 1	OPENING DAY 2	Chaired: Dr. Muhammad Ajmal Khan (Chief Operating Officer, Healthcare Commission Punjab) Co-Chaired: Dr. Shereen Mustafa (Secretary P&D Department Karachi)
09:00 – 09:15	Recap Day 1	Ms. Muqaddisa Mehreen, Child Protection Specialist, UNICEF
SESSION 2	NATIONAL SCENARIO: NATIONAL & PROVINCIAL CASE FOR INVESTMENT IN CIVIL REGISTRATION & VITAL STATISTICS SYSTEMS - CRVS DEVELOPMENTS	
09:15 – 09:35	Punjab	Mr. Mahmood Javed Bhatti – Director General – Local Government Punjab
09:35 – 09:50	Sindh	Mr. Nasir Khan – Assistant Director (MIS) – P&D Department Sindh
09:50 – 10:05	Khyber Pakhtunkhwa	Mr. Faiz Muhammad – Director Policy & Operations – Local Government Khyber Pakhtunkhwa
10:05 – 10:20	Baluchistan	Mr. Abdul GhaffarKakar – Director General – Bureau of Statistics, P&DD – Baluchistan

10:20 - 10:35	Azad Jammu & Kashmir	Mr. Raja Zulqarnain – Deputy Director – M&E/MIS, LG&RDD Muzaffarabad AJ&K
10:35 - 10:50	Gilgit Baltistan	Mr. Ali Jabbar – Deputy Secretary –P&DD Gilgit Baltistan
10:50 – 11:00	Discussion & Way forward	
SESSION 3	Technical Session	
11:00 - 11:30	Essentials of Thematic Areas of CRVS & Group work	Dr. S. M. Mursalin, National Technical Adviser-CRVS, M/o PD&R, Islamabad
11:30 – 12:00	Coffee /Tea Break	
12:00 – 01:00	Group Work-CRVS Thematic Areas	Facilitators
	Legal Framework	Mr. Saqib Aleem, Consultant CRVS
	Resources for Civil Registration	Prof. Dr. Amna, HoD - Political Science Department, International Islamic University, Islamabad.
	Registration Practices, Coverage, and Completeness	Dr. Jasim Anwar, Consultant CRVS
	Death Certification and Cause of Death / ICD Coding	Dr. Shagufta Zareen, Program Director, PSP Unit – Health Department, Punjab
	Data Access, Use and Quality / Innovative approaches	Maj. Aftab Saleem, Director CRMS, National Database and Registration Authority, Islamabad.
01:00 - 01:45	Lunch & Prayer Breaks	
01:20 – 01:40	World Bank CRVS Global perspective	Dr. Aliya Kashif – Health Specialist - World Bank Pakistan
	Thematic Area: Plenary Session	
01:45 – 02:00	Legal Framework	Group A
02:00 – 02:15	Resources for Civil Registration	Group B
02:15 – 02:30	Registration Practices, Coverage, and Completeness	Group C
02:30 – 02:45	Death Certification and Cause of Death / ICD Coding	Group D
02:45 – 03:00	Data Access, Use and Quality / Innovative approaches	Group E
03:00 – 03:10	Discussion & Recommendations	

SESSION 4	Commitments from Provincial Governments	Chaired by: Dr. Asma Hyder - Member SS&D - Planning Commission, Islamabad
03:10 – 03:20	Mr. Fahim Akhtar Junejo	Director General (Monitoring) – Local Government Sindh
03:20 – 03:30	Mr. Faiz Muhammad	Director Policy & Operations – Local Government Khyber Pakhtunkhwa
03:30 – 03:40	Mr. M. AbidRazzaq	Senior Chief P&D Department – Lahore, Punjab
03:40 – 03:50	Mr. Muhammad Nadeem Akhtar	Additional Secretary Health – Quetta, Baluchistan
03:50 – 04:00	Mr. Khwaja Muhammad Masood Chief M&E, LG&RDD	On behalf of M. Shamoan Hashmi Chief Economist – P&D Department Muzaffarabad AJ&K
04:00 – 04:10	Mr. Saeed Ullah Khan Niazi	Secretary Health – Gilgit Baltistan
SESSION 5	Closing Ceremony	
04:30 – 05:00	Participants Comments / Suggestions	Mr. Tauseeq Haider
05:00 – 05:15	Vote of Thanks	Dr. Asma Hyder - Member SS&D–Planning Commission, Islamabad
05:15	Coffee /Tea Time, Event Close.	

(ANNEXURE-B)

Questionnaire Provincial/Federal CRVS Summit

(Thematic Areas Discussions/Group Work¹)

Thematic Area – I: Development of CRVS Legal Framework

1. How do you feel about National Uniform CRVS law? What could be the components?
2. How could timely registration of vital events be ensured? Do we need registration or by laws?
3. What are the most appropriate options for registration fee?
4. What roles and responsibilities could be assigned to various CRVS departments? How could these be implemented?
5. Other important suggestion in this area for National Consensus?

Thematic Area – II: Physical, Human and Financial Resources for Civil Registration System

1. What is the current situation of infrastructure, human resource and their ability / capacity for the smooth running of vital events registration?
2. What are the adequate or necessary measures to maintain the smooth functioning of the entire process of registration, certification, storage, retrieval and transmission of legal and statistical information?
3. Suggest special measures required to protect vital records from loss or damage due to conflict or natural disasters.
4. What initiatives could be taken to mobilize and empower social and health workers, including frontline health workers, midwives, community health workers and volunteer workers, and health facilities, as notifiers for vital events?
5. Other important suggestion in this area for National Consensus?

Thematic Area – III: Registration Practices, Coverage, and Completeness

1. What best practices could be suggested to increase coverage, completeness and good quality information for CRVS registration?
2. How could the message of CRVS be disseminated across various segments of population including community workers, civil society organizations, parliamentarians, citizens and media?

¹ As decided during CRVS Summit Preparatory Meeting held Sep 14 2018, all these points are to be discussed during provincial CRVS summits in respective Work Groups. Collective response from each provincial summit against each thematic area would inturn be shared and presented during International CRVS Summit scheduled end Nov 2018.

3. What is the current practice or barriers of registration of marriage, divorce, migration and adoption in your province? How could we enhance registration of these events and collation of such information at a central point?
4. How could the demand for vital events registration be generated both at the community, supervisory and other levels, while using existing structures?
5. Other important suggestion in this area for National Consensus?

Thematic Area – IV: Death Certification and Cause of Death / ICD Coding

1. In view of the exceptionally low death and COD registration in the country, what do you think are the barriers and possible options for improvement?
2. How can the information relating registration of deaths occurring in the community and private hospitals be tapped or improved?
3. What is the current status of community based death registration using verbal autopsy method?
4. How to ensure the registration of unnatural deaths (e.g. road side accidents, suicide / police information etc.) and its collation with central database?
5. From your province, please quote an institute/hospital/pilot project where death registration along with ICD coding is being adequately practiced?
6. Other important suggestion in this area for National Consensus?

Thematic Area – V: Innovative Approaches for Data access, Use and Quality

1. How can we promote/establish linkage between various CRVS related data source e.g. local governments, health information systems, BISP, NADRA, Bureau of Statistics and other related systems?
2. How can we promote the secure utilization of collected information and civil registration records for the improvement of other administrative systems?
3. Please enlist (Quote example with salient features) of some innovative CRVS pilot programs in your province/districts at smaller and large scale.
4. What is the current practice of generation, dissemination and usage of vital statistics in your province?
5. How can we promote the culture of generation and usage of vital statistics in decision-making? Suggest some innovative ways and means to generate interim vital statistics reports, including utilizing the incomplete VR data.
6. Other important suggestion in this area for National Consensus?

(ANNEXURE-C)

Thematic Areas Group Work (List of Group Members)

THEMATIC AREA-1: DEVELOPMENT OF CRVS LEGAL FRAMEWORK	
NAMES	DESIGNATION / DEPARTMENT
1. Mr. Saqib Aleem	Consultant CRVS
2. Mr. Irshad Waheed	Director PCRD, Social Welfare, Govt. of Punjab, Lahore
3. Mr. Fahim Junejo	Director General, M&E, LG, Karachi
4. Mr. M Nasir Khan	CRVS Focal Person, Assistant Director (MIS) LG Sindh, Karachi
5. Mr. Mian Adeel	Director General, LG &RD Department, Peshawar
6. Mr. Mushraf Khan	CRVS Focal Person, Chief Health, P&D KPK, Peshawar
7. Mr. Anwar Janjua	Lahore
8. Dr. Zahid Parvez	MS Jinnah Hospital Lahore
9. Mr. M. Junaid	Director - PMRC – Lahore
10. Dr. Basharat Javed	Dy. Director PHCC
11. Mr. Faiz Mohammad	Director General LG & RDD Khyber Pakhtunkhwa

THEMATIC AREA-2: PHYSICAL, HUMAN AND FINANCIAL RESOURCES FOR CIVIL REGISTRATION SYSTEMS	
NAMES	DESIGNATION / DEPARTMENT
1. Prof. Dr. Amna Mahmood	HoD, - Political Science Department, International Islamic University, Islamabad
2. Mr. Bahrawar Jan	Member National Accounts, Pakistan Bureau of Statistics, Islamabad
3. Mr. Waqar Shah	Director General, Bureau of Statistics Punjab, Lahore
4. Mr. M. Abid Razzaq	CRVS Focal Person / Sr. Chief, P&D Department, Lahore
5. Mr. Abdul Ghaffar Kakar	DG / CRVS Focal Person, Bureau of Statistics, P&D
6. S. Zahoor-ul-Hasan Gillani	Secretary, LG&RD, Muzaffarabad

7.	Mr. Baber Aman Baber	Secretary, P&DD, GB
8.	Mr. Sana Ullah	Secretary, LG&RD, GB
9.	Mr. Farooq Ahmed	DHIS Lahore
10.	Mr. Altaf Bijrani	Director General, Bureau of Statistics, Karachi
11.	Dr. Kashif Nazeer	Chief Health P&D KP
12.	Dr. Muhammad Amjad	Director P&D, Higher Education Commission
13.	Mr. Tariq Khan	Director, Bureau of Statistics, P&D department
14.	Dr. Alia Kashif	Health specialist, world bank, Islamabad

THEMATIC AREA-3: REGISTRATION PRACTICES, COVERAGE AND COMPLETENESS

NAMES		DESIGNATION / DEPARTMENT
1.	Dr. Jasim Anwar	Consultant CRVS
2.	Mr. Nisar Ahmed	Dy. Chief, Social Welfare Section, M/O PDR
3.	Mr. Saif Anjum	Secretary, LG&CD Department, Lahore
4.	Mr. M. Javed Bhatti	Director General, LG&CD Department, Lahore
5.	Mian Najeeb Aslam	Dy. Secretary (Impl.), LG&CD Department, Lahore
6.	Mr. Khalid Kazi	District Coordinator, Badin
7.	Ms. Rabia Kanwal	M&E Assistant, Badin
8.	Mr. Sohail Lutuf	M&E Assistant, Badin
9.	Mr. Asif Ismail	M&E Assistant, Badin
10.	Mr. Irfan Ahmed	M&E Assistant, Badin
11.	Mr. M Shamoan Hashmi	CRVS Focal Person, Chief Economist P&D, Muzaffarabad
12.	Dr. Mehtab S. Karim	ED - Centre for Studies in Population & Health, Karachi
13.	Ms. Silvia Pasti	OIC CP Unit UNICEF , Pakistan, Islamabad
14.	Mr. Muqaddar shah	Prog. /Tech. analyst, ILO-Pakistan, Islamabad

THEMATIC AREA-4: DEATH CERTIFICATION AND CAUSE OF DEATH/ ICD CODING

NAMES	DESIGNATION / DEPARTMENT
1. Dr. Shugfta Zareen	Program Director, PSP Unit – Health Dept. Punjab, Lahore
2. Dr. Murtaza Haider	Assistant Chief, M/O Planning Development and Reform, Islamabad
3. Dr. Nasir Mohiudin	DG, M/o National Health Services, Regulation & Coordination, Islamabad
4. Dr. Masood M. Bhukari	Add. Director, Health Department – AJ&K
5. Mr. Saeedullah Khan Niazi	Secretary, Health
6. Dr. Saima Hamid	Registrar Health Services Academy, Islamabad
7. Dr. Asad Zaheer	Registrar, University of Health Sciences, Lahore
8. Professor Sarah Saleem	Community Medicine Dept. Agha Khan University – Karachi
9. Mr. Saeed Alvi	Director MIS, Jinnah Hospital Lahore
10. Dr. Munir Ahmed	Lahore Medical & Dental College
11. Prof. Nadeem Afzal	University of Health Sciences, Lahore
12. Dr. Tayyab Masud	Senior Health Specialist, World Bank - Pakistan, Islamabad
13. Dr. Jamal Thabet Nasher	Coordinator, HSD, WHO - Pakistan, Islamabad
14. Dr. Iqbal Kahoot	Ex-Director Health

THEMATIC AREA-5: INNOVATIVE APPROACHES FOR DATA ACCESS, USE AND QUALITY

NAMES	DESIGNATION / DEPARTMENT
1. Maj. (R) Saqlain Bukhari	Director General (NADRA) Punjab, Lahore
2. Maj. Aftab Saleem	Director CRMS, National Database and Registration Authority (NADRA)
3. Syed Ali Imran	Assistant Chief, Social Welfare Section, M/O PDR
4. Dr. M. Ajmal Khan	Chief Operating Officer, Punjab Health Care Commission, Lahore
5. Mr. Raja Zulqarnain	Dy. Director (M&E/MIS) LG&RDD, Muzaffarabad – AJ&K
6. Mr. Ali Jabbar	CRVS Focal Person, Assistant Chief (Admin), P&DD
7. Dr. Shafiqur Rehman	Registrar - QAU, University Road Islamabad
8. Dr. Shafaat A Khan	Head of Department - HIS COMSATS, Islamabad
9. Mr. Saqlain Haider	Punjab Information and Technology Board, Lahore
10. Mr. Atif Ikram Butt	Executive Director CCP
11. Ms. Quratulain Shabbir	Information Officer
12. Dr. Fozia Anwer	Asst. Prof. HIS COMSATS, Islamabad
13. Ms. Saeeda Batool	Asst. Prof. NUST Islamabad
14. Dr. M. Zahid Siddique	Asst. Prof. NUST Islamabad

(ANNEXURE-D)

Pakistan International Summit on CRVS (November 28-29, 2018)

LIST OF PARTICIPANTS	
NAMES	DESIGNATION/DEPARTMENT
FEDERAL GOVERNMENT	
1. Ms. Kanwal Shauzab	Parliamentary Secretary, Ministry of Planning Development and Reform Islamabad
2. Dr. Asma Hyder	Member (Social Sector & Devolution), Planning Commission, Islamabad
3. Dr. Muhammad Asif	Chief Health, M/O Planning Development and Reform, Islamabad
4. Dr. Muhammad Qaisar Khan	Deputy Chief, M/O Planning Development and Reform, Islamabad
5. Dr. Murtaza Haider	Assistant Chief, M/O Planning Development and Reform, Islamabad
6. Dr. Nasir Mohiudin	DG, Ministry of National Health Services, Regulation & Coordination, Islamabad
7. Executive Director	National Institute of Health, Islamabad
8. Mr. Gohar Ahmed Khan	Director General, NADRA – Islamabad
9. Mr. Aftab Saleem	Director CRMS, NADRA – Islamabad
10. Ms. Lubna Yaqoob	Information System Specialist, M/o NHR&C, Islamabad
11. Mr. Abdul Sattar	Protocol Officer, Ministry of Planning, Development and Reform, Islamabad
12. Dr. Haseeb	P&D Islamabad
13. Ms. Nadia Masood	Project Director (Development), M/o Planning, Development & Reform, Islamabad
14. Ms. Aqsa Tariq	YDF (Development) Ministry of Planning, Development and Reform, Islamabad
15. Ms. Sana Nisar	SDG Secretarial Consultant, Parliamentary Secretary
16. Mr. Ghulam Shabbir	Ministry of Planning Development and Reform, Islamabad
17. Mr. Safdar Ali	Ministry of Planning Development and Reform, Islamabad
18. Mr. Saif Ullah	Ministry of Planning Development and Reform, Islamabad
19. Mr. M Nazir	Ministry of Planning, Development and Reform, Islamabad
20. Mr. Iqtidar Haider	Sr. Joint Director

TECHNICAL SUPPORT UNIT CRVS	
21. Dr. S.M Mursalin	National Technical Adviser, M/o Planning Development & Reform, Islamabad
22. Mr. M. Tayyab Nazir	System Analyst, Ministry of Planning, Development and Reform, Islamabad
23. Ms. Irum Abid	Research Coordinator, Ministry of Planning, Development and Reform, Islamabad
24. Mr. Imran Majeed Malik	Admin Accounts Officer, Ministry of Planning, Development & Reform, Islamabad
25. Mr. Gul Shehzad	Technical Assistant, Ministry of Planning, Development and Reform, Islamabad
26. Mr. M. Arslan Sabir	Assistant, Ministry of Planning, Development and Reform, Islamabad
27. Mr. M. Siddique	GIS Expert, Ministry of Planning, Development and Reform, Islamabad
28. Mr. Khalid Hussain Shah	CRVS Resource Person – Report Developer, Islamabad
29. Mr. Arsalan Ullah Baig	YDF, Ministry of Planning, Development and Reform, Islamabad
30. Mr. Hammid Siddique	YDF, Ministry of Planning, Development and Reform, Islamabad
31. Ms. Mariyah Jamil	YDF, Ministry of Planning, Development and Reform, Islamabad
SAARC COUNTRIES	
32. Mr. Ahmad Mukhtar Nazar	Head of Politics, Afghanistan Embassy
33. Mr. M Anas	Deputy Head of Mission, Afghanistan Embassy
34. Homayoun Muhtaata	General Director for CRVS, Govt. of Afghanistan
35. Saied Akbar	Vital Statistic Registrar, Government of Afghanistan
36. Geety Benazir Baktash	Civil society activist, Govt. of Afghanistan.
37. Ikrisha Abdul Wahid	Senior Statistical Officer, National Bureau of Statistics, Maldives
38. Aishath Rishmy	Assistant Director, Ministry of Health - Maldives
39. Ibrahim Shaugee	System Analyst, Department of National Registration - Maldives
GOVERNMENT OF PUNJAB	
40. Dr. Naveed Ahmed Ch.	Member (SI), P&D Board, Lahore
41. Dr. Muhammad Ajmal	Chief Operating Officer Punjab Health Care Commission

42. Dr. ShaguftaZareen	Program Director PSP Unit – Health Dept. Punjab, Lahore
43. Mr. Shahid Akram Khan	Joint Director, Punjab Information Technology Board - Lahore
44. Mr. Hassan M Khalid	Project Director, Punjab Information Technology Board - Lahore
45. Mian. Najeeb Aslam	Dy. Secretary (Impl.) LG&CD Department, Lahore
46. Mr. Mahmood Javed Bhatti	Director General LG&CD Department, Lahore
47. Dr. Munir Ahmed	Director General Health Department
48. Mr. Waqar ul Hassan	Director – I Bureau of Statistics Punjab, Lahore
49. Mr. M. Abid Razzaq	CRVS Focal Person / Sr. Chief P&D Department, Lahore
50. Ms. Fatima Haq	Sr. Technologist, P&D Punjab
51. Mr. Mubashir Junaid	Consultant, RSD Lahore
52. Mr. Imran Ahmed	Program Manager, PMRC Lahore
53. Mr. Farooq Ahmed	Computer Program Officer, D.G.H.S Punjab
54. Mr. M Farhan Rajpoot	P.O C4D, SWD Lahore
GOVERNMENT OF SINDH	
55. Mr. Fahim Junejo	Director General, M&E, LG, Karachi
56. Mr. IshtiaqAhemd	Chief Health, Planning and Development, Sindh
57. Mr. M Nasir Khan	CRVS Focal Person Assistant Director (MIS) LG Sindh
58. Mr. Khalid Kazi	District Coordinator Badin, LGD Sindh
59. Ms. Rabia Kanwal,	M&E Assistant Badin LGD Sindh
60. Mr. M Sohail	M&E Assistant Badin LGD Sindh
61. Mr. Asif Ismail	M&E Assistant Badin LGD Sindh
62. Mr. Irfan Ahmed	M&E Assistant Badin LGD Sindh
63. Mr. Iqbal Hussain	Project Assistant (M&E), Badin Sindh

GOVERNMENT OF KHYBER PAKHTUNKHWA	
64. Mr. Faiz Mohammad	Director Directorate General LG&RDD Khyber Pakhtunkhwa
65. Mr. Tariq Khan	Director Bureau of Statistics, P&D Department KP
66. Mr. Mushraf Khan	CRVS Focal Person Chief Health, P&D KPK, Peshawar
67. Mr. Abdul Wajid	Chief Foreign Aid, P&D Department KP
68. Mr. Naveed Syed	Research Officer, Foreign Aid, P&D Department KP
GOVERNMENT OF BALUCHISTAN	
69. Mr. Nadeem Akhtar	Add. Secretary Health Department, Quetta
70. Mr. Abdul Ghaffar Kakar	DG / CRVS Focal Person Bureau of Statistics, P&D
71. Mr. Syed Nisar Ahmed	Data Administrator, College and Higher Education Department
72. Mr. M. Farooq	Additional Secretary, Higher Education Department
73. Mr. M Nazeer	Deputy Chief Protocol Officer, Health Department, Quetta
74. Mr. Sajid Naeem	Senior Assistant Director, LGD, Quetta
75. Mr. Rehan Najam	Town Planner, LG&RD, Quetta
GOVERNMENT OF AJ&K	
76. Mr. M Shamoan Hashmi	CRVS Focal Person Chief Economist P&D, Muzaffarabad
77. Mr. Raja Zulqarnain	Dy. Director M&E/MIS, LG&RDD, Muzaffarabad
78. Dr. Masood M. Bhukari	Add. Director Health Department – AJ&K
79. Mr. Khawaja M Masood	Chief Planning & Monitoring, LG&RD, AJK
80. Ms. Quratulain Shabir	Information Office - / Directorate Gen PR AJ&K
GOVERNMENT OF GILGIT BALTISTAN	
81. Mr. Saeedullah Khan Niazi	Secretary, Health – Gilgit Baltistan
82. Mr. Ali Jabbar	CRVS Focal Person Assistant Chief (Admin), P&DD

83. Ms. Anisa Yousaf	Research Officer, P&DD GB
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88. Mr. Aamer Khan	CP Officer, UNICEF , Pakistan, Islamabad
89. Mr. Asghar Ali	SPA – CPU, UNICEF , Pakistan, Islamabad
90. Mr. Zahoor	C4D Officer UNICEF , Pakistan, Islamabad
91. Ms. Farrah Ilyas	CP Specialist UNICEF , Pakistan, Islamabad
92. Mr. Farman Ali	CP Officer UNICEF , Pakistan, Islamabad
93. Mr. Shakeel Ahmed	Program Officer UNICEF, Pakistan, Islamabad
94. Ms. Zara Shafique	EPI Consultant, UNICEF, Islamabad
95. Mr. Azlan Butt	CP Officer UNICEF, Pakistan, Lahore
96. Ms. Zahida Manzoor	CP Officer UNICEF, Pakistan, Lahore
97. Ms. Mehwish Maria	CP Officer UNICEF , Pakistan, Karachi
98. Ms. Jabeen Fatima	CP Officer UNICEF , Pakistan, Karachi
99. Mr. Dawood Khan	CP Officer UNICEF , Pakistan, Quetta
100. Ms. Bushra Ajmal	CP Officer UNICEF , Pakistan, Quetta
101. Ms. Farzana Yasmeen	CP Officer UNICEF , Pakistan, Peshawar
102. Mr. Igulu Wanume David	Chief of Field Office, UNICEF Pakistan
103. Dr. Aamir Akram	Health Specialist, UNICEF Quetta
104. Mr. Faheem Bashir	ICT, UNICEF Peshawar
105. Ms. Fermain Mirindi	ICT Chief, UNICEF

106. Ms. Sidra Mobin	Program Associate, UNICEF
107. Mr. Aqeel Zahoor	UNHCR, Pakistan, Islamabad
108. Dr. Nima Saeed Abid,	WHO Representative in Pakistan, Islamabad
109. Dr. Jamal Thabet Nasher	Coordinator, HSD, WHO, Pakistan, Islamabad
110. Cristina Isabel Panasco Santos	Head of Human Development, World Bank, Islamabad
111. Dr. Alia Kashif	Senior Health Specialist, World Bank, Islamabad
112. Ms. Joanna Reld,	Head of DFID – Pakistan
113. Mr. Muqaddar Shah,	Prog./Tech. Analyst, UNFPA , Pakistan, Islamabad
114. Dr. Hanadi	Health Specialist
115. Ms. Yasmeen Jaswal	UN Women
116. Ms. Saima Gul	WHO
117. Mr. Fiach O BroinMollay	DFID
118. Mr. Usman Bakri	DFID
119. Ms. Asima Ansari	Coordinator, UNDP
ACADEMIA / RESEARCH	
120. Dr. Asad Zaheer	Registrar, U/o Health Sciences, Lahore
121. Dr. Shafaat A Khan	Head of Department - HIS COMSATS, Islamabad
122. Prof. Dr. Mrs. Amna Mahmood	HoD, - Political Science Dept, , International Islamic University
123. Dr. Mehtab S. Karim	ED - Centre for Studies in Population & Health, Karachi
124. Mr. Abdul Bari	Director Research, Islamia University, Bahawalpur
125. Mr. Saqib Aleem	Consultant CRVS
126. Dr. Jasim Anwar	Consultant CRVS
127. Mr. M. Junaid	Director - PMRC – Lahore

128. Dr. Basharat Javed	Dy. Director PHCC, Lahore
129. Mr. Owais Hussain Farooqi	Dy. Director National Socio Economic Registry, BISP Programme
130. Ms. Namra Tariq	Student, Islamic International University
131. Ms. Sofia Rehman	Student, Islamic International University
132. Mr. Shahryar Ghazi	Program Assistant, IOM
133. Ms. Umm-e-Rumaisa	Student COMSATS HI
134. Ms. MuskaNayab	Student COMSATS HI
135. Ms. Ayesha Naeem	Student COMSATS HI
136. Ms. Sidra Bukhari	Student Quaid-e-Azam University Islamabad
137. Mr. M Saeed Alvi	Director HMIS Cell, Jinnah Hospital
138. Dr. Iqbal	HMIS Consultant
139. Mr. Syed Ahsan Ali Shah	AM Sustainability, Telenor
140. Mr. Mudassar Mushtaq	Assistant Professor, HSA
141. Dr. Tayyab	National Institute of Health NIH Islamabad
142. Ms. Fariha Munir	National Institute of Health NIH Islamabad
143. Dr. Fozia Anwar	Assistant Professor
144. Ms. Sana Habib Abbasi	Statistical Officer, NIH
145. Dr. Azhar Halim	Director IIMCT
146. Mr. Waseem Khan	Project Officer, IIMCT
147. Dr. Badr e Alam	Medical Director, Citi Lab Rawalpindi
148. Mr. Zaheer Ahmed	
149. Ms. Quratulain Shabbir	Islamic International University
150. Mr. Saadat Khan	CIIT, Comsats University
151. Mr. Shahbaz Ahmed	C/Max, PTV News

152. Ms. Zainab Hussain Siddiqui	Director Sustainability, Telenor
153. Mr. Tariq Aziz	DUNIYA News
154. Dr. Shafiq ur Rehman	MS Student Comsat
155. Mr. M SohailKazi	Protocol Officer, Ministry of Education
156. Ms. Saima Hamid	Associate Professor, Health Services Academy
157. Mr. Khalid Khan	Former DG CRMS NARDA, Member RSG UNESCAP
158. Dr. M Farooq	General Surgeon (Asst. Prof) HITECH IMS Taxila
CIVIL SOCIETY / NGOS / MEDIA & OTHERS	
159. Mr. M Farhan Rajpoot	SWD Lahore
160. Mr. Safdar Raza	Advocacy Manager, Knowokers
161. Mr. Zahid Jalbani	Program Manager, Knowokers
162. Mr. Raja Mehmood	Pak One Health Alliance
163. Dr. Farah Ashraf	Research Coordinator POHA
164. Mr. Tauseeq Haider	Director, Black Box
165. Mr. Raza Ansari	Ministry of Education - Islamabad
166. Mr. Zia-ul-Amin	Reporter, App
167. Mr. Najam ul Hassan	English Reporter, App
168. Mr. M Rizwan Arif	Reporter Producer, PTV
169. Mr. Shams Abbasi	Journalist, APP
170. Ms. Amina Amir	GEO TV
171. Mr. M Shabir	PID Photographer, Press
172. Mr. Haseeb Hanif	Reporter Express
173. Mr. Farhan Rajpoot	POC SWD
174. Ms. Ghazala Parveen	Chief BPD, NIH - Islamabad

(ANNEXURE-E)

South Asian Regional Meeting of Civil Registrars (CR8)

(Agenda- November 28-29, 2018)

AGENDA OF THE MEETING (FRIDAY, 30TH NOVEMBER 2018)		
TIMELINE	SESSION TITLE/DETAILS	SPEAKERS
SESSION 1		
OPENING CEREMONY		
10:00 – 10:10	Round of introductions	
10:10 – 10:30	Presentation on CR8 with Conclusions from the Nepal CR8	Mr. Homayoun Muhtaata - General Director for CRVS, Govt. of Afghanistan
SESSION 2		
COUNTRY PRESENTATIONS		
10:30 – 10:40	Bangladesh	Mr. Anir Chowdhury, Policy Adviser, Access to Policy information Program
10:40 – 10:50	Pakistan	Dr. Muhammad Asif - Chief Health M/o PDR, Islamabad
10:50 – 11:00	Maldives	Ms. Ikrisha Abdul Wahid - Senior Statistical Officer - National Bureau of Statistics
11:00 – 11:10	Sri Lanka	Mr. N. C. Vithanage – Registrar General
11:10 – 11:20	Afghanistan	Mr. Homayoun Muhtaata - General Director for CRVS
11:20 – 11:40	Coffee /Tea Break	
11:40 – 12:15	Identification of key CR challenges faced by countries	Moderated by: Ms. Muqaddisa Mehreen, Child Protection Specialist, UNICEF
12:15 – 01:00	Recommendations of how CR8 could function	Moderated by: Mr. Homayoun Muhtaata - General Director for CRVS
01:00 - 01:45	Lunch & Event Close	

(ANNEXURE-F)

South Asia Regional Meeting of Civil Registrars (CR8)

Islamabad – Pakistan/November 30, 2018 (List of Participants)

NAMES	DESIGNATION/DEPARTMENT
FEDERAL GOVERNMENT	
1. Dr. Muhammad Asif	Chief Health, M/O Planning Development and Reform, Islamabad
2. Dr. S.M. Mursalin	Technical Advisor (TSU-CRVS) M/o Planning Dev & Reform, Islamabad
3. Dr. Naseer Mohiuddin	Director General Ministry of Health Islamabad
4. Maj. Aftab Saleem Malik	Director CRMS - NADRA Islamabad
5. Dr. Bharawar Jan	Member National Accounts, Pakistan Bureau of Statistics, Islamabad
6. Mr. Tayyab Nazir	System Analyst TSU-CRVS M/o Planning Dev. & Reform, Islamabad
7. Ms. Irum Abid	Research Coordinator TSU CRVS M/o Planning Islamabad
8. Mr. Imran Majeed Malik	Admin Accounts Officer TSU CRVS M/o Planning Islamabad
9. Mr. Gul Shehzad	Registry Assistant TSU CRVS M/o Planning Islamabad
10. Mr. Arslan Sabir	Assistant TSU CRVS M/o Planning Development and Reform, Islamabad
11. Mr. Arslan Baig	YDF TSU CRVS M/o Planning Development and Reform, Islamabad
12. Mr. Hammid Siddique	YDF TSU CRVS M/o Planning Development and Reform, Islamabad
13. Ms. Mariya Jamil	YDF TSU CRVS M/o Planning Development and Reform, Islamabad
PROVINCIAL GOVERNMENT	
14. Mr. Mehmood Javed Bhatti	Director General, Local Government Lahore - Punjab
15. Mr. Najeeb Aslam	Dy. Secretary LG&RD Lahore - Punjab
16. Mr. Abdul Ghaffar Kakar	Director General, Bureau of Statistics P&DD Quetta
17. Mr. M. Naseer	Dy. Chief Protocol Officer Department of Health Balochistan
18. Mr. Khawaja M. Masood	Chief Planning & Monitoring LG&RD AJ&K

19. Mr. Raja Zulqarnain	Dy. Director LG&RD AJ&K
20. Mr. Saeed Ullah Niazi	Secretary (Health), Gilgit Baltistan
21. Ms. Anisa Yousaf	Research Officer, P&DD Gilgit Baltistan
22. Mr. Ali Jabbar	Focal Person (CRVS) P&DD - Gilgit Baltistan

INTERNATIONAL PARTNERS

23. Ms. Muqaddisa Mehreen	Child Protection Specialist – UNICEF Islamabad
24. Ms. Silvia Pasti	Chief Child Protection UNICEF Islamabad
25. Mr. Aamer Khan	Child Protection Officer UNICEF Islamabad
26. Ms. Farzana Yasmin	Child Protection Officer UNICEF KPK
27. Mr. Azlan Butt	Child Protection Officer UNICEF Lahore
28. Ms. Mehwish Maria	Child Protection Officer UNICEF Karachi
29. Mr. Dawood Khan	Child Protection Officer UNICEF Quetta

SAARC COUNTRIES

30. Mr. Mohamed Anas	Deputy Head of Mission – High Commission for Sri Lanka
31. MD. Najmul	Counselor PH High Commission for Bangladesh
32. Mr. Saeed Akbar	Vise Secretary ACCRA Afghanistan
33. Mr. Homayoun Mohtaata	Director General ACCRA Afghanistan
34. Ms. Aishath Rishnee	Assistant Director Ministry of Health Maldives
35. Mr. Ibrahim Shaugee	System Analyst Dept. of National Registration Maldives
36. Ms. Ikrisha Abdul Wahid	Senior Statistician Bureau of Statistics Maldives

