Bangladesh

Overview of the current CRVS situation:

challenges, opportunities and way forward

7 June 2023
Bangabandhu
Sheikh Mujibur Rahman
Father of the Nation
Bangladesh CRVS Country Paper

Dr. Mohd. Sher Ali
Additional Secretary
Local Government Division
Historical Role in Civil Registration

- Act on 1873
- Under British Role
- Civil Registration system was promulgated
- Birth registration was mandatory within 8 days
- This system remained in operation for over a century
- But achieved very low levels of event registration
Consequence

- That System was not properly working
- Government of Bangladesh repealed the law
- Need to introduce new arrangement
After That

- In 2004, with the support of UNICEF,

- the Government of Bangladesh enacted a new act


- Birth and Registration act, 2004 has enforced on 3 July 2006.
Difference

• Only Government officers like District Magistrate or his authorized officers worked as registrar under the act of 1873.

• Elected people representative of Local Government Institutes or their authorized people representative or officers under LGI work as registrar under the act of 2004

• Amended 2013, 2018 and also going on
REGISTRARS:

• Mayor, City Corporations
• Mayor, Municipalities
• Chairman, Union *Parishads*
• Bangladesh Ambassadors
• Cantonment Executive Officers
• Registrars
Population and Civil Registration

• Population:
  • Total population: 169 million around

• Crude birth rate: 18 / 1000 population per year
• Crude death rate: 05 / 1000 population per year
### Year Wise Death Registration

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Registration</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>5253</td>
</tr>
<tr>
<td>2012</td>
<td>25637</td>
</tr>
<tr>
<td>2013</td>
<td>56129</td>
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<tr>
<td>2014</td>
<td>75964</td>
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<td>2015</td>
<td>99702</td>
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<td>371470</td>
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<tr>
<td>2022</td>
<td>646017</td>
</tr>
<tr>
<td>2023</td>
<td>351853</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3052866</strong></td>
</tr>
</tbody>
</table>

![Year wise Death Registration](chart.png)
Citizen’s Lifecycle with Government

- A citizen is coming (BIRTH REGISTRATION)
- The citizen is born
- The citizen is immunized
- Enrolled in school
- Completes exams
- Becoming a voter
- Marrying another citizen (MARRIAGE REGISTRATION)
- Migration (MIGRATION)
- Death registration (DEATH REGISTRATION)

Systems:
- HEALTH SYSTEM
- EDUCATION SYSTEM
- SOCIAL SAFETY NET SERVICES
- VOTER ID SYSTEM
RESPONSIBILITIES:

- Father
- Mother
- Guardian
- Person himself after 18 years
- Specified person
Latest Initiatives

• Steps taken for online registration of marriage and divorce across the country

• A software called ‘Bondhon’ is about to launch for marriage and divorce registrars of from Establishing Digital Connectivity project of ICT Division

• CRVS Steering Committee decided that BBS to generate vital statistics from civil registration data to implement Regional Action Framework Goal 3 of UNESCAP

• BBS takes steps for collection of data from relevant departments to generate vital statistics.
Success/Progress

• Bangladesh introduced the Birth and Death Registration Information System (BDRIS) in 2019 - a sophisticated online system of prompt service deliveries.
• BDRIS data base: Recognize as Critical Information Infrastructure (CII)
• Application Programming Interface (API) with 17 organizations
• Digitize system (can be access from anywhere in the world).
• E-payment
• Electronic Notification
• Structured Legal and organizational frameworks
Interoperability

• With relevant departments
Challenges

• Developing a unique ID system and linking it to the service delivery processes of various ministries
• The limited coverage of death registration, particularly among women
• The large majority of deaths occurs outside of health facilities in this area of Bangladesh.
• Lack of community-based interventions and the deployment of recording systems that reach villages and remote areas.
Challenges

• Lack of an efficient birth/death notification system from health facility to CRVS system
• Every additional source adds an extra level of complexity to the overall database system and its accountability and sustainability.
• Lack of sufficient technical manpower and data interoperability among core CRVS implementing agencies sometime delays service deliveries.
• Funding for scaling up of determining facility cause of death to all 6,000 public and private hospitals,
• Verbal Autopsy to remaining 31 of 69 sub-districts (full sample size) and Introducing ICD 11 coding in health facilities is emerging as big obstacle.
Challenges

• Civil registrars are mostly elected public representative engaged with many other activities including civil registration.
• Civil registration offices are not under direct control of Registrar General
• Acute shortage of technical manpower in office of the Registrar General
• Lack of good system of data interoperability among core CRVS stakeholders.
• Scaling up of MCCD to remaining hospital and VA to full sample size (69 sub-districts)
Opportunities

➢ Good infrastructure

• Registration offices are located in the doorsteps of beneficiaries (5132 offices across the country)

• Online registration facilitates prompt process of registration
Opportunities

➢ Regional and country level support

• Regional support from UNESCAP
• Substantive support from UNICEF country office
• Development partner like Vital Strategies relentless support
Opportunities

➢ Government support

- Coordination of Cabinet Division leads rapid CRVS development in Bangladesh

➢ Attending legal issues
Way forward

• Enhancing capacity of the Office of the Registrar General, Birth and Death Registration with increased manpower and resources

• Offices at district and division level require to establish directly under the office of the Registrar General for monitoring activities of CR offices.

• Review the Birth and Death Registration Acts to examine the possibility of making necessary changes under the current provisions of the laws
Way forward

• Work closely with civil registration, statistical authorities, and other partners for timely compilation and dissemination of vital statistics reports in line with SDG recommendations.

• Work with civil registration authorities to evaluate measures initiated in response to the pandemic and institutionalize them as part of overall CRVS improvement to strengthen the resilience of CRVS systems in anticipation of future emergencies as well as prolonged crises.
Way forward

• Work with civil registration and health authorities to use initiatives for improving death registration to implement or expand the coverage of WHO prescribed Medical Certificate of Cause of Death (MCCOD) forms, and advocate with WHO to train physicians on International Certificate of Disease (ICD), and establish a linkage between MCCOD and the death registry.

• Work with other authorities to harmonize and align the data standards in other registers/systems with civil registration and national ID prescribed standards, including IDs, dates, and naming standards.
Way forward

• Develop joint work plans and deliverables between ORG and DG Health to aid smooth and timely birth registration based on immunization record.

• Commit to joint resource mobilization to bridge the funding gaps and foster innovative partnerships with other agencies to synergize efforts and resources.

• Work together on the rollout and reporting to assess the extent of interoperability between CR and other sectors.
Way forward

• Explore the possibility of declaring health facilities as registration points for institutional births and deaths to promote registration at birth/death.

• Interoperability of all agencies implementing CRVS with BDRIS system needs to be established. Efficient dashboard for real time intensive monitoring of birth and death registration based on monthly target of each registration office needs to be established.
Thank You very much

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