

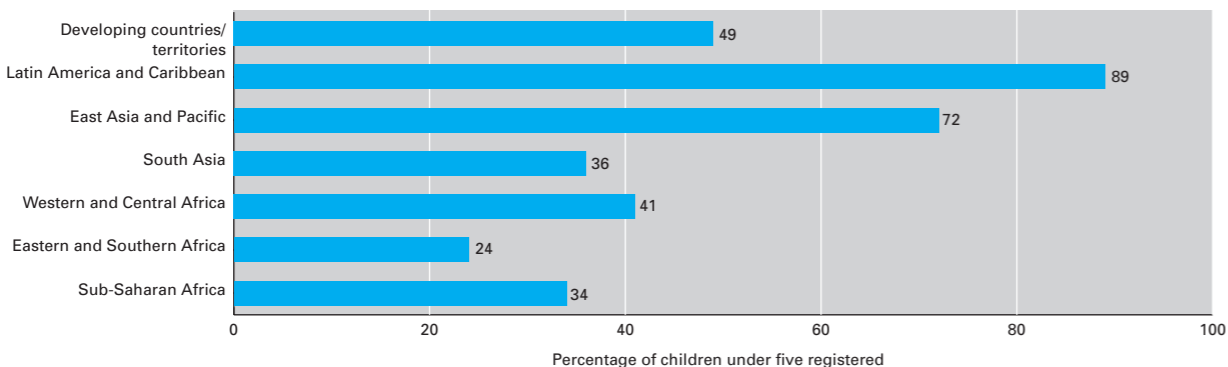
Birth registration: An important step towards accessing essential services

The right to a name and a nationality is well established by the Convention on the Rights of the Child, which explicitly calls in article 7 for the registration of a child immediately after birth. Yet every year the births of around 51 million children go unregistered. These

children are almost always from poor, marginalized or displaced families or from countries where systems of registration are not functional, and the consequences for their health and well-being are often severe and long-lasting.

Figure 1.20

Levels of birth registration* are low in South Asia and sub-Saharan Africa



* Birth registration refers to the percentage of children under five who were registered at the moment of the survey. The numerator of this indicator includes children whose birth certificate was seen by the interviewer or whose mother or caretaker says the birth has been registered. Multiple Indicator Cluster Survey data refer to children alive at the time of the survey.

Source: Multiple Indicator Cluster Surveys, Demographic and Health Surveys, other national surveys and vital registration systems. Country and regional data can be found in Statistical Table 9, page 146 of this report.

Although sub-Saharan Africa has the highest proportion (66 per cent) of children not registered at birth, South Asia, with a corresponding ratio of 64 per cent, has the highest number. The challenges are particularly daunting in some countries, such as Afghanistan, Bangladesh, the United Republic of Tanzania and Zambia, where birth registration rates are very low due to the absence of effective and functioning birth registration systems. In Bangladesh and Zambia, UNICEF estimates that only 10 per cent of births are registered, while in the United Republic of Tanzania the registration rate is just 8 per cent.

Birth registration and access to health care in particular are closely linked, especially for children under five. For instance, data from several African countries suggest a close correlation between the presence of a skilled attendant at birth and child registration. In Benin, for example, 74 per cent of children who were delivered by a skilled attendant were registered, as compared to 28 per cent of those who were not. Furthermore, the data also suggest that birth registration levels are associated with the number of vaccinations received and with the provision of vitamin A supplementation, as well as with the level of medical care available. For example, in Chad, 38 per cent of children receiving vitamin A supplementation have been registered, compared to 15 per cent of those not receiving supplementation. Conversely, in the absence of birth registration, in many countries children are denied access to vital interventions or programmes.

The challenges encountered by parents in registering the birth of their children often signal and overlap with broader

patterns of social exclusion and lack of access to social services. Thus, particularly in remote areas, parents often do not see the benefits of their own citizenship, let alone the benefits that birth registration would confer on their children. Furthermore, even when parents do plan to register a birth, the high cost of registration and long distances to registration centres often act as powerful deterrents. High cost in particular was revealed by a recent UNICEF analysis to be the primary reason for the lack of birth registration in no fewer than 20 developing countries, resulting in large registration disparities between rich and poor children. In the United Republic of Tanzania, where overall birth registration is very low, there is a strong disparity between rich and poor, with only 2 per cent of the poorest fifth of children being registered compared to 25 per cent of the richest fifth.

Achieving universal birth registration requires governments, parents and communities to work together to make birth registration a priority, and an integrated approach – such as combining national immunization campaigns with birth registration campaigns – often provides the best strategy. Where such cooperation has been achieved, it has led to remarkable results even in the most trying circumstances. In Afghanistan, in 2003, a nationwide campaign to register all children under the age of one was combined with the country's National Polio Immunization Days. The campaign was expanded in 2004 and had reached 2 million children under five by mid-October of that year.

See References, page 105.