

RWANDA



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Acronyms

ACRONYM	NAME
CRVS	Civil Registration and Vital Statistics
DHIS 2	District Health Information Software 2
MCCOD	Medical Certification of Cause of Death
MIGEPROF	Ministère du Genre et de la Promotion de la Famille (Ministry of Gender and Family Promotion)
MINALOC	Ministère de L'Administration Locale (Ministry of Local Government)
MINJUST	Ministry of Justice
MOH	Ministry of Health
NCI-CRVS	National Centralized and Integrated Civil Registration and Vital Statistics System
NIDA	National Identification Agency
NISR	National Institute of Statistics of Rwanda
NSDS	National Strategy for Development of Statistics
RBC	Rwanda Biomedical Centre
RDHS	Rwanda Demographic and Health Survey
UIN	Unique Identity Number

Objectives and Methodology for Individual Country Reports

OBJECTIVES

This represents one of six case studies initiated by the UN Legal Identity Agenda (UNLIA) Task Force, examining the experiences of six nations: Bangladesh, Bhutan, Colombia, Kenya, Namibia, and Rwanda. The primary aim is to draw lessons from these countries, considering their diverse experiences and perspectives, regarding integrating their Civil Registration and Vital Statistics (CRVS) systems with their population register/ID systems. While this may be a relatively small sample size, these case studies offer valuable insights that can benefit other countries embarking on a similar journey. By doing so, they contribute to the overarching goal of UNLIA and help propel progress towards achieving the Sustainable Development Goals (SDGs) and their associated targets.

The study seeks to answer three fundamental questions:

1. How was the stock built? This pertains to the establishment of the initial population register.
2. When was the civil registration data linked to the population register/identity database? This explores the timeline of integrating civil registration data into the population register.
3. How long did the system transition from a transient to a steady state? This examines the duration required for the system to achieve a stable and sustainable state.

This case study and the others also aim to assess how the enabling environment and the organizational capabilities, including their legal and institutional frameworks, supported these countries in their efforts to develop their CRVSID systems.

METHODOLOGY

The approach to developing the case studies included desk review and country-specific questionnaire-based interviews. This study and the others were done remotely, which proved to be a limiting factor in efficiently accessing information through interaction with key stakeholders.

The desk review attempted to access normative and guidance documents and literature from global and regional organizations. Documents on legal frameworks, in-country assessment reports, assessments conducted by global and regional organizations, and other relevant documents were also reviewed. Information gaps were identified, and country-specific questionnaires were developed and distributed to the relevant individuals for their responses. Focused interviews were subsequently conducted with country officials and/or local focal points from organizations actively involved in supporting the Government in CRVSID activities. All interviews were recorded with the interviewees' permission.

Rwanda at a Glance

Total population (2022)	13.2 million	5th Rwandan Population and Housing Census
Percentage of urban population (2022)	28 %	5th Rwandan Population and Housing Census
Estimated number of births (2021)	368 thousand	Vital Statistics Report, Rwanda 2021
Estimated number of deaths (2021)	76 thousand	Vital Statistics Report, Rwanda, 2021
Birth registration completion level (2021)	93 %	Vital Statistics Report Rwanda 2022
Death registration completion level (2021)	31 %	Vital Statistics Report Rwanda 2022
Coverage of ID among population (15 + years)	98 %	World Bank ID4D dataset 2021

The Journey Towards an Integrated CRVSID System

KEY MILESTONES

DATES	KEY MILESTONES
1988	Civil registration made compulsory all over Rwanda.
2005	National Institute of Statistics of Rwanda (NISR) established, with the mandate of coordinating activities of the national statistical system.
2006	Sector Executive Secretary added to the list of civil registrars to bring services closer to the population
2007	The agency that became NIDA subsequently conducts a census-like door-to-door operation to collect data from the entire population. This was followed by a campaign to collect biometric data for all people over 16 years.
2011	The National Identification Agency (NIDA) established in 2011, responsible for the day-to-day operational management under MINALOC
2015	NISR launched the CRVS web-based application deployed in all public and private Rwandan health facilities and in all sectors and districts for the regular production of vital statistics reports.
2016	Mandate of civil registration shifted from the Ministry of Justice to the Ministry of Local Government following the new law relating to persons and family.
2020	Law amended to further decentralize birth and death registration from the sector office to health facilities for HF births and to Cell Offices for community births.
2020	Cell (sub-sector office) Secretaries tasked with registration of births occurring outside health facilities.

THE CRVS-ID JOURNEY OF RWANDA

The initial steps taken after Rwanda's independence in 1962 built upon the paper-based 'ID booklets' (Ibuku) that existed in the pre-independence period.

The next milestone event for CRVS was in 1988, when registration of vital events was made compulsory under Law No 42/1988.

Before 2007, information on households and members within the households was available as a paper-based register based at the sector offices.

The first step in “building the stock” took place in 2007, when the project, which became NIDA, collected data on the entire population through a door-to-door census using paper-based individual forms with the help of primary school teachers in 3 days. The information collected included, among other things, name, date of birth, gender, nationality, address, etc. The information collected through this census-type exercise was entered using 700 data entry clerks who entered 9.5 million forms in 45 days in the computerized national population registry. The Application number was issued after recording individual demographic data in the NPR, which later turned into an ID number during biometric data collection.

This was followed by the capture of biometric information of each person aged 16 years and above, which was linked to their biographical information available in the NPR. This was used for creating ID cards. It would be important to note that the NPR already included children below 16 years of age, and they visit the sector office upon reaching the eligible age to provide their biometric data.

The responsibility for civil registration moved to the Ministry of Local Government (MINALOC) in 2016, following the enactment of the new law No 32/2016 governing persons and family. This is the Ministry responsible for policy and performance of civil registration and ID. The National Identification Agency (NIDA), established in 2011 under Law No 43/2011, is responsible for the day-to-day operational management of these sectors under MINALOC.

Law No 09/2005 established the National Institute of Statistics of Rwanda (NISR) in 2005, responsible for coordinating all statistical activities in the country. The NISR releases a national vital statistics report through its website and 14 other platforms.

Action for ensuring the flow in a systematic manner and stabilizing the system was achieved through “NIDA and NISR working hand in hand to improve and strengthen the CRVS systems in Rwanda,” as stated in the Vital Statistics Report of Rwanda for 2020. It is also important to note that civil registration and national ID systems were integrated into the administrative structures, and the same field staff (agents) were responsible for both activities in Rwanda.

Registration facilities were only available at the District level initially. The first step in bringing civil registration facilities closer to the population came when Executive Secretaries of the “Sector” offices were added to the list of civil registrars in 2006. Work on building a National Population Register (NPR) started in 2008. This plan included the initiation of a web-based system for civil registration to all the sector offices and health facilities.

The decentralization process deepened further when registration of births and deaths was available down to the “cell” level under each Sector office as well as in all government and private health facilities. This addressed the problem of parents having to travel long distances to register children’s births and reduced associated delays and costs. Ministerial order No 001/07.01 published in the National Gazette on 27 July 2020, specifies the health facility staff who are given responsibilities of civil registrar based on the type of health facility.

However, certificates are issued only at the Cell offices, and parents/relatives have to pay even for the 1st copy of the birth/death certificates. Consequently, there is a significant drop-off between registration and certification.

Presidential order No. 092/2020 determines the responsibility of the Executive Secretary of the Cell (sub-sector administrative unit) to register births and deaths occurring in places other than the health facility based on information provided by the Village Head in the place where the birth or death took place.

Presently, over 600 health facilities, 2148 cells and 416 sector offices offer real-time services for registration of births and deaths.

The Covid period saw a dip in the birth and death registration completeness levels, but the country is regaining the ground lost in this period.

Government leadership, coordination and decentralization were the driving forces for the construction of an integrated structure for CRVSID in Rwanda. The leadership provided at the Ministerial level through the High-level Coordination Committee on civil registration and vital statistics has been critical in this respect. Table 1, under the Legal and Organizational Arrangements section, provides more details.

The interesting aspect of the development in Rwanda is the simultaneous strengthening of the civil registration, vital statistics and ID systems that is paying dividends through system integration and inter-operability.

The broadening out of the registration infrastructure to include multiple agencies (the National Civil Registry, notary offices, authorized hospitals and clinics and Rwandan consulates abroad) along with decentralization down to Sector and Cell levels as well in all government and private health facilities has helped in bringing the services as close as possible to the community.

With over 43 per cent of the population under the age of 14 and a fast-growing economy that has weathered setbacks due to COVID-19, Rwanda is accelerating its development pace. This case study shows that the integrated CRVS ID system is being increasingly recognized as a prerequisite for a modernizing and agile governance structure.

Challenges remain, with significant percentages of the population still unreached for death registration. While the level of birth registration was estimated at around 93 per cent, death registration completeness is at 31 per cent.

Much more work needs to be done to improve the reporting of marriages in Rwanda. Also, divorce registration is extremely low.

Legal and institutional arrangements

INSTITUTIONAL ARRANGEMENTS

Rwanda has a decentralized system of governance with four provinces and the City of Kigali, 30 districts; 416 sectors; 2,148 cells and 14,837 villages.

The CRVS organization and coordination mechanism in Rwanda, as explained in the Rwanda Vital Statistics Report 2020, is given in the box below:

Table 1: CRVS-ID organization and coordination mechanisms¹

COORDINATION COMMITTEE	COMPOSITION OF COMMITTEE	MAIN FUNCTIONS
High-level Coordination Committee on Civil Registration and Vital Statistics To meet once a year	Chaired by Minister of Local Government Members: Minister of Health, Minister of Finance and Planning Minister of Justice, Ministry of gender and family promotion	Provide oversight and policy guidance to the work of civil registration and vital statistics
National CRVS Steering Committee To meet once every Quarter	Chaired by Permanent Secretary of Local Government Members: PS Ministry of Health, PS Ministry of Justice, PS Ministry of Gender and Family Promotion, DG/NIDA, DG/NISR, DG/RBC, ES/NCDA and special invitees depending on the nature of the meeting	Resource mobilization, Organize and conduct annual development partners meeting and approve reports from CRVS Core Technical Team.
CRVS Core Technical Team	Technicians in charge of civil registration and vital statistics from MINALOC, MINIJUST, MOH, MIGEPROF, NIDA, NISR, RBC and NCDA	Coordinate the implementation of all policies related to CRVS and advise the CRVS steering committee on all matters related to CRVS.

SOME SHORTFALLS IN THE LEGAL PROVISIONS FOR CRVS

The Vital Statistics Report of Rwanda for 2020 calls attention to some of the shortfalls in the legal framework.

One of the persisting legal issues in 2019 is that law No 32/2016 of 28/08/2016 governing persons and family (amended in 2020) did not provide for the registration of foetal deaths as recommended by the UN. Only nine events (births, deaths, marriages, divorces, adoption, recognition, guardianship, legitimization and marriage annulment) are currently covered under Article 62.

It also says that though the registration of vital events is free of charge, the certificate needs to be paid for and is provided only on demand. Thirdly, and importantly, while the law provides for 30 days for timely birth and death registration, it is silent on late and delayed registration. There is only a provision for presenting a court judgment before registering a death declared after 30 days of occurrence.

¹ Source: NISR, National strategic plan, 2017/18-2021/22

Status of Civil Registration, Vital Statistics & ID systems

BIRTH REGISTRATION

Birth registration should be completed during the first month of a child's life. The process is based on the certificate of live birth that the health care facility issues after a child is born. The NCI-CRVS established that, in the absence of a certificate of live birth, the birth can be registered based on a sworn statement by two witnesses present at the birth or with direct and reliable news of the birth. For births outside of health facilities, employees of the civil registry shall fill out the certificate of live birth for statistical purposes and complete the birth registration procedure.

Births can be registered in NCI-CRVS offices, notary offices, Rwandan consulates abroad, and authorized hospitals and clinics.

COMPLETENESS OF BIRTH REGISTRATION

Calculating the completeness of registration can be used to monitor the performance of the CRVS system in capturing all vital events and allows for adjustment of incomplete data. Completeness is defined as the proportion of actual vital events in a population that are registered, divided by the estimated number of vital events that occurred in the same year.

A comparison of registered births with estimated live births within Rwanda reflects an increase in birth registration completeness rates from 84.2% in 2021 to 92.9% in 2022. Timely registered births increased from 93.7% in 2021 to 95.9% in 2022, which could have been a result of the decentralization efforts to health facilities and cell offices.

DEATH REGISTRATION

The Vital Statistics Report, 2022 reports a low rate of death registration of 31.1%, though this is an increase from 26.2% in 2021. However, the proportion of timely registration of deaths improved significantly from 68% in 2021 to 94.8% in 2022. The analysis of deaths shows a reduction in community deaths from 51.4% in 2021 to 47.2% in 2022. This shows the urgency for additional efforts to increase death registration, including creating awareness and if possible, incentivization of death registration. A key area of focus is the monitoring of community death registration and the operationalization of community death registration at the cell level.

An analysis of registered deaths reveals that not all deaths that occur at health facilities are recorded with their respective causes. Furthermore, a high proportion of deaths across Rwanda take place within the community compared to deaths in health facilities. The low registration rate has been aggravated by the fact that around 70% of the deaths that occur in the community have always gone unregistered, with no information about the causes of these deaths.

Before October 2017, medical doctors in Rwanda did not receive training on certifying the causes of death aligned to international standards. A major data quality challenge has been the ascription of deaths to vague or ill-defined causes. Only 54.5% of cases have a cause of death that is appropriately informative for use in policy decision-making. The Ministry of Health, via a ministerial order, now requires health facilities to correctly certify and report deaths aligned to the International Classification of Diseases (ICD), 10th Revision.

In Rwanda, cause of death registration is a subset of the mortality module of its civil registration system. It is supported by the amended law No 001/2020 of 02/02/2020, which replaced law No 32/2016 governing person and family. The amended law allows for the declaration of death at the health facility if it occurs at the HF and at the Cell for deaths occurring in the community. Sectors and Rwandan embassies abroad also register deaths.

MARRIAGE AND DIVORCE REGISTRATION

Marriages are registered at the sector offices after a period of 20 days of notice for public information. In Rwanda, consensual cohabitation (unions) and forms of marriages other than those solemnized by a civil registrar (monogamous) are not accepted by law and thus not registered. Nevertheless, such marriages still take place across the country.

Although marriage registration is functional across Rwanda, the reporting framework remains inadequate. Vital statistics on marriages are usually computed based on legal marriages registered within the CRVS system.

Divorce registration is extremely low across Rwanda and needs improvement to strengthen the CRVS system.

IDENTITY SYSTEMS

SDG Target 16.9 aims at achieving “legal identity for all, including birth registration, by 2030.” Legal identity is defined as the basic characteristics of an individual’s identity, e.g., name, sex, place and date of birth conferred through registration and the issuance of a certificate by an authorized civil registration authority following the occurrence of birth.²

According to the UNLIA, there are key differences between a population register and an identification register. A population register stores information about all residents of a country and envisages continuous (in some countries, real-time) updating based on information on vital events recorded in the civil registration system. When fully developed, it can provide data to produce population, migration and vital statistics on a regular basis.

On the other hand, an ID register may include only those residents who attain a legal minimum age (usually 18 years), and in some countries, only citizens are included. It is not necessarily updated from a CRVS system on a continuous or real-time basis and may be largely demand-driven. While ID systems necessarily include biographic and biometric information of registered individuals, a population register does not.

UNLIA identifies a ‘stock-and-flow’ approach for rolling out population registration/identity management systems. The ‘stock-and-flow’ is adopted with the purpose of ensuring inclusion of the entire existing population as well as the continuous flow of new people (for example, new-borns and immigrants).

2 Operational definition of ‘Legal Identity’ developed by the UN Legal Identity Agenda Task Force

As suggested by the UNLIA, the concurrent building and strengthening of identity systems and CRVS systems, respectively has several benefits. For example, this can promote systemic integration and/or interoperability, avoid errors, duplication and fraud, and facilitate the judicious use of financial and human resources for the achievement of user-centric systems.

The integration of data systems in Rwanda followed these principles. The first element in the exercise was to arrive at standardization of data elements through a comprehensive consultation with all stakeholders interested in the data. All variables were standardized, and a principle of ensuring that the same information is not sought multiple times was adhered to in the design process.

In Rwanda, information on households and members within the households was available in the form of a paper-based register based at the sector offices. In 2007, NIDA collected data on the entire population through a door-to-door census using paper-based individual forms using primary teachers in 3 days. The information collected through this census-type exercise was entered (9.5 million forms) in 45 days in the computerized national population registry. Furthermore, in the same year, Rwanda initiated the collection of biometric data, which became an ongoing process for the country. This signifies that the capture of biometric information has been consistently carried out beyond the initial census exercise.

The information gathered through door-to-door census operations was thoroughly verified and validated by cross-referencing it with the paper-based records available at the local level. Once the data was verified, it was computerized to establish the national population register. This entire process was successfully completed within a span of two months. The collection of biometric data commenced immediately afterwards. Massive campaigns informed citizens about the activity and shared the timelines for each region as the teams collected the biometrics and issued the ID cards after their production.

Following the massive enrolment campaigns, educational campaigns followed on TV, radio and community gatherings (Umuganda) educating citizens on the benefits of having an ID card and included answers to frequently asked questions regarding the processes to acquire, declare loss or correct data on the ID card.

The decentralization of the National Population Registry started in 2015. Since then, over 600 health facilities, 2148 cells and 416 sector offices offer real-time services for registration of births and deaths under the National Centralized and Integrated Civil Registration and Vital Statistics system (NCI-CRVS) for enabling electronic registration of vital events.

Lessons Learnt and Challenges

There are four key elements essential to a conducive enabling environment for pursuing a holistic identity system, as enumerated in the Compendium of Good Practices in Linking CRVS and ID management systems³.

3 Centre of Excellence for Civil Registration and Vital Statistics (CRVS) Systems, 2019. Compendium of Good Practices in Linking Civil Registration and Vital Statistics (CRVS) and Identity Management Systems, International Development Research, Ottawa, ON.

A holistic approach does not necessarily mean that all aspects of the identity system need to be the responsibility of a single agency. The systems can be technically integrated or inter-operable, while the different parts of the system are operated by different authorities.⁴

First and foremost is the political commitment from key government stakeholders to ensure that all vital events from birth until death for the entire population are registered in a timely manner.

Rwanda demonstrates the presence of strong political commitment from key government stakeholders, including those responsible for CRVS and identity management, as well as other stakeholders to strengthen CRVS coverage and interoperability with ID management systems, including the use of identity data through interoperable platforms.

One of the primary challenges is the low rate of death registration, leading to the failure to de-activate the identities of individuals whose deaths have not been officially recorded.

References

1. Rwanda Vital Statistics Report, 2021
2. NISR, National strategic plan, 2017/18-2021/22
3. Centre of Excellence for Civil Registration and Vital Statistics (CRVS) Systems, 2019. Compendium of Good Practices in Linking Civil Registration and Vital Statistics (CRVS) and Identity Management Systems, International Development Research, Ottawa, ON.

Annex

CASE STUDY ON THE IMPLEMENTATION OF CRVSID SYSTEM IN RWANDA QUESTIONNAIRE

UNICEF as co-chair of the UN Legal Identity (UNLIA) Task Force has commissioned case study on implementation of CRVSID system in six countries Asia, Africa, and Latin America – Bangladesh, Bhutan, Kenya, Namibia, Rwanda, and Columbia. The overall objective of the case study is to document the learnings from the experience that selected countries have had, so that many other countries benefit in their own journeys to build integrated CRVSID systems.

Although the study will offer some insights into the current operational status of the three systems (CR, VS, and ID management) individually, its primary objective is to learn about the interoperability of these systems.

4 Ibid

The country-specific case studies will attempt to answer the following questions:

- a. How was the “stock” built?
- b. When was the civil registration data was linked to the population register and/or national ID, and how?
- c. How much time did the system take to migrate from transient to steady state?

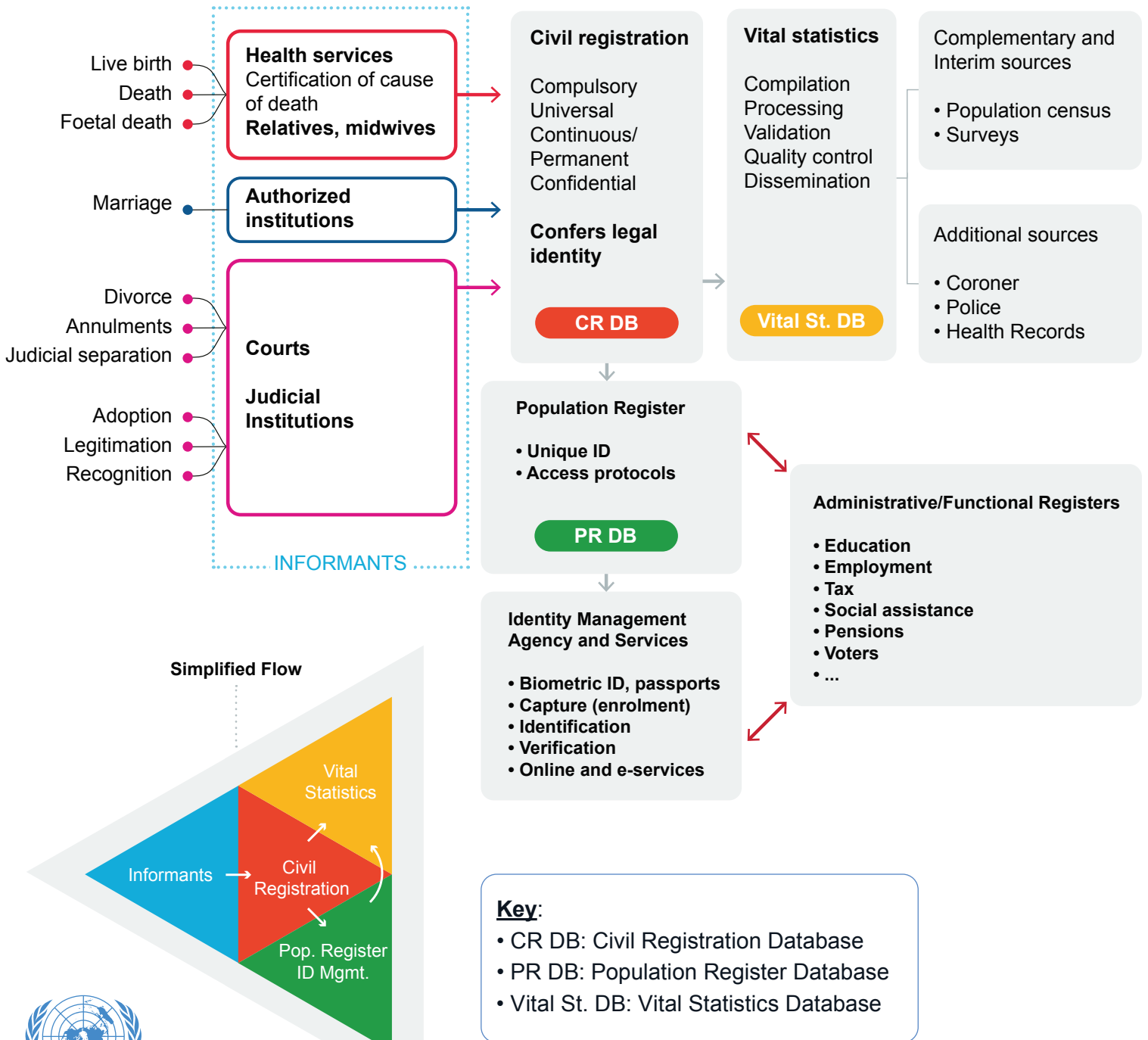
The studies will also include the steps taken by the countries in establishing organizational capabilities required for the efficient functioning of a CRVSID system, such as the legislative frameworks, organizational structure, human resources, ICT infrastructure, physical infrastructure, advocacy and communication and management and coordination.

We have gathered a significant amount of information through desk reviews and our team’s individual knowledge and experience working with Rwanda. However, there some gaps in our understanding of the current system and future plans particularly related to the building a CRVSID system. The following discussion points and questions will help bring in clarity which is essential for us to write a case study that reflects the true situation on the ground.

1. After the publication of the new law N° 32/2016 governing persons and family, the mandate of civil registration was transferred from the Ministry of Justice to the Ministry of Local Government. Again, the mandate of civil registration was transferred to the former National Identification Project which later became the National Identification Agency (NIDA) established by Law N°43/2011. The NIDA was charged with responsibility of population registration, civil registration, and issuance of the national identity card. Need to get clarification on this. Is the overall responsibility of implementing CR system with NIDA or Ministry of Local government?
2. Linked to the question above - who is the Chief of Civil Registration in the country?
3. Why is NIDA not a member High-Level Coordination Committee?
4. Is the sector or Cell of the lowest level of administration where events occurring in communities are registered?
5. Are all registration centres (health facilities and sector level registration centres) connected on-line to the central CR database using NCI-CRVS system. Please confirm that even the cell offices are connected.
6. Please confirm that modules covering all the processes have been implemented in the NCI-CRVS?
7. How many health facilities have deployed the NCI-CRVS modules for birth and death registration? Are there still health centres that have not deployed the NCI-CRVS?
8. Is the NISR pulling data from the NCI-CRVS, if so, is it automatically done in real time? Is the data that is pulled by NISR anonymized?

9. 'Under the transition period, CRVS web-based system is timely pulling birth and death registrations from NCI-CRVS since December 2020 and is still being used at its own to capture information on vital events other than those captured via NCI-CRVS' (Vital Statistics Report). What other data is captured and how?
10. According to the milestone notification is followed by validation and registration – does the informant not declare or make application?
11. Need some information related to late and delayed registration.
12. Where and when are the birth and death certificates issued? Health facilities for facility events and Cell or sector for community events? Can families download certificates?
13. What is Irembo system? How will the certificates be used for issuance of birth, death, and marriage certificate? Checked the website – it seems to relate to issuance of electronic certificate?
14. What proportion of the population in Rwanda are covered by National IDs?
15. The NPR and electronic ID was started in 2008.
 - a. Is the NPR for all residents or all citizens?
 - b. How was the NPR initialized? Was it a campaign method through which all the country registered the target population or was the existing ID system database (if any) was used to initialize the stock?
 - c. If the earlier ID data was used to initialize the NPR, was a new number generated for all target population captured while initializing the NPR?
 - d. At what point were the biometric data collected in the NPR?
 - e. Is the national ID card a smart card? Does it have chip and data/application is loaded on the chip?
 - f. When was the NPR linked to civil registration system (NCI-CRVS)?
16. The Vital Statistics Report provides tabulations on registered births by birth weight, order of birth. The information on birthweight, order of birth are not collected to birth registration form. How are these variables integrated with birth registration records?

Given below the framework on CRVSID proposed under the UNLIA.



This model represents a holistic approach to civil registration, vital statistics and identity management recommended by the United Nations, adapted from the United Nations *Principles and Recommendations for a Vital Statistics System, Revision 3*. It can be adjusted to national circumstances and governing structures as necessary.

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