Case Study on Narrowing the Gaps in Birth Registration:
Born Identity Project Solomon Islands
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## ACRONYMS

<table>
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<tr>
<td>CRO</td>
<td>Central Registration Office</td>
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<tr>
<td>BAG</td>
<td>Brisbane Accord Group</td>
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<td>Birth Registration</td>
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<td>CPP</td>
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<td>CRO</td>
<td>Civil Registry Office</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>ESCAP</td>
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<td>GNI</td>
<td>Gross National Income</td>
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<td>HDI</td>
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<td>MEHRD</td>
<td>Ministry of Education and Human Resource Development</td>
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<td>MHA</td>
<td>Ministry of Home Affairs</td>
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<td>MHMS</td>
<td>Ministry of Health and Medical Services</td>
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<td>MWYCYFA</td>
<td>Ministry of Women, Youth, Children and Family Affairs</td>
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<td>NACCC</td>
<td>National Advisory and Action Committee for Children</td>
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<tr>
<td>NGO</td>
<td>Non-Government Organisation</td>
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<td>NRH</td>
<td>National Referral Hospital</td>
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<td>SBD</td>
<td>Solomon Island Dollars</td>
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<td>SPC</td>
<td>Secretariat of the Pacific Community</td>
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<td>TA</td>
<td>Technical Assistance</td>
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<td>TYPSS</td>
<td>Ten Year Pacific Statistics Strategy</td>
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<td>UNICEF</td>
<td>United Nations International Children’s Fund</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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UNICEF Pacific has commissioned this case study to review and document key achievements, challenges and lessons learned in innovative child protection work being carried out in selected Pacific Island countries. The purpose of this work is to assist governments and donor partners with future planning, using insights gained from this review. The Solomon Islands Birth Registration (BR) Pilot Project was selected as part of this process given the pioneering nature of this initiative, the strong partnership approach underlying the work, and the high level of commitment by the Government of the Solomon Islands to achieving birth registration outcomes.

This case study was prepared by an external, independent consultant who travelled to all pilot locations in the Solomon Islands to interview project implementers, partners and beneficiaries. An extensive literature review was also conducted. Although this work is not intended to be a formal evaluation of results against an agreed set of objectives, donor agreements do provide an important point of reference when considering pilot project achievements, results and challenges as outlined in Sections 3 and 4.

A 2008 study in Solomon Islands\(^1\) estimated the number of formal birth registrations at 0.1%, the lowest in the Pacific Islands region. In 2010, the Solomon Islands Civil Registry Office (CRO) under the Ministry of Home Affairs (MHA) partnered with the Ministry of Health and Medical Services (MHMS), the World Health Organization (WHO) and the UNICEF Solomon Islands Child Protection Programme to establish an efficient and reliable national BR system. Collaboration between the MHA and the MHMS has enabled expansion of birth registration to the sub-national level. UNICEF’s support is aimed at assisting the Government achieve its’ target of 100% births formally registered by 2015, as detailed in the Solomon Islands’ National Children’s Policy\(^2\).

To achieve this objective, the CRO with partner support, are developing a comprehensive birth registration strategy that will see, government agencies, health care workers and parents working together to ensure that every newborn child was registered. This strategy has numerous inter-related components including: legal and policy reform; public awareness campaigns; development of e-system technology and protocols; improved administrative and communication procedures; capacity building of implementing agencies (including staff training and mentoring); political advocacy, technical assessment and support, and decentralization of key functions of the civil registration system to the provincial and local level.

Over the past four years, numerous donor partner agencies have contributed financially and/or through the provision of technical assistance to developing the new BR process in the Solomon Islands, including: the Governments of Australia, the New Zealand National Committee for UNICEF, the European Union, the Secretariat of the Pacific Community (SPC), WHO and UNICEF Solomon Islands. This multi-donor, collaborative approach has proven to be one of the key strengths of this initiative. Although much of this support has been focused on birth registration, it is important to note that investment in birth registration is also making a significant contribution to strengthening the overall development of the civil registration and vital statistics system (CRVS) in the Solomon Islands.

The UNICEF Pacific Child Protection Programme (CPP) is also working closely with other Pacific Island Governments, including Kiribati and Vanuatu to increase BR rates. Activities in these countries contribute toward achieving the objectives of the wider Ten Year Pacific Statistics Strategy\(^1\) (TYPSS), which is being implemented in collaboration with the Brisbane Accord Group\(^4\) (BAG) and the support of donor partners. The impetus for improving vital statistics in the Pacific arose from the development priorities outlined in the Pacific Plan (formulated by regional Heads of Governments) and from global initiatives such as the Millennium Development Goals (MDGs). The Economic and Social Commission for Asia and the Pacific (ESCAP) also recognized the urgent need to focus on improving civil registration systems rather than simply relying on alternative sources of vital information that can only be partially derived from population census and household survey samples.

There are numerous positive outcomes resulting from the Solomon Island Birth Registration Pilot Project and many lessons learned that can be applied as new BR systems rolls nationwide over the coming years. Other regional governments can also benefit from the Solomon Islands experience, as can donor partner agencies supporting implementation of the TYPSS.

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\(^{1}\) Assessment on the Current Status of Civil Registration with focus on Birth Registration in Solomon Islands, 2008. UNICEF Pacific, Suva Fiji Islands

\(^{2}\) Solomon Islands National Children’s Policy, 2008. Solomon Islands Ministry of Women, Youth, Children and Family Affairs

\(^{3}\) A Pacific Island Region Plan for the Implementation of Initiatives for Strengthening Statistical Services through Regional Approaches, 2010-2020

\(^{4}\) Brisbane Accord Group (BAG) membership includes WHO, UNFPA, UNICEF, the SPC, the Australian Bureau of Statistics (ABS), the University Of Queensland. The role of the BAG is to provide strategic and technical support to Pacific governments to improve their vital statistics as part of the implementation of the TYPSS.
Why is birth registration important?

The Convention on the Rights of the Child (CRC), ratified by the Government of Solomon Islands in April 1995, says that every child has the right to be registered at birth, without discrimination (Article 7). Birth registration results in a birth certificate - which is an essential document for school enrolment, health treatment, accessing social and economic entitlements (such as the National Provident Fund and academic scholarships), opening a bank account, getting a loan and obtaining a passport to travel overseas.

Birth registration also supports enforcement of minimum age legislation as required to regulate the sale and service of alcohol, obtain a driver’s license, secure employment, and to prove eligibility to vote or to get married. This is particularly important in the Solomon Islands given: i) the new electronic voter registration system which requires proof of identity and age, and ii) the Government’s plans to amend the minimum age of marriage without parental and/or judicial consent from 15 years to 18 years, and the minimum age of employment from 12 to 18 years. Further, proof of age is fundamental to the operation of the justice system, which, according to the CRC must ensure the unique legal rights of juvenile offenders and child victims and witnesses.

In addition to being a right, a method of facilitating public entitlements and benefits, and serving as a form of protection for people under the age of 18; a birth certificate also recognizes and validates a child’s very existence. In interviews conducted with numerous parents during the preparation of this case study, they all expressed a strong desire for their children to have a birth certificate. When asked why, they said things like; “because it proves she is a Solomon Islander” and “it shows who the parents are and where we came from” and “to protect them if people try to take their land”.

In speaking with young people who were in the process of obtaining a “late birth registration” (globally referred to as retrospective registration), they also think it is very important to have a birth certificate. While their reasons varied, most said it would enable them to study at a tertiary education institution, get a job, or go overseas. For others, getting a birth certificate was more personal and seemed to be an important part of their self-identity.

In addition to these reasons, up-to-date birth registration and demographic data is critical to Government in carrying out evidenced-based planning, budgeting and monitoring. Unless authorities know definitively how many children are born they cannot effectively plan health, education or other support services, nor can they gauge the effectiveness of funded programs and services. Birth registration also provides the basis for calculating infant and child mortality rates, population growth rates, migration patterns and for forecasting health, education and social service needs. Through implementation of the Pacific Plan and the TYPSS, there is now greater awareness of the need for quality and timely data to inform policy-making and the provision of technical and financial assistance to regional governments in improving vital statistics.

Despite 191 countries ratifying the Convention, the births of millions of children worldwide go unregistered. By their very nature, data concerning unregistered children are approximate; however, it was estimated in 2008 that 51 million babies – more than two fifths of those born worldwide – were not registered at birth.


17 year old interviewed after receiving his birth registration at the CRO.

“Having a birth certificate makes me feel like I'm someone important.”

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1 Solomon Islands National Children’s Policy, 2010. Solomon Islands Ministry of Women, Youth, Children and Family Affairs

2. Development Context
Solomon Islands is divided into 9 provinces and one administrative area that encompasses the capital city of Honiara, home to over 30,000 people. The other principal towns are Gizo, Auki, and Kirakira. In 2010, the total urban population is estimated at 19% of the total population with a projected 4.2% change in the urbanization rate from 2010-2015. To date, the new BR process has reached out to three provinces; Western, Choiseul and Guadalcanal and the capital Honiara. Roll out to Makira and Temotu is underway.

The country has one of the lowest gross national income (GNI) per capita in the Pacific Region, alongside one of the lowest human development index (HDI) values. The country also has some of the lowest rates of child immunization, primary school enrolment, access to water and sanitation, and some of the highest rates of infant mortality, under-five mortality and childhood malnutrition. The current population of Solomon Islands is approximately 600,000 people, with an annual growth rate of about 2.3%. This means that about every hour 1.8 persons are born and 0.2 persons die in the Solomon Islands. About 86% of all births take place at health facilities while 14% occur at home. The proportion of births in health facilities is higher in urban areas (94%) than in rural areas (83%). About 85% of births are attended by a skilled provider – 95% in urban areas and 84% in rural areas.

Table 1: Map of the Solomon Islands

<table>
<thead>
<tr>
<th>Children 0-19 %</th>
<th>Girls</th>
<th>Boys</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
<td>50% - 52%</td>
<td>50% - 52%</td>
<td>50% - 52%</td>
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Two parallel birth registration systems co-existed in the Solomon Islands - operating largely in isolation from one another and under separate legislations – one for registration of nationals and one for non-nationals. While authorities estimate that about 90% of all births are recorded by hospitals and clinics throughout the country and reported to the MHMS and entered into their Health Information System (HIS), this information was not systematically shared with the CRO or entered into a centralized BR database. Historically, churches have also played a key role in the keeping birth records through issue of baptism certificates.

The civil registration system in Solomon Islands is largely centralized, with one CRO located in Honiara. Given that approximately 80% of the population lives outside Honiara, often in remote locations far from any urban center, this poses significant access and logistical issues for birth registration. In addition, the financial and technical capacity of the CRO has been, until recently, extremely limited. Working with limited staff and funds, and using an outdated, paper-based data management system, was proving wholly inadequate in managing a functional nationwide BR system. As such, a database design company was engaged to develop and install an appropriate civil registration e-database with accompanying protocols, CRO staff training and technical support.

In an effort to decentralize and reach out to provinces, in 2011 the MHMS and the MHA formally agreed to work together on a pilot basis at the main provincial hospitals of Gizo Hospital (Western Province), the Taro Hospital (Choiseul Province) and the National Referral Hospital (NRH) in Honiara to provide direct registration of children at birth.

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2 Country Meters, Solomon Islands www.countrymeters.info
3. Achievements and Results
The Solomon Island Birth Registration Project has been highly successful in achieving results across a wide range of areas, as summarized below.

### 3.1 Increased number of people with birth registration

- In 2007, 20 births were formally registered nationwide; with the support of the project more than 35,430 people are now legally registered (as of June 2014) and are on the national electronic civil registration database.
- Prior to the project, all civil registration work took place at the CRO in Honiara. Since the pilot commenced, access to birth registration for children and their families living in rural areas has significantly improved with the establishment of 15 additional “satellite service centers” in health facilities in Guadalcanal, Choiseul and Western Provinces and Honiara that directly facilitate BR through facilitating birth notifications.
- The demand for birth registration has steadily increased over the last three years largely due to: i) heightened public awareness of the benefits of registration, ii) improved understanding of registration processes, and iii) greater accessibility to registration administrative centers. Increased demand is demonstrated through the growing number of applicants for retrospective registration, demand from services providers such as banks, immigration and tertiary institutions, as well as new parent willingness to provide the child’s name at the time of birth in order to activate the registration process.

### 3.2 Greater awareness and capacity of implementing agencies

- Through support provided by donor partners, the capacity of the CRO in Honiara and other BR implementing agencies has been significantly strengthened. This is evidenced by:
  1. The 300% increase in the number of CRO staff. Before 2013 there were 3 permanent staff (the Civil Registrar and 2 data entry clerks) and in May 2014, 7 staff were based at the CRO with additional MHMS staff directly engaged in BR processing in four provinces.
  2. The creation of the CRO as a separate division within the MHA has enabled the CRO to develop its own unique identify as a government division, which has been significant in increasing public understanding of its role and mandate.
  3. Until recently, the CRO had very limited finances provided solely through the government recurrent annual budget to the MOHA and then apportioned to the CRO. In 2014, for the first time, a national recurrent budget allocation was provided directly to the CRO of SBD 1m for operational costs. While these funds are expected to cover all overhead and personnel costs, some funds will be available for programming purposes.
  4. The recent exponential increase in the number of people legally registered in the country, including people from disadvantaged and remote areas.
  5. The significant increase in the level of engagement between the CRO, other government agencies including MHMS, National Statistics Officer and Ministry of Finance and a wide range of external organizations - both national and regional.
  6. The successful transition from an inefficient, manual paper-based registration system to a functional state-of-the-art electronic database with national storage and broad analytical capabilities.
  7. The willingness of the MHMS to assume responsibility for initiating the BR process in collaboration with the parents of newborn children (through the training of designated staff to complete notification forms with copies sent to the CRO for registration processing) has served to greatly improve BR data accuracy and management efficiency. Further, critical BR data gathered by MHMS officials and entered onto the Ministry’s HIS will enable better statistical analysis of the childhood health situation (i.e., infant and under-5 mortality rates) required to optimize health system effectiveness.
  8. BR integrated with routine anti-natal and postnatal clinic programs in test areas and allocation of provincial health budget in support of BR activities (i.e. in Western Province).
  9. Similarly, the capacity and effectiveness of Census and Statistics Offices is being enhanced through access to more accurate demographic and household information needed for effective policy development and planning. Improved BR information will also better position the Government of the Solomon Islands to report on progress against the Solomon Islands National Development Strategy, 2011-2020, relevant

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9 Historically, it was not common for parents to name their child immediately following birth, which is required to efficiently process birth registration especially when parents do not live near the hospital or health center. Given this custom, significant awareness raising work was required so that front-line antenatal clinic and maternity ward nurses would fully understand the advantages of birth registration and be able to convince parents of the need to choose names for their child prior to delivery.

10 The current CRO staff composition includes the Civil Registrar an IT Officer; an Administrative Assistant/Senior Data Entry Officer (funded by UNICEF), and 3 “Youth at Work” Volunteers (funded by SPC as part of a regional youth employment initiative).
sector plans as well as global and regional commitments including the MDGs, the CRC and the Pacific Plan.

- The capacity of the CRO and the civil registry system in general has increased as a result of technical assistance (TA) and financial support provided by donor partners - alongside a strong commitment by the MOHA and the MHMS to achieving birth registration outcomes. This TA has encompassed a variety of forms including, among others:

1. Close and regular mentoring by partner agency staff, in particular UNICEF Child Protection programme specialists;
2. Attendance of key implementing agency staff at international conferences, regional study visits and planning meetings;
3. Provision of intensive training and assessments for key implementing agencies on the use of the CRVS Comprehensive Assessment Tool (developed by the WHO and University of Queensland, Australia) which facilitated the development of a national CRVS Strategy for the Solomon Islands;
4. Establishment of the Solomon Islands CRVS Committee in 2013, chaired by the Civil Registrar, serves as an inter-agency, multi-sector working group mandated to assist in coordinating and overseeing progress toward completion of the comprehensive assessment, development and full implementation of the CRVS Strategy. Advice and support provided to the MOHA/CRO by this committee is highly valued by the Civil Registrar and MOHA leadership team;
5. Assistance in conducting joint monitoring visits to all satellite birth registration service centers in pilot provinces and in documenting the required follow-up to improve project effectiveness based on field experience and lessons learned from teams on the ground;
6. Provision of external civil registration database design and implementation expertise and e-system training for CRO and related staff (see Section 3.4), and
7. Legal assessment of civil registration provisions in the Solomon Islands and the development of an Action Plan (see Section 3.8).

8. Collaboration of pilot program health staff to support training in new areas based on their accrued experience and lessons learnt

### 3.3 Increased political and public awareness

- Extensive awareness on the importance of birth notification/registration was conducted for all health care facilities operating in pilot project target areas in four provinces. This included a series of decentralized trainings for front-line health workers, as well as management and administrative staff. One of the outcomes of this training was the significant improvement in the number of parents who come for birth delivery with baby names already agreed as a result of successful integration with anti-natal and postnatal routine programmes.

- Regular newspaper articles and radio broadcasts - including excellent coverage of the launch of the new e-database - have also aided considerably in increasing public understanding and enthusiasm for BR developments in the Solomon Islands.

- The effective use of information, education and communication (IEC) materials including posters and brochures made available through district health care facilities and other public offices has improved knowledge of BR processes in rural areas as evidenced by increased registration numbers and greater demand from provinces.

Regular briefs and advocacy events with senior Government official including the Prime Minister’s Office has ensured that critical birth registration issues in the Solomon Islands are well understood at the decision-making and policy level. This strategy has served to ensure that the CRVS Committee’s action plans regarding new BR processes and targets have received high level political support. As a result of these efforts, combined with the increased number of birth registrations already completed over the last three years, the Government provided the CRO/MHA with a first time budget allocation for 2014 to support further roll-out of the BR pilot project. Involving the Prime Minister’s Office and other key government agency leaders in awareness and training workshops and at the launch of the new e-database system (and providing the Prime Minister with a copy of his own birth registration) was a highly successful strategy in gaining national buy-in and commitment to new BR processes.
3.4 Development of e-birth registration database technology

- In February 2014, the Government of Solomon Islands launched its’ new CR database to replace the out-dated paper-based system. The CR database will enable accelerated efforts to increase birth registration rates throughout the country and to reduce the backlog of birth notification forms (completed by MHMS nurses and birth attendants) currently awaiting registration on the CR database by the CRO.

- The new CR database guarantees a much more secure, reliable and transparent national system of storing and maintaining records of all births in the Solomon Islands. In addition to providing basic BR data, the new database has also been designed to capture, maintain and analyze data on other key vital events such as deaths, causes of deaths, name changes. In future, additional functions (i.e., marriages and adoptions) can be easily added as required.

- The CR database was also designed to enable remote operation, which means that birth registration data can be entered from anywhere in the country (assuming internet access) by a qualified and authorized entry clerk and linked up to the ICT SIG network. As such, the database will support decentralization of CRO functions to satellite service centers or other locations as deemed appropriate in the future.

- The CR database is compatible with the mobile registration systems that can be used for collecting and sending birth-related information (birth notifications) through compatible mobile phones. The CR database has been designed to enable use of mobile technology when ICT conditions in Solomon Islands would properly support use of this technology.

- To support the smooth operation and maintenance of the new ERDB and to ensure data integrity, a range of procedures have been developed. These include, amongst others, data quality audit and verification system protocols for sharing relevant BR information within and between implementing agencies efficiently, securely and confidentially. Further information on the technical and functional aspects of the new CR database is available from UNICEF or the CRO.

3.5 Improved administrative and communication procedures

- The new carbon Birth Notification Form has reduced the work load of nursing staff (who previously had to recopy the same form three times when a child was born, including still births) and has also improved the quality of data as fewer errors occur when only one copy is completed. Previously, three copies of the Birth Notification Form (formally called the Live/Still* Birth Certificate) were made – one for the delivery ward, one for the MHMS (for inclusion in the HIS) and one was given to the family. However, no form was provided to the Civil Registrar. Under the new system, four carbon copies are made, with one copy provided to the CRO for inputting in to the new CR database.

- The new Birth Notification Form was also amended to include additional information required for demographic and vital statistical purposes. These changes, while fairly ‘low-tech and low-cost’, are proving highly effective in improving the efficiency of the BR system.

- Linking with the established MHMS HIS system to transmit Birth Notification Forms from rural health care centers to district hospitals in provinces and then onward to the MHMS and the CRO for entry into the CR database and subsequent issue of birth registration certificates. These certificates then need to be returned to parents - generally via the health care system in rural areas given that people living in these areas do not have access to postal or telephone services. This process remains cumbersome and relies on both formal and non-formal transport and delivery systems.

3.6 Decentralization of key functions of civil registration

- The need to decentralize delivery of public services from national to provincial and district level has long been recognized in Solomon Islands. As such, the BR project is playing a major role in achieving this objective through the establishment of satellite birth registration “service centers” at provincial level which are supported by information collected by rural health care centers. Given the challenges inherent in servicing a largely rural-based, widely dispersed population with limited telecommunication capacity, the need for decentralized birth registration is essential to achieving the 100% coverage target.

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15 Additional information collected on the new NOBF such as birth weight, the father’s name, DOB and occupation, current addresses of both parents, their marital status and where applicable, marriage details. Whenever possible, both parents are now asked to sign the Notice of Birth Form whereas the previous Live/Still* Birth Certificate was only signed by the mother.
• The impact of decentralized birth registration has been extremely positive in rural areas. School-based education officials had already reported to provincial authorities that they had seen an increase in the number of children who enroll for school with birth registrations in pilot areas. Given that birth registration is gradually becoming a requirement for school enrolment, the education system has a vested interest in facilitating the registration process. In particular, the close relationship that ECE and elementary teachers have with parents can provide a strategic opportunity to work with families to complete late registration forms.

3.7 Creation of multi-agency agreements and positive partnerships

• At the regional level, the BR pilot project has effectively drawn from existing partnerships and strategies (i.e., the BAG Accord, the TYPSS and Pacific Vital Statistics Action Plan) and made excellent use of innovative planning techniques (i.e., WHO/University of Queensland CRVS Rapid and Comprehensive Assessment and Mapping Tools) to create a comprehensive and highly collaboration approach to CRVS development in Solomon Islands. These partnerships are also essential in meeting common global, regional and country objectives as set out in the Pacific Plan, the MDGs and the CRC with respect to birth registration and other vital statistics required for accurate analysis and tracking of progress toward agreed development targets.

• At the national level, the establishment of the inter-agency, multi-sector CRVS Committee has proven extremely valuable in getting all key implementing and stakeholder agencies around the same table to conjointly plan and coordinate efforts, and in fostering continuous improvement through application of lessons learned from implementation and best practices in other countries.

• Among key efforts to strengthen birth registration coverage in rural areas, is the highly successful partnership between the MOHA and the MHMS to facilitate direct birth registration through identified health facilities in four pilot provinces. This collaboration has enabled testing of new protocols and procedures and led to system improvements based on actual experience that can be applied when developing the upcoming “National BR Roll-Out Strategy”.

• The project has also established, and been greatly assisted by strong relationships with development partners, resulting in a consolidated and well-coordinated approach to CRVS development in Solomon Islands. Donor funding has made it possible to accelerate registration efforts and build capacity of key implementing agencies through the use of appropriate TA modalities. This financial and technical support has been used to build a solid foundation for future sustainability of CRVS systems in Solomon Islands. In addition, lessons learned from this pilot project are applicable to civil registration work in other Pacific Island countries and will be shared with governments throughout the region.

• Improving ICT capacity for supporting BR through the planned integration of EPI/BR emergency/recovery through use of mobile outreach program using laptops and partnership with ICT Unit Ministry of Finance to link up national centralized database to SIG network and exploring ICT decentralization options.

3.8 Recognition of the need for legal and policy reform

• In Solomon Islands, some laws date back to colonial times and urgently require revision based on changed circumstances and conditions, including the need to accommodate human rights concessions. As such, an initial assessment of existing laws relative to civic registration and vital statistics took place in late 2013 as part of the comprehensive national CRVS assessment process. Key stakeholders from representative government agencies participated in this review, from which a plan of action was developed. Legal reform efforts will focus on integrating existing laws related to civil registration into one unifying and coherent piece of legislation.

3.9 Creating a vision and building momentum for change

• One of the most significant achievements of this pilot project has been the collective creation of a unified vision for civic registration in Solomon Islands, and the attending momentum that has been built to achieve this vision among multiple government and donor partner agencies. This project provides an excellent example of the kind of synergy that can arise when organizations pool resources and ideas and work together on multiple fronts toward achieving a common objective.

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11 Additional information collected on the new NOBF such as birth weight, the father’s name, DOB and occupation, current addresses of both parents, their marital status and where applicable, marriage details. Whenever possible, both parents are now asked to sign the Notice of Birth Form whereas the previous Live/Still* Birth Certificate was only signed by the mother.
4. Challenges, Lessons and Suggestions
During consultations with stakeholders in Honiara and all pilot provinces during preparation of this case study, they shared success stories as well as some of the challenges they face with implementation; they shared lessons learned from their experiences with the project so far; and they also offered numerous suggestions for enhanced effectiveness of new BR systems.

As such, this section outlines identified implementation issues with the current pilot project and summarizes stakeholder suggestions for improved effectiveness and efficiency. These lessons and stakeholder suggestions provide an important basis for planning for national roll-out which is discussed in Section 5.

### 4.1 Ongoing public awareness campaigns

While public knowledge of the importance of birth registration and the new BR processes has significantly increased, people in rural areas remain largely uninformed (other than women attending antenatal clinics in pilot sites). There is also confusion regarding new BR terminology as the previous Notice of Birth Form was called a “Birth Certificate” so people are often under the impression they already have the official birth registration document.

**It is suggested that:**

- BR IEC materials are distributed through schools, health clinics, churches, chiefs, NGOs, women’s organizations and banks for broader coverage. In this regard, it was suggested that banks be approached regarding their interest in sponsoring IEC material publications as a public service as this would also facilitate compliance with bank proof-of-identity requirements for opening accounts and loan applications.
- BR IEC materials are translated to local vernacular given that English literacy rates are low, especially in rural areas.
- School administrators and teachers are updated on new BR procedures and the importance of registration as they are ideally positioned to pass this information on to parents. Options for increasing awareness of education personnel include; introducing BR during teacher training and in-service sessions; including BR information in the Teaching Service Handbook which all schools receive copies of; making BR presentations at head teacher and school inspector conferences, and through CRO visits to provincial education authorities.

- Birth registration is included in school social science curriculum so that children understand why BR is important and how it will benefit them later in life.
- A module on birth registration be developed and included in teacher training at the Solomon Islands National University, with particular emphasis on training Early Childhood Education (ECE) and primary school teachers.
- Church leaders explain new BR systems to their congregations and work closely with the CRO to ensure baptism records can be converted to official birth registration when this is the only birth record available.
- To facilitate national roll-out, all education officials and teachers involved in educating parents about the benefits of birth registration are issued with their own birth certificate so they have personal experience with the application process and are better positioned to conduct BR advocacy.

### 4.2 Ongoing training of health care workers

While training sessions held to date with provincial hospital staff and rural health clinic nurses involved with the pilot project were said to be highly effective in increasing the understanding of frontline antenatal clinic and maternity workers on the benefits of birth registration and new BR processing procedures, high staff turn-over rates mean that ongoing training will be required. To increase efficiency, institutionalization of BR training within the health sector is necessary.

**It is suggested that:**

- Refresher training is provided on an annual basis to all rural health center staff through provincial hospitals and/or district managers.
- Birth registration is incorporated in the nursing program curriculum at the Solomon Islands National University.

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1. A new version of the Teacher Service Handbook will be available next year and education authorities agreed the birth registration information could be included as an Annex in this Handbook.
• Birth registration is incorporated in medical training programs offered through the Fiji National University (this has already been done for death notifications18) and the Papua New Guinea Medical School.

• The CRO provide regular updates on birth registration developments to provincial health administrators to ensure high-level awareness and support.

• All health care workers involved in educating parents about the benefits of birth registration are issued with their own birth certificate so they have personal experience with the application process and are better positioned to conduct BR advocacy.

4.3 Reduce turn-around time

A strong need was frequently expressed to dramatically reduce the turn-around time between completion and submission of Birth Notification Forms and the return of Birth Certificates to parents. The current lag time is up to 24 months because new registrations were not processed by the CRO while the new e-BRDB was being developed. While understandable from an administrative perspective, the negative impact this delay has had on project momentum and enthusiasm is significant and needs to be urgently addressed before provincial health workers and parents “lose interest and faith” in new birth registration processes.

It is suggested that:

• The CRO establish a maximum processing time and make a public commitment to adhere to this timeframe. If people understand the expected turn-around when notices and applications are filed, unrealistic expectations and negativity will be reduced.

• The CRO establish a fair and transparent system for processing the backlog of birth registrations from all pilot provinces, as well as keeping place with new birth registrations and retrospective applications.

• The demand for retrospective applications is likely to dramatically increase as public awareness of new BR processes grows and as public services (i.e., schools, banks, scholarship programs etc) become more stringent in enforcing proof-of-identity requirements – while at the same time, the demand for birth registrations grows. As such, the CRO workload is expected to significantly intensify which has major implications for CRO staffing and reinforces the need for judicious planning. This issue is discussed in more detail in the following Section.

4.4 Improved communication between the CRO and satellite service centers

MHMS staff administering BR paperwork from provincial and district service centers expressed a desire for more regular communication with the CRO in Honiara so they have a better understanding of new developments and directions. For instance, rural health care staff did not know a new BR database was being developed, thereby causing a delay in processing birth notification data. As such when parents repeatedly inquire about the status of the child’s birth registration document, they were poorly equipped to explain the reason for the delay.

It is suggested that:

• A simple, one-page newsletter issued on a quarterly basis would greatly assist in keeping key stakeholders informed of BR developments at national level. These updates could also assist in creating momentum to achieve established local BR targets that are developed in collaboration with provincial and district authorities during roll-out planning.

• Regular field visits by the Civil Registrar and/or his delegate to all satellite service centers is critical in ensuring the CRO maintains a comprehensive understanding of progress and challenges in decentralized locations and in addressing difficulties that arise as proactively as possible. Personal visits by the CRO are also extremely important in maintaining project momentum and enthusiasm of health care workers who are working to facilitate birth registration on top of already heavy workloads. As such, it is critical that these staff feel valued and that they are an important part of an important national initiative.

4.5 Improved and consistent administrative procedures

During visits to satellite service centers, it was observed that a range of administrative procedures are being used for record keeping purposes, with some more effective than others. These procedures

18 Death notification training (supported by the MHMS and WHO) was provided to 30 Solomon Islands doctors in 2013 to address international guidelines re attributing immediate and underlying causes of death.
pertain to record-keeping on Notification of Birth forms completed and sent to the MHMS/CRO, as well as records on Birth Registrations returned to health care facilities by the CRO. In some cases, BR nurse administrators maintain a list of child/parent names so they can track progress, while in other facilities there are no records available for cross-checking. In some BR service centers, excel spreadsheets (inclusive of personal details) are being used while in other satellite centers, the number of forms sent and received are simply recorded in a book with no identifying information.

This situation poses significant risks with respect to tracking of BR paperwork that is often passed through multiple sources en route from rural health clinics - to provincial hospitals - to the MHMS and the CRO - and then back again to provincial health centers – to rural health clinics - and then finally on to parents - many of whom rural health clinics have lost touch with given the lengthy turn-around time from birth to receipt of the birth registration. This system is highly dependent on people passing papers through both formal and informal means which has high potential to break-down at only point along this convoluted path. In addition, as the number of birth registrations increases as provincial and national roll-out proceeds, the situation is likely to become even more complicated and ineffective.

In addition, administrative and tracking procedures at the National Referral Hospital (NRH) require special attention given the large volume of births that need to be registered (approx 500 children are born at this facility each month) and the fact that many of these births involve mothers who live in remote locations throughout the Solomon Islands who are only in Honiara temporarily for specialist maternity and delivery care. As such, the NRH has no ability to track these parents after they return home following the birth, nor does the NRH provide post-natal care which makes follow-up with mothers during post-natal and immunization clinics problematic even when parents do reside in Honiara.

The issue of “late” or retrospective birth registrations facilitated through satellite service centers also needs to be addressed. The number of people coming to these service centers seeking assistance with registration has dramatically increased, largely due to the effectiveness of BR public awareness campaigns. However, the role of medical staff in retrospective registration is not clear and work load issues of medical staff are not conducive to assuming additional responsibilities in this area unless additional support is provided. As such, new systems for dealing with retrospective registrations at provincial level need to be identified as soon as possible.

It is suggested that:

- User-friendly BR Work Instructions or Procedures are developed to train and inspire staff confidence and ability and to ensure consistent and accurate birth data records. Through staff induction or training sessions (4.2), simple step-by-step processes would articulate Birth Registration procedures for staff to follow. Marketing and initial communication of the administrative processes would initially be paper based, supported by a simple web based training module. Work Instructions, updates and general positive communication about the implementation progress of the BR Project would be regularly updated on the web for staff to follow and own. Relevant medical staff and where staffing capacity permits, administrative staff, should be trained in direct input of Birth Registrations.

- Work Instructions or Procedures for retrospective birth registrations should also be documented. Community promotion of the ease of registering a birth is critical as well as promoting the ability to register and gain a birth certificate retrospectively. There should be no guilt, shame or fee attached. A publicized amnesty period is important to encourage participation.

4.6 Build capacity of the CRO and satellite service centers

While the capacity of the CRO and the civil registry system in general has significantly increased as a result of robust TA and financial support provided by donor partners over the past four years, alongside additional resources from the national recurrent budget for 2014, there are concerns that the current capacity of the CRO remains limited in the face of the intended national roll-out. As such, roll-out plans will need to be carefully formulated to ensure that the CRO actually has the capacity to expand service delivery throughout the country without any loss to the quality of data entered into the e-BRDB and/or to established procedures involving implementing partner organizations.

As discussed previously, revised communication and administrative protocols will be required to ensure consistency and effectiveness in transmitting Birth Notification and Birth Registration paperwork through the complete birth registration cycle,
especially given the expected increase in demand. It will also be important to ensure that satellite service centers are not over-loaded with additional BR work, which could result in burn-out on the part of implementing agency staff, thereby eroding established partnerships. As discussed, there is also an urgent need to shorten turn-around registration time as substantial backlogs will negatively affect the reputation and credibility of the CRO and lead to down-stream problems.

As such, provincial and national roll-out will need to occur on a well thought-out, phased-in basis and be accompanied by appropriate and responsive forms of technical and financial assistance. In short, unless there is congruence between the demand for and the supply of birth registrations significant problems are likely to arise during the roll-out. Suggestions regarding the roll-out are provided in Section 5.

4.7 Continue work on legal reform

Legal revision of relevant birth registration in Solomon Islands is scheduled to occur later this year and will build on the findings of the legal component of the 2013 Comprehensive CRVS Assessment. This process is expected to result in harmonization of relevant legislation, thereby allowing for improved management and coordination of civil registration duties across sectors. Legal reform will also address existing inconsistencies between legislation and allow for planned development of BR service delivery roll-out.

One of the major legal issues to be addressed is the fact that current legislation only allows for delegation of CR functions at the discretion of the Civil Registrar which is a bottleneck for wiser agency engagement in facilitating birth registration functions. In this scenario, the potential to decentralize BR services and/or enter into partnerships with other government agencies, including the MHMS and the MOE, is significantly constrained. In addition, there is a need to amend the Birth, Marriages and Deaths Registration Act (1996) to allow for the use of mobile technology which is not covered in this legislation.

A further legal issue requiring resolution pertains to the cost of civil registration, both at the time of birth and in the case of retrospective registration. One of the “best practice” characteristics of birth registration systems globally is that registration services are provided for free. The right to receive a birth certificate is a basic right of citizenship and should not depend on ability to pay or proximity to the national CRO.

It is suggested that:

• The CRO collaborate with the CRVS Committee, including the Attorney General’s Office, to carry out legal reform work as required to ensure an enabling legal environment for decentralized, cross-sector BR implementation.

• Solomon Island citizens - and any child born in the Solomon Islands to non-citizens - are not charged for the initial copy of their birth registration, regardless of when the notification form is filed. In addition to being a right of citizenship, administrative and accountability problems are likely if the collection and tracking of fees is decentralized and outsourced to other implementing agencies – especially as the demand for registration increases throughout the country. However, in cases where the initial copy is lost or damaged, it would be appropriate to charge for the cost of reprinting the birth certificate. This practice will encourage people to take care of their registration document.

• CR Division should have overall internal policy, protocols and procedures for issue of documents, sharing of information, definitions of what constitutes a late or delayed registration etc. this has been identified as priority area as part of legal reform.

4.8 Improve portability and durability for birth registration certificates

The CRO has recognized the need to review the portability and durability of the Birth Registration template. Stakeholders are concerned that unless certificates are smaller (so they can fit in school bags etc) and are made more resistant to weather conditions, they can be easily damaged and require replacement.

It is suggested that:

• While lamination will incur additional costs, over the long term this may be justified by reducing
the work and expense involved in preparing and distributing frequent replacements.

4.9 Maintain multi-agency collaborative approach

The current momentum and high levels of collaboration and cooperation evident between government agencies, regional organizations, development partners and donors will need to be maintained if current challenges with implementation are to be satisfactorily resolved in preparation for provincial and national level roll-out. While the pilot has been highly successful, challenges are likely to intensify as geographic coverage expands and the demand for registration continues to grow - most likely faster than the response capacity of the CRO and other implementing agencies. As such, judicious planning and management will be required in order to prevent back-sliding in BR system effectiveness and efficiency. Suggestions for roll-out planning and management are provided in the following section.

**It is suggested that:**

- An MOU between the MHA and the MHMS be developed based on lessons learned from ongoing cooperation, to provide the basis for negotiation of a revised agreement between the MOHA (and other implementing agencies) in preparation for national roll-out.
4. Considerations for National Roll-Out
In planning for national roll-out of the new birth registration system, it is critical that wise logistical and strategic decisions are made to maximize effectiveness and efficiency. In this regard, the following issues should be carefully considered:

(i) Capacity of the Civil Registry Office/MOHA, including available finances and human resources (HR) and the ability of donor partners to support capacity building;

(ii) Capacity of key implementing agencies, including the MHMS and the Ministry of Education (MOE) to assume BR functions;

(iii) Degree of desired decentralization of civil registry functions to CRO satellite centers and/or outsourced to other agencies;

(iv) Pace of BR related law reform to enable decentralization and/or outsourcing of CRO functions and ensure consistency within and between relevant legislation;

(v) Determination of location and age priorities for effective roll-out;

(vi) Capacity of the CRO and BR implementing agencies to absorb the suggested implementation changes (as outlined in Section 4) aimed at improving the effectiveness and efficiency of the current pilot project and enable replication during roll-out, and

(vii) The application of global “best practice” guidelines in birth registration systems (see Table 2, page 21) are used as a reference in guiding the development of the “National Birth Registration Implementation Roadmap for 2014-2020” (see Section 5.3).

5.1 Capacity of the CRO and implementing agencies

- The primary consideration in scaling up BR efforts across the country is the current and projected capacity of the CRO/MOHA and key implementing agencies including the MHMS and the MOE. With respect to capacity issues, the results of the suggested institutional audit will provide important guidance in establishing an appropriate capacity building strategy and for seeking donor partner support. It is expected that TA will need to be robust over the next two years to cope with the increased demand and logistical complexities associated up national roll-out, while maintaining system integrity.

- While the demand for birth registration is increasing - and is likely to further intensify as public awareness grows - it is important to establish a realistic roll-out schedule to ensure that the collection and entry of high quality data is maintained and that strong partnerships are maintained. The workload of MHMS staff with direct responsibility for BR processing will need to be carefully monitored to ensure that this work does not distract from core functions of maternity, birth attendant and antenatal health care staff.

- The CRVS Committee has a critical role to play in providing ongoing strategic and logistical advice regarding BR roll-out planning and implementation. As such, it is suggested that the National CRVS Committee also receive capacity building support to ensure sustainability of planning and evaluation functions when donor partners begin to withdraw the level of current assistance.

5.2 Degree of decentralization and out-sourcing of CRO functions

- Fundamental to planning for national roll-out are clear, carefully considered decisions regarding; i) the degree to which centralized BR functions will be decentralized to satellite CRO service centers located in provinces and districts, and ii) the degree to which CRO functions will be out-sourced to current and future implementing agencies. With respect to out-sourcing of civil registry processes to other agencies (government and/or civil society), regulatory changes will be required to facilitate this collaboration. As such, it is important to pre-determine the nature and degree of desired decentralization and out-sourcing prior to drafting of new enabling legislation.

- It is suggested that the MHA continues to strengthen its’ relationship with the Ministry of Women, Youth, Children and Family Affairs (MWYCF), the MWYCA National Advisory and Action Committee for Children (NAACC), the National Women’s Council and the National Youth Council to facilitate collaboration with women and youth networks that are well positioned to assist with BR awareness campaigns and distribution of birth registration information.

5.3 Development of a Birth Registration Implementation Roadmap to Guide National Roll-Out

- Given current capacity constraints of the CRO and BR implementing agencies, it will be necessary to roll-out the new birth registration system in a gradual and logical manner, using a staged-in process. As such, it is suggested that a “National Birth Registration Implementation Roadmap 2014-2020” be drafted by the CRO, and reviewed by the CRVS Committee, that targets the following three categories of service:
1. Registration of children at birth
2. Retrospective registration of children to age 18, and
3. Retrospective registration of adults.

- Given the high population growth rate and the fact that the majority of the population of Solomon Islands is still not registered, the BR Implementation Roadmap will need to employ a focused, multi-faceted strategy to meet the growing demand for birth and retrospective registration and to achieve national coverage within the next 8-10 years. To achieve this goal, the MHA will need to develop and sustain highly effective working partnerships with the MHMS, the MOE, the Electoral Commission, the National Statistics Office, the Attorney General’s Office, tertiary education institutions, the private sector (i.e., banks) and civil society organizations (i.e., Churches).

- It is also suggested that the CRVS Committee assume a lead role in developing and implementing a BR monitoring and evaluation (M&E) strategy as part of the National Birth Registration Implementation Roadmap for 2014-2020. This strategy could include, amongst other indicators and annual objectives:
  - Number of new birth registrations by province/district/service agency against specific roll-out targets (as a percentage of the total target population);
  - Monitoring of turn-around times from notification-to-registration;
  - Provision of public IEC materials and political advocacy;
  - Training provided to implementing agency staff in all decentralized locations;
  - Survey feedback from implementing agency staff regarding ease of registration processing;
  - Number of site visits by CRO staff to satellite centers and the effectiveness of follow-up;
  - Publication of BR newsletters and distribution to implementing agencies;
  - Drafting and enactment of enabling BR legislation;
  - Establishment of MOUs with all implementing agencies, with regular review/revision as required;
  - Civil registration budget allocation from national government and other sources;
  - Quality of BR data gathered and entered into the e-BRDB and the effectiveness of data cleansing processes;
  - Production of BR data reports disaggregated by gender, age, place of birth etc.
  - Degree to which BR data is used in national and sector plans and reports, and
  - The extent to which lessons learned from this case study have been incorporated into future practice.

5.4 Implementation of the National Birth Registration Roadmap 2014-2020

- Category 1 Services: Registration of children at birth

Discussion and collaborative decision-making is required between the MOHA, the MHMS and province-based health care facility staff involved with the current project regarding their capacity and willingness to accelerate efforts to deliver BR services at health care centers not yet involved with the project.

Concurrent with this planning, discussion will also be required with two additional provinces of Makira and Temotu (Year 1) regarding their willingness to commence implementation of new BR processes. Training of provincial personnel provided by the CRO prior to implementation could also involve current BR administrators from Western, Choiseul and/or Guadalcanal province to facilitate discussion of lessons learned and increase ownership for BR processes nationwide. In addition, there may be advantages to involving members of the CRVS Committee, on a rotational basis, so they have first-hand knowledge of BR decentralization and planning processes. Based on the success of the Year 1 roll-out (mid 2014 to mid-2015), two additional provinces could be added each year. At this rate, decentralization to all provinces will occur by mid-2017 with full geographic coverage expected by 2020.

- Category 2 Services: Retrospective registration of children to age 18

Retrospective registration of children to the age of 18 requires a specific strategy to ensure logical, equitable and efficient roll-out. When children miss registration at birth (or at post natal follow-up health visits), the next opportunity to institutionalize birth registration processing nationwide is when children enter the formal education system for early childhood education (ECE) or class one attendance. When enrolling children for school, parents are increasing being required to show birth registration documentation. As such, annual school enrolment
Table 2: Global “Best Practice Characteristics” of Birth Registration Systems

- It is free. The initial birth registration certificate, whether received at the time of birth or as an adult, is a basic right of citizenship and no one, regardless of financial means, should be prevented from obtaining a copy of their birth registration.
- It is available to everyone, regardless of where they live in the country and is therefore decentralized, especially in countries that are largely rural and all people do not have easy access to postal and/or transport services.
- It is universal in coverage, which means that anyone born in that country, regardless of their ethnicity or legal status (i.e., citizen or non-citizen) must be registered, without prejudice.
- It is consistent in the collection and analysis of birth information throughout the country.
- It is timely and efficient, which means that birth registration processes are completed as soon as possible after the birth and registration forms are expediently returned to parents or adult citizens.
- It assures privacy, which means that information gathered for birth registration cannot be used to discriminate against certain groups of people nor be used for unintended purposes
- It is commonly understood by the public, which means that awareness campaigns are carried out to ensure that all citizens understand the importance of birth registration as well as the registration process.
- It is used for statistical, planning, evaluation and reporting purposes by national government agencies and civil society organizations in developing and monitoring health, education, transport, agricultural, water and other services.
- It allows for special circumstances, including grace periods and amnesty.

provides an ideal opportunity to complete birth registration forms for those children without birth registration. Education officials consulted during the preparation of this case study expressed interest in assisting with the collection of BR data as schools also require this information for enrolment, reporting and record keeping purposes.

It is suggested that an MOU be negotiated between the MOHA and the MOE to trial school-based birth registration during week one of the school year in selected provinces. Given that new BR processes have already been piloted in Western, Choiseul and Guadalcanal provinces, it would be logical to trial Category 2 Services at primary and secondary schools located in capital cities in these provinces. Given the backlog of children requiring retrospective birth registration, it will be important to include secondary schools in this trial.

When birth registration forms are completed and signed by the Civil Registrar, they could be returned to home schools for distribution to parents by teachers, which would avoid logistical issues regarding return of birth registration certificates given the lack of postal services in rural areas. Based on lessons learned from this experience, expansion to other provinces, in line with the national roll-out schedule for birth registration could take place.

Consideration could also be given to placing outsourced CRO staff at tertiary institutions during registration week given the number of new students who require birth registration documentation in order to enroll at institutions like the Solomon Islands National University. Similarly, birth registration forms could be provided to regional scholarship providers and tertiary institutions with a base in Honiara (such as the Australia Pacific Technical College) for distribution. This could expedite the process and reduce congestion at the CRO during key registration periods.

It was also suggested that church leaders be trained to help fill in and distribute birth registration forms at the time of baptism if children are not already registered.

- Category 3 Services: Retrospective registration of adults

It is suggested that retrospective birth registration for adults in Solomon Islands could most efficiently be achieved by piggy-backing on to the new voter registration system. In the words of a senior representative of the MOHA (the Ministry also responsible for electoral services), “this system cost the Government of the Solomon Islands millions of dollars and we need to make sure we use it for maximum benefit.”

Other options to address retrospective registration of adults is to collaborate with the Ministry of Finance, and the National Statistics Office, during the next national household survey and census in 2015, and/or to make birth registration forms available at banks throughout the country given that birth registration documentation is required to open a bank account or apply for a loan.
“A birth certificate is the most tangible proof that a Government legally recognizes a child as a member of society... a child who is not registered at birth is invisible in the eyes of the authorities.”

Hon. Gordon Darcy Lilo
Prime Minister Address at launch of new Electronic Civil Registration Database System, Honiara
7th February 2014