POLITICAL COMMITMENTS TO CRVS IMPROVEMENT IN PACIFIC ISLAND COUNTRIES AND TERRITORIES

Civil registration and vital statistics (CRVS) systems provide governments with critical information for planning on topics such as population dynamics, health and civil status. In addition, CRVS also provides an important mechanism for protecting human rights and supporting social inclusion through the provision of a legal identity. These functions concern the whole of government, and as such the political commitments made to highlight the importance of CRVS and system improvement have come from a broad range of government sectors.



National Commitments: The United Nations Convention on the Rights of the Child (1990) has been endorsed by all Pacific Island Countries and Territories (PICTs). The convention specifically requires countries to undertake birth registration noting that:

"The child shall be registered immediately after birth and has the right to a name and nationality..."

International Covenant on Civil and Political Rights, Convention on the Rights of the Child, Article 7

The **2030 Agenda for Sustainable Development** also highlights, under goals 16 and 17, the importance of strengthening national CRVS systems to address targets including the following:





- By 2030, provide legal identity for all, including birth registration; and
- By 2030, build on existing initiatives to develop measurements of progress on sustainable development that complement gross domestic product, and support statistical capacity-building in developing countries.

Three of the headline indicators specifically address the completeness of registration for births and deaths. In addition, many of the other targets and indicators adopted under the Sustainable Development Goals (SDGs) require high-quality civil registration (CR) based data, including cause of death information in order to accurately establish baselines and monitor progress.

CRVS Indicators in the SDGs

16.9.1 Proportion of children under 5 years of age whose births have been registered with a civil authority, by age.

17.19.2 (b) Proportion of countries that have achieved 100 per cent birth registration.

17.19.2 (b) Proportion of countries that have achieved 80 per cent death registration.

In November 2014, the members and associate members of the Economic and Social Commission for Asia and the Pacific also endorsed the Regional Action Framework (RAF) on CRVS in Asia and the Pacific region, and the Asia-Pacific CRVS Decade (2015–2024). These committed the countries to setting targets and reporting progress against three shared goals:



Goal 1: Universal CR of births, deaths and other vital events.

Goal 2: All individuals are provided with legal documentation of CR of births, deaths and other vital events, as necessary, to claim identity, civil status and ensuing rights.

Goal 3: Accurate, complete and timely vital statistics (including on causes of death) are produced, based on registration records and are then disseminated.

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The RAF also outlines seven action areas to assist countries with meeting these goals. The RAF builds on earlier commitments by PICTs to improving CRVS and the approach outlined in the Pacific Vital Statistics Action Plan (PVSAP), which commenced in 2011.

Health Sector Commitments: Ministers of health in PICTs have repeatedly called for national investment in CRVS data to support the Healthy Islands agenda. Most recently, the ministers have recognised the importance of CRVS and national Health Information Systems (HIS) in the 2015 Yanuca Declaration.



The decade for CRVS is a commitment of governments of the Asia-Pacific region to achieve a shared vision that by 2024 all people in the region will benefit from universal and responsive CRVS systems that facilitate the realisation of their rights and support good governance, health and development.

Commencing in Honiara in 2011, ministers agreed that 'Countries should:

- 1. create a culture of information;
- demand better quality information and evidence for policy decisions;
- 3. strengthen human resource capacity, including core data competencies at all levels;
- advocate for improved CRVS;

- 5. select appropriate solutions based on their information needs and country capacity;
- 6. improve the quality and use of existing data;
- 7. strengthen surveillance and response; and
- 8. ensure privacy and confidentiality.'

The 2013 call for action was more specific with ministers recommending that 'To strengthen and improve data quality from HIS and CRVS systems, countries need to take the following actions, unless already in place:

- a. Establish a multi-sectoral coordination mechanism or mechanisms to improve HIS and CRVS systems.
- b. Undertake an assessment of the key challenges and issues for generating reliable timely data.
- c. Develop and share detailed improvement plans for HIS and CRVS that include locally agreed targets for improving HIS and CRVS data that are measurable and provide accountability for progress, such as improvement of the completeness of birth and death registration and improvement of the reliability and completeness of health data, in particular cause-of-death data, with a minimum two-year reporting period on results of analysis and trend data.
- d. Invest in building human resource capacity for HIS and CRVS in areas such as data analysis and interpretation of vital statistics to inform policy development and planning.'

Statistics Sector Commitments: The 2013 actions from the Pacific Ministers of Health Meeting very closely reflect the resolution of the 2013 regional conference of Heads of Planning and Statistics (HOPS), held in Noumea. CRVS data has been a core priority of the first two phases (2011–2014, and 2015–2017) of the Ten Year Pacific Statistics Strategy (TYPSS), with a strong recommendation from the Pacific Statistics Steering Committee (PSSC) that this continue into phase 3. This strategy provides the over-arching framework for the PVASP, and the PSSC continues to engage closely on this topic, with a number of specific resolutions for action being endorsed at recent meetings.

