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**Sub-regional workshop on applying Principles and Recommendations
for a Vital Statistics System for implementing the Regional Action
Framework for CRVS in Asia¹**

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¹ This document has been produced without formal editing.

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I. Introduction

A. Background and objective of the meeting

1. Vital statistics and their subsequent analysis and interpretation are essential for setting targets and evaluating social and economic plans, including the monitoring of health and population intervention programmes, and the measurement of important demographic indicators of levels of living or quality of life, such as expectation of life at birth and the infant mortality rate. Reliable vital statistics are essential for producing timely and accurate population estimates and demographic and health statistics. In the context of the importance of vital statistics, there is universal acknowledgement of the urgent need to improve their availability, timeliness and quality.
2. Most Central Asian countries traditionally have had adequate legal and statistical recording systems for vital events; however, due to the shift from a planned economy to free market economy, attention paid to maintenance and improvement of civil registration and vital statistics systems has decreased. In 2009 at the first session of the ESCAP Committee on Statistics, the region's national statistical offices noted the importance of improving civil registration and vital statistics. In 2010, at the second session of the Committee on Statistics, the key elements of a regional programme for improving civil registration and vital statistics in Asia and the Pacific were endorsed.
3. The Ministerial Conference, held in November 2014, reached visionary yet implementable outcomes, including a ministerial declaration, a regional action framework for 2015-2024, and the proclamation of 2015 to 2024 as the Asian and Pacific CRVS Decade. The goals and targets of the regional action framework offer measurable outcomes that reflect progress towards achievement of the shared vision during the course of the decade 2015 to 2024. They recognize core human rights principles of progressive realization, non-regression, non-discrimination and equity, which apply to all countries and areas. The three goals are: Goal 1: Universal civil registration of births, deaths and other vital events; Goal 2: All individuals are provided with legal documentation of civil registration of births, deaths and other vital events, as necessary, to claim identity, civil status and ensuing rights; and Goal 3: Accurate, complete and timely vital statistics (including on causes of death) are produced based on registration records and are disseminated.
4. The Sub-regional workshop on applying Principles and Recommendations for a Vital Statistics System for implementing the Regional Action Framework for CRVS in Asia was held from 15 to 18 September 2015, in Istanbul, Turkey. It was jointly organized by the United Nations Statistics Division (UNSD) and the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP)-Statistics Division.
5. The objectives of the workshop were to: (a) provide training to countries on the new revision of the United Nations principles and recommendations on vital statistics in terms of concepts, definitions, data collection methods, compilation, sources and the implementation of international statistical standards; (b) assess the current status of the civil registration and vital statistics system in participating countries, identifying gaps to

be filled as well as good practices, drawing upon country self-assessments²; (c) examine the availability of data that countries are able to provide to UNSD through the *Demographic Yearbook* data collection, and (d) provide an opportunity for participants - statisticians and registrars – to share their experiences, to strengthen the regional exchange of practices and formulate national improvement strategies. In addition, registrars and statisticians participating in the workshop got acquainted with the outcomes of Ministerial Conference, including the Ministerial Declaration to “Get everyone in the picture”, the Regional Action Framework, and its implementation.

6. This report summarizes the presentations and discussions made during the workshop; documents countries’ experiences in the collection and compilation of vital statistics and highlights the major conclusions and recommendations for the improvement of the civil registration and vital statistics systems in the region.

B. Participation

7. Eleven, mostly Russian-speaking countries in Asia were represented in the workshop – Afghanistan, Armenia, Georgia, Iran (Islamic Republic of), Kazakhstan, Kyrgyzstan, Mongolia, Russian Federation, Tajikistan, Turkey, and Uzbekistan. Participants included those from National Statistical Offices who have experience with the collection and compilation of vital statistics and those from the Ministry of Justice, Ministry of Interior or State Service who are responsible for the registration process of vital events in their respective countries. The list of participants is included in Annex 1.

C. Opening session

Turkstat

8. Ms. Dr. Sebnem Bese Canpolat, Head of Demographic Statistics Department from the Turkish Statistical Institute (Turkstat), welcomed the participants to Turkey and recognized that civil registration and vital statistics are a smart investment for development and an important instrument for human rights. She pointed out that Turkey had a long registration tradition, dating back to the Ottoman Empire. Dr. Bese Canpolat recounted how in the year 2000 Turkey introduced the Address Based Population Register System, which resulted in the ability to produce almost all vital statistics from administrative data, including cause of death, on a timely basis. She highlighted the importance of interagency coordination is paramount for the successful implementation of civil registration and vital statistics systems. In Turkey, Turkstat works hand in hand with the Ministry of Health, the Ministry of Interior and other stakeholders. Dr. Bese Canpolat thanked the Turkstat regional office for organizing the visit for all participants and wished success for the workshop.

² Based on the document *State of civil registration and vital statistics in Asia and the Pacific and overview of supporting initiatives*, E/ESCAP/MCCRVS/2

UNSD

9. Mr. Srdjan Mrkic from the Demographic and Social Statistics Branch welcomed the participants to the workshop and thanked Dr. Canpolat. He described the mandate of the UN Statistics Division in four clusters. First, the collection and dissemination of international statistics; in this role, UNSDO communicates with all national statistical offices, processes their data and publishes. Second, the normative role, in which statistical standards are produced. One of these standards would be the focus of discussion during this workshop. Third, coordination of international statistical programmes; this involves, among other activities, serving as secretariat of the UN Statistical Commission. Fourth, technical cooperation, requested by countries to provide direct assistance in several areas of official statistics, or in the form of workshops like this one, which give countries the opportunity to benchmark themselves against the international standards.

10. Mr. Mrkic pointed out that this workshop was part of a series of regional and subregional workshops, and that UNSD partners with regional agents in all four clusters. In this case, Turkstat, ESCAP, who has a more direct relationship with countries, and OSCE, who has an emphasis in human rights. Mr. Mrkic presented the programme of work, indicating that it was available in English and Russian, and that participants were expected to contribute their input as regards to what are the main issues at country level, and what is preventing governments to comply with international standards. He said that throughout the days, discussions would be spurred to come up with ideas on how to overcome these issues both in civil registration and vital statistics. Further, he guided participants through the workshop layout, and rationale.

11. Mr. Mrkic then presented the publications provided as workshop materials, namely the third revision of the Principles and Recommendations for a Vital Statistics System (in English and preliminary version in Russian); the Handbook on Training in Civil Registration and Vital Statistics (CRVS) Systems, which is organized in modules; and the different modules of the Handbook on CRVS System: Developing Information, Education and Communication; Management, Operation and Maintenance; and finally Legal Framework . All were distributed in print and electronic versions.

UNESCAP

12. Ms. Tanja Sejersen from the Statistics Division of the UN Economic and Social Commission for Asia and the Pacific said that she was extremely pleased to be partnering with colleagues in NY in the organization of the workshop, as well as OSCE and WHO. She thanked Turkstat for their cooperation. Ms. Sejersen went on explaining that the work in ESCAP related to Civil Registration and Vital Statistics (CRVS) stems from the Ministerial Meeting held in 2014, with its outcomes such as the CRVS decade, a strong ministerial declaration and the Regional Action Framework. These three outcomes are the guiding documents in ESCAP programme of work, which involves a close interaction with countries, as well as an enlarged partnership within the UN family and beyond. She

highlighted that this partnership enables ESCAP to bring expertise from different groups. Ms. Sejersen expressed that this workshop was timely, as CRVS is key for monitoring the SDGs. She finished by saying that she was looking forward to hearing about countries' experiences and apologized for not being able to speak Russian.

OSCE

13. Mr. Zoran Dokovic from the Office for Democratic Institutions and Human Rights of OSCE said that his office was excited to partner with ESCAP, UNSD and Turkstat for this workshop on a topic that is particularly important for their portfolio. Mr. Dokovic went on highlighting the importance of population registration and civil registration for protection of rights and governance. He explained that, at the request of member countries, OSCE is assisting in assessing population registers and civil registration systems. In this task, it is of utmost importance to be aware of existing standards. Mr. Dokovic finished his initial intervention by wishing everybody a very successful event.

D. Organisation of the workshop

14. The full agenda of the workshop is included in Annex 2. An abridged version is shown below:

0. Registration of participants
1. Opening
2. a. Guiding principles of vital statistics
b. Regional Action Framework on Civil Registration and Vital Statistics in Asia and the Pacific
3. CRVS and human rights
4. Civil registration as a source of vital statistics
5. Topics and themes to be covered in a vital statistics system
6. Population registers as a source of vital statistics
7. Quality assessment and assurance in the civil registration vital statistics system
8. The role of health institutions
9. National-level designation of responsibilities and organizational structures of a civil registration system
10. Local-level designation of responsibilities of a civil registration system
11. Civil registration process: place, time, cost, late registration
12. International collection of vital statistics and challenges faced by countries to fulfill it
13. Guidelines for national target setting and monitoring of the Regional Action Framework on CRVS in Asia and the Pacific
14. Country team work time
15. Visit to the Turkish Statistical Institute Regional Office
16. WHO Regional Strategy for the improvement of CRVS systems (session cancelled)
17. Strategies for improving civil registration and vital statistics systems in subregional Asia

18. Wrap-up /Closing

15. Most sessions were plenary with presentations followed by floor discussions that provided participants with a forum for debates, sharing of experiences and exchange of views. Session 7 was split in two due to time constraints. Session 16 did not take place given that WHO-EMRO was not able to travel. At the end of the second day, and after official hours, a representative of Plan International gave an informal presentation on Community Engagement.

16. Session 14 consisted of having representatives from each country work as a team on analyzing the current status of their civil registration and vital statistics system and the baseline data and targets for the Regional Action Framework. Participants presented the results of this exercise in session 17.

17. In preparation for the workshop, participants were asked to submit two assignments³ (Annex 3 and Annex 4). These consisted in filling out a questionnaire, filling out two tables extracted from the regular UN Demographic Yearbook data collection, and drafting a report. The purpose of the questionnaire was to collect information on the organizational and technical aspects of the national civil registration and vital statistics system, and to assess the state of the development and methods of evaluation in the civil registration system. The tabulations required participants to look for the needed data, which meant realizing its features in terms of fitness vis a vis international standards, as well as availability. In turn, the report touched upon compilation of vital statistics from the civil registration system and other sources, factors hampering this process and improvement plans.

II. Summary of presentations and discussions

Session 2a. Guiding Principles for a Vital Statistics System

18. A representative of the United Nations Statistics Division introduced the topic in three parts, namely the basic definition of vital statistics, the history and development of the Principles and Recommendations for a Vital Statistics System, and the elements of a vital statistics system, according to these set of principles.

19. Vital statistics are the collection of statistics on vital events in a lifetime of a person, as well as characteristics of the events and the persons involved. Since the original version, dated 1953, civil registration made an integral part of the vital statistics system. However, the first revision, 1973, introduces a distinction between civil registration and vital statistics, and includes enumeration and indirect estimation. At that time, deficiencies in civil registration prevented the production of vital statistics directly. So

³ The results and analysis of the pre-workshop assignments will be presented in detail in a forthcoming Technical Report.

some indicators were produced from surveys and censuses. This, in turn, prevented further development of civil registration. The second revision, 2001, omits indirect estimation from the definition of vital statistics, presenting it only as ad hoc and temporary methods. This was done because a number of countries were solely relying on surveys and censuses using demographic analysis, not investing in civil registration. The text uses civil registration and vital statistics interchangeably, which lends itself to confusion.

20. The rationale for the third and latest revision came from the need to restructure the principles and recommendations along the lines of distinguishing between vital statistics from its sources. Thus, the third and latest revision, 2014, discusses them separately. In addition, the function of the health sector is elaborated upon, and as population registers become more common, it was necessary to align these standards.

21. The process to revise the principles and recommendations included an expert group meeting gathering national, regional and international experts from 15 countries and seven international and regional organizations, who discussed at length on the content of the publication, the overall need for revision and the proposed table of contents.

22. The major recommendations emanating from the expert group meeting were sharpening the distinction between vital statistics and its sources; elaborating on population registers; re-visiting core topics; addressing the role of health institutions within the vital statistics system; aligning the principles and recommendations with current international classifications; and updating and upgrading all the parts with contemporary approaches to producing quality official statistics

23. The resulting revision of the Principles and Recommendations for a Vital Statistics System consists of three parts, namely The Vital Statistics System; Sources of Vital Statistics; and Key Elements of the Vital Statistics System. In addition, the publication comprises three annexes, namely Recommended tabulations; Index, glossary; and References.

24. The representative of UNSD highlighted the essential features of the vital statistics system. The vital statistics system is a set of three interacting components, namely legal registration, statistical reporting and collection, compilation and dissemination of statistics. These components need to be defined adequately in a legal framework, providing clear designation of duties and responsibilities.

25. The presentation included a diagram outlining the ideal structure and interdependencies of the components, as well as the vital events to be recorded and the range of stakeholders involved in the system. In this regard, the role of integration, coordination and collaboration was emphasized, recommending uniform regulations, an inter-agency or interdepartmental coordination committee and a communication plan, among other measures and mechanisms. The need to have a strategy of quality assurance and assessment was also stressed.

26. The three principles of a vital statistics system – continuity, confidentiality and regular dissemination were elaborated on. In addition, the sources of vital statistics were presented, highlighting civil registration as a critical source and distinguishing population censuses and household (health) surveys as complementary sources. The presentation gave a priority list in terms of vital events, grouping them in three levels. The first level includes births, deaths and foetal deaths, including causes; the second level comprises marriages and divorces; and the third encompasses annulments, judicial separations, adoptions, legitimations and recognitions. However, it was recognized that priorities may change according to national circumstances.

Session 2b. Regional action framework on CRVS in Asia and the Pacific

27. A representative of UNESCAP recounted the background of the regional action framework (RAF). She highlighted that it aims to accelerate efforts of Governments and development partners to realize the shared vision that “By 2024, all people in Asia and the Pacific benefit from universal and responsive CRVS systems that facilitate the realization of their rights and support good governance, health and development”.

28. The RAF was developed through a consultative process under the leadership of the Regional Steering Group on CRVS and was adopted at the Ministerial Conference on CRVS in November 2014. The representative of ESCAP explained the main components of the RAF: three goals, 15 targets set by each country, six key principles, seven action areas and several implementation steps.

29. The three goals are: universal civil registration; legal documentation to claim identity, civil status and ensuing rights; and accurate, complete and timely vital statistics. Each goal has a set of targets which; the representative of ESCAP presented some as examples and explained that the actual level of the target to be achieved will be defined by each country based on their national baseline. She continued by explaining the key principles of the RAF, namely countries take the lead, a stepwise approach, flexibility and responsiveness (given that the situation in countries can change), building on local expertise, consistency with international legal principles, and coordination and alignment.

30. The representative of ESCAP also mentioned the action areas of the RAF and its implementation steps. The action areas are: Political commitment, Public engagement and participation, Coordination, Policies, legislation and implementation of regulations, Infrastructure and resources, Operational procedures, practices and innovations, and Data quality, production, dissemination and use of vital statistics. While the implementation steps are as follows: National CRVS coordination mechanism, Conduct a comprehensive assessment, Set the national target value for each target, Assess inequalities related to CRVS experienced by subgroups of the population, and, where appropriate, set national targets to address those inequalities, Comprehensive multi-sectoral national CRVS strategy, Assign a national focal point, and Report relevant information to the ESCAP secretariat.

31. She highlighted the role of the national focal points. This includes liaising with the ESCAP secretariat to report and monitor progress in implementing the RAF, speaking on behalf of all CRVS stakeholders in the country, and it is a crucial role in the implementation of the Regional Action Framework. At the time of the workshop, there were still 19 countries who had not nominated their focal point, with the main gaps located in north and central Asia and the Pacific.

32. The representative of ESCAP took the audience through the expected reporting time line. In 2015, countries were expected to submit a baseline report to the secretariat; in 2019 they were expected to submit a midterm report and in 2024, a final report.

33. Finally, she spoke about the governance structure of the RAF; there is a regional steering group, and national CRVS coordination mechanisms. The former provides oversight and guidance for the implementation of the RAF, acts as custodian of the CRVS decade, and facilitates synergies with other regional initiatives. The latter oversee the implementation of the RAF at the national level.

Session 3. CRVS and human rights

34. The representative of OSCE began by mentioning that the organization is the largest security international organization, and that its main concerns are promotion of security, conflict prevention and promotion of the human dimension of security. His main focus of work is population registration and its relevance to fundamental rights and democratic governance.

35. Population registration is regarded as an essential component for ensuring that all citizens can access and enjoy their social, civil and political rights. It is fed by civil registration in addition to information on registration of place of residence. Population registration is common to most OSCE participating States. In these States, it provides the legal and administrative framework for compliance with fundamental commitments and international standards in three distinct areas: the rule of law, the right of universal and equal suffrage and freedom of movement, especially free choice of place of residence. A functional population registration system, among other benefits, facilitates freedom of movement, free choice of place of residence and dramatically increases accuracy of voter lists.

36. The role of the population registration systems in promoting fundamental freedoms and human rights can be seen in terms of the possibility of proving one's identity, of obtaining travel and identification documents, inclusion in the voter's lists and access to social services. Population registration is a tool to enable citizens to exercise their rights. In addition, it is a cost-effective public management strategy, particularly if electronic services are provided by governments.

37. OSCE has developed guidelines on population registration for its Member States. These guidelines focus on the following topics: Background information, and the relevant OSCE commitments and other international standards related to population registration;

Benefits of a well-run system of population registration; Legislative framework for population registration; Types of information stored in a population register and how it should be updated; Designing population-registration systems; and Using technology to share information

38. The representative of OSCE emphasised the costs associated with having no communication or data sharing agreements amongst different agencies. There is considerable time and money wasted both for the citizen and the State, if each authority has its own database, to ensure that a change of personal information is communicated to all authorities. He pointed out that information should be exchanged amongst agencies via a computerized secured network, and that a clear information sharing mechanism should be in place so that public institutions have permanent or periodic access to view only the information required for fulfilling their particular function.

39. The representative of OSCE finished his presentation by indicating that the organization assists participating States in designing a population registration system in terms of choosing either a centralised or decentralised model, developing or reforming the legal framework, defining responsibilities among agencies, the first steps of data collection, gives guidance on updating and storing information, data protection, and sharing information with other public administration authorities. Furthermore, OSCE assists in utilizing population registration to develop systems which assure freedom of movement and free choice of place of residence and access to state guaranteed services and rights.

40. During the discussion, there was some confusion regarding the equivalence of the term “registration” versus “notification”. A representative from UNSD clarified that they are two different actions. The first step, if a medical doctor or health worker was involved in the birth or death, he/she can issue a notification of the event addressed to the civil registrar. The second step is that the civil registrar receives the notification, possibly from the informant, and proceeds with the registration of the event. Unlike notification, only the registration carries a legal value and confers legal validity to the documents and certificates issued.

Session 4. Civil registration as a source of vital statistics

41. This session comprised an introductory theoretical presentation by a representative of UNSD followed by three country representatives, from Turkey, Georgia and Russian Federation, who talked about their use of civil registration data to compile vital statistics.

42. A representative of UNSD made a presentation on the basic characteristics of the civil registration method and system. The four principles of civil registration – that it is continuous, permanent, compulsory and universal, were elaborated. In order for civil registration to be continuous and permanent, the existence of a civil service agency is critical; civil registration has to be operated by a state-run public institution. Registration of a vital event needs to be compulsory by law, hence the importance of the legal framework that spells out the consequences for not complying with the law, yet, it is

always better to rely on incentives rather than penalties. The principle of universality refers to civil registration applying to the whole territory, to all the population and to all citizens abroad. An additional principle is confidentiality, which translates into integrity of individual information and its protection from misuse and is limited only by the need to certify individual information.

43. It was noted that the primary purpose of civil registration is establishing documents provided by law, while its secondary purpose is being the ideal source of vital statistics. The civil registration method and system were presented. The civil registration method refers to the procedure of gathering the basic information on the incidence and characteristics of vital events that occur in the population of the country. This forms the base for the preparation of vital records with legal value and the production of vital statistics. The civil registration system encompasses those institutional, legal and technical settings needed for the performance of civil registration functions in a technical, sound, coordinated and standardized manner. Civil registration system functions include recording vital events; storing, safe-keeping and retrieval of vital records; protection of confidentiality; certificate issuing and other customer services; recording and reporting information on vital events for statistical purposes; and providing reliable and timely information and data to other government agencies.

44. The civil registration system has a legal and protective function. Its fundamental role is the provision of legal instruments to individuals, including the certification of facts relating to existence, identity, civil status and family status. The system establishes identity, parental relationship, inheritance and citizenship, and provides eligibility data for social benefits and age-related items, such as school entry, the right to work and driver's license, not to mention the right to vote. The presentation further outlined the importance of a properly functioning civil registration system and its impact on exercising basic human rights, as it was explained in session 3. A civil registration is needed to safeguard individual rights at the most basic level, like the right to being registered and having a name, and other rights directly contingent to registration, such as the right to vote. In addition, the civil registration system carries a number of administrative advantages, such as access to services and benefits, and statistical advantages such as monitoring cause of death, maternal and child health care.

45. The presentation gave a priority list in terms of vital events, grouping them in three levels. The first level includes births, deaths and foetal deaths; the second level comprises marriages and divorces; and the third encompasses annulments, judicial separations, adoptions, legitimations and recognitions. In addition, the representative of UNSD analyzed the components the legal framework of civil registration – proof of registration, statistical reports, inspection and penalties, and funding. The component of proof of registrations spells out the authorization of officials to issue documents certifying the facts of registration. The component dealing with statistical reports specifies the agency where statistical forms need to be sent, the deadlines for submitting statistical forms, and the ways for cooperation and division of labor among agencies. The component on inspection and penalties establishes oversight procedures, spells authority and defines penalties. The funding component designates source of funding and funding procedures.

46. The presentation included a diagram outlining the structure and interdependencies of the components a civil registration and vital statistical system, highlighting the submission of information from the civil registration authority to the statistical office.

47. In its concluding remarks, UNSD's presentation reiterated the importance of civil registration being an apparatus operated by the government, oriented to providing individual services, legal protection of human rights, proof of civil status, access to services and to producing vital statistics. Finally, the representative of UNSD reminded delegations that the civil registration method is related to the registration procedures and protocols, while the civil registration system refers to the entity in charge of implementing the method.

48. The first country to present on their practice of using civil registration data to compile vital statistics was Turkey, followed by Georgia and Russian Federation.

Turkey

49. The representative of Turkey first enumerated the vital statistics produced by the Turkish Statistical Institute (TurkStat): birth, death, marriage and divorce statistics. The data are collected through administrative registers and have country-wide coverage. She elaborated on the main data sources for the production of vital statistics, namely the Central Civil Registration System which is called MERNIS, and the District Population Directorates.

50. Birth statistics are compiled based on the Central Civil Registration System (MERNIS) since 2001. The resulting statistics are 90% complete within the first year of occurrence, 95% complete at the end of the second year and 100% complete within five years. Figures are revised retrospectively and announced for dissemination each year. The main weaknesses of the birth statistics in Turkey are that the births of newborn infants who died before the birth registration deadline are generally not registered and that 10% of the births are registered with delay.

51. The representative of Turkey talked about the process of compiling birth statistics based on data fed by MERNIS. First, raw data are checked for consistency between current value and values of previous years, followed by data editing. Afterwards, fertility indicators are computed and compared with population and health surveys, as well as with population projection figures. Birth statistics are compiled both by date of occurrence and by date of registration, but analysis is performed using date of occurrence.

52. Birth data are tabulated by place of residence at the level of province and district. The topics collected are the ID numbers of the infant, mother and father, usual residence of mother and father, date of occurrence of the birth, sex of infant, birth date of mother and father; and by linking to the education statistics database, the topics on mother and father educational levels are obtained.

53. The representative of Turkey noted that information on the mother's working status and her urban or rural residence are not collected. Neither are the birth order, the time and method of delivery and the weight at birth of the newborn, as the registration form does

not contain these fields. Furthermore, if the mother is of foreign nationality, no demographic information is collected from her.

54. Regarding the death statistics, the presenter pointed out that compilation has been based on data from MERNIS since 2009. Like birth statistics, death statistics are 90% complete within the first year of occurrence, 95% complete at the end of the second year and 100% complete within five years. Figures are revised retrospectively and announced for dissemination each year. The main weaknesses of the death statistics in Turkey are that newborn infant deaths are generally not registered and that 10% of the deaths are registered with delay.

55. The same production process is followed as with births. First, raw data are checked for consistency between current values and values of previous years, then, data are edited accordingly. Additionally, death data from MERNIS are matched to cause of death records at TurkStat, in order to detect missing records in MERNIS, particularly the cases of newborn infant deaths, as they are most likely to be missed in the civil registration system. Finally, mortality indicators are computed and compared with population and health surveys, as well as population projection figures, in order to benchmark the results. Death statistics are compiled both by date of occurrence and by date of registration, but analysis is performed using date of occurrence.

56. Death statistics are tabulated by place of residence at the level of province and district. The topics collected for tabulations and disaggregations, are the usual residence, sex, date of occurrence of the death, birth date of deceased, marital status; and by linking with the education statistics data base, data of educational level are obtained.

57. The representative of Turkey acknowledged that information on the working status of the deceased, and urban or rural residence are not collected or tabulated.

58. The presenter further described the process of compiling marriage and divorce statistics based on data fed by MERNIS since 2001. Statistics are announced for dissemination each year. The production process is similar to birth and death statistics. First, raw data are checked for consistency between current values and values of previous years, then, data are edited accordingly. Nuptiality and divortiality indicators are computed. Marriage and divorce statistics are compiled and analyzed by date of occurrence.

59. Marriage and divorce data are tabulated by place of occurrence at the level of province. At the district level, tabulations are tabulated by place of occurrence in the case of marriages, and by usual residence of the husband in the case of divorces since in some districts, there are no courts. The topics used for marriage tabulations and disaggregations, are date of occurrence of the marriage, ID number of the couple, their date of birth, their nationality, their previous marital status; and by linking with the education statistics database, their educational level is obtained.

60. It was noted that information of the working status of the spouses is not collected. Furthermore, if the couple are of foreign nationality, their marriage or divorce is excluded from tabulations.

61. Some ongoing improvement efforts were outlined. Measures are being taken to eliminate delayed registration and achieve complete coverage of birth and death registration. Additionally, TurkStat is working on collecting information of nationalities of foreign mothers in birth statistics, and is also developing an urban-rural classification of districts, in order to be able to produce tabulations on this core topic. Furthermore, she mentioned that TurkStat is establishing a birth notification system jointly with the Ministry of Health.

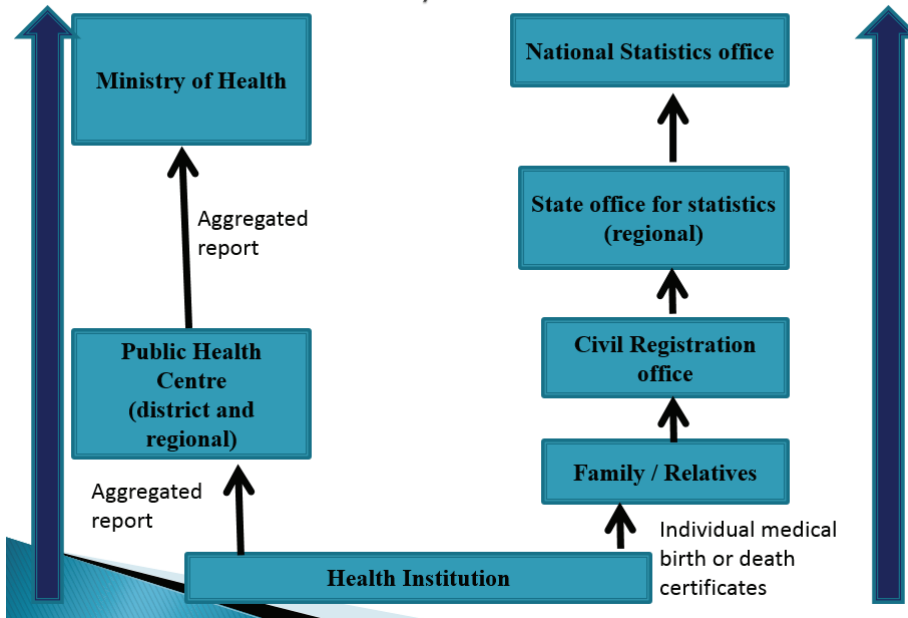
62. By the end of the presentation, the representative introduced the dissemination programme of vital statistics in Turkey. It was noted that vital statistics are presented to users via press releases every year in the format of electronic files available in TurkStat website, both as statistical tables, and as databases.

Georgia

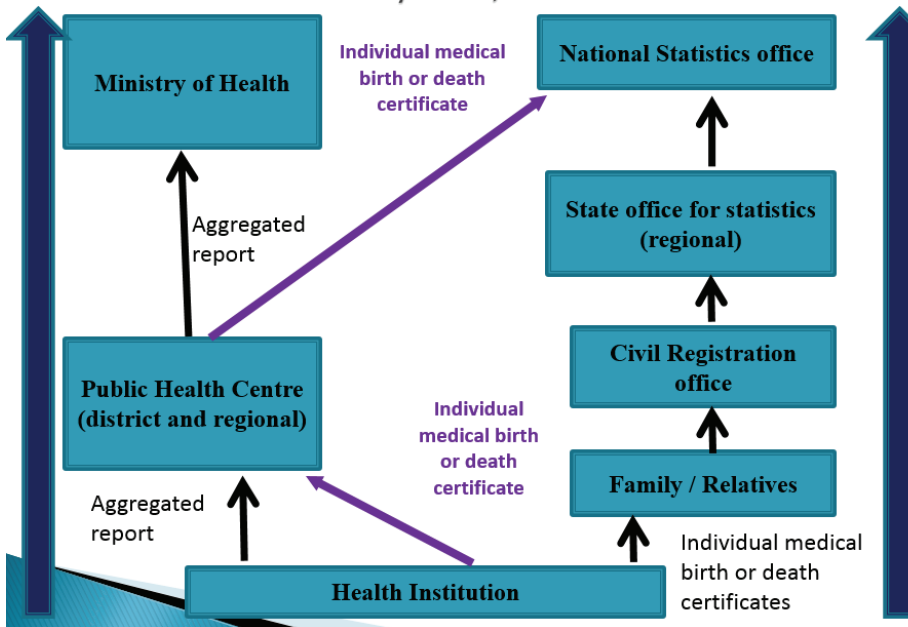
63. The representative of Georgia began her presentation by clarifying that the definition of birth currently used in the country, is consistent with the World Health Organization (WHO) recommendations since 1996; before then, Georgia used Soviet definitions of live birth and still birth. The Soviet definition of birth excludes infants born alive of less than 28 weeks' gestation, of less than 1 000 grams in weight and 35 centimeters in length, who die within seven days of birth.

64. She elaborated on the change of the system of data collection since 2003. In the past, health institutions used to send aggregated reports all the way up to the Ministry of Health while individual medical birth and death certificate issued by health institutions were sent by family to civil registration, and passed to national statistical office. The purpose of the change was to add two more flows of data reporting. Health institutions send individual medical birth and death certificate to district and regional public health centers in addition to aggregated reports. Then health centers submit individual medical birth and death certificates to the National Statistical Office (NSO) in addition to the aggregated reports to the Ministry of Health. This change had a positive impact on the quality of data. The absolute counts of births, deaths and infant deaths increased significantly due to this improved statistical reporting process.

The system of collecting the data of death and birth
The old system till 2003

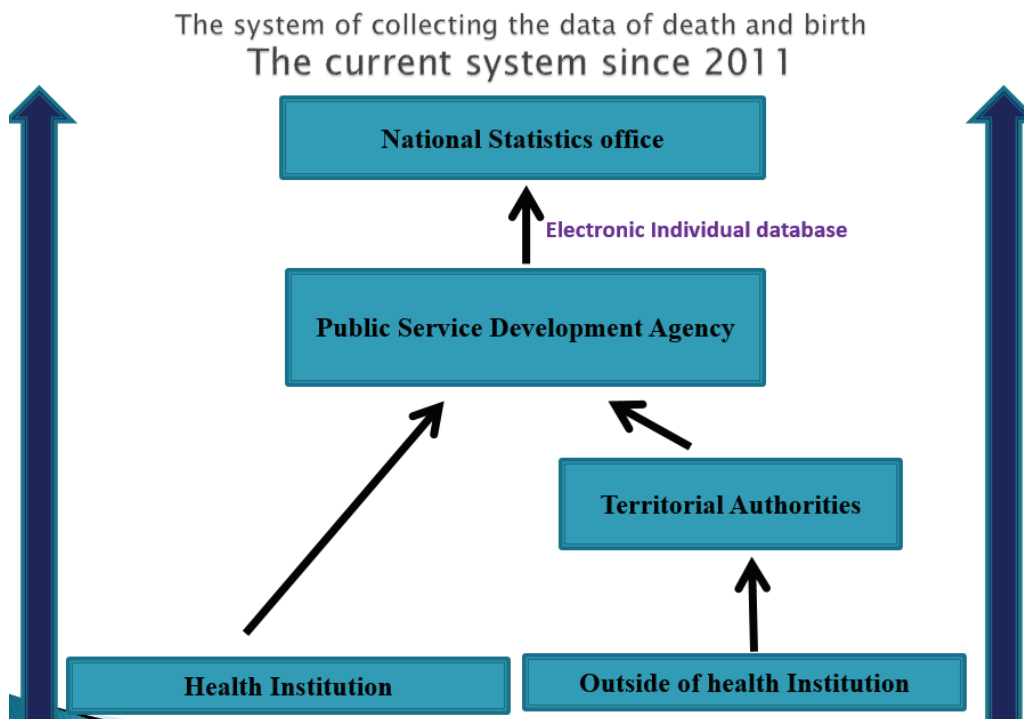


The system of collecting the data of death and birth
The new system, 2003–2010



65. Subsequently, in 2011, another change in the data reporting line was introduced; health centers now submit medical birth and death certificates to the civil registration agency (Public Service Development Agency). There data are compiled together with

data from births occurred outside hospitals, which has further elevated coverage. Finally, the Public Service Development Agency submits an individual-level electronic database to the NSO, so data can be collated and tabulated.



66. The main challenge with data quality is the accuracy of cause of death, given that as much as 55% of deaths have a cause incorrectly classified. If a death occurs within a medical institution, the doctor is required to record the cause of death on a medical death certificate which is sent to Public Service Development Agency. On the other hand, if a death occurred outside of a medical institution, in theory, the local authority is obliged to fill the death certificate according to information given by family members. However, in practice often, cause of deaths is missing. A study is being carried out to shed light on what measures can be taken in order to improve quality.

67. The representative of Georgia finished her presentation by explaining the definitions of marriage and divorce and the system for collecting data on these vital events. Starting in 2011, the Public Service Development Agency submits an individual-level electronic database to the NSO, who is responsible for data compilation and tabulation.

Russian Federation

68. The representative of Russian Federation started her presentation by introducing the federal law regulating the procedure of registering vital events, encompassing birth, death, marriage, divorce, adoption, paternity and change of name. State registration is done by the bodies of civil registration by law. When there are no offices of civil registration, there are authorities designated to perform those functions. The most update version of

registration forms was made by the Ministry of Justice in July 2015. Two copies of the registration forms are kept, one for the applicant and one for the civil registration office. Data are also stored electronically.

69. Per the federal law, all data should be sent to the national statistical office (RossStat). Information submitted includes registration of births and death up to one year, all registration of marriage and divorce. Submission is done electronically. Registration forms of newborns are matched with records from health institutions while registration forms of deaths are matched against medical death certificates.

70. The definition of live birth in Russia is fetus of at least 22 weeks and 500 grams and showing signs of life. Birth registration can be in the civil registration office in the locality of place of birth or place of residence of mother or father.

71. A glance was taken at the topics covered when registering vital events.

72. When compared to core topics recommended in *Principle and Recommendation for a Vital Statistics System, Revision 3*, topics not covered in their birth registration form are attendant at birth, mother's duration of residence in usual place, children born alive to mother during her entire lifetime, still birth to mother during her entire lifetime, date of last previous birth and father's education.

73. All core topics are covered for death, marriage and divorce.

74. It was noted that registration of marriage can be done in any civil registration office in the territory of the Russian Federation at the choice of the couple and not restricted to the locality of place of residence of the marrying couple.

75. Vital statistics is disseminated in the official website of RossStat monthly and annually, as per statistical law in Russia.

76. After the presentation by Russian representative, the floor was open for discussion. During the discussion session, delegations expressed a keen interest in civil registration practices in Turkey. There were many questions directed to Turkey in this session. The first one was whether there is classification of cause of divorce there. A representative from Turkey answered that the information of cause of divorce is collected from the registration form but no classification. Registration of religious marriage was also asked because it is common in Muslim countries that marriage is conducted with the religious authority but not civil registrar. A representative from Turkey clarified that religious marriage is not recognized by law in Turkey and only civil marriage is counted in the purpose of statistical collection. However, births from couples that are married only by religious marriage (not civil marriage) are registered because the birth certificate is the root document for any identity related documents. Other delegations were interested in the definition of on time registration in Turkey and whether or not there is a deadline. It was answered that in Turkey, birth registration is required within 30 days after birth and within 60 days after birth to Turkish citizen residing abroad. Registration of foetal death was touched upon. A representative from Turkey clarified that foetal death is not registered. Related statistical figures are from surveys. It was also confirmed that all

divorces had to be declared by court in Turkey. Finally, a concern was raised regarding data confidentiality. A representative from Turkey clarified that ID number is collected as a unique identifier for the purpose of joining different tables but will never appear in any form of statistical dissemination.

77. One delegation was interested to learn what the punishment can be for no registration. A representative from UNSD explained that there is a fine in most countries, or even jail time in some countries, which is rarely applied though. However, the representative of UNSD emphasized that it is the responsibility of the civil registration agency to guarantee that people have all the means to register their vital events.

78. There was also confusion as to why there is no interest in vital events of foreign nationals in Turkey. A representative from UNSD responded that foreigners' marriage should be counted if they are permanent residents but not visitors.

79. At the end of the session, Georgia further shared their experience in birth and death registration. In Georgia, medical institutions have to report both. In addition, a new measure is being introduced so medical institutions will have to pay a fine if they don't fulfill this obligation.

Session 5. Topics and themes to be covered in a vital statistics system

80. A presentation was made by UNSD reviewing the core and additional topics in the *Principles and Recommendations for a Vital Statistics System, Rev. 3*; explaining the interdependence between global recommendations and national experiences; and elaborating on the criteria for inclusion or exclusion of topics at the national level. A topic was defined as a statistical variable that collects information on the event and on the persons involved in the event.

81. A typology of topics was also given, first in terms of priority, in recognition to the fact that not all countries will be able to collect information on all topics; core topics represent an immediate goal. Secondly, in terms of how the information was collected; it either can be a direct topic if the information was given directly by the informant at the time of registration, or it can be a derived topic if the information was inferred from the data collected at the time of registration.

82. The presentation focused on describing all direct and derived topics for each vital event to be recorded in the civil registration system. It elaborated on how birth and death statistics could be derived from a civil registration system and what items are recommended to be collected in the statistical reports for vital events. A quick glance was taken at the topics that can be collected from other sources, such as censuses and surveys.

83. Some examples of tabulations using the recommended topics were given. Tabulations can contain absolute figures on the vital event, classified by certain characteristics, or relative indicators that involve the population at risk of the vital event.

The presentation concluded by pointing out that there is no substitute for a well-designed and well-maintained civil registration system as a source of data for the production of vital statistics.

84. After the UNSD presentation, a question was asked on whether gestational age was important. A representative from UNSD answered that this used to be a core topic but not anymore.

85. Delegations were also concerned about the various definitions of urban and rural across countries. A representative from UNSD acknowledged that there is no one single definition applicable to all countries because of national differences in the characteristics that distinguish urban from rural areas. Countries must establish their own definitions in accordance with their own needs if there are no regional recommendations on the matter.

86. A representative from Turkey shared their difficulties in collecting and compiling birth order. UNSD made it clear that birth order is a core topic and it can be derived from linking civil registration with health records.

87. There was some confusion between date of occurrence and date of registration for marriage and divorce. Only date of registration is collected in Armenia. A representative from UNSD replied that both date of registration and date of occurrence are core topics. By collecting both, we can tell whether there is a lag between the two, which serves to evaluate the quality of data.

88. In addition, the inclusion of place of registration was also not clear to some delegations. UNSD emphasized that place of registration and place of occurrence serve different purposes. Place of registration is used to monitor performance of civil registration system while place of occurrence is used for planning purposes at the lowest geographical level.

89. The issue of birth registration of children born abroad and children of foreign parents was raised, asking whether there was any international standard for birth registration of these two specific groups. UNSD replied that there is no international standard but one should bear in mind that birth registration is always one time only in anyone's entire life. People can only own one birth certificate. When people move to a new country, a set of legal procedures may be needed to lead life and have access to services, but not birth registration.

90. A representative from ESCAP added that it is important to make a distinction between birth registration and granting citizenship. The issuance of birth certificate does not necessarily lead to granting citizenship. Children are required to be registered in the country where they were born, irrespective of citizenship regulations of the countries.

Session 6. Population registers, population censuses and surveys as a source of vital statistics

91. This session was comprised of an introductory theoretical presentation by a representative of UNSD followed by one country representative who talked about the development of their national population registry.

92. A representative of UNSD presented the nature, use, advantages and limitations of population registers, censuses and surveys in the production of vital statistics. The population register was defined as a mechanism of continuous recording and coordinated linkage of selected information pertaining to each member of the resident population of a country in such a way to provide the possibility of determining up-to-date information concerning the size and characteristics of that population at selected time intervals. It was highlighted that the primary function of a population register is not statistical, but administrative.

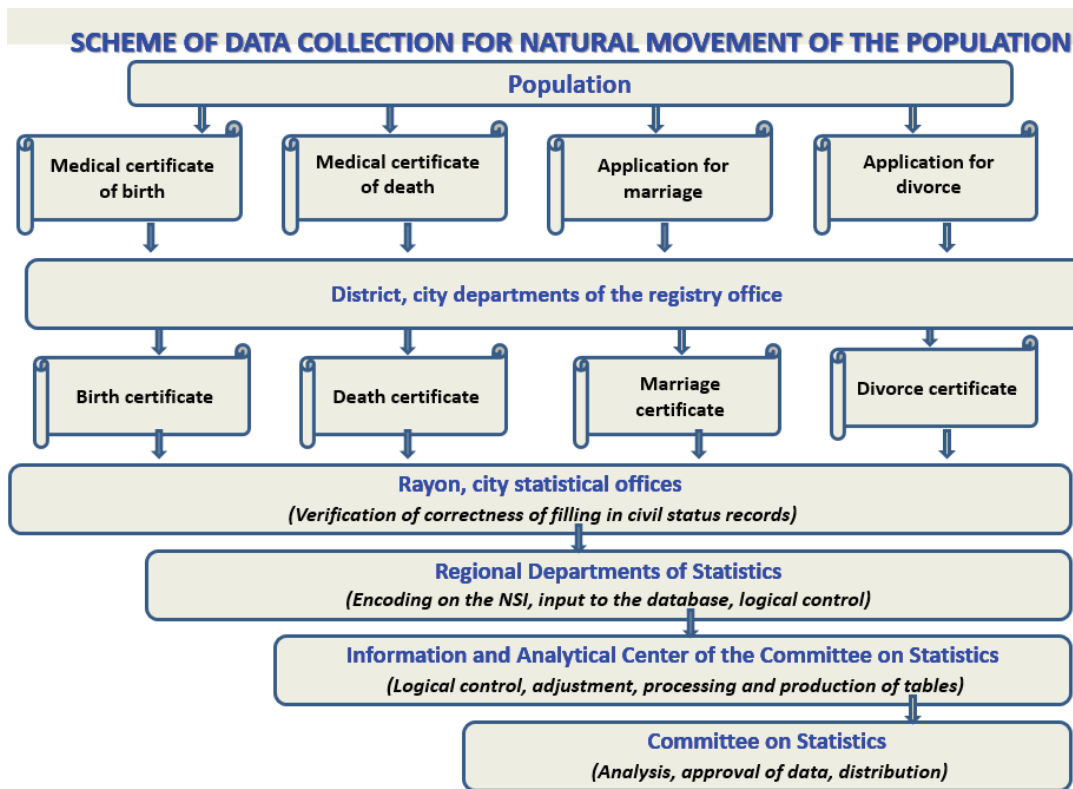
93. The presentation included a diagram outlining the structure and interdependencies of the components a civil registration and vital statistical system, where it was showed how population registers censuses and surveys fit in such a system.

94. Some of the issues facing the implementation of population registered were elaborated upon. For example, the determination of what population will be covered by the register, and the particularities of usual resident population, citizens temporarily abroad, non-citizens temporarily in the country, and diplomats, as well as the question of legal status of certain segments of the population. The recommended content of a population register was also presented.

95. In addition, the links between civil registration and population registers were clarified, explaining the different institutional arrangements that these components can have at the national level. Civil registration and population registers can both belong to the same agency, but they can also be run by separate agencies. Irrespective of this, if a government decides to have a national population register, making the civil registration system a vital component that feeds information into a computerized population register will generate relevant, accurate, timely and comprehensive vital statistics.

Kazakhstan

96. A representative of Kazakhstan first elaborated on the main source of vital statistics -- the administrative data from local registries. There is no punishment for late or no registration but people have no access to certain services without registering their events. A diagram of data flow was then presented. For birth and death, notifications are sent by health institutions to local registration offices in the form of medical certificates. For marriage and divorce, applicants file respective forms at the local registration offices, which then send the information to city statistical offices, followed by regional statistical offices. Then data go to information analytical center of committee on statistics. Finally, data are analyzed, approved and disseminated by the statistical committee. Dissemination of vital statistics is done monthly, quarterly and annually



97. He further elaborated on the development of population register since 2011. Work was begun by the creation of an information system for the management of the National Population Register (NPR) in 2011. Together with other state bodies, rules for information interaction have been developed and approved. In 2012 and 2013, work continued on the development of the NPR. The methodology for maintaining the NPR has been approved. In 2014 and up to the present, work continues on the development of the NPR and analysis of information for the computation of demographic indicators based on information from the NRC.

98. A diagram of the links between different government agencies and population register was presented. The national population register comprises data from Ministry of Justice, Ministry of Health, Ministry of Social Welfare and Employment which is under development, Ministry of Interior and Department of National Security. All this information is inter-connected by ID number.

99. During the discussion, the use of ID number as a link between the population register and other systems was of great interest to delegations, particularly the question of which authority is responsible for assigning ID numbers. It was responded that every person is given an ID number at the time of birth registration by the Ministry of Interior. Such ID number comprises date of birth, place of birth and other characteristics. A representative of Armenia shared their difficulties of using ID number as the link. In Armenia, ID number existed long before the creation of population register but it was not being used in most administrative process. Therefore, when the population register first rolled out, there was no information of people's ID numbers in various databases. Names, family

names and other related information have to be used as a temporary solution to link the population register and other systems. A lot of work has been done to transit to use of ID number as the link, yet a long way to go.

100. A representative of Mongolia sought advice on which agency should be the ideal caretaker of the population register. In the case of Mongolia, they are establishing a population register under the authority of NSO, but encountering a lot of troubles. UNSD suggested that experience shows that it is better to have a separate agency. If the NSO is responsible for managing the population register, it will get overwhelmed with requests from members of public. It would be necessary to change completely the profile of the NSO. In Scandinavian countries, where population register has been developed for long time and plays an important role, NSO has access to the population register but they don't operate it. OSCE added that population registration can be treated as adding registration of place of residence to civil registration system. It is up to authorities to decide where it belongs. It could be a Ministry (such as Justice), or local authorities for registration and a national authority for communication among local offices, to mention a couple of possibilities. There could be a "cloud" or hub database to store information; and the right to edit, input, erase is in the hands of all the contributing authorities. For example, Bosnia and Herzegovina have completely separate systems, but one hub. ESCAP added that inter-agency coordination is more important than deciding where to place the population register.

Session 7. Quality assessment and assurance in the civil registration vital statistics system

101. This session comprised an introductory theoretical presentation by a presentative of UNSD followed by ESCAP presenting the Regional Action Framework reporting and regional reviews.

102. UNSD emphasized the importance of maintaining high standards of quality in civil registration and vital statistics; the basic framework was presented in detail, exploring standards and a range of methods. Evaluation activities are essential for improving systems that have deficiencies and maintaining systems that function satisfactorily. To maintain the goal of universal coverage, central and sub-national registration offices need to establish regular protocols to assure that all local registration areas are properly performing registration functions. The protocols should also examine other quantitative and qualitative aspects of the registration of vital events. In addition to internal management and surveillance protocols, objective assessments by external authorities are also recommended. There are two elements in the evaluation framework that are complimentary to each other: quality assurance and assessment. Quality assurance deals with the process for producing information, while quality assessment has more to do with information that has already been produced.

103. Quality assurance encompasses each stage of the operations of civil registration and vital statistics systems, i.e. collection, transmission to electronic format, processing and dissemination. The registration authority must ensure that all local registration areas carry out the required functions, that every vital event has a record in the system, and that all local offices transmit the records to a higher-level registration office

104. Quality assessment entails specific studies that aim to answer specific questions. These questions could relate to the coverage of the registration of a vital event at the country level or in a smaller area, the accuracy of one of the variables recorded or published in vital statistics or the overall status of civil registration and vital statistics systems. Quality assessment exercises can be conducted regularly or on an ad hoc basis.

105. The quality of data should be measured according to the standards of completeness, correctness or accuracy, availability and timeliness. The methods used to assess data quality can be divided into direct and indirect methods. Direct methods consist mainly in matching registration records with records from an independent source. Several independent sources – civil registration records (for an independent vital event), administrative and social records, population census and sample survey records, and dual record system – may be used for making a direct evaluation.

106. A practical example from health services of the state of Queensland, Australia was given to illustrate how to use direct method to assess data quality. In this case, the primary source is Perinatal Data Collection (PDC), which encompasses information about all live births in Queensland and all stillbirths of at least 400g birth weight or 20 weeks of gestation. The data is maintained and disseminated by the Health Statistics Branch, which is used not only in the national reporting but as key performance indicators to assist with service planning and for research into perinatal and obstetric care and outcomes. The secondary source is the birth registration maintained by the Queensland Department of Justice and Attorney-General. The linkage file is a file containing person identifiers, which can be used for joining database of various administrative sources (including Perinatal Data Collection and birth registration data). This file is managed by the Health Statistics Branch (HSB).

107. The result shows that 2.7% of PDC records cannot be linked to the registration data. There are significant differences in linkage between Indigenous mothers (15-18% under-registration) and non-Indigenous mothers (1.8% under-registration) Remote and very remote geographical areas tend to have high rates of under-registration, however, this effect is only found for births to Indigenous mothers in these areas, but no noticeable differences for non-Indigenous mothers in terms of registration coverage. There is a slight differential by the marital status of the mother. What's more, younger non-Indigenous mothers are less likely to register births, while the proportion is constantly high across all age groups for Indigenous mothers. Hospital and Health Services (HHS) in the localities of high proportions of Indigenous population also show high rates of under-registration.

108. Indirect methods entail demographic analysis. The following methods were described: comparison of trends, delayed registration, comparison with census data and comparison of rates.

109. Advantages of direct methods include a more accurate assessment of registration completeness and that they have the capacity of indicating which sources are under or over registration, particularly if the test is carefully designed. Direct methods can also improve registration by identifying unregistered vital events. On the other hand, their limitations include high costs, a heavy dependence of accuracy upon the choice of the second source, which is unlikely to be truly independent and that they can be time consuming or computer-intensive. The Advantages of indirect methods include their capacity to offer a prompt assessment of vital statistics completeness and to indicate whether a data quality problem exists. However, they rely on the assumptions that may not hold and they are heavily dependent on the quality of census data.

110. The choice of implementing direct or indirect methods depends on the needs of the analyst and the resources available. In some cases, a blend of direct and indirect methods may be more appropriate than either one. Some factors to take into account when deciding which type of method to use are the objective of the study, the degree of precision needed, the time frame for obtaining results, the type of event to be studied and the resources available.

ESCAP

111. A representative from ESCAP first recapped the main components of the Regional Action Framework for Asia and the Pacific, namely, the three goals, the 15 targets set by each country, the six key principles, the seven action areas and the expected reporting time line.

112. There are various ways that the Regional Steering Group provides support for members. An established reporting structure was set up during the Ministerial Conference and described in the Regional Action Framework. The Regional Steering Group (RSG) for CRVS provides oversight for reporting through the ESCAP Commission. A standard reporting template is currently under development. There are also guidelines provided for target setting and monitoring. Details of this were covered later in session 13.

113. It is expected that after countries submit their reports, a synthesis report will be prepared by ESCAP secretariat, development partners and the Regional Steering Group. This report will highlight the current situation and progress so as to give development partners and donors an overview of where assistances might be needed. It can also highlight the importance of CRVS to non CRVS stakeholders in member countries and gain ongoing political commitments for strengthening CRVS. Last but not least, it provides a structured way for countries to get an overview of the current situation, especially how their countries perform compared to other peers in the region.

114. Elements of the baseline report include the most recent nationally representative baseline data for each target, the national target value for each target, information on

progress with CRVS improvement steps and activities, the report of any comprehensive assessment conducted in the country if available and any national CRVS strategy if available.

115. The timeline for 2015 baseline report is set. ESCAP Secretariat and the RSG are supposed to complete the reporting template in August and September 2015. Then the template will be circulated to all national focal points by 1 October 2015. The deadline for submission of baseline report is 1 December 2015. In January and February 2016, the secretariat will prepare a synthesis report for submission to the ESCAP Commission in May 2016.

116. At the end of the presentation, the representative from ESCAP acknowledged that it is unlikely that all countries can reach all the targets by the end of the campaign.

117. During the discussion, a representative from Georgia expressed her concern on whom the RSG would send the template to in her country, since there was no focal point in Georgia. ESCAP replied that it will be sent to the Ministry of Foreign Affairs, National Statistical Office or other stakeholders if there is no focal point in the country.

Session 8. The role of health institutions

118. This session comprised three presentations, one by UNSD focusing on the role of health institutions, one by WHO dealing with cause of death certification and the last one was a representative of Turkey talking about the role of health institutions in collecting cause of death information in their country.

119. The first presentation emphasized that this topic was added as a stand-alone chapter to the Principles and Recommendation for a Vital Statistics System in its third revision, given the prominent part that the health sector plays in the occurrence and notification of two of the most important vital events, i.e. births and deaths, and in the certification of cause of death. In addition to these functions carried out within the vital statistics system, information collected by health institutions is crucial in generating health statistics which provide irreplaceable information regarding the overall health of the population, and, in turn, the functioning and the needs of the public-health system.

120. The Civil Registration Law often designates the head of the health institutions as responsible for acting as informant of births, foetal deaths and deaths occurring in their institutions. In practice, this results in having a secondary civil registration office located in the health institutions, making the information of occurrence fast-flowing. Population (parents and relatives) are pointed to the registrar's office within the health institutions where the registration of the event takes place and certificates are issued.

121. In cases where the registrar's office is elsewhere and individuals are not able to register the event within health sector premises, population (parents and relatives) have to go to the registration offices and bring the birth notification document provided by the health institutions with them.

122. The presentation highlighted that health institutions are not civil registration entities, as they do not have the authority to issue certificates. Only civil registrars have the authority for legitimate registration. Health institutions must not be distracted from their primary function, which is to provide health services. Often, however, health institutions are tasked to submit statistical reports on vital events; this will enable the production vital statistics. To illustrate these linkages, the presentation included a diagram outlining the structure and interdependencies of the components a civil registration and vital statistical system, where it was showed how health institutions fit in such a system.

123. Equally important from the public health aspect is the cause of death. This information must be included as part of the record by the registrar and submitted for statistical processing. The presentation also mentioned the WHO standards for deriving and collecting cause of death.

WHO

124. The second part of the session consisted in a presentation delivered by the representative of WHO addressing medical certification of cause of death (COD) in detail. Traditionally, the data fed to civil registration and vital statistics systems, either centralized or decentralized, is mainly hospital notifications, mortuary data and police records. More innovations are encouraged to be applied to strengthen civil registration and vital statistics systems. Active collection, including verbal autopsy, Maternal, Newborn and Child Health (MNCH) tracking systems, Maternal Death Surveillance and Response (MDSR) processes and survey/census collections are recommended. Outreach in hospitals, at “one stop shops” and immunization points, is another suggested approach. As a result, better health data can be produced, aided by the civil registration and vital statistics system.

125. The four major sources of mortality information are civil and sample registration, health care facilities, census (by asking deaths in household in the last 12 months) and household survey (by asking deaths in last year, or sibling survival or orphanhood). Age and sex are collected in all four sources while only the first two sources include cause of death on a regular basis, the latter two will only include COD if verbal autopsy follow up for reported deaths is implemented. There are different kinds of issues with these four sources. Civil and sample registration record cause of death only if deaths are medically certified or verbal autopsy is conducted. Health care facilities only reflect deaths in populations using facilities. As for census and survey, standard demographic techniques necessitate strong assumptions, which carry challenges to assess completeness of birth and death reporting. Finally, getting cause of death from verbal autopsy is not straight forward and cannot be treated as face value at the individual level.

126. The presentation included a diagram outlining the flow of recording COD. The process was explained step by step in detail, from death notification and examining to certification and coding as the last step.

127. The presenter further described the process of certification in the ideal world. It starts by notifying the death to physician within one hour. The physician should be

present within 2 hours. Then the physician examines the surface of the dead body for colour, signs of injury or disease. He/she should also verify all openings for foreign bodies, injuries or suspect color. After that, he/she shall explore circumstances with persons living in the same household, verify environment for signs of vomit, blood, fight, plausibility of described circumstances, and check the drugs taken by the decedent. In the end, he/she should read medical reports or files as present. Ideally the physician is encouraged to get in touch with family doctor of deceased.

128. If death is identified as non-natural, there may be legal issues so police and justice usually take charge if additional inquiries are deemed necessary. In the normal case, medical certificate of cause of death is filled by medical doctors. After medical certification, notification of death to the registrar may be done by family, hospital or undertaker, depending on country practices.

129. In the past, health sector worked independently from CRVS system. Health data including birth and cause of death was sent to the Ministry of Health to study disease pattern, morbidity and cause of death by age, sex etc. while civil registration data was sent to statistical office to produce demographic statistics. However, it is recommended that CRVS system and health sector share the information as a complementary source so that quality of data can be enhanced.

130. The presentation highlighted the roles of medical doctors and coders. Doctors act as certifiers. The criteria of good quality of diagnosis, operation notes and any other doctor notes are correctness, completeness, specificity, timeliness and readability. Similarly, coders are responsible for good quality of ICD-10 codes allocation, i.e. correctness, completeness, specificity, sequencing and timeliness.

131. Several global standards are established to enhance the comparability of mortality data. The international statistical classification of diseases and related health problem (ICD) is used to code and compare causes. The international form of medical certificate of death is used to record all the conditions relating to the death. There are also other ICD rules used to select and modify the underlying cause of death.

132. To correctly record cause of death, a clear definition is essential, which is “the disease or injury which initiated the train of morbid events leading directly to death, or the circumstances of the accident or violence which produced the fatal injury”. In addition, doctors should have relevant medical background to carry out the inquiries and examination and establish the relationships between the facts. Besides, medical doctors need not only training in examination and exploration, but also frequent practice to keep skills updated. Last but not least, doctors should understand why the quality of cause of death data is so important. The chapters of ICD-10 and an example of international form of medical certificate of cause of death were included in the presentation for reference.

133. The importance of medical certification of death and cause of death was highlighted. Legally speaking, access to civil registration is a legal right to each individual. At the same time, it is legally required to certify the occurrence of a death and to define the nature, namely whether the cause of death is natural or not. From the

statistical point of view, cause of death by sex, age, ethnic group, residence and other socioeconomic attributes is a crucial subject in demographic analysis. Furthermore, statistical information on deaths by underlying cause is important for monitoring the health of the population. In particular, data for some specific groups, like infant and maternal deaths are crucial in public-health interventions and maternal health service planning.

134. What has been discussed so far was on the premise of ideal world. What if no medical doctors are available to conduct certification? Verbal autopsy is an option to solve the problem. Verbal autopsy is a method used to ascertain the cause of a death based on an interview with next of kin or other caregivers. The interview is done using a standardized questionnaire that elicits information on signs, symptoms, medical history and circumstances preceding death. The cause of death, or the sequence of causes that lead to death, is assigned based on the data collected by the questionnaire and any other available information. There are rules and guidelines, algorithms or computer programs that aid to determine the cause of death.

135. Besides cause of death, the presentation emphasized the global value of mortality data. It is a key input to Millennium Development Goals, in the context of child and maternal mortality goals, HIV/AIDS, tuberculosis and malaria goals. Mortality is also a key measurement of progress in the Post 2015 Development Agenda. Availability of mortality data by different causes helps identify problems, measure effectiveness of policies hence reducing deaths in all perspectives. A few selected WHO reports in year 2011 with substantial mortality data inputs were shared with participants.

136. As said, mortality data is essential for global health planning. For instance, to achieve the propose Universal Health Coverage goal, health system planning cannot succeed without health data, among which mortality statistics is of great importance. Better planning means determining efficient and effective delivery, for example, medicines and vaccines, which requires knowledge of service in need, where deaths are occurring and why, what is needed for prevention.

137. At the end of the presentation, the WHO ICD training tool was introduced. ICD-10 Interactive Self Learning tool is provided with two versions, a full ICD-10 training version containing all modules and the cause of death certificate version for professional certifiers. More information can be found in the website <http://apps.who.int/classifications/apps/icd/icd10training/>

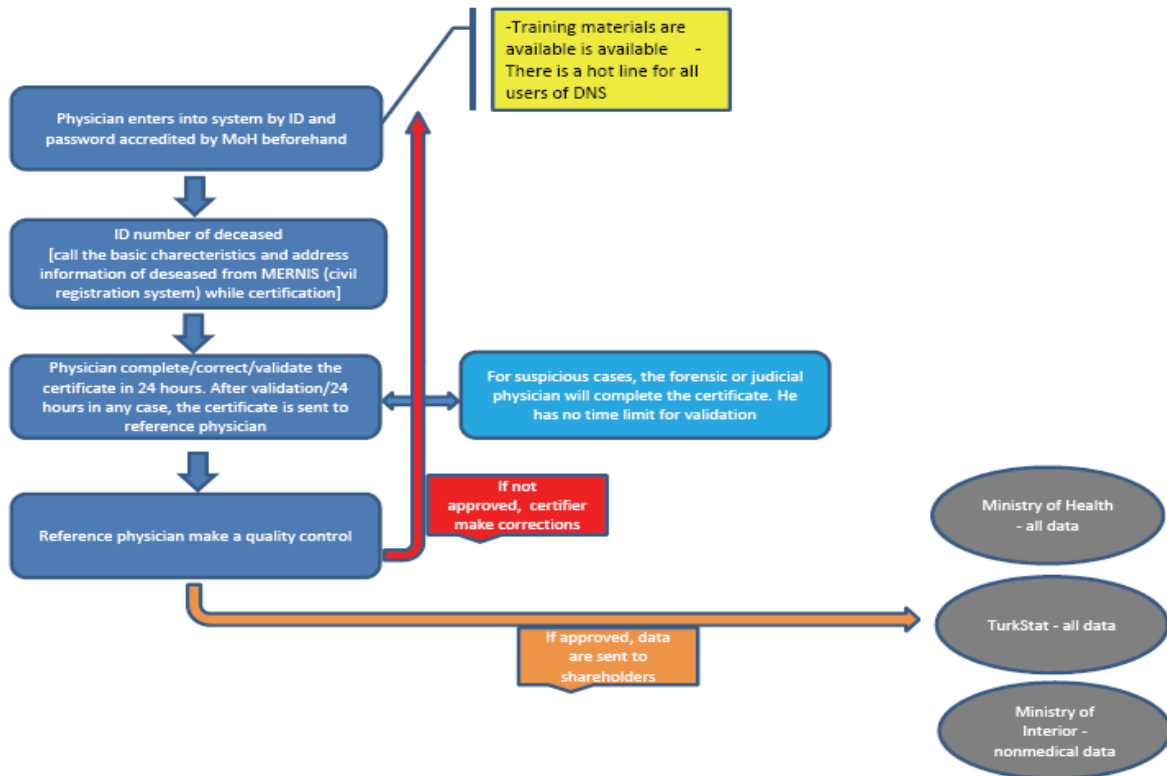
Turkey

138. A representative of Turkey gave a presentation on the role of health institutions in Turkey, particularly the collection of cause of death.

139. Legislative issues were first elaborated on. In Turkey, laws assign health institutions as the main responsible agencies in identifying death events. For suspicious cases, responsibility is shared by prosecutors and judicial physicians.

140. The historical background of COD certification in Turkey was introduced. International death certificate and ICD-10 have been adopted since 2009. The process of certification was all paper based before 2013, including issuing burial license and sending statistical form of death registration. An electronic death notification system (DNS) was launched in 2013.

141. A screen capture of the death notification system was presented, followed by a diagram outlining the procedure of using DNS.



142. Preliminary coding is done at regional level in each of the 26 regions of Turkey. There are between two and ten coders in each region according to its size. At central level, four coders are in charge of quality control and training. All coders use a specific data entry program to access the Ministry of Health database to translate text description of COD fed by DNS to international code of disease.

143. In conclusion, the role of the Ministry of Health and health institutions is critical for ensuring quality certification and universal coverage. Only the diagnoses made by physicians are accepted. The efforts made by the Ministry of Health, such as implementing the duty physician and family physician systems are useful to increase coverage. Trainings on certification are critical to improve the quality of certification. Since 2013 with the enforcement of DNS by the Ministry of Health, there has been a visible improvement in coverage and timeliness in the dissemination of results.

144. The role of national statistical office, ie. TurkStat, is equally important as the process of producing qualitative statistics of cause of death does not stop at the step of certification. The text results have to be translated to correct codes. In this sense, it is recommended to provide training to coders at least once a year. In addition, there should be arrangements to facilitate easy interactions between regional coders and central coders.

145. After the last presentation in this session, delegations discussed the e-learning platform developed by WHO. They asked for the e-training in languages other than English. The representative of WHO responded that they were working on Russian translation with the WHO collaborating centre in Moscow. Delegations were also keen to have training on coding for their countries if possible. WHO mentioned that their regional office for Europe in Copenhagen has a range of activities in the region and encouraged countries in the region to join. She emphasised that medical doctors are certifiers not coders. It would be too expensive to have doctors coding while it is possible.

146. There were some confusions regarding which document should include cause of death, whether the legal death certificate issued to family members or death record retained at the register. If both, there were concerns about the former due to confidentiality. The representative of Georgia shared that cause of death is written only in the medical certificate but not in the certificate issued to families from civil registrar in their country. WHO explained that cause of death is important for planning and introduction of preventive measures; that is why it is a core topic in vital statistics. A representative from UNSD added that cause of death is written in the medical certificate and the confidential portion of death notification form, which is transferred for statistical purposes. He emphasized this information is not public information so it is not required to be in the certificate issued to family members according to the principles and recommendation for a vital statistics system. A representative from Kyrgyzstan shared that often in their country, a false cause of death is used in the certificate issued to families to protect deceased from stigma, especially in case of AIDS. A representative from Turkey added that in Turkey deaths with no physician certification are only included in general death statistics but not cause of death statistics.

147. A question on the location of coders in Turkey was raised. A representative from Turkey clarified that coders are located in the regional offices of TurkStat while quality control of coding is performed at the central level.

148. Finally, the representative of OSCE mentioned that electoral lists serve can serve to evaluate how good death registration is.

Session 9. National-level designation of responsibilities and organizational structures of a civil registration system

149. This session comprised an introductory theoretical presentation by a representative of UNSD followed by three country representatives who talked about their civil registration operational arrangement at the national level.

150. UNSD elaborated on two components of civil registration, namely the legal framework and the organizational structures. National legal frameworks are made up in the first place by the Constitution, which is the highest law of the land. Being generic in character, Constitutions spell out major concepts such as individual rights and citizenship, among others. In second place, the Laws, derived from the Constitution, give substantive as well as procedural provisions. Some laws are more substantive than others, such as the Family Law and the Criminal Law, while others are more procedural, like the Law on Criminal Justice Procedure and the Civil Registration Law. The third echelon of a national legal framework is the Regulations, which in turn are derived from laws. Regulations outline procedural provisions and are easier to enact.

151. The principles of the civil registration legal framework – legality, protecting interest of individuals, official status, compulsoriness, simplification and gratuity – were described and analysed. The principle of legality means that the civil registration is supposed to reflect reality, i.e. the events that occurred, once registered, become legally valid. Protecting the interest of the individual translates into providing ready access to the service, full information on procedure and outcomes, ensuring confidentiality and privacy of individual information, as well as easy retrieval of information. The principle of official status states that the law must give the registration agency the power and authority to promote registration; update or correct entries in the register; and ensure the integrity of the civil registration system. Compulsoriness of registration refers to the fact that the law has to spell out the obligation to register; and that entries in the civil registration constitute the only official and legal proof of civil status. Moreover, the registration agency must provide the population with free services and should strive to achieve simplicity in the registration procedures.

152. The components of the legal framework were also examined. The civil registration law needs to set the general provisions, starting with the definition of those vital events to be registered, the compulsoriness of registration, collection of statistical items, confidentiality, privacy, access and safekeeping, storage and preservation of records. The civil registration organizational structure must also be captured in the legal framework; the agency in charge of registration must be designated, along with its chief registrar, local registrars, registration units, notifiers, and informants, including authority and responsibilities for each of them. The civil registration law states the sphere of competence of the civil register, in terms of its responsibility for completeness and designation of place of registration. Furthermore, the law sets out what is the content of the register and establishes deadlines for making entries in the register. The legislation indicates specific procedures for registering each type of event and designates informants for each type of event, too. Incentives for registration; sanctions for non-compliance; authorization and procedures for amending records; as well as authorization to officials to issue documents certifying the facts of registration are also spelled out in the legal framework. The statistical role of the Civil Registrar is likewise contemplated in the law; it specifies the agency where statistical forms need to be sent, the deadlines for submitting statistical forms and the mechanisms for cooperation and division of labor. Legislation should include designation of oversight authority, procedures and penalties, as well as sources of funding and funding procedures.

153. The terms of the administrative and organizational structures of civil registration should be stated in the relevant law. Depending on the judicial, political and administrative circumstances, as well as history and tradition the legislation assigns the authority for registration of vital events to a newly formed or an existing institution and establishes the system as centralized or decentralized.

154. A centralized system is characterized by a central agency responsible for civil registration with national standards and uniform registration procedures. The central agency administers and manages the system nation-wide, conducting supervision and evaluation of local registration offices. It is also responsible for coordination with other agencies, such as statistics and health. Advantages of centralized systems include having in place a standard legal frame for the registration system, promoted by uniform legislation; it also facilitates interpretation and enforcement of norms and regulations and allows for uniform procedures for recording, including certification and release of records. Centralized structures enable maintenance and control over the entire system, facilitate nation-wide research, and make the introduction of new standards and technologies easier. In addition, training of registrars is simpler if there is a single central agency responsible for civil registration.

155. In a decentralized system, civil registration can be administered at the level of major civil division. However, there still exists the need for an agency at the national level to harmonize methodologies, procedures, definitions and classifications, and to act as the clearinghouse. This arrangement is common in countries with federal political system.

156. The introductory presentation concluding by remarking that irrespective of the organizational paradigm – centralized or decentralized – the registration takes place at the local level. Consequently, the structure of the civil registration units is the building block of the system, and so is the role of local registrars. The representative of UNSD emphasized the importance of an inter-agency coordination body built into both the civil registration and the vital statistics systems in order to run a smooth and efficient operation.

157. The first country to present on national-level designation of responsibilities and organizational structures was Mongolia, followed by Iran and Georgia.

Mongolia

158. The representative of Mongolia first introduced the size of population and territory of Mongolia. The first official registration begun in 1951. The population of Mongolia is dispersed over a vast territory; about 60 percent of the population lives in the countryside. The predominance of nomadic pastoralism creates considerable obstacles to planning and implementing state policy regarding coverage of civil registration.

159. With the aim of making every citizen participate in civil registration, according to Government Resolution No. 78 of 2008, in the scheme of the "National Program", the creation of a unified birth registration system in Mongolia was approved. Accordingly,

the hierarchical organizational structure of civil registration was built. In the new system, registrars are appointed by the national office of civil registration, working on birth and death registration in 9 districts, 21 aimaks, 330 somons and 152 horos.

160. The Mongolian government believes that the coverage of birth registration must reach almost 100 percent based on the following reasons: (a) obligations for the registration of each newborn are legally vouched for parents or other legal guardians of the child; (b) birth registration of newborn is free of charge, citizens do not pay any fee; (c) according to the law on Human Development, registered children under the age of 18 receive monthly cash benefits; (d) registered children under the age of 18 enjoy free medical service paid by the state. (e) with the receipt of the birth certificate, the right for free education in kindergartens and secondary schools is guaranteed.

161. In the future, Mongolia aspires to build an electronic system for death registration. As part of the preparatory work for implementing these goals, work has been carried out so that healthcare facilities can report deaths in the same online network as it is done for births. It was pointed out that cooperation with the directorate of technology, equipment and software has been key.

162. The main laws governing registration are General Law on State Registration (2009), the Law on Civil Registration (1999), and the Rules for the State Registration of Citizens (2015) and other relevant laws, which outline the duties of civil registrars, registration procedure and regulations of civil registrars' behaviors.

163. Civil registration is carried out by state registrars in the capital and somons. Data are stored in the electronic and archival databases. Storage and protection of the data are regulated by special rules. Information in the civil registration database is shared with other state organizations in electronic form so that services rendered to citizens are facilitated and speeded up.

Iran

164. An introduction to the civil registration system was given by the representative of Iran. The National Organization for Civil Registration (NOCR) is an independent entity in terms of administrative, financial and operational affairs. Institutionally, the NOCR is under the Ministry of the Interior.

165. Three main missions were elaborated on, which encompass registration of vital events, confirmation of identity and citizenship documents of the Iranian nationals, producing and releasing population statistics and information on demographic dynamics.

166. The history of civil registration legislation in Iran was touched upon. In 1940, a cohesive and general legislation consisting of 55 articles were passed and the regulations following it with 131 articles were passed in the same year. This legislation remained generally intact for 36 years. After these years in July 1976, a new civil registration act with 55 articles was ratified and after some amendments in 1984, the law has not changed until today.

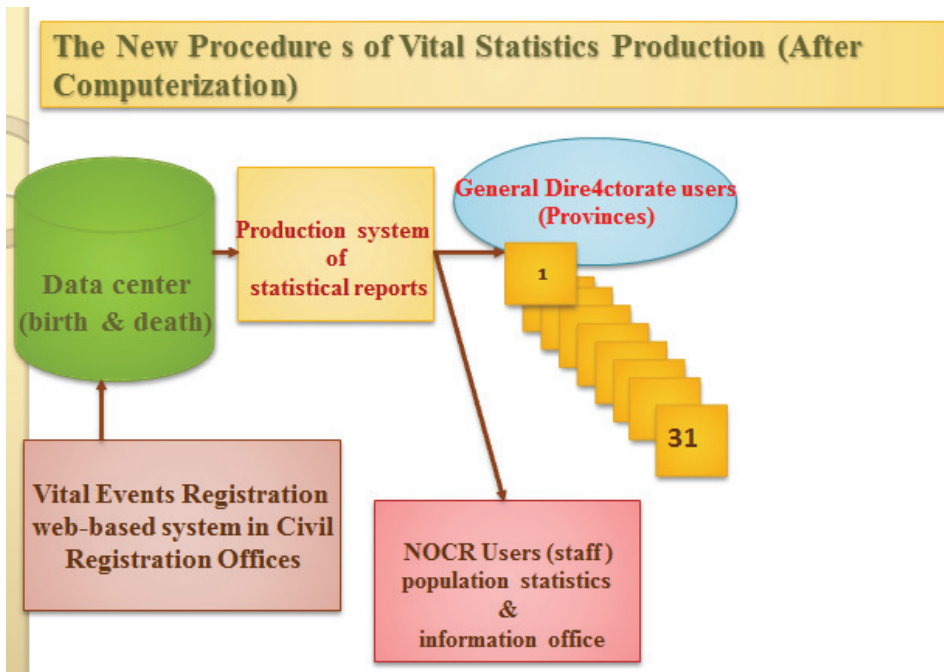
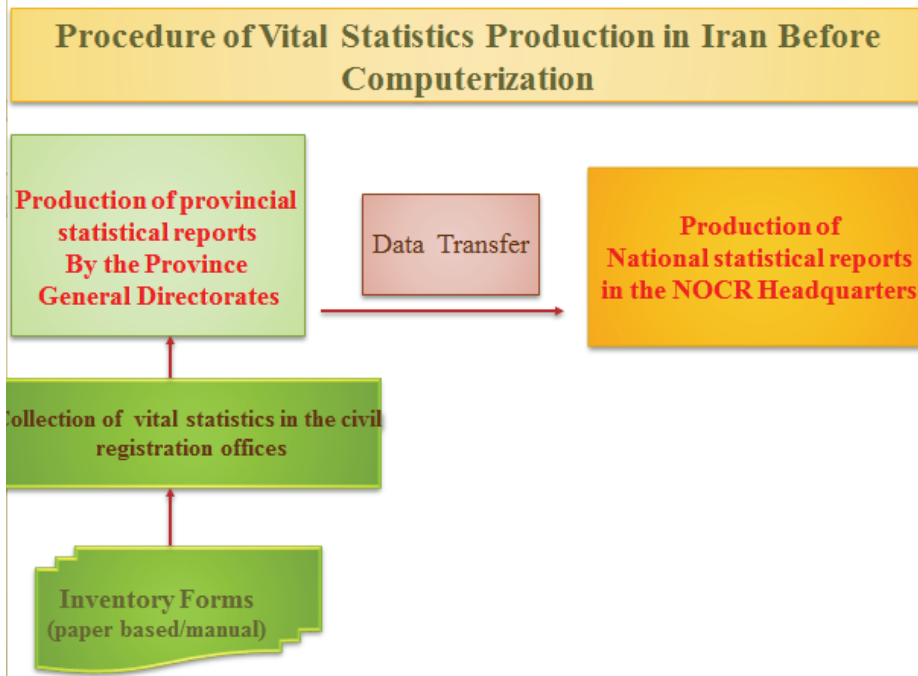
167. According to Article 1 of the Civil Registration Act 1976, the key mandates of the Iranian civil registration organization are registration of birth and issuance of birth certificate, registration of death and issuance of death permit, replacement of the current birth certificate, registration of marriage/divorce and issuance of birth certificates for foreign nationals born in Iran.

168. There are some key points envisaged in other Articles of the Civil Registration Act 1976. According to Article 25, the deadline for notifications of death is within ten days from its occurrence. According to Article 15, the deadline for notifications of birth is within 15 days from its occurrence. According to Article 5, in implementation of its mandate, the civil registration organization may utilize the services of staffs from other local government agencies as well as public institutes.

169. A map showing the National Organization for Civil Registration's online data transmission network was presented, followed by a diagram of the NOCR notification network in Iran. This is a spread network all around the country called "declaration network" which notifies birth and death to NOCR and then the event will be registered after some necessary legal steps. There are also mobile teams who register the vital events on the ground.

170. The procedure of vital statistics production in Iran before and after computerization was illustrated. Before computerization, collection of vital statistics was first done in the civil registration offices based on paper based inventory forms. Afterward, provincial statistical reports were produced by the province general directorates. At the end, data was transferred to NOCR headquarters for producing national statistical reports. After computerization, a web-based vital event registration system was created. Birth and death variables are input and stored in the data center, which then is fed into a statistical report production system. Both NOCR users/staffs and province general directorate users can access the production system to produce population statistics.

171. Below are two diagrams displaying the procedure of vital statistics production in Iran before and after computerization.



172. The representative of Iran then highlighted the topics collected by registrars and used for population statistics, as well as indices produced from birth, death, marriage and divorce registration.

173. Some of the current projects at the NOCR were mentioned, including (a) introducing the IDC-10 and educational attainment standards (completed); (b) launching the internal geographical coding system; (c) revising the civil registration legislation in order to incorporate new legislative capabilities to cover new developments in the social

and demographic arena, such as surrogate mother as a new type of event to be registered; (d) regular updating of the procedures and the institutional structures to accommodate the latest international vital statistics standards; (e) scanning and, bringing into online use, more than 130 million birth and death documents so that people do not need to refer to the issuing offices for services on these documents; (f) integrating all activities and institutions to improve the vital events registration coverage; (g) connecting all main hospitals and cemeteries to the data center in order to reduce the delay between occurrence and registration and to improve the coverage, as well as obtaining some recommended items such as weight at birth); and (h) trying to connect the State Organization For Registration Deeds And Properties to the data center. This will be done in this year (2015) and then all marriage and divorces will be transferred from that organization to the data center immediately so that coverage of these two events will grow; (i) issuing e-id card.

174. Lastly, some guidelines were suggested. It was advised that just one organization must take charge of determination and certification of the identity in the country and that organization must also take charge of civil registration. Other organizations must legally refer to that organization in order to certify their customer's identities.

Georgia

175. The representative of Georgia presented the civil registration system in Georgia. The regulations for civil registration are Law of Georgia on Civil Status Acts and Order number 18 of the Minister of Justice of Georgia on Approval of Rule for Registration of Civil Status Acts.

176. The body carrying the function of civil registration is called Public Service Development Agency of the Ministry of Justice, which exercises the authority through its territorial offices, consular offices and diplomatic missions. This agency was created in July 2012 as the civil registration agency and has 66 territorial offices and 6 wedding houses.

177. There are 7 types of vital events requiring registration at the civil registration office, namely birth, death, marriage, divorce, adoption, paternity establishment and change of given name or surname.

178. Since 2008 civil status acts have been recorded electronically via a designated software. Before introduction of electronic record management, civil registration forms were filled out by hand with two copies. The new electronic civil registration form is printed as one single copy and kept at the registration office for 5 years. After expiry of 5 years, the records are transmitted to the central archive warehouses, where they are stored for another 75 years. After expiry of the latter, records are transmitted to the National Archive of Georgia for permanent storage.

179. A person wishing to register a vital event may apply at any territorial office of the Public Service Development Agency or any branch of Public Service Hall, and in certain cases, to community centers, consular offices or diplomatic missions abroad.

180. Previously, birth and death registration could only be done upon notification by families. Since 1 April 2011, birth and death registrations have been carried out based on electronic notifications received from medical institutions. Issuance of certificates need to be applied for by the relevant individuals, but registration is done regardless. The notification must be received within 5 working days after birth and death. Certain fines are set for non-compliance with the duties. It usually takes one working day for birth and death registration and both are free of charge.

181. Persons over 18 can get married. Registration without wedding ceremony is free of charge. Marriages can be registered within 24 hours at the Signaghi office. Divorce may be registered 5 working days after the application for divorce is filed. A fee is required for divorce registration.

182. Various judgements are needed from the court in the process of civil registration of certain events, for instance, judgment of paternity establishment, judgment of divorce, judgment of adoption and judgment of declared death in absentia.

183. During the discussion, delegations wondered where Mongolia gets the figure of coverage of birth registration and what the exact amount of cash is for child allowance. The representative of Mongolia replied that the figure of almost 100% comes from international organization – WHO. Currently 20 USD is given per child while once 500 USD was given. They are confident that all births are registered, though some may with delay and according to the last MICS, the coverage is 98%, which is consistent with the former source. WHO clarified that they do not compute coverage of birth registration for any country. The figure may come from the rapid assessment that Mongolia did jointly with WHO. WHO commented that giving money as incentive for vital event registration has its difficulties and adverse side. Instead, it is recommended to give incentives at the community level, like improving public service for registered person.

184. Regarding the new notification system of birth and death registration in Georgia, a question was raised as to whether there is any legal framework for assigning such obligation to medical institutions. A representative answered it is clearly stated in the law of vital records that medical institutions are responsible for notifying birth and death events to civil registrar and failing to do so can lead to a fine of 300 USD each time. It was noted that an ID number is given to children when registration is done in the locality of parents' place of residence. If the child's mother and father have different places of residence, they need to decide where the registration is going to take place. Notification includes information about the mother and father and they have to sign the information sheet at the health facility. Parents need to provide their ID cards and certificate of marriage if it exists. In the case of surrogate mothers, their information is also included in notification. If birth happens out of hospital, parents need to register in the local civil registration office.

185. Marriage and divorce registration in Iran was further touched upon. The responsible agency is Minster of Justice. Information is then transferred to civil registration. In case of difficulties in couple, the court decides divorces. When comparing certificates issued to foreigners versus certificates issued to nationals, it was clarified that

the only difference is in the format of forms, while content is the same except that it states that it is being issued to foreigners. It was highlighted that in Iran, both national statistical office and civil register can publish vital statistics.

Session 10. Local - level designation of responsibilities of a civil registration system

186. Similar to session 9, this session comprised an introductory theoretical presentation by a representative of UNSD followed by two country representatives who talked about the responsibilities and functions of local registration offices in their national context.

187. A local registrar was defined in UNSD's presentation as an official authorized by law to register the occurrence of vital events, representing the legal authority of the government and maintain a relationship with the community. It is necessary that the local registrar be employed full-time, enjoy civil service status and benefits and receive appropriate remuneration. A special consideration regarding local registrars is that they should enjoy recognition and standing in the communities they serve, they remain informed on the community's concerns and developments, and they establish a continuous relationship with personnel in hospitals, clinics, health centers, funeral institutions, religious establishments, court clerks, among others.

188. The responsibilities of a local registrar are as follows: recording specific information regarding vital events; ensuring compliance with registration laws and regulations; ensuring the accuracy and completeness of each record; ensuring the confidentiality of each record; taking custody of the records; ensuring the completion of statistical reports; issuing certificates or copies of vital records; providing customer service; informing the public of the importance of civil registration and vital statistics; and explaining the registration process and its importance and consequence in a colloquial manner. In the case of death registration, local registrars also need to ensure that the certification of the cause of death is part of the documentation. They need to understand the process of producing vital statistics. Ideally, local registrars should display an active role within the community, and depending on the geographical features and size of the area covered, they should make regular rounds within the jurisdiction and have knowledge of local customs and languages. It is of utmost importance that local registrars maintain an easily accessible office and regular working hours.

189. Within the provision of the law, the local registrar is subjected to penalties if he/she fails to register a vital event or its characteristics, as reported by the informant; loses, damages or alters any registered records or permits such loss, damage or alteration to occur; fails to provide registrants with adequate protection of privacy and confidentiality; is found guilty of violating the provisions of the civil registration law or its rules and regulations; or if he/she fails to fill out and submit statistical documentation.

190. The primary registration unit is a well-delineated part of territory of a country that is entrusted to a local civil registrar for the recording of vital events occurring therein. It

is the jurisdictional territory of one registrar, and the boundaries should coincide with those of a minor civil division, making adjustments as needed. The physical office space of the unit must be of adequate size, easily accessible and well-marked, and open during regular working hours. Therefore, determination on the number and location of local registration unit needs to take into account the population size; availability of staff and material resources; accessibility, including transportation facilities and climate; literacy of the population; and complexity of the registration procedure.

191. Secondary registration units are located at selected locations that display frequent vital events within a primary registration unit, such as hospitals or health centers. Secondary registration units also need to have clear delineation of boundaries.

192. In addition, mobile registration units can be used in areas where the population density is too low to establish a permanent unit, or they can visit areas that are not accessible year-round. They are motor vehicles of a variety of sorts as sizes visiting small villages or other kinds of human settlement. In any case, mobile registration units should have regular schedules that are publicized in advance, and they should stay in one place long enough to give population the opportunity to register their vital events.

193. In his concluding remarks, the representative of UNSD highlighted that the local registrar is a building block of the whole system; he/she needs to be a civil servant, well versed in registration law and procedures, trained and equipped with high standards of responsibility, well versed in local circumstances, customs and language. Additionally, the presentation emphasized that local registration units must be easily recognizable and efficient.

194. The first country to present on local-level designation of responsibilities was Armenia, followed by Kyrgyzstan.

Armenia

195. The representative of Armenia first elaborated on the recent legal achievement under the framework of "Get every one in the picture" in Asia and the Pacific region. The Ministry of Justice of Armenia not only developed and put into circulation the drafts amendments and additions to the Armenian legislation on Civil Status Acts, but also added a number of regulations which are currently in practice within the Armenian governance, in order to integrate the collaboration of parallel government organizations and departments.

196. In 2010, the electronic registration system was introduced in the central and regional offices, intensely improving governance, efficiency and time management of the procedures of performing civil registration acts of compiling and entering registration records. From October of 2014 the civil registries have been performing their functions solely through the unified / integrated network: an interconnected e-register which is an intranet connecting the relevant authorities in real time. Owing to the policy designed by the state authorities, the e-register was linked also to other intergovernmental departments and structures that are by law engaged in document processing.

197. Despite the fact that the access to this information may seem open, the entry to the e-register is secured with ID cards saving the user information and IP address of the computer from which they have entered the system and performed any action. The ministry, specifically the Agency of Registration of Civil Status Acts being in charge of methodological management of district civil registries currently performs correspondence with them. The system allows the agency to perform on-going supervision over the functions performed in district civil registries.

198. Overall, the Ministry of Justice considers the introduction and standard operational procedures and mechanisms in the area of Civil Acts Registration to be one of its key achievements. It not only allowed the Civil Acts Registration Agency to perform the civil registration through an electronic system but also served as a ground for new drafts.

Kyrgyzstan

199. The representative of Kyrgyzstan presented the national practice in regards to the designation of responsibilities for the local registrar.

200. She first gave an overview of the content of module 6 of the Handbook on Training in Civil Registration and Vital Statistics Systems⁴. Then she briefed the audience on the normative and legal acts of Kyrgyzstan, such as the Family Code of the Kyrgyz Republic (2003), and the Laws of the Kyrgyz Republic "On Acts of Civil Status" (2005) and "Instruction on the procedure for registration of acts of civil status in the Kyrgyz Republic" (2011). Civil registration in Kyrgyzstan is carried out by the city and district divisions of civil status records of the Department of Registration of Civil Status Acts under the State Registration Service under the Government of the Kyrgyz Republic (hereinafter - Registry Office). In localities where such bodies are not available, civil registration is carried out by the local self-government bodies of rural settlements, called *ayil okmotu* (local communities).

201. According to the Law of the Kyrgyz Republic "On Civil Status Acts" (2005), *ayil okmotu* (local communities) have the power over civil registration for birth, death, marriage and establishing paternity. Registration of vital events such as divorce, adoption, change of last name, given name and patronymic remains at the district registry offices. By law, the responsibility for ensuring timely and proper registration of acts of civil status rests with the heads of the respective registrar offices.

202. The presentation highlighted the current situation of vital statistics in Kyrgyzstan. According to the Law of the Kyrgyz Republic "On Civil Status Acts" (2005), the certificate of vital events is produced in 2 identical copies. One copy is kept at the registration office and the second copy is sent monthly to the state statistics authorities for statistical processing and reporting, along with an attached medical certificate of birth or death. After the appropriate statistical processing, all the records are returned by the state statistical bodies to the registry office for the formation of the archive fund. The

⁴ UN publication E.02.XVII.10, 2002, New York, ST/ESA/STAT/SER.F/84, available at https://unstats.un.org/unsd/publication/SeriesF/SeriesF_84E.pdf

evaluation of coverage of registration over the last 10 years was above 90% for birth and about 90% for death.

203. Upcoming changes in vital statistics were also elaborated on. Since 2015, AIS ZAGS (Automated Information System of Registration Office) was launched. AIS ZAGS works only in district registration offices whereas *ayil okmotu* (local communities) currently continue to make civil status records manually on paper forms. In addition, the AIS project "Medical certificate" is currently being tested, which will be integrated with the AIS Registration Office. In the long term, it is planned to create a population register.

204. Four goals of the AIS ZAGS in Kyrgyzstan were presented, namely reduction of registration time; integration of information resources of registries to create electronic archive database; reduction of the number of errors in information during registration, resulting in a reduction of appeals of the population to administrative bodies; and automation of control throughout the registration process in the current legal framework.

205. In conclusion, civil registration in Kyrgyzstan is carried out at the local level and the work and functions of local registrars are bounded by the regulations of the country. Since 2015 Kyrgyzstan launched AIS Registration Office, and is currently testing a new project called AIS "Medical certificate", which in the future will become part of the population register of the country. The processing of data from civil registration is currently performed by statistical offices. In the future, this function may pass to the holder agency of the population register.

206. During the discussion, Armenia mentioned that the most recent assessment of birth registration was based on the 2010 Demographic and Health Survey (DHS), reporting 96% national coverage, but no assessment of death registration had ever been conducted. Another representative of Armenia also shared their national practice regarding cause of death. Information on cause of death is sent from the Ministry of Health to the NSO; data are processed and coded by a team at the NSO, of which, one member is a medical doctor. One question was raised as regard to missing information of cause of death. It was explained that there are no such cases in Armenia, but there is a 10% of cases where the cause will be unknown. In those cases, the medical doctor in the coding team will decide how to code. It was mentioned that the Ministry of Health is trying to have medical doctors not only filling cause of death but also coding. However, UNSD suggested to all delegations that they should not place high hopes for medical doctors to write codes because it is too difficult to achieve. An unsuccessful pilot study in Bishkek was shared by a representative of Kyrgyzstan as an example to illustrate this point. In the pilot, a high proportion of medical certificates were returned for low quality coding or missing information.

207. Kyrgyzstan further explained the ID management system, which was newly introduced. It was noted that this unique ID number for individuals cannot be used yet for statistical purpose because only newborns have it so far.

Session 11. Civil registration process: place, time, cost, late registration

208. Similar to sessions 9 and 10, this session comprised an introductory theoretical presentation by a representative of UNSD followed by two country representatives who talked about the process of civil registration and its features.

209. The presentation delivered by UNSD defined and elaborated on place of registration, time of registration, late and delayed registration, and proofs. The place of registration can be either the place of occurrence or the place of usual residence, depending on what the law specifies for each vital event. Place of occurrence is usually straight-forward, however, place of usual residence has its operational complications in certain circumstances. The two options are not mutually exclusive; in many cases the law requires both. International guidelines dictate that the place of registration for live births, foetal deaths and infant deaths must be the place of usual residence of the mother. In the case of infant deaths, it can also be the place of usual residence of the infant if it is different to that of the mother. For deaths, the place of registration should be the place of usual residence of the deceased; and for marriages, the place of occurrence, as the previous place of residence is not relevant.

210. The registration process starts when the registrar is presented with a proof of the occurrence of the vital event by the informant. These proofs can be legal documents, medical certificates, personal declarations or witnesses. Documentary proofs are, in general, more reliable than declarations. However, they are not always available, so the local registrar needs to decide whether personal and witness declarations suffice for registration purposes. In the registration of some events, such as divorces, annulments of marriage, judicial separations, recognitions, legitimations, adoptions and marriages, documentary proofs are irreplaceable.

211. Documentary evidence presented to the registrar originates in many different institutions. That is why the registrar needs to be familiar with these forms and formats, for which he/she should undergo regular training in updates, and the registration system as a whole has to be consulted when forms change. Of particular importance is the content of the documentation related to statistical requirements.

212. The time allowed for registration refers to the period of time within which the informant must report the occurrence of the vital event and its characteristics to the registrar. This time should be clearly specified in the Registration Law for each vital event. Typically, a shorter period is preferable to a longer one, as the passage of time may lead to miss-reporting, underreporting and factual errors in reporting. The shorter period is also necessary for public health reasons in the cases of death. The time period has to be identical throughout the country. In some events, such as for deaths, for example, there may be more than one deadline for registration – one for the death itself and another for the cause of death, given the time needed for certification of the cause of death in certain circumstances. There is a grace period for each type of event that normally does not exceed one year. The representative of UNSD gave some examples of grace period for different vital events. For live births, it is typically up to one month; for deaths and

foetal deaths, it is three days; for marriages, the same day; for divorce, it is seven days from the date the court granted the divorce.

213. Late registration is a registration of the vital event after the legally specified period but within a grace period. On the other hand, delayed registration is a registration of the vital event after the grace period has expired. The Registration Law has to contain specific provisions for cases of delayed registration, like requesting additional documentation and proof, and fees, but not penalties. Factors causing late and delayed registration lie either within the registration system or within the community. Within the registration system, demanding procedures in terms of time and complexity may affect the timeliness of registration, as well as high costs of registration and registration offices that are not easily accessible. Within the community, lack of awareness, combined with lack of interest cause late and delayed registration.

214. The first country to present on the registration process followed in their national context was Turkey, followed by Uzbekistan.

Turkey

215. In Turkey, parents, guardian, grandfather, grandmother and adult sibling can report the birth, or the police if a child is found by them. Birth notification can be in any civil registration office, embassies abroad or via secure electronic transfer from hospitals, which is still awaiting law amendment. Birth registration requires proving legal document such as medical certificate or verbal declaration. It has to be done within 30 days if birth occurs within country or within 60 days if birth occurs abroad. Registration is free of charge and a fine will be imposed if not reported within the legal time period. After a person reports a birth to the civil registration office, information is entered into computers. Identity card is then generated by the electronic system and released to parents.

216. As for death, it can be reported by physician, municipality physician, prosecutor in the forensic case and mukhtar (community leader) if death occurs in the village. Similarly to birth registration, death notification can be in a civil registration office, embassies abroad or via secure electronic transfer from hospitals. The only difference is that death notification cannot be in any civil registration office but only those in the same locality where the death occurs. Five copies of the death registration form are produced at the time of registration, two copies for civil registration office, one copy for TurkStat, one for hospital, and the last one for burial permit. People are responsible to report death within 10 days from the date of death. Same as birth, a fine will be imposed if death is not reported within the legal time period.

217. Regarding marriages, the mayor, an officer assigned by the mayor or the manager of the local civil registration office can authorize and celebrate marriages. In villages, marriages can also be performed by the mukhtar. Authorized officers then report the marriage to the civil registration office in the locality where the marriage occurs. Mayors and other authorised officers have to report the marriage within 10 days from the date of marriage if marriage occurs in the country and within 30 days if the marriage occurs abroad. Two copies of marriage registration forms are produced, one stays in the civil

registration office and one is sent to the central office (General Directorate of Population and Citizenship Affairs).

218. In terms of divorce registration, courts report to the civil registration office when the divorce occurs in the domestic courts. Approval is required by a domestic court even if divorce is approved by a foreign court when a divorce occurs abroad. Afterward, courts report the divorce events to civil registration office, which has to be within 10 days after final court order.

Uzbekistan

219. The legal framework of the civil registration was first listed by the representative of Uzbekistan: Civil Code; Family code; Rules of civil registration approved by the Government; Government resolution "On additional measures for improvement of activity of bodies of civil registration"; Government resolution "On rates of the state tax"; Instruction about record keeping order in bodies of civil registration; and Provision on bodies of civil registration.

220. The organizational chart of the civil registration system was introduced. Civil registration is governed by territorial authorities of the Ministry of Justice at the local level. Within the country, civil registration offices register all vital events in the country while consulates take care of citizens living abroad. In remote places, an assembly of citizens is the registration agency.

221. Civil registration offices not only register birth, death, marriage and divorce but also other vital events, including adoption, paternity proof, change of surname, name and middle name, and change of residence.

222. Birth registration is obligatory and it must be registered within a month and within 24 hours for children who are born dead. Having said that, an elapsed period is not an obstacle for birth registration. Birth registration of children any time before 16 years of age is processed as normal registration. Birth registration of children who are older than 16 years old is made as if restoration of lost of records. Stamp tax is collected for a birth certificate but no state tax.

223. Death registration has to be made no later than 3 days after occurrence. Similar to birth registration, an elapsed period is not an obstacle for registration of death. In Uzbekistan, burial is forbidden without registration by civil registration offices. No payment is required for death registration.

224. The production process of vital statistics was illustrated. Civil registration offices send all domestic data to territorial authorities of the Ministry of Justice; data of remote area come from assemblies of citizens. Then, territorial authorities of the Ministry of Justice send the data to the national statistical office. Information pertaining to citizens living abroad follows a different route. Consulates send the data directly to the Ministry of Justice, which relays then to the national statistical office.

225. A diagram of the united electronic archive of civil registration offices was displayed and explained. Civil registration offices input the registered acts of civil status to the system. Then data are sent to the State center of identification, where personal identification number of newborns will be generated.

226. During the discussion, guidelines for digitalizing civil registration systems were requested by delegations since many countries are switching to smart devices and information and communication technology (ICT) in various scenarios. UNSD recognized that the current handbook is outdated and mentioned that a new handbook was under development jointly with the UN Economic Commission for Africa (ECA).

227. Delegations were unclear about who in Uzbekistan should be present at the registration office when a newborn's father is abroad as an economic migrant. The answer was that there is no need for the father to be in the registration office as long as his documents including his birth certificate are presented. In the case that there are other births from the same parents before, that information can be used from the system.

228. WHO was interested in the cost of medical examination before marriage in Uzbekistan. It was clarified that the State pays for the fee so that medical examination before marriage is free to the public. One other question was raised regarding the format of information transmitted from consulates to national statistical office. A representative from Uzbekistan explained that full registration forms are sent from embassies to the central civil registration office. Then, the civil registration office relays the statistical forms, which are parts of the full registrations forms, to the national statistical office for processing.

229. A delegate from Turkey further clarified that while multiple copies of the death certificate will be produced at registration, among which one is for burial permit, it does not mean that the body cannot be buried without a death certificate, or before the registration, as the timeframe for registration is ten days from death.

Session 12. International collection of vital statistics and challenges faced by countries to fulfill it

230. This session comprised a UNSD presentation addressing collection of demographic statistics, a WHO presentation focusing on collection of statistics on cause of death and two country presentations sharing their experiences on practical obstacles encountered when furnishing data for the *Demographic Yearbook* and lessons learned.

231. A representative of UNSD made a presentation on the demographic data and metadata required by the international collection system, as well as processing and dissemination through the United Nations *Demographic Yearbook*. The *Demographic Yearbook* is the main international data collection and dissemination tool, which collects national demographic and social statistics through a number of questionnaires and disseminates those statistics at the international level. A great deal of the collection of demographic data depends on the replies received from countries.

232. The data collected refer to vital statistics, population estimates, international migration and population and housing censuses, while the metadata collected encompasses information on quality and methods. The *Demographic Yearbook* questionnaires are dispatched to national statistics offices in electronic format (excel, xml), are customized for each country, and are basically a series of data tabulations, pre-filled with existing data. Attached to questionnaires, instructions and metadata worksheets are also sent. Questionnaires on population estimates, vital statistics and migration flows are dispatched every year, whereas the census questionnaires follow the census schedule of each country.

233. The vital statistics questionnaire, more specifically, is a series of tables distributed in ten sections: a summary for the last five years, live births, fertility rates, life tables, deaths, infant deaths, foetal deaths, abortions, marriages and divorces from more than 230 countries or territories. The questionnaire also collects metadata such as the completeness of the statistics, methods used for data quality assessment, and whether the data were collected by occurrence or by registration.

234. International comparability depends on completeness and accuracy of data produced by each country; differences in statistical definitions of vital events; diverse tabulation procedures, for example countries using different age groupings; and official estimates coming from sample surveys, which makes it difficult to disaggregate data and is subject to sampling errors.

235. From what had been collected from the participating Central Asian countries, it was found that, in average, their response to UNSD vital statistics questionnaires was modest and varies significantly across countries. The response rate of more than half of the participating countries was lower than 50%, with Afghanistan and Turkmenistan being zero. There were some countries that were reporting an important number of tables, for instance, Kyrgyzstan, Georgia and Kazakhstan.

236. As for the quality of data, it was shown that about half of the Central Asian countries compile their vital statistics from a complete civil registration understanding “complete” as at least 90% coverage. Moreover, coverage was lower for death registration, and there were also some countries for which there was no information on their system coverage. This meant that they had not sent any metadata along with their data.

237. The last part of the presentation explored the advantages of having country data disseminated by UNSD: enabling social and public health studies, as academic institutions and non-governmental organization gain access to the data; representation in the international setting means an opportunity to share progress and allows for international comparability, which is of key importance for global publications and monitoring development indicators. In addition, international compilation and dissemination of data supports informed decisions not only at the national level, but also at the regional and global level. These data are reviewed and studied by a wide range of agencies and is used by aid institutions to organize their work programme and allocate funds.

WHO

238. The representative of WHO first explained the purpose of this presentation, which is to provide an overview of the mortality data collection, show its relevance to other surveillance systems, list its strengths and limitations as well as identify the challenges. The objectives of collecting cause-of-death are to establish and maintain statistical services and to provide information in the field of health, in particular, to provide comparable statistics on cause of death across countries for scientific research and advocacy of health policies.

239. WHO mortality database is a good source of information to analyse the health of nations. Data are reported on an annual basis by the countries, are disaggregated by year, sex, age and cause of death. Causes of death are coded according to the International Statistical Classification of Diseases and Related Health Problems (ICD). Historical data can be traced back to 1950, coded based on ICD sixth, seventh, eighth, ninth and tenth revisions.

240. In addition to ICD which is for coding and comparing causes, other international standards are available to help enhance the comparability of mortality data. The International Form of Medical Certification of Cause of Death is used to record all the conditions relating to the death. ICD rules provide guidance to select the underlying cause of death. A glimpse of ICD-10 chapters, include natural causes & external causes of death was given.

241. The representative of WHO went on to emphasize the definition of the underlying cause of death. Cause of death is “the disease or injury which initiated the train of morbid events leading directly to death, or the circumstances of the accident or violence which produced the fatal injury”. She explained that member States are contacted on an annual basis for submission of their most recent cause-of-death statistics by either WHO regional offices or headquarters. WHO takes advantage of the regional offices knowledge and closer contacts with the countries to obtain the necessary information in a timely manner and ensure that the same data sets are used within WHO headquarter and the regional offices. The administrative and database management tasks shared by WHO headquarters and its regional offices are streamlined.

242. After data are received by WHO, they are systematically verified against several typical errors, including incorrect use of the ICD (including failure to apply the periodic updates), invalid ICD codes, age and sex specific errors and unusual patterns or trends in causes. Queries are sent to countries for clarification if anything wrong is detected.

243. Three graphs were then presented, one showing the civil registration coverage of cause of death in the period 2005 to 2011 in the world, one with trends in cause-of-death data reporting, by country income group as of January 2014 and the last one picturing trends in cause-of-death data reporting by ICD revision as of January 2014.

244. Countries report their annual cause-of-death statistics 18 to 24 months later on average. WHO were requesting countries to submit their 2013 or 2014 data around the

time of workshop (September 2015). The representative of WHO noted that it is very rare that countries report their annual cause-of-death statistics six months later. There are several factors affecting timeliness of data. For example, whether processing of data is centralized or decentralized will have an impact on the timeliness, so will the degree of computerization of countries' civil registration system. Timeliness can also be affected when death certificates are not finalized, namely pending verdict from coroners or medico-legal authority. In practice, some countries may temporarily assign "event of undetermined intent" pending verdict to such deaths.

245. Some major problems exist in data reporting. For some countries reporting is sporadic and layouts of data files are not standard. Detailed ICD codes and condensed lists are not used by some countries, which makes comparability of data difficult. Data confidentiality is another major concern.

246. Potential sources of biases may come from the type of certifiers and coders. For instance, whether certifiers are authorised doctors, medically qualified practitioner or nurses may have an impact on the certification. Skilfulness of these certifiers can cause problems on certification. In addition, certain incorrect coding practices are adopted in some countries, which also introduces biases. Finally, social stigma or pressures may force certifiers to record a cause of death different from the true one to avoid certain troubles.

247. The Unit of Mortality and Burden of Disease in WHO uses the reported mortality data for producing demographic estimates (e.g. life tables) and global health estimates, in particular estimates of cause of death by country, year, sex and age. For countries which do not have mortality data, a model is used to estimate broad categories of cause of death. A graph of the trend of causes of death from 1950 onwards in Mexico was displayed, which enables the analyses of changes in patterns of causes of death, in particular the epidemiological transition.

248. There are other users of cause-of-death data. For instance, other WHO units may use the data for the programmes on tuberculosis, or maternal health. Research groups may use data to study child mortality, smoking, lung cancer and suicide, among other topics. Among international organizations, cause of death data may be used by the UN, the World Bank, the OECD, etc.

249. There are some areas where mortality data have been used in addition to other surveillance and monitoring systems. In the content of cancers, cancer registries can be linked to cancer deaths certified in death certificates. Confidential inquiries may be made into maternal deaths, or police reports may make use of cause-of-death data in the case of suicide or homicide.

250. The representative of WHO went on to introduce their mortality database, available at the website http://www.who.int/healthinfo/mortality_data/en/. One may select which country and year to be viewed online. Complete raw datasets for about 120 countries can be downloaded in CSV format, which requires some programming skills

for use. Data are published annually via the World Health Statistics, and an analysis of quality of data is available in the WHO Bulletin of March 2005 by Mathers et al.

251. Challenges are expected in the future. At WHO level, more data need to be obtained from low-income countries. In fact, the current reported data represent only one third of all the deaths in the world. In order to combat the problem of under-coverage, simplified procedures for collecting cause of death should be provided to countries in low-resourced settings and WHO is dedicated to lead in this area.

252. At the country level, WHO is committed to help countries to improve the quality of the reported data, such as ICD training. WHO will continue to develop further simple tools for countries to code and analyse their data, like ANACoD and CodEdit. Details can be found at http://www.who.int/healthinfo/civil_registration/en/.

253. At the users' level, WHO strives to foresee and address the future data needs of users, for instance, more disaggregated data, and data by multiple causes of death.

254. The first country sharing their experience was Georgia, followed by Mongolia.

Georgia

255. The representative of Georgia highlighted the challenges in their production of vital statistics. Tabulations of population by sex, age and citizenship, by sex, age and country of birth, by sex, age and marital status are available based on the population census.

256. Almost all recommended vital statistics tabulations are produced. The only ones that are not produced are the number of births by mother's education level and number of births by mother's employment or economic status. Similarly, out of the internationally recommended tabulations, only the number of deaths by marital status and by education level are not produced.

Mongolia

257. The presentation of Mongolia touched upon collection of vital statistics, tourism and migration statistics, population estimates and their respective challenges.

258. In Mongolia, vital statistics are compiled from health records and the civil registration records. A graph of a union of two sets was presented to interpret the interrelationship of these two sources. Live birth, death, cause of death lie at the intersection of these sources, while health records are solely responsible for foetal deaths and abortions, and civil registration records for marriage and divorce.

259. Common challenges for the agencies involved, namely Ministry of Health, Civil Registration Authority and National Statistical Office (NSO), include poor interagency coordination, unequal level of information technology (IT) development, lack of human resources at the responsible organization and political pressure. In addition, each agency has to face their unique challenges. For instance, definitions are not fully followed in

health records. The process of collection is not fully monitored in health institutions. Health records do not contain deaths occurring outside of hospital, resulting in partial coverage of deaths. On the other hand, it is hard to avoid delays in civil registration. Often, civil registration may not adhere to the latest guidelines. Coverage of infant deaths is incomplete and not all information will be typed into database by civil registrars. In fact, the representative of Mongolia mentioned that only 60% of infant deaths are registered, and that there is a vast gap between health records and civil registration records. The NSO has to deal with various challenges such as incomplete compilation of statistics resulting in lack of production of the tables, excessive workloads and insufficient time to monitor the detailed operations of the relevant agencies.

260. Collection of tourism and migration statistics were also touched upon. Tourism and migration statistics are collected by the citizenship and migration office, which rely on integration of two systems, namely, the border controls and foreigners' registration. Departure and arrival cards are not filled by Mongolians. The NSO produces tourism statistics quarterly but international migration statistics are not produced.

261. The NSO is facing a number of challenges. On one hand, while tourism statistics are currently being produced, the current tourism statistics do not satisfy the increasing user needs. For example, some crucial variables are not available from the source e.g. purpose of visit, duration of stay for the outgoing citizens of Mongolia. On the other hand, demand for international migration statistics has been increasing in the recent years, however there are no articles related to producing international migration statistics in the law.

262. A new integrated database for population and households, which allows real-time changes by connecting to the database of civil registration, was established in 2014 and lay the foundation for producing population estimates.

263. In conclusion, detailed information of citizens of Mongolia within and outside the territory, and of foreigners in Mongolia is needed. There is enormous interest for international migration statistics but progress on producing these statistics is slow. Poor coordination between the NSO and other agencies exists in the production of various statistics, and confidentiality issues are present. Instability of human resources at the operating agency is commonly seen. Weak political will is an obstacle for development of civil registration and vital statistics.

264. During the discussion, delegations showed their efforts to send data according to the WHO timetable but they also expressed their constraints to include cause of death within that timeline. They asked for extension of deadline so that they could provide more comprehensive information to WHO. In addition, delegations pointed out that the unavailability of the ICD and other manuals and books in Russian language makes implementation difficult and in turn affects timeliness.

Additional Session. Strategic communication for CRVS

265. In this session, a representative from Plan International gave a presentation on how strategic communication can help increase demand for CRVS. She first thanked the organizers for offering her the opportunity to present in the margins of the workshop. Then she clarified the two objectives of her presentation. The primary objective was to have an engaging and useful discussion about the Regional Action Framework (RAF) Action Area 4: public engagement and generation of demand. The secondary objective was to convince the audience that strategic communication can help considerably to increase the demand for CRVS and that non-governmental organisations like Plan are happy to work hand in hand with international organizations like United Nations to get everyone in the picture.

266. Two creative tasks were given to the audience to address the definition and importance of civil registration and vital statistics and to understand a parent's view in terms of the plans for their children. After recognizing how important CRVS is for individuals and for society, the representative from Plan International emphasized what governments can do to effectively engage the public and increase the demand under the RAF Action Area 4. It was recommended to have one CRVS comprehensive assessment, one CRVS multi-stakeholder working group and one CRVS plan of action. Every CRVS plan under Action Area 4 should have a CRVS national strategic communication plan as a key element. Furthermore, she emphasized that CRVS communication programs are not just focusing on raising awareness and informing people but convincing people to make the efforts, take the time and act -- that is to change their behaviour. These programs should be planned and designed involving not only all national CRVS stakeholders but also development partners and private sector and implemented at the national level using evidence based communications methodologies such as Communication for Behavioural Impact (COMBI).

267. COMBI is an approach that WHO and UNICEF have both applied to achieve behavioural objectives in health and social programmes across the world. It is a social mobilization scheme directed at all societal and personal influences on an individual or family to prompt them to action. It is a process intended to engage individuals and family in considering recommended behaviours and to encourage the adoption and maintenance of those behaviours. It incorporates many lessons of the past 50 years of health education and also draws substantially from the experience of the private sector in consumer communication. It recognizes that the ultimate goal is impacted behaviour. It puts forward that the population needs information and education, as well as persuasion and community involvement. COMBI also stresses consumer sensibility which focuses on consumer decision-making and behaviour, as applied to specific behaviours.

268. COMBI begins with the "people" (clients, beneficiaries, consumers -family members) and their needs (or wants, or desires) and a precise focus on the behavioural result expected in relation to these needs, wants, desires. Therefore, the situational analysis involves listening to people and learning about their perceptions and grasp of the offered behaviour, the factors which would constrain or facilitate adoption of the

behaviour, their sense of the costs (time, effort, money) in relation to their perception of value of the behaviour to their lives.

269. COMBI makes people reflect on the suggested behaviour through a blend of five integrated communication action areas in a variety of settings, appropriate to the existing circumstances and recognizing that there is no single magical communication intervention. The five integrated communication areas are public relations and advocacy and administrative mobilization; community mobilization; sustained appropriate advertising; interpersonal communication and counseling and personal selling; and point-of-service promotion.

270. It was noted that a COMBI plan is not cheap. A national COMBI plan targeting 350,000 families with children under 5 in a country with 4 million population costs about EUR 250,000. This cost excludes the baseline study and the monitoring and evaluation work. A few successful examples of COMBI were presented. For example, in the state of Bihar, India, a COMBI programme dramatically improved the number of people self-reporting with skin leprosy to 69% on average and 73% for women. In Johor Bahru, Malaysia, a three-month COMBI programme on dengue resulted in 85% of households checking mosquito breeding sites around their homes. Three months later, 70% were still maintaining the checks. In another successful example, COMBI prompted 75% of entire population in 6 countries to accept and swallow a set of pills in order to prevent lymphatic filariasis.

271. At the end, the representative of Plan International talked about how organisations like Plan International can help, for example, in the area of capacity building for national partners and bringing technical expertise on strategic communication planning or development of communication materials. Besides, they may help to engage private sectors in disseminating key messages, monitor and evaluate the outcomes of programs, coordinate partners and inputs, manage various implementing partners and sustain communication activities.

272. During the discussion session, there was great interest to learn more about COMBI. The representative of Plan International made it clear that how to apply COMBI is country specific. It is not one size fits all. Each country needs to decide which behaviour they want to change. For instance, one country has almost complete registration, then the challenges need to be analysed and maybe the issue is to engage high level government figures. 40% of the COMBI process involves analysing the target behaviours beforehand in order to understand the need.

273. A representative of Georgia mentioned that in their country there was not any communication strategy but managed to achieve complete registration by changing their civil registration approach to offer fast and free service. Plan International found it very impressive and was keen to know more.

274. To wrap up this session, ESCAP appreciated that regional partnership brings together different expertise to the improvement of CRVS and the implementation of RAF, particularly the communication component in this case.

Session 13. Guidelines for national setting and monitoring of the Regional Action Framework on Civil Registration and Vital Statistics in Asia and the Pacific

275. This session comprised a presentation by a representative of ESCAP addressing the guidelines for national target setting and monitoring under the Regional Action Framework (RAF) on Civil Registration and Vital Statistics in Asia and the Pacific, followed by general discussion.

276. CRVS monitoring guidelines are an integral part of the overall monitoring framework of the Regional Action Framework. They are living documents to be updated from time to time as countries apply and provide feedback, are designed to assist countries in the Asia and Pacific region to set and monitor their national targets and are intended to support the generation of data and statistics for accelerated implementation of the Regional Action Framework.

277. These guidelines highlight approaches and considerations that countries may take into account in order to set realistic goals. They are not intended to be prescriptive, but rather to point national stakeholders towards the pertinent issues and resources that can provide further guidance.

278. Target audience are all the stakeholders who are involved in improving the CRVS systems. The key inputs to the guidelines are the Principle and Recommendations for a Vital Statistics System published by UNSD and the publication prepared by WHO entitled Improving the Quality and Use of Birth, Death and Cause of Death Information.

279. A diagram of the time line followed was shown. The first draft was delivered in December 2014 followed by a limited stakeholder review which included partners and experts. The second draft was finished in July 2015. Then the Regional Steering Group review took place. Feedback from the review were addressed and guidelines were finalised. At the time of the workshop, countries were at the stage of applying guidelines for the collection of baseline data. Baseline reports were expected to be submitted to the secretariat in December 2015.

280. The contents of guidelines encompass four parts and one annex, as follows: Part 1. International principles, recommendations and standards; Part 2. Monitoring and reporting on results; Part 3. Special considerations for each target; Part 4. Further assistance and resources; Annex. Definition of terms.

281. Part 3 and part 4 were further illustrated. Part 3 describes each target and outlines key considerations for setting realistic goals. For each target, the following information is provided in the guidelines: Method of estimation or calculation; Ideal target; Issues and considerations; and Data sources for setting and monitoring the target.

282. Further assistance and resources were introduced in part 4. As mentioned previously, the Principles and Recommendations for a Vital Statistics System, Revision 3

are the essential standard for generating accurate, reliable and regular vital statistics from the civil registration system. The publication prepared by WHO (Improving the quality and use of birth, death and cause-of-death information) is part of a series providing comprehensive guidance on how to systematically evaluate the quality and functioning of a civil registration and vital statistics system. Moreover, the website “Get Everyone in the Picture” maintained by ESCAP contains information related to progress of civil registration and vital statistics in Asia and the Pacific. A Passport to Protection, a publication prepared by UNICEF, is a guide to birth registration programing. The Global Scaling Up Investment Plan is a report prepared by the World Bank Group and the World Health Organization with input from several agencies and countries, based on discussions from the global consultative meeting on CRVS held in Addis Ababa on 28 and 29 April 2014.

283. Between the time of workshop in 2015 and 2024, which is the end of the RAF, four implementation steps are expected, namely setting national target, formulating a monitoring and reporting plan, assessing inequalities and setting targets for subgroups and reporting on progress to ESCAP Secretariat. Complementary toolkit is available to support the guidelines and more technical guidance will also be provided to national practitioners.

284. After the presentation given by ESCAP on RAF, delegations were divided into three groups to discuss questions related to national targets in the context of RAF. Afghanistan, Iran, Georgia and Turkey were in group one, Armenia, Kyrgyzstan, Tajikistan in group two and Russia, Mongolia, Kazakhstan, Uzbekistan in group three. Three questions were addressed in the discussion: (1) Has country set the national targets?; (2) What would be the process for setting national targets? (3) Identify any targets that may prove difficult to set.

Session 14. Country team work time

285. This session required representatives of each country to team up and prepare a ten-minute presentation on strategies to implement the Regional Action Framework while applying the Principles and Recommendations in their respective countries, assisted by resource persons. A template and guiding questions were prepared by UNSD and ESCAP in order to support participants in their work.

286. In particular, the exercise required each country team to discuss the main obstacles for achieving complete coverage of civil registration, and for improving accuracy of registered information. Country teams also compared the topics covered in their registration forms with the list of core topics requested by the Principles and Recommendations.

287. A presentation was delivered by each country on the last day of the workshop. Since the workshop was attended by officials from both the National Statistics Office and the Civil Registration office, this presentation was intended to be prepared by the

statisticians and registrars working together as a country team. This was in the spirit of fostering inter-agency understanding and collaboration.

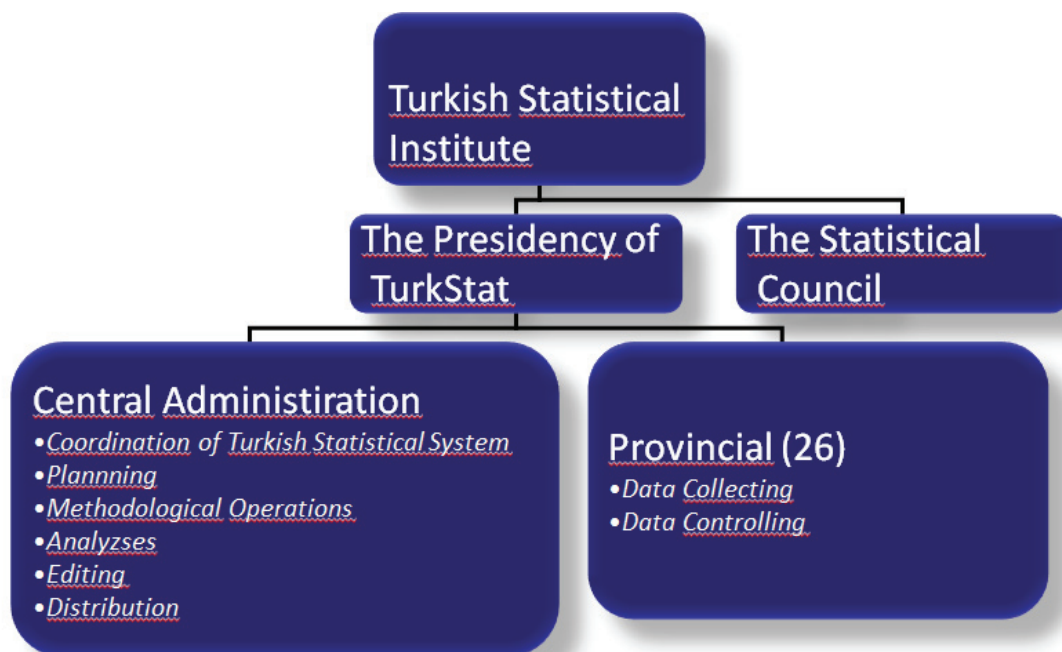
Session 15. Visit to the Turkish Statistical Institute Regional Office

288. In the afternoon of day three, a visit to the Turkish Statistical Institute (TurkStat) regional office was arranged. Two presentations were given there by TurkStat and the Population Directorate (civil registration authority). One was an overview of TurkStat and other one was specific to civil registration.

289. The presentation of overview of TurkStat started by introducing its historical background. It was established in 2005 but its predecessors long existed since 1389. Its vision is to establish a user focused and sustainable statistical system based on international standards. Its mission is to produce and disseminate statistics which are qualified, timely, reliable, objective and consistent with the international standards and responding to the requirements and priorities of national and international users, and to provide coordination among the public institutions involved in the production process of official statistics. Its fundamental values were enumerated briefly.

290. TurkStat has three strategic goals: production of statistics based on international standards; improvement of institutional capacity and increasing productivity; and improvement of organizational effectiveness by strengthening the role of cooperation and coordination capacity of the institution.

291. A diagram of the organizational structure of TurkStat was shown. Under TurkStat, there are the Presidency of TurkStat and the Statistical Council.



292. The statistics production process was explained in detail. It involves statistics management, method research and development thorough out the process. A comprehensive process requires good planning. In general, it starts by definition of needs, followed by planning and designing. Then it goes to the next stage –collecting. Afterward, it is the central production process which consists of processing and producing statistics and analysis. The cycle ends at dissemination of data.

293. Sources of data encompass censuses, sampling surveys, administrative records and registration systems. Data are collected by using a number of methods. For example, they can be collected using existing records, such as data entry from the forms or transfer of data on electronic bases, or via surveys like web based surveys. Data may also be compiled using remote sensing. Computer assisted telephone interviewing is also a possible approach used by TurkStat.

294. The principle of statistical data quality entails relevance, accuracy, timeliness and punctuality, accessibility and clarity, coherence and comparability. Quality control is conducted throughout the data production process; in the phase of planning and designing, application of international standards and pre-test for questionnaire design is crucial. In the data collection process, organization control, controller checks and data entry checks are applied. Consistency check on data, between terms and consistency norms calculation are carefully implemented in the next step – statistics analysis. An overall data quality control will be performed at the end, before distribution of reports.

295. Some principles should be honored in the process of distribution. For instance, simultaneous access should be assured. User satisfaction is of priority. TurkStat strives to ensure objectivity, transparency and timeliness of data. Data privacy is always protected. The distribution formats include press releases, publications, brochures, individual data and databases. Data can be distributed by various channels, including but not limited to directly by hand, fax, post, e-mail, webpage, telephone and teletext. Among all, the main distribution channels is their institutional web page <http://www.turkstat.gov.tr>

296. Apart from the organizational structure of TurkStat shown, the representative further introduced the organizational structure of the Istanbul Regional Office. It consists of Department of Administrative and Financial Affairs, Central Coordinator, European Coordinator and Anatolian Coordinator. The representative then went deeper to present the structure of each department. A map with location of regional offices was depicted, followed by a chart of number of personnel.

297. TurkStat also strives to promote interagency cooperation. In 2015, it signed local protocols with a number of counterparts, including private sector, academia, media, industry and civil society groups, regional and international organizations.

298. Before concluding the presentation, a number of statistics, social and economic indicators were depicted in various charts to give audience a brief picture of Turkey. After hearing an overview of TurkStat, the workshop had another presentation by the General Directorate of Population and Citizenship Affairs, sharing the national practice of civil registration in Turkey.

299. The General Directorate of Population and Citizenship Affairs, or Population Directorate in short is the name of the agency responsible for civil registration in Turkey, which serves as a population register. Transactions that have to be registered at population directorate include not only vital events like birth, death, marriage, divorce, but also population related transactions such as registration correction, and address notification. In Turkey, there are 971 district population directorates, among which 39 operating in Istanbul, including province population directorate.

300. Information recorded by population directorates include personal identity information such as name, surname, mother's and father's name, place of birth, date of birth and information on population transactions. The Turkish Republic identity number is the most important personal identity information, which enables to reach a persons' record. Information about registration place in province, district, village, neighbourhood, binder, page and file detail is also part of the record. Population services are given at the district offices via information technologies by online transactions in the central population database.

301. The Turkish Republic identity number is comprised of 11 digits, which do not contain personal information, thus resolving problems arising from identical names. This identification number is unique and unchangeable. It provides fast and efficient identification and allows easy exchange of identity information among public institutions and agencies. It is used to register all civil status events from the moment of birth and to access all public services.

302. The identity card is an official document that proves the Turkish Republic citizenship or residence and enrollment to the population family index. Requests for identity card can be done at population directorates corresponding to the domicile or registered personal address. In case of abroad, identity card is given by consular representatives. For all requests, two photos taken within six months are required.

303. There are regulations on lost or stolen identity card (Population Services Law No. 5490). In case of lost or stolen of identity card, a selected representative of the village or neighborhood (Mukhtar) will prepare a new identity card request form, in order to vouch for the individual whose card is lost. Population directorate can also ask for more proof of identity if needed. A new identity card is given to an adult himself/herself or to guardians of the child. Official documents that are accepted as proof documents of identity are international marriage certificate, driver license, passport, civil servant card, lawyer identification card, press card, foreigner' resident permit and foreigner' identity card or passport.

304. The blue card is an official document given to people who were Turkish citizens by birth and lost citizenship or to their descendants. Turkish Citizenship Law No. 5901, Article 28 defines this blue card eligibility, including the rights that blue card holders can benefit from.

305. Vital events that have to be registered at the population directorate were touched upon one by one. Every live born child has to be registered at the population directorate

either in the locality where birth occurs or any other within 30 days after birth, and within 60 days to foreign representatives if abroad. Parents should present the medical birth notification or by oral declaration if no medical birth notification is available.

306. Birth registration abroad can be done by sending petition to the consulate. Required documents include official (foreign) birth certificate and population register information of the parents. In the case when there is no consulate in the foreign country, request can be sent to any population directorate in Turkey with the original foreign birth certificate and its translated copy.

307. Children who are born from married parents, are recorded to father's household file with father's surname. Children who are born from unmarried parents are recorded to single mother's household file with mother's surname, or to father's household file with father's surname in the case of acceptance or recognition of fatherhood.

308. Whether a child is granted Turkish citizenship depends on which one of the parents is Turkish. If the father is of Turkish descent or Turkish citizen, and married to the child's mother at the time when birth occurs, Turkish citizenship is usually granted. These children are recorded to the father's household file regardless of whether birth occurs within the border and whether mother is foreigner. If the father is of Turkish descent or Turkish citizen but not married to a foreign mother, citizenship can also be given if either spontaneously gets married, according to the Civil Law Item 292, or by court decision on determination of paternity on the will of mother or child. All children with Turkish mothers either born in Turkey or abroad have Turkish citizenship by birth. The ones who have married parents, directly are recorded to the marriage household files. Otherwise, they are recorded to single mother household files.

309. When birth is notified to district population directorate, processing officers prepare three copies of the birth certificate. Birth certificate is first read to the informant including name, surname, date of birth and address. If there is no error, birth certificate is signed by the processing officer, chief officer or director of population directorate and the informant.

310. In case of death, the following information has to be reported to district population directorate: date of death occurrence and place of death occurrence. If these are not known, where the corpse is found or in case of a death in a transportation vehicle where deceased is taken from the vehicle. Related authorities and officers prepare death certificate and send it to the related district population directorate within 10 days after receiving news about death. At district population directorate, two copies of death certificate are recorded in the family page.

311. All marriages in Turkey must be performed under the authority of the Turkish Civil Code in order to be legally recognized. The authority can be the mayor or his attained officer in municipality territory or in villages, selected representative of that village (mukhtar). In addition, Ministry of Interior can authorize population directorates and consulates to perform the marriages. If one member of the couple is foreign, only municipality marriage offices and population directorates can perform the approval.

Foreigners can choose to get married at their national authorities or Turkish authorities. Marriage notification is sent to the population directorate by the authorities at most 10 days from the marriage. This marriage is recorded at the population household file by the population directorate.

312. Divorce is the end of conjugal union by a final court decision. Date of occurrence of divorce is the date of final decision of divorce. If divorce is ruled in a foreign court, Turkish courts must give final decision but the date of divorce is the date of foreign court' decision date. The domestic court then sends the divorce decision to the population directorates for recording to family files. Civil law sets out 300 days waiting period for women to get married again after divorce.

313. The Address Registration System is a centrally administered system where up to date domicile and other address information of Turkish nationals and foreigners domiciled in Turkey is maintained electronically. Every Turkish citizen has an domicile address record at the national address database along with a ID number. The National Address Database (UAVT) is the frame of the Adress Registration System which consists of all addresses in Turkey. UAVT was constituted by Turkstat in 2006 firstly. After 2006 update of the system is made by municipalities.

314. Persons shall be under the obligation of notification of domicile or other addresses. Notifications of address change shall be made within 20 working days to the civil registration offices, the consular representatives abroad or to other agencies providing address-based services. Notification can be done in person, by postal services or electronically.

315. A number of benefits of the Address Registration System were outlined to conclude the presentation. It promotes efficient use of resources by keeping address and biographical data monitored from a single center. It ensures more efficient and effective provision of public services, operation of public audit mechanism and integrated e-Government infrastructure. It abolishes the necessity to stay at home during population censuses. It contributes to compilation of reliable and up to date statistics related to the quantitative and qualitative characteristics of the population based on address information. Availability of real data in turn prevents losses and leakages during the planning and implementation of public investment. Economic losses due to address confusion caused by incorrect maintenance of address records, incorrect address notifications, information overload or frequent change of address components can be prevented as well as additional costs incurred when setting up and updating electoral lists. In addition, the Address Registration System helps prevent tax revenue loses and tax evasions stemming from failure or late delivery of communications to the relevant persons due to incorrect address information. The electronically maintained UAVT also constitutes the backbone of the city information systems.

316. During the discussion session, regarding the population directorate, a representative from Tukey made it clear that the population directorate is not under the responsibility of TurkStat but is jurisdiction of Ministry of Interior.

317. He explained that while fertility rate is low in Turkey in general, the huge population growth in Istanbul, which is the largest city in Turkey, is due to internal immigration from other provinces.

318. Delegations had great interest in birth registration in Turkey. It was clarified that while a copy of medical birth certificate is directly sent to population directorate from the hospital, parents are required to bring along the original medical certificate issued to them, to the population directorate to file an application of birth registration within 30 days after birth. The birth registration process is not automatic without an action taken by parents, only notification is automatic and electronic. Grandparents are eligible to apply for birth registration for their grandchildren after the due date, but a fine will be applied.

Session 16. WHO Regional Strategy for the improvement of CRVS systems

319. Session 16 was cancelled due to unforeseen unavailability of WHO representative; and time was used for discussion, Q&A and lessons learned from the excursion to the TurkStat regional office (session 15).

Session 17. Strategies for improving civil registration and vital statistics system in subregional Asia

320. This session was the culmination of the work of country teams. It provided a platform for countries to share their national strategies for improvement. Each country (statistician and registrar jointly) made a presentation on possible national strategies for improving both civil registration and vital statistics system, based on the work done in session 14 and existing national development plans. Countries also put forward strategies to meet the Regional Action Framework goals and targets.

Afghanistan

321. The historical background of civil registration in Afghanistan was first introduced. Civil registration started in early 18th century in Kabul centers. The Act of 1878 on registration of births, deaths and marriages was applicable to whole of Afghanistan at the King Amir Shir Alli Khan time. Registration of events was voluntary across the country. In 1977 with the help of the United Nations, civil registration started to operate together with the formation of the Ministry of Interior. In 1978 a section was created in the Central Statistical Office in order to analyze and evaluate the Civil and Voter Registration (CVR). The current CVR law has 7 main articles and 37 parts, which have been approved by the Ministry of Justice.

322. The statistical office aims to provide reliable estimates of birth and death rates, and other measures of fertility and mortality, including total fertility, and infant mortality. The levels of aggregation are at the state and national levels, as well as by place of

residence. Vital statistics are widely used in the preparation of population estimates and projections; the construction of life tables; the measurement of important demographic and health indicators; fertility data and family planning; and monitoring and evaluating public health programs, including maternal and child health services. A list of vital statistics tables generated by the Central Statistical Office, based on data collected from the civil registration system was then presented.

323. Though there are 4500 registration places available nationwide and among the 34 provinces, 33 provinces are covered, the coverage of both birth and death registration remains low in Afghanistan. On one hand, there is lack of awareness of need, importance and benefits of registration, resulting in low use of birth and death certificates as well as low priority and general apathy in the mind of public. On the other hand, lack of coordination, complex reporting lines in the hierarchy of the civil registration system, poor allocation of funds by state governments added to ignorance of rules, duties and responsibilities worsen the situation.

324. The representative of Afghanistan identified a number of initiatives that should be implemented to improve their birth and death registration, this was done from two angles. On the demand side, promoting the importance of vital event registration to increase people's awareness, such as launching advertisements and drumming up NGO supports. On the supply side, providing more financial assistance at subnational levels, including training to staffs at the local level and assisting in the maintenance of records by improving the computer network infrastructure. At the same time, the representative of Afghanistan encouraged inter-department cooperation at state levels by organizing inter-departmental coordination committee meetings.

Armenia

325. The representatives of Armenia started their presentation by comparing core topics recommended by the Principles and Recommendations with topics covered in the country's registration forms. It was noted that most topics are covered while there are some missing. Weight of newborn is not included in the birth registration form but it is available in the health record. Similarly, interval between birth and the date of previous live birth is only available in the health record. As for marriage and divorce, date of occurrence is not included, except for divorces finalized by courts. Data are disseminated in a demographic yearbook, as well as in quarterly updates.

326. The major obstacle for complete registration was accessibility to civil registration offices in rural areas where transportation is not convenient. The Ministry of Social Affairs has formed a working group to solve this problem. It was decided to give monetary incentives to the first and second child (\$120-\$150 USD each). The amount increases for the third and fourth child. This has effectively improved the coverage. According to latest Demographic and Health Survey (2010), coverage of birth registration in Armenia is 99.6%.

327. There is still a small portion of people (1.2% of population) living in the mountains and making a living from raising livestock. Women from these areas usually

give birth at home and population is not used to register births. In addition, early marriage (before age 16) is common, which cannot be registered legally. This is a factor preventing them from going to the civil registration office in the nearest town.

328. On the other hand, there are problems of registering stillbirths and infant deaths within 28 days from birth. Under the Soviet regulations, births could only be registered after 28 days from birth. Therefore, birth and death of a newborn dying before 28 days of age were not registered. The law was changed to transfer the responsibility of registering these early infant deaths to health institutions, which has had a positive effect. However, it is still difficult to catch births occurring at home if early infant deaths occur.

329. It was noted that the RAF national targets were not yet set, which would be done at high levels of government. It was agreed that it is essential to establish a national mechanism, and provide it with a clear mandate and allocated resources. Afterwards, national targets can be decided and there will be a need to establish sub-groups composed of experts in each topic.

330. Five strategies were proposed for discussion at the national level with various stakeholders. The fundamental strategy is to enhance legislation to take into account the UN Principles and Recommendations. The second strategy is to include CRVS in national development plan to ensure there are resources allocated to this area, and have its importance recognized. The third one focuses on public education. It is important to improve public awareness of how CRVS benefits each individual. The fourth one is to ensure implementation of consistent operational procedures. Lastly, it would help to improve service to users of data and metadata.

Georgia

331. The representatives of Georgia presented the topics covered in the country's registration forms compared to core topics recommended by the UN Principles and Recommendations in the context of the four prioritized vital events, namely birth, death, marriage and divorce, as well as foetal death.

332. For birth, the topics that are not covered are attendant at birth, mother's education, duration of residence in usual place, place of birth and stillbirth to mother during entire lifetime as well as father's education.

333. As for death, all the topics are covered except stillbirth to mother during her entire lifetime in the case of stillbirth.

334. All the topics are covered for marriage and divorce.

335. Demographic statistic in Georgia have been deteriorating after independence. The sharp increase of migration flows, with one fifth of Georgian population leaving the country during 1990s, poses a challenge to population estimation. Furthermore, after independence, Georgia had to face unresolved conflicts, such as the conflict in Abkhazia and South Ossetia in 1993-1994 and the conflict in South Ossetia in 2008, which carried changes in the territory of the country and made data collection complicated.

336. In particular, the completeness of causes of death is low. A chart of percentage of cause of death class XVIII (symptoms, signs and abnormal clinical and laboratory findings not elsewhere classified) was displayed. It once went up to 55% around year 2010, then dropped to 29.4% in 2014 which was still at a very high level.

337. Three national goals were set by the RAF to strengthen civil registration and vital statistics, namely to achieve universal civil registration; to provide all individuals with legal documents of vital events; and to produce and disseminate accurate, complete and timely vital statistics based on registration records. All three goals were achieved since 2008 with one exception that cause of death is still not complete.

338. A number of strategies were proposed to improve data on cause of death. It was suggested to create a working group, having the NSO, the Public Service Development Agency (PSDA, the civil registration agency), the Ministry of Health and National Center for Disease Control and Public Health (NCDC) collaborating with WHO. The Ministry of Health and NCDC would be designated for data collection. Statistics of morbidity and causes of death should be linked. Adoption of verbal autopsy and instituting “coroners”, namely public officers whose primary function is to investigate any death thought to be of other than natural causes were recommended. The representatives acknowledged that the degree of success of these proposed strategies mainly depended on the actual financial resources.

Iran

339. The representatives of Iran delivered a presentation according to the assignment given. They walked the audience through the core topics covered by their civil registration system.

340. In the context of the RAF, it was shared that a memo was going to be signed among the Civil Registration Agency, the National Statistical Office and the Ministry of Health.

341. The main obstacles were touched upon, including institutional weakness of the civil registration agency and lack of public awareness. Some improvement strategies were highlighted in order to tackle these obstacles. For instance, Iranian government is setting up an interagency mechanism to facilitate the workflow. Registration offices are being set up in the main hospitals, which will favourably impact timeliness, completeness and accuracy of data. The government also was planning to design and implement a monitoring and evaluation system.

Kyrgyzstan

342. The representatives of Kyrgyzstan first made a comparison between main topics recommended in the Principles and Recommendations with topics collected in Kyrgyzstan. Coverage of topics is rather complete. In the case of foetal deaths, information is available in health records but not in registration forms. Similarly, birth weight is only available in health record but not birth registration form.

343. As for coverage of vital events registration, it was particularly pointed out that coverage of marriage registration is incomplete because many people only perform religious marriages. Besides, there are issues with birth registration by single mothers as they are usually not willing to register their babies.

344. The main strategy Kyrgyzstan adopted to address the above difficulties was to establish a population register while at the same time, tries to raise awareness of registering marriages and divorces among Muslim leaders

345. The rest of the presentation focused on the establishment of a population register in their country, which improves the civil registration and vital statistics. Prior to the launch of the population register, there was no single body for implementing the policy of interdepartmental exchange, which resulted in either lack of interdepartmental exchange of information or data chaos because each agency operated based on its own rules. This new population register involves the complete cycle of human life, which includes but is not limited to birth registration at the beginning of one's life, obtaining ID and passport, editing address, marriage registration and so on until death.

346. There are three development phases. The first one is to create a biometric database with the prerequisite of a new legal framework for biometric registration of citizens and availability of funding. Infrastructures such as processing center and data warehouse, equipment and software for collecting biometric data are expected to be completed by the end of phase one.

347. In the second phase, an up-to-date database of the population is to be created, including the passport database with "1 person - 1 passport - 1 PIN", the database on invalid passports and Automated Information System(AIS) for Registration Office and Address Register. New generation biometric passports will be introduced in the third phase.

348. The Electronic National Population Register (EGRN) would be a centralized automated information system for collecting, accumulating, updating and analyzing data on individuals and providing this information to authorized state bodies. The collection, processing, storage and use of biometric data respect the following principles (a) mandatory biometric registration; (b) openness in terms of ensuring citizens' confidence in the use of biometric data by the State; (c) guarantees the legitimate use of biometric and personal data by public authorities and local self-governments, vested with special powers in accordance with the legislation of the Kyrgyz Republic; (d) protection of the biometric database; (e) ensuring the security of biometric data when they are collected, processed, stored and used in information systems and compliance with the requirements of physical media.

349. The launch of the population register had gone well. Up to the time of the presentation, the total number of citizens who have passed biometric registration was more than 2,720 thousand, which represented more than 75% of the total population over 16 years old.

Mongolia

350. The representatives of Mongolia elaborated first on the comparisons of core topics recommended by the P&R with topics covered in the country's registration forms in the context of birth, death, marriage and divorce registration.

351. For birth, the topics that are not covered are attendant at birth, mother's duration of residence in usual place and place of birth, foetal deaths to mother during her entire life time, mother's date of last previous live birth, father's marital status.

352. For death, the topics that are not covered are certifier, place of the usual residence of the mother in the case of infant death. It was highlighted that foetal deaths are not registered at the registrar but data is available from health records.

353. For marriage and divorce, place of occurrence is not covered.

354. The common major obstacles for the registration of all four vital events are budget constraints and lack of IT personnel at the headquarters of the registration authority. The representative then walked the audience through the major obstacles for each vital event.

355. Late registration is common in birth registration, particularly in rural areas due to large landscape of the country and long distance between herder households and registration offices. Thankfully, birth registration is motivated by the state subsidy. Similarly, the phenomenon of late registration exists in death registration, particularly in rural areas. Coverage of infant deaths is low due to people's stereotype about deceased children. Like birth registration, death registration is motivated by state subsidy. Furthermore, burial and incineration requires death certificates in urban areas.

356. As for marriage registration, there are policies intervening marriage in irregular manner. Motivation among the population is low, as they feel that they do not need to have a legal obligation with their spouse. Unlike birth and death, no financial motivation is provided by the government. In terms of divorce registration, one major obstacle is the negative effect of policy intervention. Besides, people may opt to not register their divorce in order to avoid payment of child care. Judicial and registration requirement of presence of both spouses also make people reluctant to register their divorce.

357. The representatives of Mongolia addressed the RAF targets mentioning that the targets have not yet been determined officially but they are setting up an interagency working group to work on the action plan for the targets. Their two main concerned areas are foetal death and cause of death.

358. To finalise, the Mongolian presenters outlined the strategies to improve the system. First, they touched upon the organizational issues, highlighting the importance of assigning a national focal point, and establishing a coordination mechanism. Second, they proposed to conduct an assessment of the current circumstance. The third one was to define targets and develop specific strategies for increased coverage of foetal death and

cause of death. The last one mentioned was to produce vital statistics in line with the recommendations.

Kazakhstan

359. Similar to previous country presentations, the representative of Kazakhstan first compared the main topics recommended in the Principles and Recommendations with topics collected in their country. It was confirmed that most of the topics are covered, with some information coming from health records. Then she outlined the obstacles to achieving full coverage of registration of vital events, which are the absence of a document proving the identity of the child's mother or both parents when registering a birth. When registering a death, often there is no correspondence between information provided by informants sometimes and the official addresses lists; there are also challenges for registering deaths corresponding to unclaimed corpses.

360. The national target under Goal 3 of the RAF (Formulate and disseminate accurate and up to date statistics based on civil registration data) is to reduce the proportion of poorly coded causes of death from 22% in 2014 to 3-4% by 2024. Several strategies were provided to achieve this goal. The first one was to provide continuous training to physicians and coders. The second one was to establish working groups for the analysis of medical certificates with an inaccurate cause of death vis à vis the outpatient card of the deceased, in order to discuss the assigned code. In addition, there should be an ongoing assessment of the quality of data on causes of death using WHO tools.

Tajikistan

361. The representatives of Tajikistan informed delegations that 77% of births and marriages are registered in “Jamats”, which are the rural local registration authorities. All topics recommended are included in their registration forms.

362. The major challenge for achieving full coverage is that accessibility is difficult in some remote areas. In addition, issuance of certificate is current based on a paper system, which often causes delays. To solve this problem, the government plans to connect rural local registration authorities to the electronic system so that issuance of certificates is sped up.

363. Regarding the problem of early marriage of young girls, efforts are being made to prevent them from marrying before the legal age. Furthermore, attention was called to the ID system that Tajikistan plans to introduce.

Russian Federation

364. The representative of Russia confirmed that all core topics are included except birth weight. Obstacles of getting complete coverage are with population in rural and remote areas, especially indigenous peoples and population who make a living by hunting, raising livestock or growing agricultural products. They are not accustomed to register vital events. Money incentives have been offered to increase participation, particularly

for marriages. However, there is risk of double registration if population moves to Moscow.

365. It was noted that delayed registered events, namely those registering more than one year after occurrence are not included in tabulations. As for RAF national targets, the representative mentioned that there was no plan for that yet but Russia was planning to implement a population register.

Turkey

366. The representatives of Turkey first elaborated on the main differences in terms of topics covered in their birth, death, marriage and divorce registration forms, compared to the list of core topics provided by the Principles and Recommendations.

367. Then she outlined the major obstacles for achieving complete coverage of vital events registration. The first consists in the challenges of making new legal arrangements. The second one is the lack of awareness and consciousness of public and the low educational level of public, especially of women. Thirdly, there are challenges due to the geographical configuration of the country. Coupled with this, in rural localities where there are no physicians, infant death registration is often overlooked. She also mentioned that child marriages are common in some areas, but these events cannot be processed. In some regions, declaration of birth is made by family members or kinfolks other than the parents, which makes the registration process more complex. Finally, the representative of Turkey stated that late registration and non-qualitative information recorded are prevalent.

368. The RAF national targets were also touched upon. Turkey aims to set a new birth notification system, with which declaration of births, including infant death, will be performed directly by the health institutions. Topics such as birth order, biological mother and other related information would be covered. However, it had been difficult to implement due to bureaucratic processes and legal arrangements. In addition, the involvement of private health sector would also take time.

369. Five strategies were proposed to improve the civil registration and vital statistics and to achieve the targets. The first one is to make necessary changes in the Population Services Law of Turkey. The second one is to set electronic birth notification integrated with the civil registration system. The integration of current death notification system to the civil registration system is equally important. The improvement of awareness of public and especially the educational attainment of women cannot be overlooked. The final proposed strategy is to produce accurate, complete and timely vital statistics by adapting the data flow according to the national and international statistical infrastructure.

Uzbekistan

370. The representatives of Uzbekistan confirmed that all core topics recommended by the UN are included in their collection. Additionally, the country is reforming the law in order to include ID numbers of parents and newborn in birth registration, and ID number

of the deceased in death registration. Similarly, for divorce registration, the government is introducing an amendment to include ID number in the divorce registration form.

371. With regard to marriage, religious marriages are not registered in Uzbekistan. This represents a challenge in rural areas, as most couples only have religious marriages, so these events are not registered legally, which hinders their ability to exercise relevant rights. To tackle this problem, Uzbekistan is introducing a new law which not only requires Imams to participate actively in government-run education campaigns, but makes it obligatory for Imams to notify the civil registration office of any marriage performed by them.

372. Every five years, the government adopts some new measures. The measures introduced lately are to prevent early marriages and marriages between relatives, as well as to promote importance of civil registration. This has had positive results. Additionally, the establishment of local committees, composed of women who have knowledge about the households in the locality (for instance, whether a particular couple is married; if they have a child, whether they register their kid) contributes to the high coverage of civil registration. At the same time, pregnant women are advised about child rights, importance of marriage and birth registration as part of awareness campaigns.

373. The representatives acknowledged positive experiences of other countries she had seen, such as the practice of “one person, one file” recommended by OSCE. It means that for each individual residing on the territory there should be only one file in the register containing his/her personal information. There are four files per person in Uzbekistan, but amendments have been introduced to minimize the discrepancies. For instance, in case a person dies, the Ministry of Health has to inform the civil registration office about this event, so that respective change can be reflected in both files. The representatives of Uzbekistan also recognized that late registration of births (after 1 month from occurrence) remains a challenge.

374. During the discussion session, the issue of ethnicity was first touched upon. There was an interest in knowing whether population estimates by ethnic group are produced in Kyrgyzstan, since there is a minority of Kyrgyz in Afghanistan who have lived there for long time and have Afghan citizenships. A representative of Kyrgyzstan clarified that the population was estimated based on a house listing compiled in 1979 and the 2004 population census, and it included minorities in the calculation. OSCE further explained that issue of ethnicity is not a core topic in the UN Principles and Recommendations. It is sensitive information and it relates to human rights. It needs to be further discussed at the national level depending on national relevance of the topic. UNSD agreed that this is an additional topic left to the discretion of countries.

375. There was a question related to the plans to link morbidity to cause of death in Georgia. The Georgian representatives reiterated that this implementation is through the ID numbers of people who go to the hospital. For those who refuse to go to the hospital, brigades will visit the households and interview them.

376. A question was raised by UNSD regarding to the rapid and comprehensive assessment undertaken in Iran. It was responded that the data collected through these exercises has informed the formulation of strategies to raise the coverage of registration, which has been improving. For cause of death, the Ministry of Health is also taking strategies to improve data.

377. Finally, delegates discussed the intricacies of a legislation that makes Imams responsible for marriage or notification registration in Uzbekistan.

Session 18. Wrap-up / Closing

378. During the wrap-up session, delegates reviewed the draft Conclusions and Recommendations that the representatives of UNSD had prepared, provided feedback and proposed revisions. After each paragraph was looked at, participants agreed on the changes to be made to the document. Agreed changes were made immediately and the resultant text was circulated to participants. Afterwards, the text was posted on the workshop website.

III. Conclusions and recommendations

379. The workshop was conducted in partnership with the Institute of Statistics of Turkey, the Economic and Social Commission for Asia and Pacific, the Organization for Security and Cooperation in Europe and the United Nations Statistics Division. Civil registrars and statisticians from the following countries participated: Afghanistan, Armenia, Georgia, Iran (Islamic Rep. of), Kazakhstan, Kyrgyzstan, Mongolia, Russia, Tajikistan, Turkey and Uzbekistan.

380. The participants expressed their appreciation for the organization of the workshop and emphasized that it was very timely taking into consideration the implementation of the Regional Action Framework on CRVS for Asia and Pacific.

381. The workshop welcomed the revised version of the *Principles and Recommendations for a Vital Statistics System* underlying its importance in terms of setting international standards for civil registration and vital statistics.

382. The full implementation of these international standards is recognized as a goal for all participating countries; nevertheless, there are difficulties and obstacles that vary from one country to the other, ranging from the coverage of civil registration to the completeness of vital statistics.

383. The workshop recognized the whole set of handbooks accompanying the *Principles and Recommendations for a Vital Statistics System, Revision 3*, as relevant and valuable reference; at the same time, it concluded that all efforts should be made to produce a guiding material on the use of ICT in civil registration.

384. Visible and tangible improvement of civil registration procedures and coverage has been noted in almost all of the participating countries albeit the levels of modernization and functioning of these systems in different countries was not at the same level. Irrespective, all the participating countries are implementing efforts in terms of modernizing civil registration systems. In that context, the participants outlined the need for constant training within the national civil registration systems and concluded this should be strongly emphasized and reflected in these conclusions and recommendations.

385. Vital statistics produced by participating countries varied in terms of comprehensiveness and quality; however, basic vital statistics are produced regularly in all participating countries on the basis of civil registration.

386. The workshop re-iterated the importance of civil registration for a whole range of issues, including the exercise of basic human rights, assigning legal identities to all the citizens and the functioning of the government, aside from its role in terms of producing reliable, regular and comprehensive vital statistics. In that context, the participants welcomed the regional initiatives related to the improvement of civil registration and vital statistics systems in Asia and Pacific.

387. The workshop discussed at length the role of civil registration in the process of certification of the causes of death. It noted the international recommendation that this

role consists of ensuring that the certification of the cause of death by a trained medical practitioner is part of the death registration record and as such is transmitted to the statistical office for further processing. Acknowledging that national practices somewhat differ, the workshop concluded that certification and coding of causes of death remains an area of weakness, and that national practices need to be re-visited and possibly adjusted to comply with international standards.

388. In that context, the participants outlined the difficulties that the lack of adequate translation of methodological materials, primarily handbooks accompanying the International Classification of Diseases, rev. 10, poses in terms of fully implementing it. These problems may only be exacerbated with the introduction of the 11th revision, the workshop noted.

389. In discussing the legal framework for a civil registration system the participants noted that national practices differ when it comes to consequences of non-registration, such as fees and other forms of possible administrative responsibilities – including those for delayed registration; however, in all the participating countries the legal framework contained provisions for non-compliance; the workshop concluded that incentives, rather than fines, are a much more efficient tool in improving the coverage of registration, as documented in a number of participating countries.

390. Regarding the assessment of the coverage of civil registration and the quality of vital statistics, the workshop noted that these exercises did not take place in some participating countries for quite some time; it concluded that this issue should be raised once they are back in their respective countries.

391. Coordination at the national level among institutions responsible for civil registration, vital statistics, public health institutions, interior affairs, social services, and a host of other stakeholders remains unsolved in a number of participating countries.

392. The participants acknowledged and welcomed the Regional Action Framework for Asia and the Pacific, an outcome of the Ministerial Conference for Improving Civil Registration and Vital Statistics in Asia and the Pacific, held in November 2014. The three goals resonated at the workshop and participants recognized their relevance for participating countries. Furthermore, the workshop engaged in a lively discussion on the process of setting national targets in their respective countries as well as identifying those that might represent a specific challenge. The workshop concluded that this process will continue once participants are back in their capitals; yet they expressed appreciation for having this opportunity to take a close look at these issues.

393. Participants also expressed their interest in having training at the national level on specific methodologies for assessing the quality of their civil registration data and the consequent generation of vital statistics.

394. The afternoon session of the third day of the workshop consisted of a field trip and visit to the Regional Istanbul Office of TurkStat, who provided a detailed demonstration of the process of producing vital statistics from civil registration. The

office is a modern facility with a high level of organization and contemporary features. The participants expressed their most sincere appreciation for outstanding hospitality and comprehensive overview of the functioning of the office by its director and his staff.

395. In delivering their presentations on the major obstacles related to the functioning of civil registration systems and the production of vital statistics, as well as responding to regional initiatives, the workshop concluded that for all participating countries these obstacles are well known and are already being addressed at the national level. The workshop also concluded that the recently developed Regional Action Framework can assist those improvements in a comprehensive manner.

Annex 1. List of participants

No.	Country / Organization		Contact Person Information
1.	Afghanistan	1.	Mr. Abudl Khaliq Azimi Position : Director of Demography Central Statistics Organization
2.	Armenia	2.	Ms. Karine Kuyumjyan Position : Head, Population Census and Demography Division National Statistical Service
		3.	Ms. Ani Mkhitarian Position : Head, Department of works and methodology Civil Status Acts Registration Agency, Ministry of Justice
3.	Georgia	4.	Ms. Shorena Tsiklauri Position : Chief Specialist, Population Census and Demography Division National Statistics Office (GeoStat)
		5.	Ms. Eleonora Zurabashvili Position : Deputy Head, Civil Acts and Population Registration Division Public Service Development Agency
4.	Iran (Islamic Republic of)	6.	Ms. Maryam Pourreza Anvar Position : Head, Group for Census, Office of Population and Labour Force Statistics and Census Statistical Centre
		7.	Mr. Alireza Sadjedi Position : Senior Expert, Analysis of Thematic Statistics National Organization for Civil Registration (NOCR)
5.	Kazakhstan	8.	Ms. Bakytkul Uteulina Position : Chief Expert, Division of Social and Demographic Statistics Committee on Statistics, Ministry of National Economy
6.	Kyrgyzstan	9.	Ms. Liudmila Torgasheva Position : Main specialist National Statistical Committee
		10.	Ms. Nazik Shatmanova Position : Head, International Cooperation Department State Registration Service
7.	Mongolia	11.	Mr. Munkhbadar Jugder Position : Head, Census Bureau National Statistical Office

No.	Country / Organization		Contact Person Information
		12.	Mr. Davaadorj Radnaased Position : Vice chairman General authority for State Registration
8.	Russian Federation	13.	Ms. Venera Chumarina Position : Deputy Head, Population and Healthcare Statistics Department Rosstat
9.	Tajikistan	14.	Mr. Safarov Usufdzon Position : Chief of main department in Kulyb Agency on Statistics
		15.	Mr. ZhalolidinRakhimov Position : Deputy Head of CRO Department, Ministry of Justice
10.	Turkey	16.	Ms. Nevin Uysal Position : Statistician Expert Turkish Statistical Institute
		17.	Mr. Idris Beyazit Position : Expert Turkish Statistical Institute
		18.	Mr. Yegan Bilgiç Position : Statistician General Directorate of Population and Citizenship Affairs
		19.	Mr. Ahmet Gök Position : Statistician Expert Turkish Statistical Institute, Istanbul Regional Office
11.	Uzbekistan	20.	Ms. Flora Rasulova Position : Main specialist, Department on Demography and Labor Statistics State Committee on Statistics (Goskomstat)
		21.	Ms. Dilbakhor Yakubova Position : Head, Notary, Advocacy and Civil Registry Offices Ministry of Justice
12.	ESCAP	22.	Ms. Tanja Sejersen Position : Associate Statistician Statistics Division ESCAP Bangkok, Thailand
		23.	Ms. Sinovia Moonie Position : Associate Statistician Statistics Division ESCAP Bangkok, Thailand

No.	Country / Organization		Contact Person Information
		24.	Mr. Hong Pum Chung Position : Associate Economic Affairs Officer Subregional Office for North and Central Asia ESCAP Almaty, Kazakhstan
13.	UNSD	25.	Mr. Srdjan MRKIC Position : Chief Demographic Statistics Section, United Nations Statistics Division (UNSD)
		26.	Ms. María-Isabel Cobos Position : Statistician Demographic and Social Statistics Branch United Nations Statistics Division (UNSD)
14.	WHO	27.	Ms. Doris Ma Fat Position : Statistician Mortality and Burden of Disease Health Statistics and Information Systems WHO Geneva, Switzerland
15.	OSCE	28.	Mr. Zoran Đoković Position : Freedom of Movement/Human Contacts Adviser Office for Democratic Institutions and Human Rights (ODIHR) OSCE
16.	Plan International	29.	Ms. Nicoleta Panta Position : Advocacy Manager (global) Plan International

Annex 2. Organisation of work

Day 1. Tuesday, 15 September 2015	
8:30–9:00	Registration of participants
9:00–9:30	<p>1. Opening Introductory remarks by</p> <ul style="list-style-type: none"> -TurkStat - United Nations Statistics Division (UNSD) - United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) - Organization for Security and Co-operation in Europe (OSCE) <p>Introduction of participants and administrative matters Introduction of the programme of work, the methods of work and the literature provided to participants in print and in electronic format.</p>
9:30–10:30	<p>2. a. Guiding principles of vital statistics system. Following a brief introduction of the changes made in the latest version of the UN Principles and Recommendations for a Vital Statistics System, the session will discuss the main uses and sources of vital statistics, as well as the components of a vital statistics system. This session will focus on international recommendations for setting up and running a civil registration system, as well as the necessary coordination and integration within it (Chapters I and II of Part One of the Principles and Recommendations, Rev. 3).</p> <ul style="list-style-type: none"> • UNSD presentation <p>b. Regional Action Framework on Civil Registration and Vital Statistics in Asia and the Pacific. This session highlights the goals, targets and implementation steps of the Regional Action Framework.</p> <ul style="list-style-type: none"> • ESCAP presentation
10:30 – 11:15	<p>3. CRVS and human rights. This session highlights the importance of legal identity for full participation in society and to the realization of human rights.</p> <ul style="list-style-type: none"> • OSCE presentation • General discussion
11:15–11:35	Coffee break
11:35–12:20	<p>4. Civil registration as a source of vital statistics. The session examines the method, system, role and other characteristics of civil registration, and defines the vital events that should be registered. It also reviews the</p>

	<p>registration process for vital statistics purposes (Chapter II of Part Two of Principles and Recommendations, Rev 3/Goal 1 of the RAF and Action Area D, E and F).</p> <ul style="list-style-type: none"> • UNSD presentation • Country presentations (NSOs: Turkey, Georgia) • General discussion
12:20 – 13:45	Lunch break
13:45–15:00	<p>5. Topics and themes to be covered in a vital statistics system. This session considers topics to be investigated for each vital event, its specific characteristics and the persons directly involved (Chapter III of Part One of the Principles and Recommendations, Rev. 3/ Goal 3 of the Regional Action Framework and Action Area G: Production, dissemination and use of vital statistics).</p> <ul style="list-style-type: none"> • UNSD Presentation: Topics from Civil Registration, Censuses and Surveys • General discussion
15:00–15:20	Coffee break
15:20 – 16:30	<p>6. Population registers as sources of vital statistics. The session provides an overview of the use of alternative sources and their potentialities in the context of vital statistics (Chapters III and V of Part Two of Principles and Recommendations, Rev 3/Goal 3 of the RAF). In addition, it discusses in depth the difficulties with using administrative data.</p> <ul style="list-style-type: none"> • UNSD presentation (population registers) • Country presentation (NSO: Kazakhstan) • General discussion
16:30 – 17:00	<p>7a. Quality assessment and assurance in the civil registration and vital statistics system. The session reviews the basic quality assurance framework, and techniques, both direct and indirect, that can be used to evaluate the completeness of a civil registration system and reported vital statistics. The session will focus on internationally recommended mechanisms for assuring reliable, accurate and timely vital statistics (Chapter I of Part Three of Principles and Recommendations, Rev 3).</p> <ul style="list-style-type: none"> • UNSD presentation
Day 2. Wednesday, 16 September 2015	

<p>9:00 – 9:55</p>	<p>8. The role of health institutions. The critical role of health institutions in collecting death and cause of death information is examined (Chapter IV of Part Two of the Principles and Recommendations, Rev. 3/Goal 3 of the RAF and Action Area E on Infrastructure and resources).</p> <ul style="list-style-type: none"> • UNSD presentation • WHO presentation. Certification of causes of death. • Country presentation. Experience of a pilot on cause of death registration (NSO: Turkey). • General discussion
<p>9:55- 11:05</p>	<p>9. National-level designation of responsibilities and organizational structures of a civil registration system. This session examines the types of structures under which information on the frequency of occurrence of certain vital events and the person(s) concerned with them is collected, stored, retrieved and preserved. It includes the legal framework for civil registration under which the structures can operate efficiently (Module 3 of Chapter I of Handbook on Training in Civil Registration and Vital Statistics Systems/ RAF Action Area D and F).</p> <ul style="list-style-type: none"> • UNSD presentation • Country presentations (Registrars: Mongolia, Iran, Georgia) • General discussion
<p>11:05- 11:20</p>	<p>Coffee break</p>
<p>11:20 – 12:30</p>	<p>10. Local-level designation of responsibilities of a civil registration system. This session looks at the designation and duties of the local registrar. It also considers ways for the central office to improve the efficiency of the local registrar (Module 6 of Chapter I of Handbook on Training in Civil Registration and Vital Statistics Systems).</p> <ul style="list-style-type: none"> • UNSD presentation • Country presentations (Registrars: Armenia, Kyrgyzstan) • General discussion
<p>12:30 – 13:55</p>	<p>Lunch break</p>
<p>13:55– 15:05</p>	<p>11. Civil registration process: place, time, cost, late registration. This session considers the place of registration for each type of event and how it should be defined in law and regulation. The session also considers the importance and effect of the time factor in the registration of vital events; how fees should be assessed, relative to the effect they have on the completeness of registration; and it examines the methods of late and delayed registration</p>

	<p>(Module 8 of Chapter I of Handbook on Training in Civil Registration and Vital Statistics Systems).</p> <ul style="list-style-type: none"> • UNSD presentation • Country presentations (Registrars: Turkey, Uzbekistan) • General discussion
15:05 - 15:20	Coffee break
15:20- 16:30	<p>12. International collection of vital statistics and challenges faced by countries to fulfill it. The session reviews the data and metadata requirements at international level for vital statistics and the purpose of international collection; it will describe the system for collecting, processing and disseminating demographic statistics at international level using the United Nations Demographic Yearbook. Response rates for participating countries will be presented and compared with other regions of the world. In addition, based on pre-workshop assignments, countries will make a presentation addressing the challenges they faced in meeting data requirements.</p> <ul style="list-style-type: none"> • UNSD presentation. Collection of demographic statistics. • WHO. Collection of statistics on causes of death. • Country experiences on practical obstacles encountered when furnishing data for the Demographic Yearbook and lessons learned (NSOs: Georgia, Mongolia). • General discussion
16:30 - 17:00	<p>7b. Quality assessment and assurance in the civil registration and vital statistics system.</p> <ul style="list-style-type: none"> • ESCAP presentation. Reporting under the RAF • General discussion
Day 3. Thursday, 17 September 2015	
9:00 – 10:15	<p>13. Guidelines for national target setting and monitoring of the Regional Action Framework on Civil Registration and Vital Statistics in Asia and the Pacific. This session presents the Guidelines for setting national goals and targets, and also touches upon future challenges and opportunities for their country application.</p> <ul style="list-style-type: none"> • ESCAP presentation • General discussion
10:15 – 10:45	Coffee break

<p>10:45- 12:30</p>	<p>14. Country team work time. Representative(s) of each country will work as a team on preparing a 10 minute presentation on strategies to implement the Regional Action Framework while applying the Principles and Recommendations in their respective countries, assisted by resource persons. In particular, participants are expected to discuss:</p> <p>a) The main obstacles for achieving complete coverage of vital events registration, and for improving accuracy of registered information. Country teams will compare the topics covered in their registration forms with the list of core topics provided by the Principles and Recommendations.</p> <p>b) The baseline data (or lack thereof), as well as national targets for the RAF, using the Guidelines.</p> <p>A presentation will be delivered by each country on the last day of the workshop.</p>
<p>12:30 – 14:00</p>	<p>Lunch break</p>
<p>14:00 – 17:00</p>	<p>15. Visit to the Turkish Statistical Institute Regional Office</p>
<p>Day 4. Friday, 18 September 2015</p>	
<p>9:00–9:20</p>	<p>16. WHO Regional Strategy for the improvement of CRVS systems.</p> <ul style="list-style-type: none"> • WHO-EMRO presentation. Strategic options for the improvement of CRVS systems in the Region
<p>9:20- 10:50</p>	<p>17. Strategies for improving civil registration and vital statistics systems in subregional Asia. The session provides a platform for countries to share their strategies for improving CRVS systems. Each country (statistician and registrar jointly) will make a presentation on possible national strategies for improving both civil registration and vital statistics, based on the work done in session 14 and existing national development plans. Countries will present the strategies to be adopted to meet the Regional Action Framework goals and targets.</p> <ul style="list-style-type: none"> • Country presentations
<p>10:50 – 11:10</p>	<p>Coffee break</p>

11:10 – 12:30	<p>17. Strategies for improving civil registration and vital statistics systems in subregional Asia (continued).</p> <ul style="list-style-type: none"> • Country presentations
12:30 – 13:50	<i>Lunch break</i>
13:50 – 15:20	<p>17. Strategies for improving civil registration and vital statistics systems in subregional Asia (continued).</p> <ul style="list-style-type: none"> • Country presentations
15:20 – 15:40	<i>Coffee break</i>
15:40 – 17:00	<p>18. Wrap-up /Closing. Presentation and discussion of the summary of the workshop’s proceedings: conclusions and recommendations on how to improve the quality of vital statistics in participating countries.</p> <p>Evaluation of the workshop</p>

Annex 3. Pre-workshop assignments for civil registrars

Pre-workshop assignment 1 – Review and assessment of the national civil registration system

The purpose of this questionnaire is to collect information on the organizational and technical aspects of the national civil registration system. The questionnaire also assesses the state of the development and methods of evaluation in the civil registration system. Please return the completed questionnaire before **10 September 2015** at the following address by email if possible or by fax:

Att. Ms. Maria-Isabel Cobos
2, UN Plaza DC2-1564
10017 New York, NY, USA
Tel. +1 917 367 3072
Fax. +1 212 963 1940
Email. cobos@un.org

Please provide detailed answers to the questions. When necessary, please attach additional sheets of paper.

Official completing this questionnaire:

Name:
Title:
Address:
Institution:
Country:

PART I: LEGAL AND ORGANISATIONAL ASPECTS OF THE CIVIL REGISTRATION SYSTEM

1. Is there a legal framework providing guidelines concerning how the civil registration system works?

- Yes No

If Yes, please provide us with the title of the law.

2. Which of the following best describe the type of civil registration organization currently in operation in your country?

- a national system with a central office to administer the system
- a national system with different governmental departments to administer the registration of vital events
- The country has separate systems of registration in each major administrative division (e.g., province or state level) with a central office at those levels to administer the system)
- Other arrangements (specify) _____

3. At national level, which agency has the primary responsibility for the registration of the vital events:

Vital event	Agency primarily responsible for registration
Live births	
Foetal deaths	
Deaths	
Cause of death	
Marriages	
Divorces	

4. Is there a coordination agency or inter-agency coordination committee at national level, for needs and services among different agencies dealing with civil registration?

- Yes No

If Yes, provide the name and main responsibility.

5. Location of the primary registration units? (Check applicable items)

	Births	Foetal deaths	Deaths	Marriages	Divorces
a) Municipal offices					
b) Health offices					
c) Revenue offices					
d) Court offices					
e) Parishes/temples					
f) Population registers					
g) Other, specify					

6. Are there secondary registration units in certain hospitals, clinics, or religious places (e.g., churches, temples) or other public places to supplement the registration network?. Include subsidiary registration places for marriages and divorces.

Yes No

7. Which of the following perform the functions of the local civil registrars in your country? (Local civil registrars are the persons authorized by law to record vital events and civil status). Check applicable items:

	Births	Foetal deaths	Deaths	Marriages	Divorces
a) Appointed civil registrars					
b) Priests, ministers, other religious leader					
c) Court clerks					
d) Notaries					
e) Justices of peace					
f) Teachers					
g) Other, specify					

8. What are the main duties and responsibilities of the local civil registrars, as specified by civil registration law and regulations?. Check applicable items.

a. With respect to registration:

- Recording vital and civil status events and safekeeping of records
- Issuing certified copies of civil registration records
- Celebrating marriages

- Issuing burial permits
- Promotion of registration completeness
- Other, specify:

- b. With respect to vital statistics collection and reporting:
- Reporting civil registration data to higher level offices
 - Other, specify:

9. Do local civil registrars receive guidance for their work? Check applicable items.

- Copies of current laws and regulations on civil registration
- Updated handbooks or instructions on civil registration
- Handbooks on vital statistics reporting
- In service training
- Direct advice by higher level civil registration authorities through field visits
- Periodical bulletin of information concerning civil registration and vital statistics
- Circulars regarding procedures for civil registration
- Other, specify:

10. Technical supervision to local civil registrars work is provided by: (Check applicable items)

- Registration authorities from the National Agency (field visits from central office staff)
- Regional Registration authorities
- Judicial authorities vested with responsibility for the custody of the records
- The Mayor
- The Priest or Minister
- The local government authority
- Other, specify:

11. Administrative supervision to local civil registrars work is provided by: (Check applicable items)

- Registration authorities from the National Agency (field visits from central office staff)
- Regional Registration authorities
- Judicial authorities vested with responsibility for the custody of the records
- The Mayor
- The Priest or Minister
- The local government authority
- Other, specify

12. Which national agency and ministry are responsible for compiling vital statistics from civil registration?

Agency	
Ministry	

13. By what means is information on vital events transmitted to the compiling office?

	Individual/collective Pre printed forms	Summary reports	Computer tapes, diskettes or USB	Computer transmission
Live births				
Foetal deaths				
Deaths				
Cause of death				
Marriages				
Divorces				

14. Is there an agreed schedule for transmitting information on vital events to the compiling office?

	Monthly	Quarterly	Every six months	Other agreed periodicity	Ad-hoc arrangement / On request
Live births					
Foetal deaths					
Deaths					
Cause of death					
Marriages					
Divorces					

(ATTACH A DATA FLOW CHART)

PART II: TECHNICAL ASPECTS OF THE CIVIL REGISTRATION SYSTEM

Please provide a complete set of forms used for legal and statistical recording of all types of vital events.

PART III: EVALUATION OF COMPLETENESS AND QUALITY OF THE CIVIL REGISTRATION SYSTEM

1. Does the civil registration system cover all segments of the population in the entire country?

Yes No

If NO, please give a brief description of the coverage:

a) Which geographic areas are not covered? Why?

--

b) Which population groups (ethnic or national groups) are not covered? Why?

--

c) Any other categories that are not covered? Why?

--

2. Indicate if the registration coverage of vital events has been estimated in your country in the past ten years?

	Live births	Foetal deaths	Deaths	Cause of death	Marriages	Divorces
Yes						
No						

3. If YES for at least one event, indicate the most recent estimate of coverage for each event, the year to which this estimate refers and the method of evaluation used.

a. Level of coverage and year of reference

	Percentage of coverage	Year to which this estimate refers
Live births		
Foetal Deaths		
Deaths		
Cause of death		
Marriages		
Divorces		

b. Method of assessment

	Live births	Foetal deaths	Deaths	Cause of death	Marriages	Divorces
Through retrospective questions in population census(es)		Not applicable				
Through a follow up (prospective) survey						
Through retrospective questions in a single round survey						
Through a birth history in a single round retrospective survey					Not applicable	Not applicable
Through a dual-records system						
Verbal autopsy						
Other (specify)						

4. What agency is responsible for compiling and disseminating information on cause of death?

5. In the past ten years, have any studies been conducted to assess the accuracy of information on cause of death? If so, please attach the resulting report.

Pre-workshop assignment 2

1. Please do your best effort to fill in Tables 1.2 and 1.3 below (extracted from the regular UN Demographic Yearbook data collection).

1.2 Summary: Live births by sex of child and urban/rural residence of the mother

Year	TOTAL			URBAN			RURAL		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
2004									
2005									
2006									
2007									
2008									
2009									
2010									
2011									
2012									
2013									
2014									

1.3 Summary: Deaths by sex and urban/rural residence of deceased

Year	TOTAL			URBAN			RURAL		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
2004									
2005									
2006									
2007									
2008									
2009									
2010									
2011									
2012									
2013									
2014									

2. Please write up a report addressing the following items:

- Does your office compile vital statistics from the civil registration system? If yes, briefly describe what statistics are being compiled.
- What were the challenges faced to fill in the Tables 1.2 and 1.3 from question number 1.? What were the sources used to fill in the needed information? What are the factors that hamper the production of vital statistics from civil registration in your country?
- Are there any plans to improve the civil registration and vital statistics system in your country?

Please return the completed report before **10 September 2015** at the following address by email if possible or by fax:

Att. Ms. Maria-Isabel Cobos
2, UN Plaza DC2-1564
10017 New York, NY, USA
Tel. +1 917 367 3072
Fax. +1 212 963 1940
Email. cobos@un.org

Annex 4. Pre-workshop assignments for statisticians

Pre-workshop assignment 1 - Review of sources and methods for vital statistics

The purpose of this questionnaire is to collect information on the sources and methods for obtaining vital statistics used in your country. Please return the completed questionnaire before **10 September 2015** at the following address by email if possible or by fax:

Att. Ms. Maria-Isabel Cobos
2, UN Plaza DC2-1564
10017 New York, NY, USA
Tel. +1 917 367 3072
Fax. +1 212 963 1940
Email. cobos@un.org

Please provide detailed answers to the questions. When necessary, please attach additional sheets of paper.

Official completing this questionnaire:

Name:
Title:
Address:
Institution:
Country:

PART I: SUMMARY INFORMATION ON VITAL STATISTICS

1. Is there a legal framework defining responsibilities for the collection, processing and dissemination of vital statistics?

Yes No

a. If Yes, which agency has the primary responsibility for the:

Vital events	Agency primarily responsible for	
	Collection of data	Processing and dissemination of data

Live births		
Foetal deaths		
Deaths		
Cause of death		
Marriages		
Divorces		

b. If Yes, please provide us with the title of the law.

2. Which of the following best describe the type of organizational structure for the collection, processing and dissemination of vital statistics?

- a centralized system at the national level
- a decentralized system in each state or province or any other major division of the country
- The head office of the population register is in charge of the vital statistics
- Other arrangements (specify) _____
- Vital statistics are not compiled

3. Indicate the source(s) of data currently used to obtain vital statistics on:

	Births	Foetal deaths	Deaths	Marriages	Divorces
a) Civil registration					
b) Population Censuses					
c) Sample surveys					
d) Health records					
e) Dual record system					
f) Other (please specify)					

4. Are current available vital statistics obtained from multiple data sources? which sources?, indicate whether these statistics are coherent and if not explain why.

5. Please specify the definitions of vital events adopted in your country.

Live birth

Foetal death

Death

Marriage

Divorce

PART II: DATA SOURCES IN DETAIL

A – Civil registration:

1. Does a civil registration system exist in your country?

Yes No

2. If YES, what event does the civil registration cover?

	Live births	Foetal deaths	Deaths	Marriages	Divorces
Yes					
No					

If you replied YES to at least one event, please answer questions 3 to 18, otherwise go to **section B – Sample Surveys.**

3. Which national agency and ministry are responsible for civil registration?

Agency	
Ministry	

4. Is civil registration used as a source for statistics on:

	Fertility	Foetal mortality	Mortality	Marriages	Divorces
Yes					
No					

If YES to at least one of the event, please answer questions 8 to 15, otherwise go to **section B – Sample surveys.**

5. Which national agency and ministry are responsible for compiling vital statistics from civil registration?

Agency	
Ministry	

6. By what means is information on vital events transmitted to the compiling office?

	Individual/collective Pre printed forms	Summary reports	Computer tapes or diskettes	Computer transmission
Live births				
Foetal deaths				
Deaths				
Marriages				
Divorces				

(ATTACH A DATA FLOW CHART)

7. Are rates calculated from civil registration data on vital events?

	Live births	Foetal deaths	Deaths	Marriages	Divorces
Yes					
No					

If YES,

a. Please indicate the source used for the most recent population estimates used as denominator in the computation of current vital rates:

Continuous population register	
Population census (give year)	
Sample survey (give year)	
Other, specify	

b. Please indicate the technique used for the time adjustment in the population estimate (when the base data is not secured annually by a population register):

Interpolation	
Extrapolation	
Demographic equation	
Other, specify	

8. Indicate if vital statistics are published, their frequency and the title of the last publication containing these statistics?

	Fertility	Foetal mortality	Mortality	Marriages	Divorces
Published (Y/N)					
Frequency					
Title					

9. Are data on vital events tabulated by date of occurrence or/and registration?

	Date of occurrence	Date of registration
Live births		
Foetal deaths		
Deaths		
Marriages		
Divorces		

10. Are data on vital events tabulated by place of occurrence or/and place of registration?

	Place of occurrence	Place of registration
Live births		
Foetal deaths		
Deaths		
Marriages		
Divorces		

11. Is the information on place of usual residence (of mother for births and foetal deaths and of deceased for deaths) registered?

	Live births	Foetal deaths	Deaths
Yes			
No			

a. If YES to at least one event, is this information used in the calculation of vital rates?

Yes No

12. Indicate the level of accuracy of reporting of age of mother in case of Live births and of the deceased in case of Deaths and specify if any study to evaluate the age quality have been carried out.

Age of mother

--

Age of deceased

--

13. List vital statistics obtained from civil registration (use additional sheets if necessary).

--

14. Indicate if the registration coverage of vital events has been estimated in your country in the past ten years?

	Live births	Foetal deaths	Deaths	Marriages	Divorces
Yes					
No					

15. If YES for at least one event, indicate the most recent estimate of coverage for each event, the year to which this estimate refers and the method of evaluation used.

c. Level of coverage and year of reference

	Percentage of coverage	Year to which this estimate refers
Live births		
Foetal Deaths		
Deaths		
Marriages		
Divorces		

d. Method of assessment

	Live births	Foetal deaths	Deaths	Marriages	Divorces
Through retrospective questions in population census(es)		Not applicable			
Through a follow up (prospective) survey					
Through retrospective questions in a single round survey					
Through a birth history in a single round retrospective survey				Not applicable	Not applicable
Through a dual-records system					
Other (specify)					

B – Sample surveys:

1. Have sample surveys been undertaken to obtain fertility and mortality statistics in the last 10 years?

	Fertility	Mortality
Yes		
No		

If YES, please indicate the number of surveys conducted in the last 10 years and provide the following information for the last two surveys.

	Survey 1	Survey 2
2. Title of survey		

3. Date		
4. Coverage:		
a. Geographic areas		
b. Population		
5. Sample fraction percentage:		
6. Type of operation		
a. Single-round survey		
b. Multi-round survey		
c. Sample survey combined with continuous registration (dual record system)		
7. Method of sampling		

8. Is this a specialized survey on fertility and mortality?

Yes No

If No, what are the other topics covered in the survey?

--

9. Provide a list of fertility and mortality statistics obtained from the surveys:

	Survey 1	Survey 2
Fertility statistics		
Mortality statistics		

10. Have these estimates been evaluated? Yes No

a. If Yes, how?

	Survey 1	Survey 2
Fertility statistics		
Mortality statistics		

11. What are the technique(s) used to obtain estimates:

	Survey 1	Survey 2
a. Reverse Survival		
b. Own Children Method		
c. Reconstructed Birth Histories		
d. Children Ever Born		
e. Recent Births		
f. Birth Histories		
g. Survival of Children ever born		
h. Birth Histories		
i. Recent Household Deaths		
j. Survival of Parents		
k. Survival of Siblings		
l. Others, specify		

12. Indicate if age accuracy has been evaluated and which techniques have been used.

Survey 1	
Survey 2	

13. Have results from these surveys been published?

Yes No

a. If Yes, provide dates when the results were published and the title of the publication.

	Survey 1	Survey 2
Publication dates		

Publication title

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14. Indicate the name of institution responsible for the collection, processing of data and dissemination of results.

Survey 1	
Survey 2	

15. Please provide us with the relevant sections of the questionnaires used.

C - POPULATION CENSUSES:

1. Have population censuses been used to obtain fertility and mortality estimates?

	Fertility	Mortality
Yes		
No		

If YES, please provide date of latest census used to collect such information and answer questions 2 to 7 below:

	Fertility	Mortality
Census date		

2. Provide a list of fertility and mortality statistics obtained from the census:

Fertility statistics	
Mortality statistics	

3. Have these estimates been evaluated? Yes No

a. If Yes, how?

Fertility statistics	
-----------------------------	--

Mortality statistics

--

4. Select the technique(s) used to obtain estimates:

Fertility		Mortality	
Reverse Survival		Survival of Children ever born	
Own Children Method		Birth Histories	
Reconstructed Birth Histories		Recent Household Deaths	
Children Ever Born		Survival of Parents	
Recent Births		Survival of Siblings	
Birth Histories			

5. Indicate if age accuracy has been evaluated and which techniques have been used.

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6. Have results from the census been published?

Yes No

a. If Yes, provide dates the results were published.

Publication dates

Publication title

7. Indicate the name of institution responsible for the collection, processing of data and dissemination of results.

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8. Please, provide us with the relevant sections of the questionnaire.

Pre-workshop assignment 2

- Please do your best effort to fill in Tables 1.2 and 1.3 below (extracted from the regular UN Demographic Yearbook data collection).

1.2 Summary: Live births by sex of child and urban/rural residence of the mother

Year	TOTAL			URBAN			RURAL		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
2004									
2005									
2006									
2007									
2008									
2009									
2010									
2011									
2012									
2013									
2014									

1.3 Summary: Deaths by sex and urban/rural residence of deceased

Year	TOTAL			URBAN			RURAL		
	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female
2004									
2005									
2006									
2007									
2008									
2009									
2010									
2011									
2012									
2013									
2014									

- Please write up a report addressing the following items:

- Do current available vital statistics satisfy users' needs? If not, explain why.
- What were the challenges faced to fill in the Tables 1.2 and 1.3 from question number 1? What were the sources used to fill in the needed information? What are the factors that hamper the production of vital statistics from civil registration in your country?
- Are there any plans to improve the civil registration and vital statistics system in your country?

Please return the completed report before **10 September 2015** at the following address by email if possible or by fax:

Att. Ms. Maria-Isabel Cobos
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10017 New York, NY, USA
Tel. +1 917 367 3072
Fax. +1 212 963 1940
Email. cobos@un.org