

## Statistics for Development Division (SDD)

### 6th Regional Conference of Heads of Planning and Statistics (HOPS6)

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SPC/HOPS6/Session 6A ii – Working Paper 4

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## SESSION 6A II: ACTION PLAN FOR PACIFIC CRVS

*(Document presented by Jeff Montgomery on behalf of the Brisbane Accord Group)*

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### EXECUTIVE SUMMARY

1. A new Action Plan for Pacific Civil Registration and Vital Statistics (APPCRVS) was initiated at the March 2023 meeting of the Brisbane Accord Group (BAG)<sup>1</sup> and provides the mechanism by which partners coordinate, plan and manage the implementation of technical activities at the national and regional level. The plan focuses on five areas:
  - Strong CRVS systems and processes
  - Digital civil registration systems and records
  - Inclusive and responsive civil registration systems
  - Cause of death certification and coding
  - Data analysis, reporting, dissemination and use for policy and planning.
2. A collaborative work programme, reflecting country priorities and plans of each partner agency has been developed, with the Pacific Community's focus being cause-of-death, system interoperability and data sharing.

### RECOMMENDATIONS

3. HOPS is invited to:
  - Acknowledge the range of activities being carried out across the Pacific by members of the Brisbane Accord Group to strengthen civil registration and vital statistics as detailed in the annex, in particular work by the Pacific Community on cause-of-death reporting, and system interoperability and data sharing.
  - Endorse the [Brisbane Accord Group's Action Plan for Civil Registration and Vital Statistics 2023–2026](https://sdd.spc.int/brisbane-accord-group-bag).

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<sup>1</sup> Brisbane Accord Group (BAG) of development partners work to strengthen Pacific civil registration and vital statistics (CRVS) systems. The Pacific Community (SPC) serves as Secretariat. Details at: <https://sdd.spc.int/brisbane-accord-group-bag>

- Encourage stronger collaboration across country-level agencies and partner agencies to improve civil registration completeness, and to ensure civil registration data can be used for statistical purposes.

## BACKGROUND

4. The Pacific region has some of the lowest rates and some of the highest rates of civil registration globally, with birth registration rates ranging from under 15% to 100%, and death registration rates ranging from under 2% to 100%.
5. Civil registration and vital statistics (CRVS) is the “continuous, permanent, compulsory and universal recording of the occurrence and characteristics of vital events of the population in accordance with the law.”<sup>2</sup> The typical actors in a CRVS system include civil registration authorities (often located in the ministries of internal affairs or justice), ministries of health, national statistical offices and international development partners.
6. Pacific Island countries and territories have clearly recognised the importance of CRVS systems for health and human rights and demonstrated a strong interest in supporting CRVS system improvements. Political commitments over the recent decades have included those from:
  - Pacific Health Ministers Meetings<sup>3</sup>;
  - Pacific Heads of Planning and Statistics Meetings<sup>4</sup>; and
  - The Asia Pacific Ministerial Declaration and Decade (2015–2024) for CRVS.<sup>5</sup>
7. The improvement of CRVS systems in the Pacific requires a diverse set of technical expertise that is not available in any one agency. Recognising this, development and other partners came together in 2010 to form the Brisbane Accord Group (BAG). This is a consortium of agencies which work to improve the quality and availability of birth, death, and cause of death data at both national and regional levels and support universal birth and death registration; and to improve investment outcomes through better coordination between technical partners. BAG partners work with the 15 independent countries and seven territories in the Pacific. The Pacific Community serves as the secretariat of the partnership. Current active BAG members include Australian Bureau of Statistics, Australian Institute of Health and Welfare, CDC Foundation, Pacific Civil Registrars Network, Pacific Health Information Network, Pacific Island Health Officers Association, University of New South Wales, United Nations Development Programme, United Nations Children’s Fund, United Nations Economic and Social Commission for Asia and the Pacific, Vital Strategies and the World Health Organization.
8. Following its formation in 2010, BAG developed the Pacific Vital Statistics Action Plan (PVSAP) to promote the improvement of statistics on births, deaths, and cause-of-death through routine collections to provide decision-makers with the evidence needed for effective planning; and to better coordinate technical efforts among partners. This vision was later extended to be more inclusive, recognising the importance of encouraging civil registration for human rights. The first phase of the PVSAP covered 2011–2014. In March 2014, all partners committed to continuing support for CRVS system improvements in the region, in line with the Ten-Year Pacific Statistics Strategy (2011–2020).

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<sup>2</sup> Principles and Recommendations for a Vital Statistics System, Revision 3, United Nations publication Sales No. E.13.XVII.10, New York, 2014, available at: [https://unstats.un.org/unsd/demographic-social/Standards-and-Methods/files/Principles\\_and\\_Recommendations/CRVS/M19Rev3-E.pdf](https://unstats.un.org/unsd/demographic-social/Standards-and-Methods/files/Principles_and_Recommendations/CRVS/M19Rev3-E.pdf).

<sup>3</sup> See Meetings archive and documents at <https://www.who.int/westernpacific/about/how-we-work/pacific-support/pacifichealth-ministers-meetings>

<sup>4</sup> See Meetings archive and documents at <https://sdd.spc.int/heads-planning-and-statistics-hops>

<sup>5</sup> Agreed timeframe for realizing a shared vision that all people in Asia and the Pacific will benefit from universal and responsive CRVS systems facilitating the realisation of their rights and supporting good governance, health and development. See more at: <https://getinthepicture.org/resource/ministerial-declaration-get-every-one-picture-asia-and-pacific>

9. Since 2010, BAG partners have developed regional best practice guidelines in areas such as legislation, data sharing and IT systems; and provided support to countries to subsequently implement these guidelines. BAG partners have also provided training and capacity-building on analysis and interpretation of civil registration data, medical certification of causes of death, and ICD coding of cause of death. BAG partners have also facilitated high-level advocacy for CRVS with in-country partners. In light of these activities, PICTs have conducted rapid or comprehensive assessments of national CRVS systems and formed national CRVS committees to provide oversight and coordination of CRVS improvement activities. Countries have increased CRVS stakeholder engagements, including between national civil registries, statistics offices, and health departments, implemented policy changes and undertaken review of CRVS legislation. National vital statistics reports have also been published. There have been improvements in birth and death registration. For specific details on achievements over the period of the PVSAP, see Pacific CRVS webpage by SPC; <https://sdd.spc.int/civil-registration-and-vital-statistics-support-crvs>.
10. Despite the progress made, key challenges remain in many PICTs in achieving efficient and reliable universal registration of births, deaths and causes of death. Few Pacific countries have links between the collection of civil registration data and the production of national statistics.

### Action Plan for 2023–2026

11. The new Action Plan for Pacific Civil Registration and Vital Statistics (APPCRVS) was initiated at the March 2023 in-person BAG meeting. It provides the mechanism by which BAG partners can coordinate, plan and manage the implementation of their technical activities at national and regional level. It is driven by country needs and issues as articulated through the Strategic Framework for the Development of Pacific Statistics 2022–2030 and input from the member countries of the Pacific Community through their national CRVS committees and plans, other BAG partners and direct representation through Pacific Health Information Network (PHIN) and Pacific Civil Registrars Network (PCRN).
12. The action plan aligns with the goals and eight implementation steps of the CRVS Asia Pacific Regional Action Framework for strengthening civil registration and vital statistics in the Pacific.<sup>6</sup> It has the following eight objectives:
  - i. Establish mechanisms for the coordination of development partners and country stakeholders.
  - ii. Support countries to undertake (and update periodically) an assessment of their civil registration and vital statistics systems involving key stakeholders across health, registry, planning and statistics to identify weaknesses and priorities for strengthening.
  - iii. Support countries to develop a comprehensive, prioritised and achievable country strategic plan for improving civil registration and vital statistics that can be carried out drawing on the technical and financial resources of the Brisbane Accord Group.
  - iv. Support countries to improve national civil registration and vital statistics systems through improved legislation, business processes, sustainable investments and leveraging changing technology to improve access and coverage.
  - v. Improve collaboration and coordination between the national statistics offices, civil registration offices, health departments, and other agencies involved in registering vital events and producing vital statistics.
  - vi. Strengthen the capacity of personnel involved in civil registration and production of vital statistics through training, mentoring and support.
  - vii. Promote the use of CRVS data as part of a national statistics system that supports policy development, advocacy, and research.

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<sup>6</sup> See Regional Action Framework document: <https://getinthepicture.org/resource/regional-action-framework-civilregistration-and-vital-statistics-asia-and-pacific>

- viii. Investigate and support regional solutions that support south–south collaborations and encourage the sharing of experiences and lessons learnt between countries and territories across the region and beyond; and build regional capacity in CRVS.
13. Five regional priorities have been identified through direct observation of needs in-country, engagement with country CRVS committees, national CRVS plans and assessments, feedback from Pacific networks such as PHIN and PCRN.
- i. Strong CRVS systems and processes
    - a. Improved national coordination through CRVS committees.
    - b. National comprehensive assessments and action plans.
    - c. Business processing improvements.
    - d. Legislative review and upgrade regulatory frameworks.
    - e. National CRVS systems are adequately resourced.
    - f. Civil registration included in national development plans.
  - ii. Digital civil registration systems and records
    - a. Paper-based or out-dated systems replaced with modern e-CRVS systems which are sustainable over the long-term.
    - b. Interoperability of information systems and sharing of data with other agencies within a country and regionally, as appropriate.
  - iii. Inclusive and responsive civil registration systems
    - a. Conduct Inequality assessments and develop action plans to address identified inequalities.
    - b. Civil registration improvements linked to human rights commitments.
  - iv. Cause of death certification and coding
    - a. Sustainable national and regional capacity in cause of death certification training for new graduates and doctors already practicing in the country.
    - b. High-quality coding of cause-of-death data, including regional coding capacity for countries unable to sustain expertise internally.
    - c. Data quality audits and improvements.
  - v. Data analysis, reporting, dissemination and use for policy and planning
    - a. National data analysis capacity through regional capacity building activities.
    - b. National and regional levels platform for data dissemination.

### Country Engagement in Developing and Updating APPCRVS

14. While APPCRVS is primarily a mechanism for partner collaboration, active steps are taken to ensure that country needs are reflected in the work plans of each partner and in the APPCRVS generally.
15. Most PICTs have a National CRVS Committee with representatives for civil registry, health and statistics agencies as well as partner agencies. Where national plans exist these are reflected in the APPCRVS, otherwise partner agencies identify needs and feed these directly into discussions by the BAG. This year, the development of the APPCRVS followed immediately after meetings of the Pacific Health Information Network (PHIN) and Pacific Civil Registrars Network (PCRN) where countries identified their priorities and discussed areas of regional focus.
16. In some countries, more targeted engagement with stakeholders and partners is needed to develop a comprehensive national action plan. This recently occurred in Papua New Guinea where the Pacific Community facilitated a series of workshops with the national CRVS committee, BAG partners and other national agencies to develop an action plan and explore development partner contributions. This will be reflected in the next iteration of the partners' work plan (see annex for current plan).

17. Targeted country-level engagement, similar to PNG, has been suggested for Samoa, Solomon Islands and Tonga where there is significant CRVS development activity or need but either no clear overarching CRVS plan or a lack of effective coordination across development partners.

### Partner activity in the Pacific

18. The PVSAP 2011–14 established four country groups, acknowledging that different structural and administrative challenges affect small island states and larger countries and administrations in different ways, and hence there is a need to organise technical assistance and training along such lines. However, the varying rates of progress and changing needs in the region have led to some re-organisation of these initial groups. The current plan recognises six broad groupings of countries, each with different needs and priorities as outlined below. These groupings are based on characteristics such as population size, historical system influences, system complexity and challenges, coverage and access to registration, and the ability to generate and utilise CRVS data for statistical purposes. These are summarised in the table below:

Group	Characteristics	PICT	Priority
A	Small countries of the south Pacific with good national coverage	Cook Islands, Nauru, Niue and Tokelau	Medium
B	North Pacific countries and territories with US-influenced health reporting requirements:		
B1	- States and countries with significant system challenges, incomplete coverage, and limited COD data.	FSM (National, Chuuk, Pohnpei, and Yap) and RMI	Very High
B2	- States and countries with good coverage and data quality.	Palau and FSM (Kosrae)	Medium
B3	- US territories with data processing and coding done remotely.	American Samoa, CNMI, Guam	Medium
C	Large Pacific countries with good registration coverage including COD.	Fiji and Tonga	High
D	Mid to large Pacific countries with significant legal and structural challenges in registration coverage and completeness, reporting processes, and causes of death.	Kiribati, Samoa, Solomon Islands, Tuvalu, and Vanuatu	Very High
E	Papua New Guinea has its own category due to population, presence of a national ID system, and current registration challenges.	Papua New Guinea	Very High
F	French territories do not receive direct support as they have well developed systems with centralised support from France, but may be engaged in specific activities.	French Polynesia, New Caledonia, and Wallis and Futuna	Medium

19. A collaborative work programme, reflecting country priorities and plans of each partner agency has been developed and is an annex to this paper. It maps activity against each country as well as initiatives that benefit the wider region. This is updated quarterly.
20. The Pacific Community has one staff member dedicated to CRVS activities and seeks donor support to supplement this with consultants. Currently two consultants, funded by Vital Strategies and Plan International, are assisting across the following activities with the key areas of focus being cause-of-death, system interoperability and data sharing:

APPCRVS priority	SPC contribution 2023
Coordination and collaboration.	<ul style="list-style-type: none"> <li>- Brisbane Accord Group</li> <li>- Pacific Civil Registrars Network</li> <li>- Action Plan for Pacific CRVS</li> </ul>
1b. National comprehensive assessments and action plans.	<ul style="list-style-type: none"> <li>- PNG – Action Plan validation, initiation, and monitoring</li> <li>- Vanuatu – BPI follow through (ESCAP-led)</li> <li>- Responding to country requests</li> </ul>
2a. Out-dated systems replaced with modern e-CRVS systems.	<ul style="list-style-type: none"> <li>- Niue – OpenCRVS implementation</li> <li>- Cook Islands Business Process Mapping</li> <li>- Samoa – system replacement (UNDP-led)</li> <li>- Nauru – BPI mapping support and next steps</li> </ul>
2b. Interoperability of information systems and sharing of data with other agencies within a country and regionally, including platforms for data dissemination.	<ul style="list-style-type: none"> <li>- Document interoperability opportunities and requirements with focus on health, statistics, immigration, passport, and the regional data systems. In-scope countries – Niue, the Cook Islands, Tokelau, Samoa, Tonga, Vanuatu, American Samoa, Fiji and Solomon Islands</li> </ul>
4a. Sustainable national and regional capacity in cause of death certification training for new graduates and doctors already practicing in the country.	<ul style="list-style-type: none"> <li>- Support Global Grants funding proposals for in-country capacity building in Tonga and Tuvalu</li> <li>- Support countries and individuals who completed training in 2023 to implement new practices</li> <li>- Scope, plan and complete funding proposals for the delivery of medical certification of cause of death, ICD mortality coding or other identified needs in the North Pacific</li> </ul>
4b. High quality cause of death coding including regional capacity.	<ul style="list-style-type: none"> <li>- Progress proposals for a Regional Coding Support Centre in partnership with other BAG members</li> </ul>
5a. National data analysis capacity through regional capacity building.	<ul style="list-style-type: none"> <li>- Support countries or partners to finalise reports from the March 2023 Data Analysis and Report Writing course so it is available for inclusion in the Pacific Data Hub (SPC and Vital Strategies funded, SPC led)</li> </ul>
5c. National and regional level platforms for data dissemination.	<ul style="list-style-type: none"> <li>- Contribution to UNStats review of Principles and Recommendations for Population and Housing Censuses – focus on Administrative Data</li> </ul>

## Challenges

21. Success in improving CRVS relies on strong collaboration between country agencies, especially the civil registry, health and statistics agencies. This is often achieved through an effective national CRVS committee or collaborative leadership from a senior official. This in-turn leads to effective relationships with development and funding partners. It is also important that development partners work together to ensure that they are not duplicating effort and that limited donor resources are being used effectively.
22. Once civil registration completeness has been increased, the flow of data to the statistical agency can be inhibited by the lack of data sharing agreements or legislative permission, or the ability of the registration agency to extract and share data or the statistical agency to receive and use the data. Participation by the statistical agency in the governance and early design of replacement civil registration systems is important.



## ANNEX – August 2023 APPCRVS Partner Work Plan Overview

Country <small>green = in-progress orange = early thinking/planning</small>	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
<b>American Samoa</b>	PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategize for future work	SPC – October workshop on interoperability			
<b>Cook Islands</b>		SPC – BPI mapping (October) leading top scope replacement of e-CRVS system. SPC – October workshop on interoperability needs internally, across borders and with regional bodies		SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding. Participants planning own training for May/June 23	
<b>Fiji</b>	UNESCAP – BPI workshop 18-20 September. Possibly involve GHAI in legal review. AIHW – DFAT priority country. Comprehensive HIS assessment/mapping to take place in next 6-8 months FNU – possible CRVS short course	UNSW – streamlining variables in the civil registration birth database to facilitate analyses (facility of birth and location of registration). UNICEF – Linking master patient index to CRVS	UNESCAP - Inequality assessment and some follow up supporting the use of the findings to adjust policies. Report complete and ready to publish following official launch	SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding. SPC – Funding follow-up train the trainer event August. QUT – Ongoing support to coders who have been participants in previous coding courses - questions and answers by email. WHO – South Pacific Clinical Coding Training online course ending in May 2023	UNESCAP – Data Analysis and Report Writing In-person workshop - completed. Report completed (with UNSW and Vital Strategies) and ready to publish following official launch Vital – Collection and entry of missing birth data from health facilities, Vital Statistics Report Production WHO - Excess mortality report on COVID impacts (due June 2023) AIHW – Request for support on developing a 'data managers toolkit for emergency preparedness/response
<b>French Polynesia</b>	Nothing	Nothing	Nothing	Nothing	Nothing
<b>Guam</b>	PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategise for future work			SPC - North Pacific Coding Workshop	UNESCAP - Possible Report Writing course in February 2024
<b>Kiribati</b>	UNICEF – Support to amend BMD Act, including changing registration time frame from 1 year to 1 month and	Vital - Creation of an integrated database from MoH, CRVS, and Census Data - supported by a Data Protection		SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding.	UNESCAP – Virtual eleven-week vital statistics report writing training in Q3 of 2021.

Country <small>green = in-progress orange = early thinking/planning</small>	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
	<p>allowing acceptance of overseas certificates.</p> <p>UNICEF – Support awareness raising campaigns to increase demand for birth registration (planned).</p> <p>UNICEF – Support for training of CRO (planned).</p>	<p>Policy and governance mechanism (March 2023).</p> <p>UNDP – Digitization of records, data management. Participation in site visit to Vanuatu (planned).</p> <p>UNICEF – Provide tablets to MoJ Civil Registration Office to support utilization of electronic birth registration system (planned). Also - Linking Master patient index to CRVS.</p>		<p>Local Certification training for Doctors being delivered by attendees.</p> <p>WHO/ABS – Coding audit and then training (planned)</p>	<p>UNESCAP - Data Analysis and Report Writing In-person workshop - recently completed. Follow-up support with completing the VS report.</p>
<b>Marshall Is (RMI)</b>	<p>PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategise for future work</p>			<p>SPC – North Pacific Coding Workshop</p>	<p>UNESCAP – Virtual eleven-week vital statistics report writing training in Q3 of 2021.</p> <p>County request for face-to-face training, with the North Pacific PICTs, similar to the recent South Pacific training.</p> <p>UNESCAP - Possible Report Writing course in February 2024</p>
<b>Micronesia (FSM)</b>	<p>PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategise for future work.</p>			<p>SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding.</p> <p>SPC – North Pacific Coding Workshop.</p>	<p>UNESCAP – Possible Report Writing course in February 2024</p>
<b>Nauru</b>	<p>ESCAP/UNDP – Stakeholder workshop held. CRVS platform shared by UNDP. As-is maps and process descriptions drafted. BPI work to analyse birth, death, marriage/divorce and adoption registration processes (ongoing). In-person workshop 12 April working on redesign phase.</p> <p>SPC – supporting new Registrar</p>			<p>QUT – Ongoing support to coders who have been participants in previous coding courses – questions and answers by email.</p>	<p>UNESCAP – Maybe include in North Pacific training on report writing?</p>
<b>New Caledonia</b>	Nothing	Nothing	Nothing	Nothing	Nothing



Country <small>green = in-progress orange = early thinking/planning</small>	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
Niue	UNESCAP – Business Process Mapping using the CRVS System Improvement Framework. Full report of BPI published: <a href="https://getinthepicture.org/sites/default/files/resources/NIUE_AW%20CRVS_Assessment%20analysis%202022_thirdv2.pdf">https://getinthepicture.org/sites/default/files/resources/NIUE_AW%20CRVS_Assessment%20analysis%202022_thirdv2.pdf</a>	PLAN – OpenCRVS implementation. Aim to implement November. Interoperability (Medtech) issues to be looked at following implementation. SPC – October workshop on interoperability needs internally, across borders and with regional bodies.			
Northern Mariana Is (CNMI)	PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategise for future work			SPC – North Pacific Coding Workshop Feb 2024.	ESCAP – May invite to possible VS face-to-face training, with other North Pacific countries, similar to the recent South Pacific training
Palau	PIHOA – Convening USAPI CRVS Working Group Meeting in June to create network, map current processes, and strategise for future work			SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding. SPC – North Pacific Coding Workshop Feb 2024.	ESCAP – Virtual eleven-week vital statistics report writing training in Q3 of 2021. UNESCAP – Possible Report Writing course in February 2024
Papua New Guinea (PNG)	CDC – Technical support through stakeholder committees; Legal review. GHAI – Assisted to develop a draft law on CRVS and ID in 2019, which has not yet been adopted by Parliament. UNICEF – CR co-location Lae Provincial Hospital and Morobe, Eastern Highlands Province and Southern Highlands Province to come SPC/CCF/ESCAP/WHO – Re-engaging stakeholders and partners to validate and implement 2019 Action Plan. August workshop.	WHO - supporting NDoH to conduct a digital health maturity assessment CDC - Digitisation mapping of health activities including CRVS (PNG and Sols) UNICEF – training in use of mobile kits and for central approvers UNICEF – need for bottle neck analysis to access to performance data UNICEF – mobile BR kits (USD 10 k each): sourcing cheaper supplier, funding some	ESCAP – PNG invited to Inequality Assessment Workshop September	CDC – Mortality surveillance activities: 1. Notification of Verbal autopsy for community deaths (Use of SmartVA and trial of the WHO VA tool); 2. MCCOD training to improve quality of cause of death data for hospital/health facility deaths; 3. Pilot of SmartVA for Physicians for dead on arrivals in hospital. WHO - hospital information system assessment 2022 to understand issues related to low coverage of death reporting WHO – revising forms in NHIS, can BR question be added? (idea from UNICEF)	

Country <small>green = in-progress orange = early thinking/planning</small>	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
<b>Samoa</b>	<p>UNESCAP – Business Process Mapping using the CRVS System Improvement Framework 2021 - report yet to be published</p> <p>AIHW – DFAT priority country. Comprehensive HIS assessment/mapping to take place in next 6-8 months</p> <p>UNICEF – Trained BDM staff on improving existing systems in 2022.</p> <p>Supported youth consultation on birth registration ahead of 2nd Asia and Pacific CRVS Decade 2015–2024 Ministerial Conference.</p> <p>UNICEF – Continued capacity building of BDM staff.</p> <p>Review of policy and legislation as required.</p> <p>Awareness raising and behaviour change initiatives to increase demand for birth registration.</p> <p>Provision of supplies to support birth registration. Focus on home births being registered through village elder council. Outer island support.</p> <p>SPC – Is there a forward action plan and aligned partners? World Bank?</p>	<p>UNDP - RFQ for system replacement (July) Study tour to NZ (August)</p> <p>SPC - October workshop on interoperability needs internally, across borders and with regional bodies</p> <p>UNICEF – Linking Master patient index to CRVS</p> <p>PLAN – Expressed interest in OpenCRVS</p> <p>WorldBank – ID Project?</p>	<p>UNESCAP - Inequality assessment (inception W/S completed 4 April 2023). Capacity building workshop scheduled for September</p> <p>UNICEF – Review of BDM Act?</p> <p>UNICEF – capacity building. Social behaviour change capacity building.</p>	<p>SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding.</p> <p>WHO – South Pacific Clinical Morbidity Coding Training ending May 2023</p>	<p>UNESCAP – Data Analysis and Report Writing In-person workshop – recently completed. This followed Virtual eleven-week vital statistics report writing training in Q3 of 2021. Follow-up support with completing the VS report.</p>
<b>Solomon Islands</b>	<p>CDCF - 1. Technical support through stakeholder committees (irregular meetings); 2. Legal review.</p> <p>GHAH - Consultation workshops and Drafting Instructions for a Law on CRVSID. Will assist with drafting the law if requested - Bill delay due to election.</p> <p>UNICEF - Supported draft bill</p>	<p>UNICEF – training on the use of Promadis system.</p> <p>CDC – Digitisation mapping of health activities including CRVS (PNG and Sols)</p> <p>UNICEF – Linking Master patient index to CRVS.</p>	<p>ESCAP - Solomons invited to Inequality Assessment Workshop September.</p>	<p>CDCF – Mortality surveillance activities: 1. Notification of vital events; 2. Verbal autopsy for community deaths; 3. MCCOD training to improve quality of cause of death data for hospital/health facility deaths.</p>	

Country green = in-progress orange = early thinking/planning	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
	<p>consultations in 3 provinces, ongoing advocacy for single BDM law.</p> <p>UNICEF – Decentralised birth registration and issuance to provincial health facilities.</p> <p>Continue training of health staff provision of birth registration services (PROMADIS).</p> <p>Potential support to Government to clear data entry backlog related to birth registration (partly caused by re-entry of provincial data due to connectivity issues).</p> <p>Support for awareness raising to increase demand for birth registration.</p> <p>AIHW – DFAT priority country. Comprehensive HIS assessment/mapping to take place in next 6–8 months</p> <p>SPC – Is there a forward action plan and aligned partners?</p>				
Tokelau	<p>SPC - Country request for help digitising paper records (about 6k). Potential for BPI followed by e-CRVS project as in Niue</p>	<p>SPC – Will "piggyback" developments with Cook Is/Niue (NZ realm) or with Samoa (administrative centre for Tokelau)</p> <p>SPC – October workshop on interoperability needs internally, across borders and with regional bodies</p>			
Tonga	<p>AIHW – DFAT priority country. Comprehensive HIS assessment/mapping to take place in next 6-8 months</p> <p>SPC – Is there an overall development plan and partner co-ordination?</p>	<p>WorldBank – improve digital public service delivery including in Civil Registration and national ID systems - <a href="https://projects.worldbank.org/en/projects-operations/project-detail/P154943">https://projects.worldbank.org/en/projects-operations/project-detail/P154943</a></p> <p>SPC – October workshop on interoperability</p>		<p>SPC – March 2023 Regional Training Workshop on MCCD and ICD mortality coding.</p> <p>WHO – South Pacific Clinical Morbidity Coding Training ending May 2023</p> <p>WHO – links between BR, DR and new electronic health system</p>	<p>UNESCAP – Data Analysis and Report Writing In-person workshop – recently completed. This followed Virtual eleven-week vital statistics report writing training in Q3 of 2021. Follow-up support with completing the VS report.</p>

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		Asia Development Bank – Introducing eGovernment through Digital Health” focuses on health information systems and developing population registries as part of the CRVS system and data integration across ministries <a href="https://www.adb.org/projects/50281-001/main">https://www.adb.org/projects/50281-001/main</a>			SPC/Vital – GGP application for coding and reporting project (NOT SUBMITTED)
Tuvalu	UNESCAP/UNDP – Business Process Mapping and assess existing electronic data management system, and support for digitisation of records plus prototyping of digital ID solution.			SPC - March 2023 Regional Training Workshop on MCCD and ICD mortality coding.	SPC/Vital – GGP application for coding and reporting project
Vanuatu	UNESCAP – Business Process Mapping using the CRVS System Improvement Framework 2021 - Niue, Samoa, Vanuatu; (report yet to be published). UNICEF – Technical support to pass the Civil Registration and Identity Management Act 2021 and National Identity Card Act 2021. Support for 4 positions in CRIM (national CRVS coordination, 3 provincial CRVS officers). National workshop to sensitize all stakeholders Induction workshops at provincial hospitals Support for procurement of ID cards for children under 18 (5,000) Support for supplies for CRIM (computers, tablets, binding machine, printer). UNDP – New SoPs developed in 2022 informed by BPI process CRVS Policy development and some legal changes.	Vital - Development of an interoperable database between MoH and CRIM, supported by a Data Protection Policy and TWG. SPC - October workshop on interoperability needs internally, across borders and with regional bodies. UNICEF - technical review of the CRVS Information Management System (RegisterVIZ). Recommendations included data clean up, revising modules, introducing new ones, prioritising the use of web components and mobile technologies, and the use of web interfaces to provide access to the CRVS data set to ministries of health and education. UNDP – Lead UN agency. Developing new CR platform		SPC - March 2023 Regional Training Workshop on MCCD and ICD mortality coding.	UNESCAP - Data Analysis and Report Writing In-person workshop - recently completed. This followed Virtual eleven-week vital statistics report writing training in Q3 of 2021. Follow-up support with completing the VS report.

Country green = in-progress orange = early thinking/planning	1. Strong CRVS systems	2. Digital civil registration systems and records	3. Inclusive and responsive civil registration systems	4. Cause of death certification and coding	5. Data analysis, reporting, dissemination and use for policy and planning
	AIHW – DFAT priority country. Comprehensive HIS assessment/mapping to take place in next 6–8 months.				
Wallis and Futuna	Nothing	Nothing	Nothing	Nothing	Nothing